

Mycobacterial infection diagnosis
Practical Microbiology
Semester 2

Instructor information

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- Practical: Mycobacterial infection diagnosis
- Module (Respiratory and Renal Module RAR)

Module (Respiratory and Renal Module RAR)

MNU



Learning outcomes

By the end of this lecture student will be able to:

- Explain the proper sample to recover mycobacteria.
- Describe the principles and procedures for the stains used to demonstrate mycobacteria.
- Outline the different culture media used for the isolation of mycobacteria.
- Compare the new techniques used in detecting mycobacteria.
- State the principle and value of the tuberculin skin test.



Lecture outline

General characteristics of *Mycobacteria*

Laboratory diagnosis of *Mycobacteria*

Specimen collection

Microscopic examination

Isolation and identification



mycobacteria

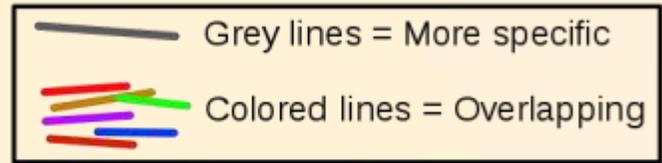
**1- M. tuberculosis complex
(M. tuberculosis, M. bovis)**

2- M. leprae

**3- Non tuberculous
“Atypical”**

4- Saprophytic

Symptoms of Tuberculosis



M. Tuberculosis
diseases:

(Established) pulmonary tuberculosis

Productive cough

Poor appetite

Miliary tuberculosis

Return of dormant tuberculosis

Night sweats

Weakness

Cough with increasing mucus
Coughing up blood

Primary pulmonary tuberculosis

Fever

Structural abnormalities

Dry cough

Weight loss

Extrapulmonary tuberculosis

Common sites:

Tuberculous pleuritis

Meninges
Lymph nodes
Bone and joint sites
Genitourinary tract

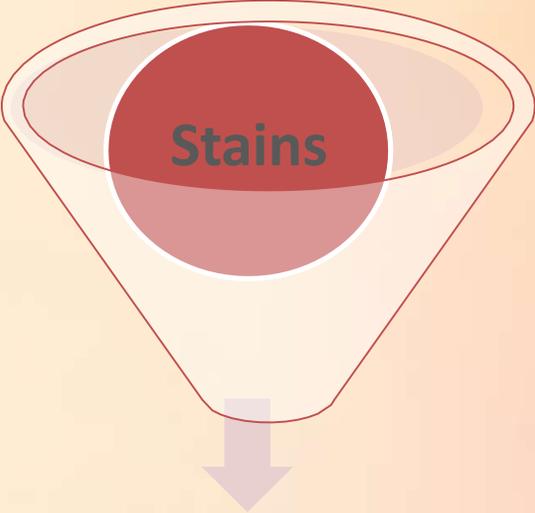
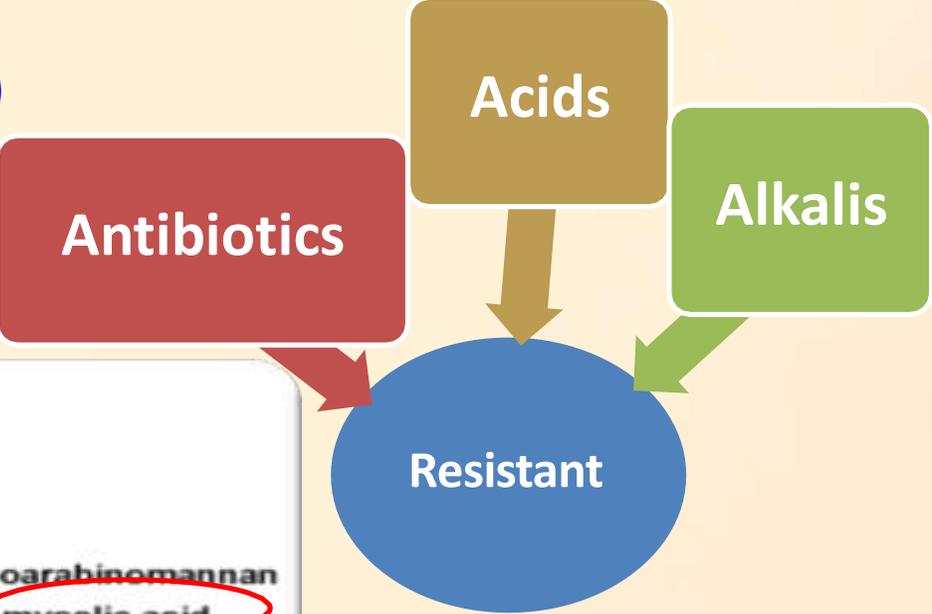
Chest pain

Gastrointestinal symptoms

- 1- Pulmonary
- Gastrointestinal
- 2 Renal
- 3 Meningitis
- 4 Spread (pleural, bone,..).

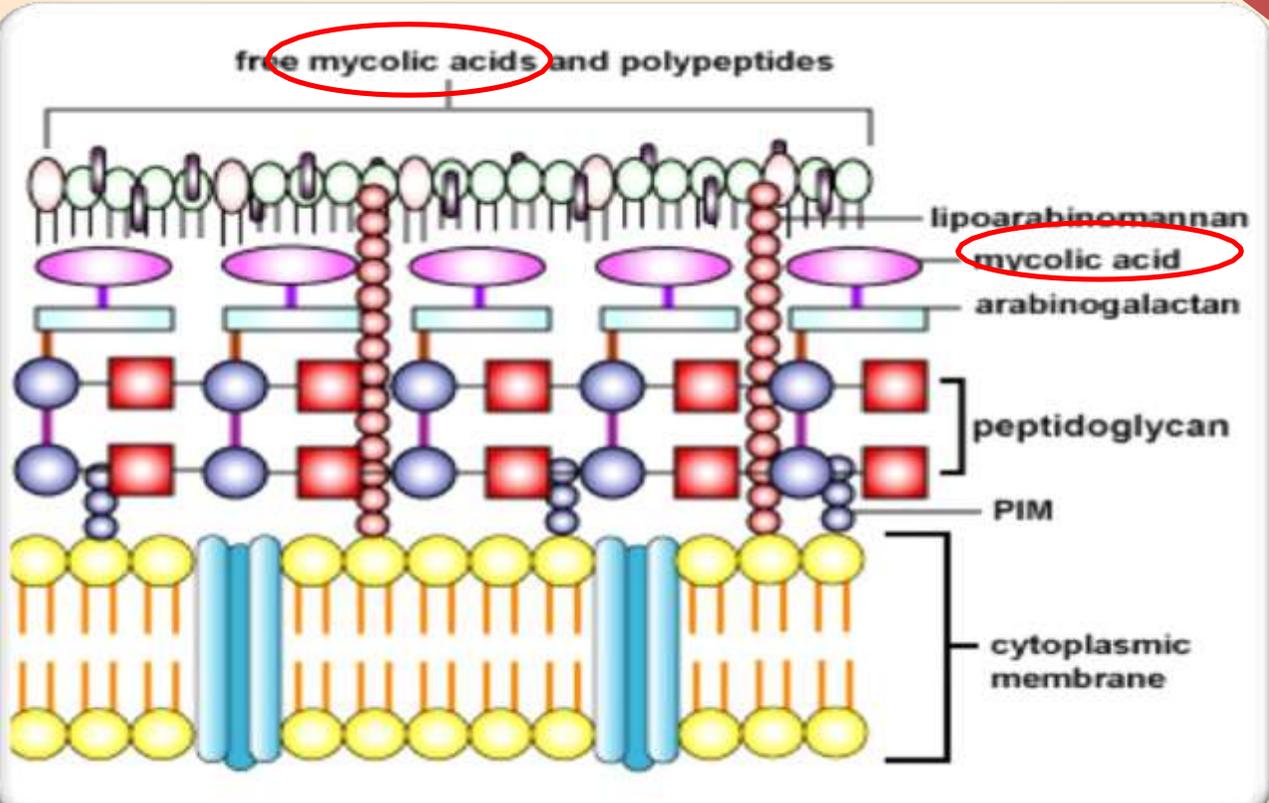
Mycobacterial cell wall

High lipid content (40-60%)



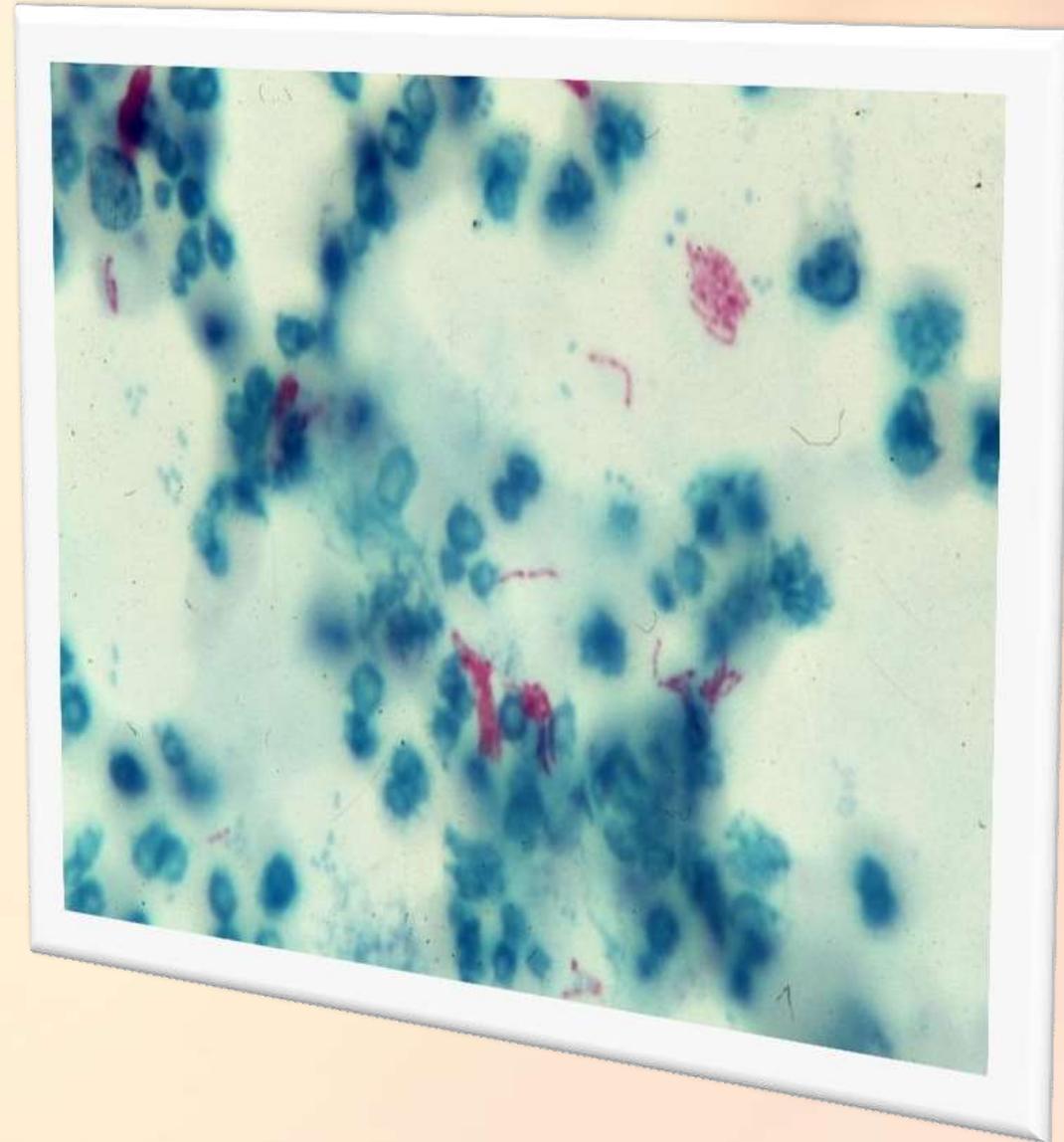
Impermeable

Gram stain



**MYCOBACTERIUM
TUBERCULOSIS**

- One of the '**Mycobacterium tuberculosis complex**'
- **Human** is the only reservoir.
- Etiologic agent of tuberculosis "TB".
- F. **intracellular** 'Macrophages'. Small
Straight or slightly curved Non motile
Non spore forming Occur in singles,
pairs or masses.
- **Acid and alcohol fast**
i.e: resist decolourization by them



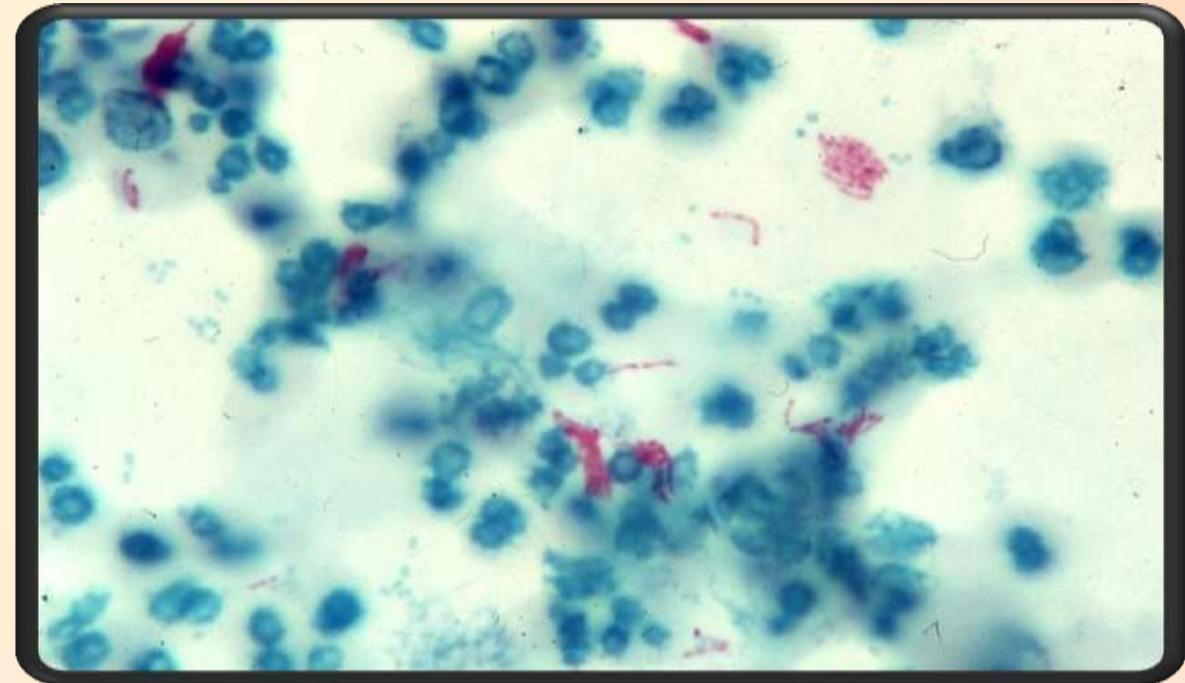
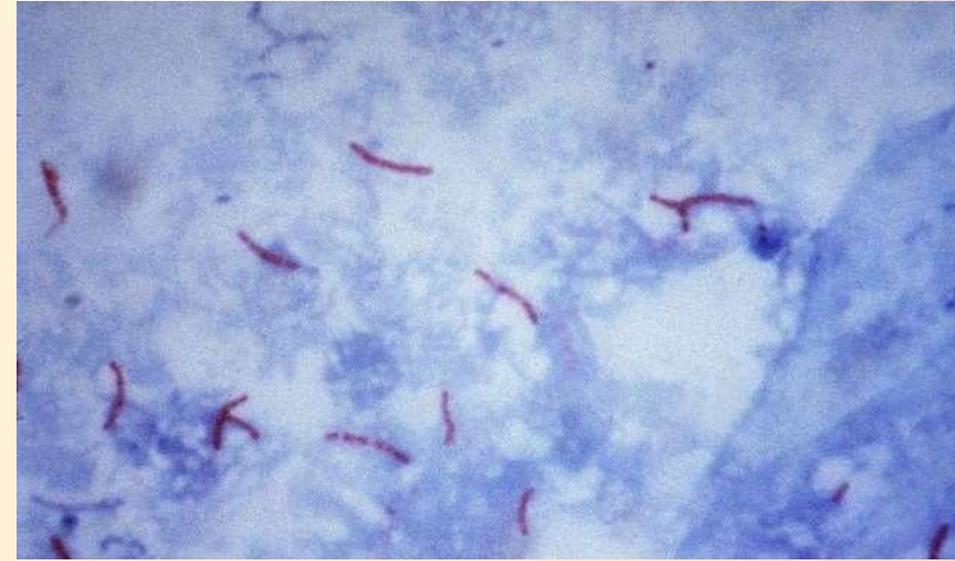
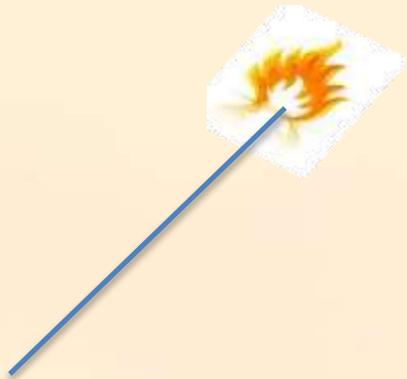
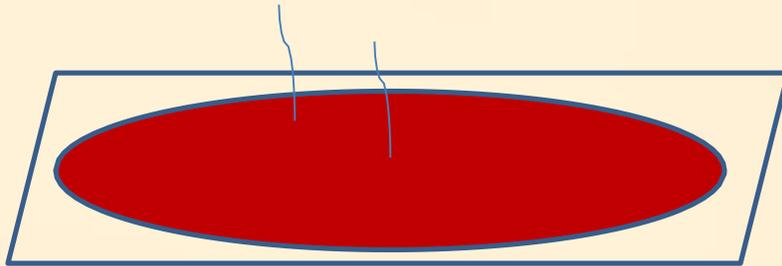
Lab diagnosis of pulmonary tuberculosis

- 1- Sample: ?
- Sputum, bronchial or gastric washings.
- At least **3 morning** samples of sputum are required for diagnosis.

2- Direct film 'smear':

Z.N. stain

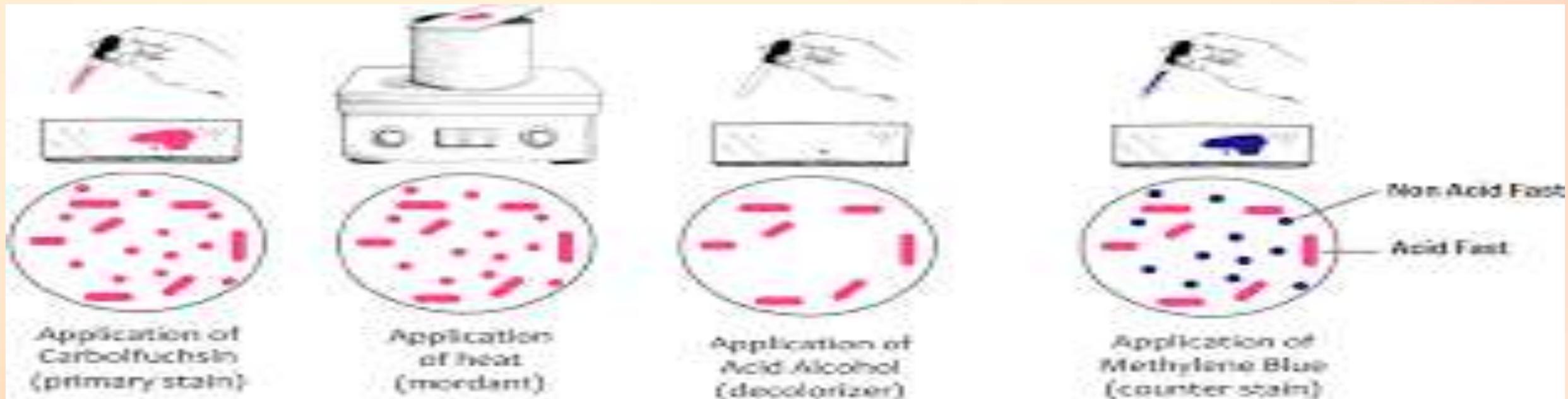
(after liquefaction → by N-acetyl L-cystein)



Ziehl- Neelsen Stain

Principle

- Some organisms contain many lipids in their cell wall that prevent staining with Gram stain.
- These organisms can be stained by concentrated dyes as concentrated carbol fuchsin in presence of **heat**.
- These organisms **resist** decolourization by acid (acid fast).



Requirements

- Concentrated carbol fuchsin.
- Sulphuric acid 20%.
- Alcohol 95 %.
- Methylene blue.

The Ziehl-Neelsen staining procedure requires:

- Staining for 5 minutes
- Decolourising for 3 minutes
- Counterstaining for 1 minute

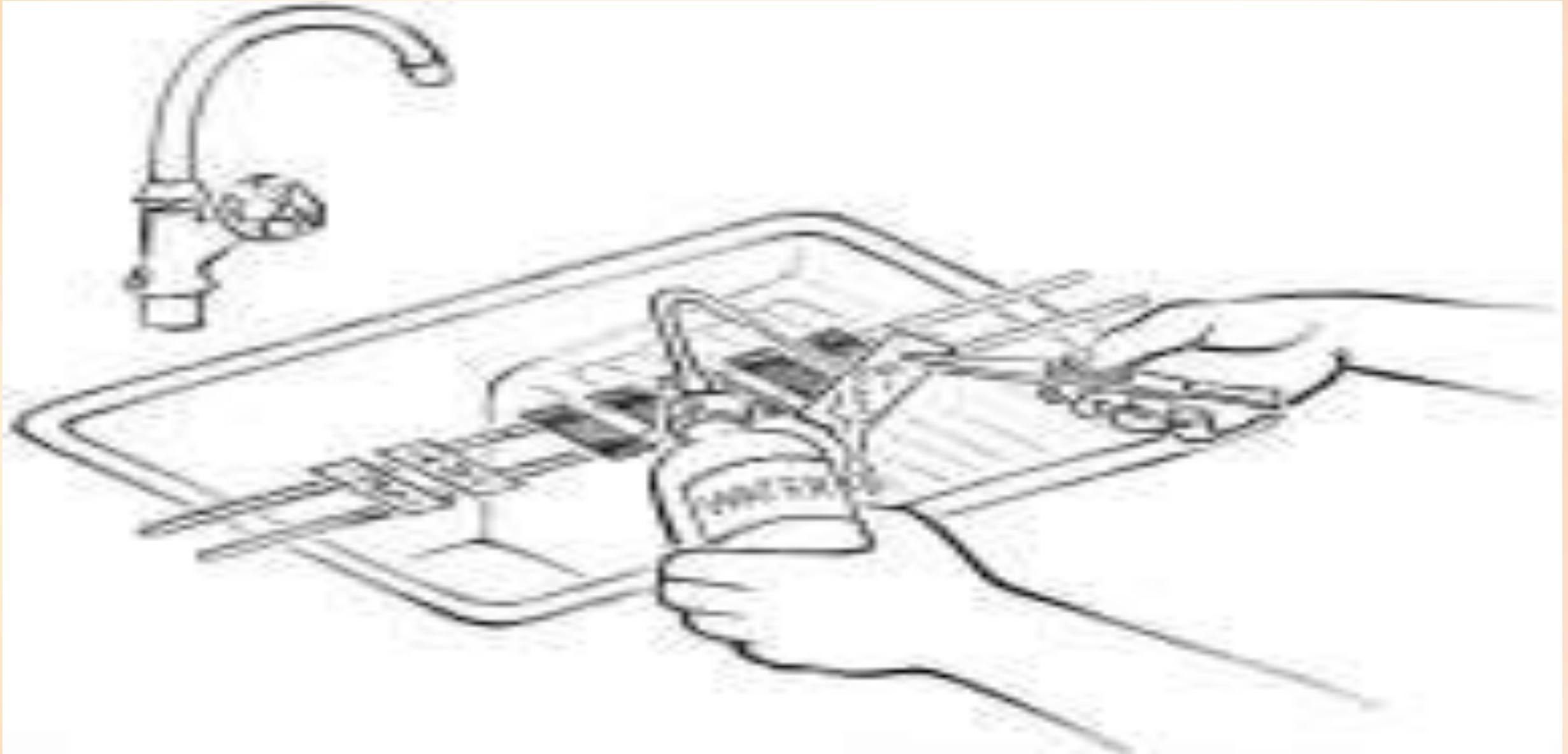
Cons. Carbol Fuchsin stain



Steam then cool



Rinse with water



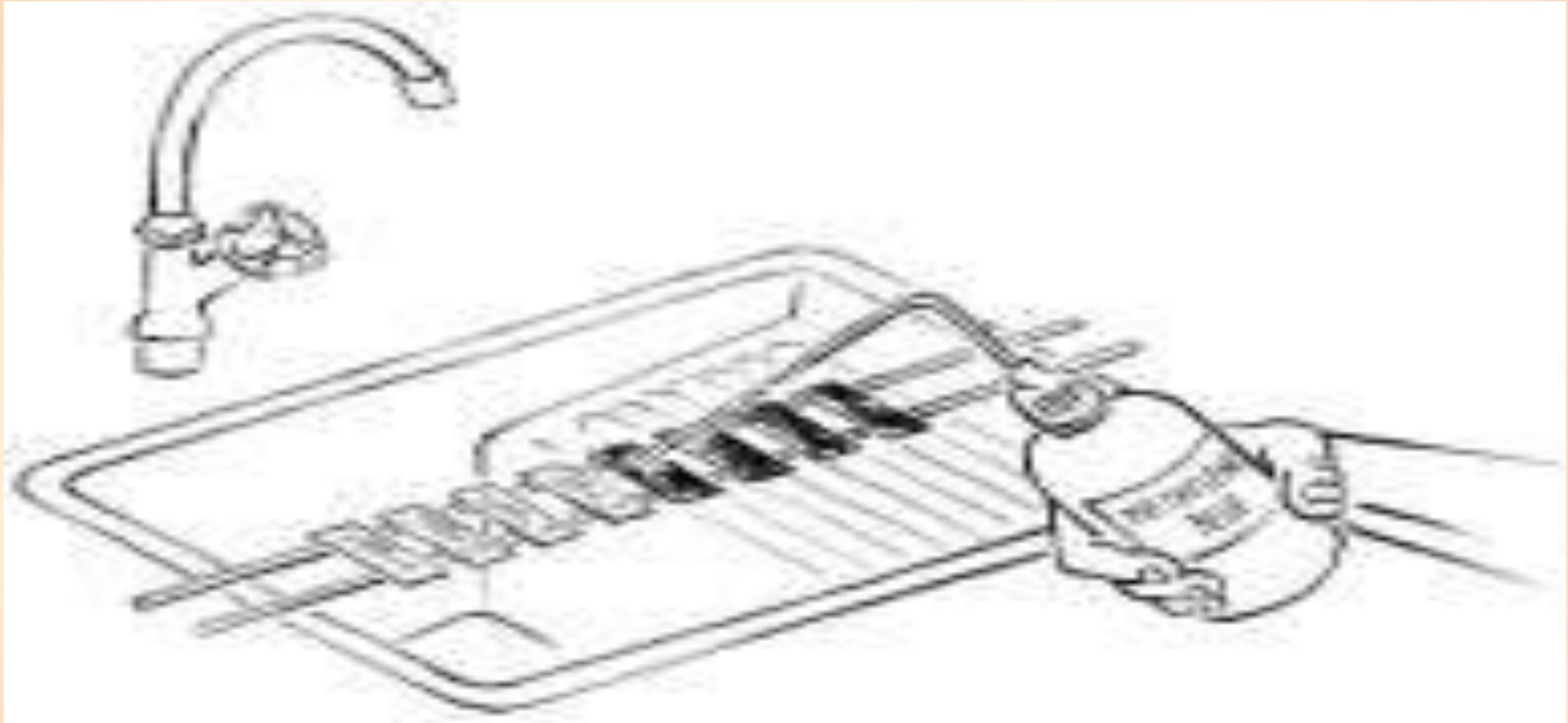
acid alcohol

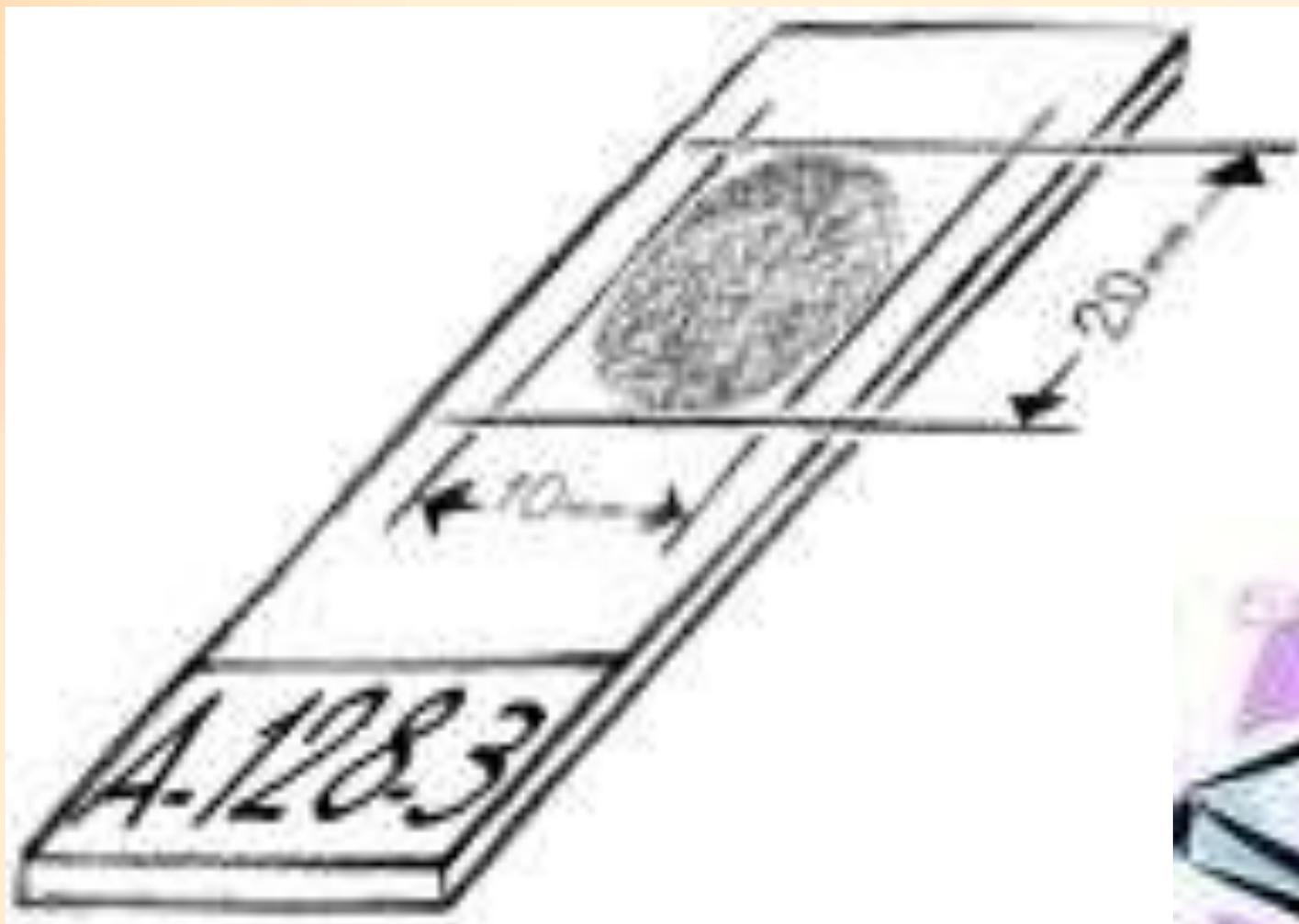


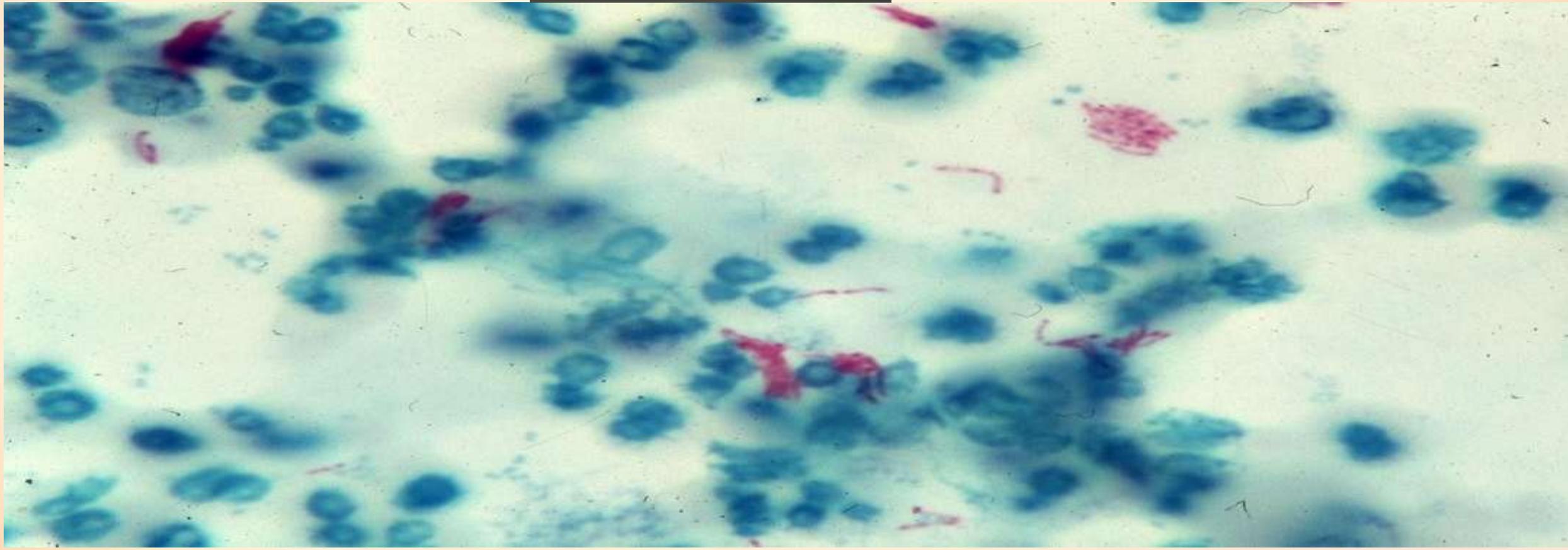
Rinse with water

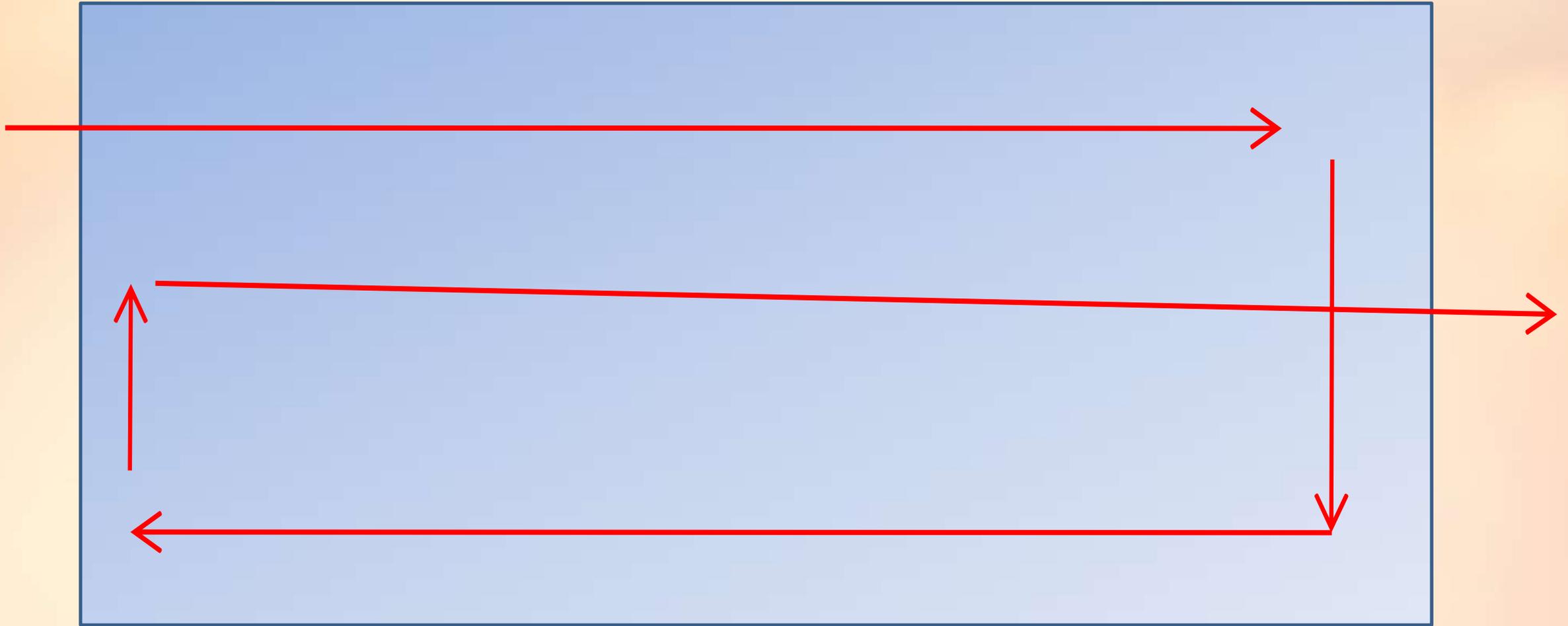


Methylene Blue







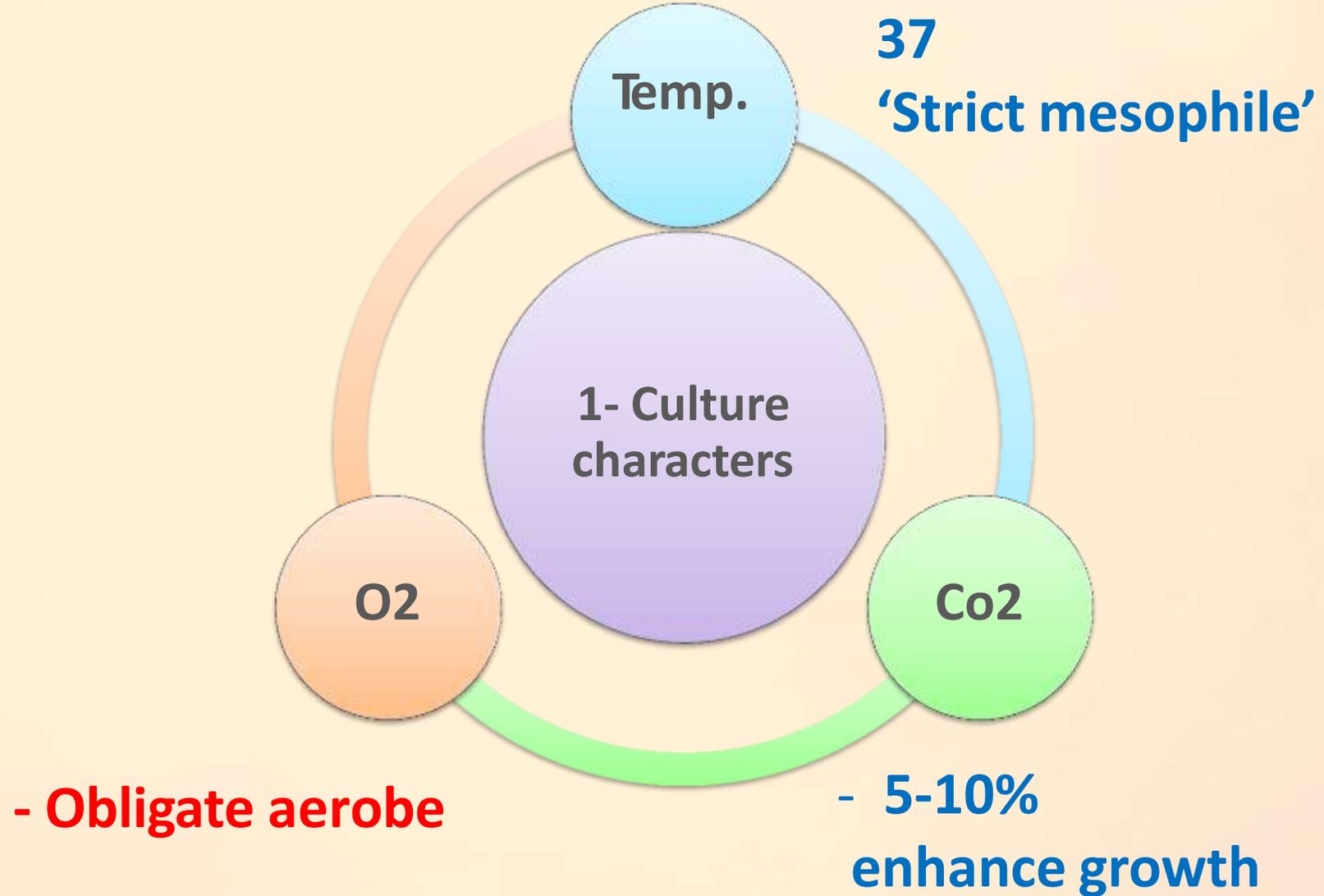


**Before saying “Negative” examine well.
& Ask for another sample (3).**

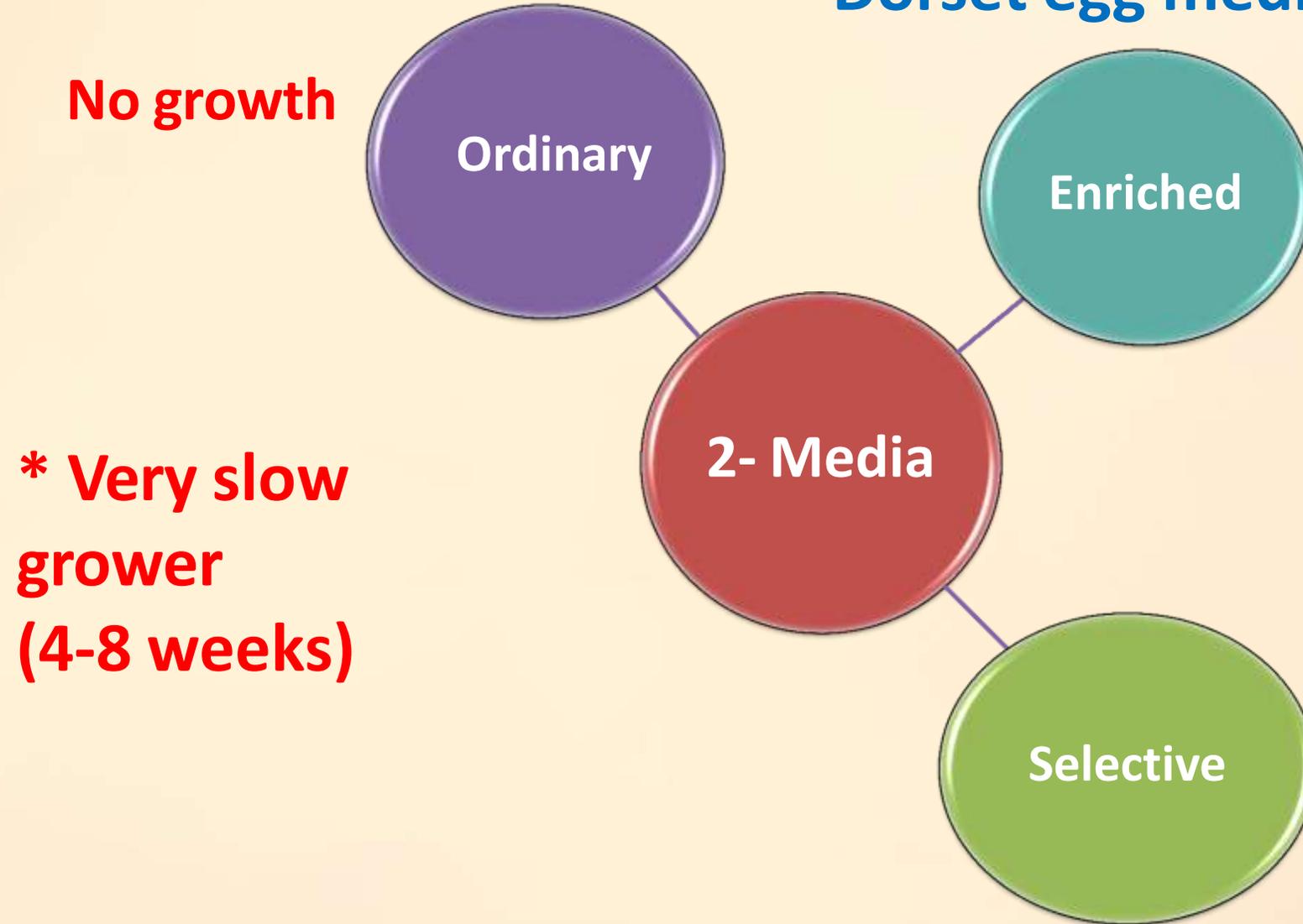
fluorochrome stain



3- Culture: (after decontamination; NaOH)



Dorset egg medium



- Lowenstein-Jensen medium
- Middlebrook medium 'agar-based'

Colony Identification

ZN Stained film

Characters

Dry, raised, rough, grayish, confluent "eugenic growth"





**4- Animal pathogenicity:
Guinea pig**

5- Serology:

6- Recent methods for diagnosis:

- DNA probes
- PCR
- Gas-liquid chromatography.
- Quantiferon TB → latent TB diagnosis.

Rapid culture method (BACTEC System):

- More rapid.
- Broth media containing radio-labeled 'palmitic acid' as the sole carbon source, antibiotics.
- M.TB. multiplies, → radio-labeled CO₂ is released.
- Detected in 9-16 days .

Tuberculin test:
hypersensitivity skin test

- I.D. injection of (0.1 ml) containing (5 tuberculin units) of **PPD**.
- Read after 48-72 hours.



previously exposed to M.TB → induration > 10 mm

Tuberculin test:

Negative reaction → **Never** exposed to M.TB

False negative →

- Impaired CMI response immune
- HIV, immunosuppressive drugs, malignancy, malnutrition, late stages of tuberculosis, acute viral infections, Improperly stored PPD.

False positive →

- other mycobacteria
- Vaccination „BCG“.
- Operator error
- reading errors

References

Koneman, W., Allen, SD., Janda, WM., Schreckenberger, R. and Winn, W. (1997): Color Atlas and Text Book of Diagnostic Microbiology, 5th ed. , PP, Philadelphia. Lippincott – Raven.

