DEPARTMENT OF VETERINARY PUBLIC HEALTH AND EPIDEMIOLOGY

VIBRIO PARAHAEMOLYTICUS



VIBRIO

PARAHAEMOLYTICUS

SYSTEMATICS

Scientific classification Introduction and structure of bacteria Epidemiology > Pathogenicity Mode of transmission Reservoir and host > Drug resistance Clinical signs > Diagnosis Prevention and control





Kingdom: Bacteria Phylum: Proteobacteria Class: Gamma Proteobacteria Order: Vibrionales Family: Vibrionaceae Genus: Vibrio

INTRODUCTION

- Curved
- Rod shaped
- Gram negative
- Oxidase positive
- Facultative aerobic
- Non spore forming
- Hollophillic
- Ferment glucose without gas production
- Polar flagellum which enable its high motility in liquid media
- Found in blackish saltwater which when ingested cause gastro intestinal illness in humans



WHAT IS Vibrio parahaemolyticus ?

> It is a bacterium in the same family as those that cause cholera and vibrio vulnificus > It lives in brackish saltwater and cause gastrointestinal illness in humans > V.parahaemolyticus naturally inhabits coastal waters in the US and Canada and is present in higher concentration during summer > It is Hollophillic or salt requiring organism

EPIDEMIOLOGY

- 4500 cases of V.parahaemolyticus infection occur each year in the United State
- V.parahaemolyticus and other vibrio species became nationally notifiable in 2007
- An average of 215 culture confirmed cases, 30 hospitalization, 1-2 deaths are reported each year, how ever it is estimated that there are truly as may as 45 case as most not cultured confirmed
- Persons with medical conditions like alcoholism and liver disease are at increased risk of infection are serious complications



HOST RANGE

- Humans
- Finfish
- Seafood such as cold fish
- Sardines
- Mackerel
- Flounder
- > Octopus
- Shrimp
- Crab



INFECTIOUS DOSE

Ingestion of 10⁷-10⁸ organism

RESERVOIR AND DRUG RESISTANCE

RESERVOIR –

- Vibrio parahaemolyticus can survive in shellfish during warm season
- Naturally part of the flora of bivalve shellfish



RESISTANCE –

- Resistance has been confirmed Penicillin, Ampicillin, Apramycin, Gentamycin, Streptomycin
- Extremely sensitive to heat as cells are no longer detectable at 48-50 °C after 5 minutes

MODE OF TRANSMISSION



PATHOGENICITY

- Infection can occur by faecal oral route.
- ➢ 60-80 % by ingestion of bacteria in raw or undercooked seafood usually Oysters
- 34 % enters through wound infection cause Gastro-enteritis
- 5 % septicaemia with symptoms including diarrhea (bloody or watery)



SYMPTOMS

- I.P. 15 hours after infection
- Diarrhea with abdominal cramping (bloody or watery)
- Nausea
- Fever
- Chills
- Soft tissue infection
- Wound infection





DIAGNOSIS

- Isolated from culture of stool, wound, blood
- In case of stool isolation selection medium thio-sulphate-citrate-bile salts and sucrose can be used (TCBS agar)

Selective Medium - TCBS

 V.cholrae grows well on Thiosulphate citrate bile sucrose (TCBS) agar, on which it produces yellow colonies that are readily visible against the dark green background of DET.WARK







PREVENTION AND CONTROL

- No vaccines are currently available
- Avoid infection by keeping raw shellfish for consumption
- Consumption of raw shellfish should be at cool temprature as soon as possible after harvest
- By thoroughly cooking seafood especially oysters
- Exposure of wound should be avoided to warm water
- In outbreak conditions oyster bed should be closed
- Timely and voluntary reporting of infection to State Health Department, Regional offices and other associated department

Harvest management tools to control Vibrio parahaemolyticus in oysters and other bivalve shellfish





