

## Pathology of viral disease

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## Topics for the first lecture....

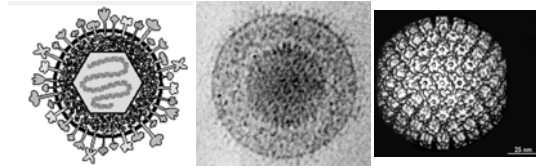
General virology  
Viral lifecycle  
Viral pathogenesis  
Laboratory diagnosis

## Virus size

QuickTime™ and a  
TIFF (LZW) decompressor  
are needed to see this picture.

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S. J. Flint, L. W. Enquist, V. R. Racaniello, A. M. Skalka

## Viral Structure Herpes virus



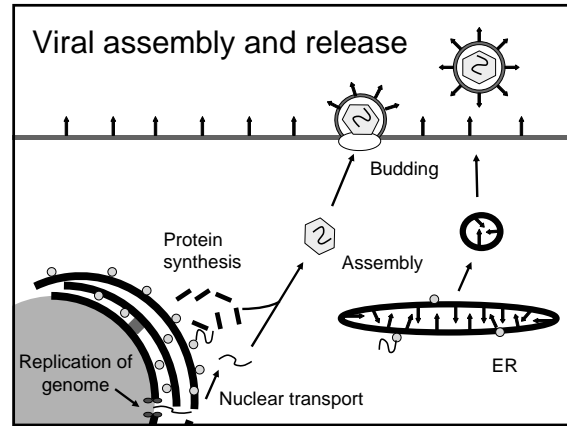
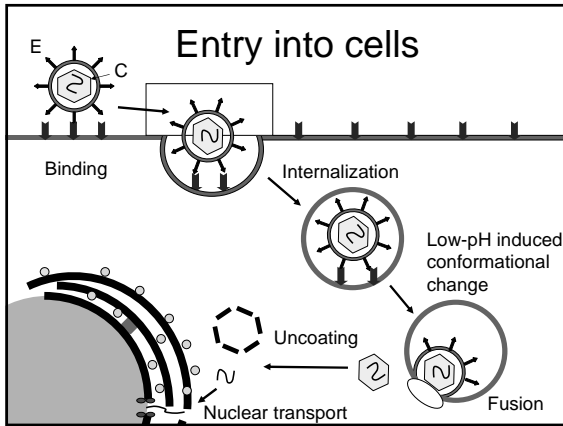
- Envelope
- Tegument
- Spikes
- Nucleocapsid
- Genome

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## Some useful terms

- Plaque
- pfu
- MOI
- Particle to infectivity ratio
- Neutralizing Abs
- Cytopathic effect

## Viral life cycle



### Methods of diagnosis for viral diseases

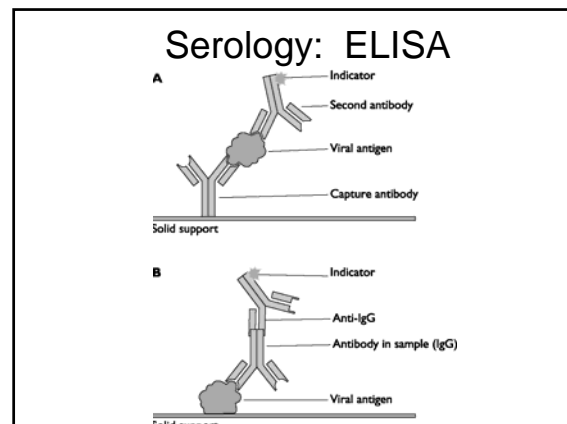
- Serology
- Cytology or Histology
- Viral growth in cell culture
- Detection of viral genome

### I. Serology


- Look for viral antigens or anti-viral antibodies
- A four fold or greater rise in titer between two serum specimens provides a positive diagnosis. Paired sera, the first taken as early as possible in the illness and the second 10 to 14 days after the onset of symptoms.

### Serology Methods

- ◆ ELISA
  - ↳ Rapid tests for Flu, RSV
  - ↳ Hep B, Hep C etc etc
- ◆ Western Blots



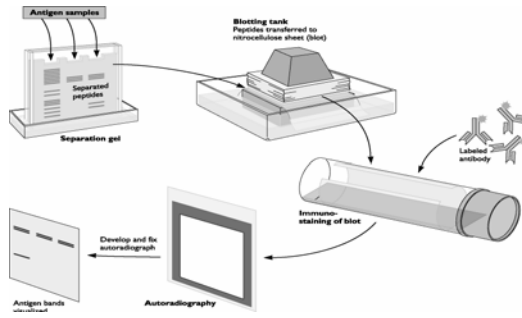
### EIA for RSV



ROCHE  
POSITIVE REACTION

- 93-97% sensitivity and 90-97% specificity when compared to tissue culture
- results in about 6 minutes
- room temperature storage of kit

### Serology: Western blot




Antigen samples  
Separated peptides  
Separation gel  
Blotting tank  
Peptides transferred to nitrocellulose sheet (blot)  
Labeled antibody  
Immuno-staining of blot  
Autoradiography  
Antigen bands  
Develop and fix autoradiograph

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## II. Histology and cytology

- ◆ Inclusion bodies
- ◆ Syncytia
- ◆ Tzanck test for VZV and HSV
- ◆ Negri bodies in rabies

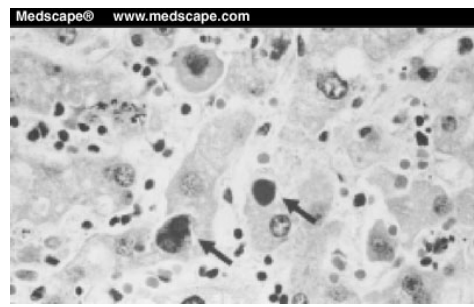
### Inclusion bodies



CMV: owl eyed nucleus

[www.asmus.org](http://www.asmus.org)

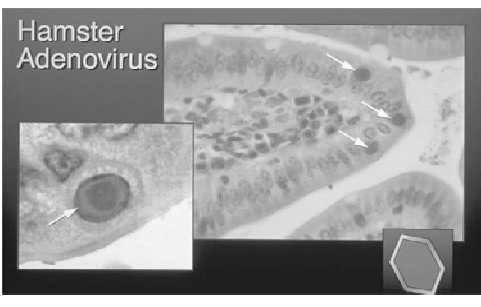
### Inclusion bodies



Medscape® [www.medscape.com](http://www.medscape.com)

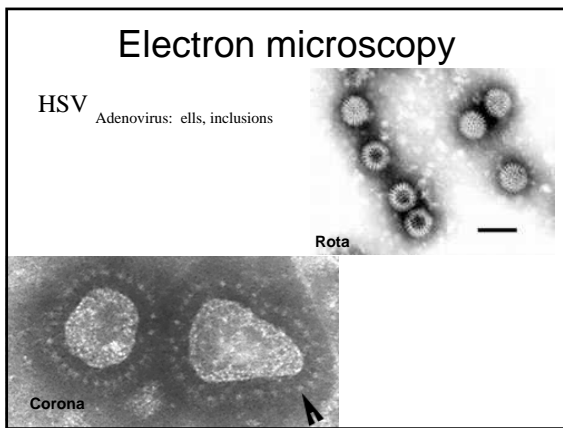
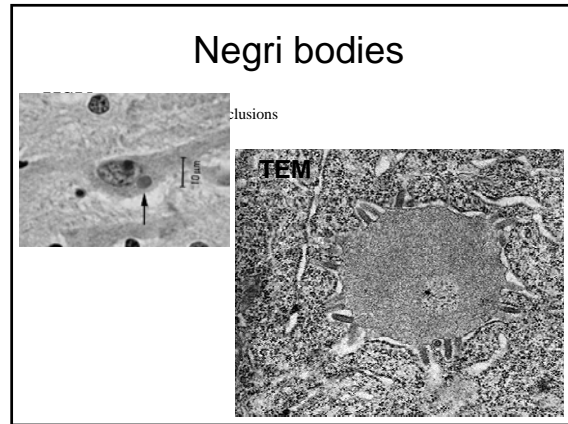
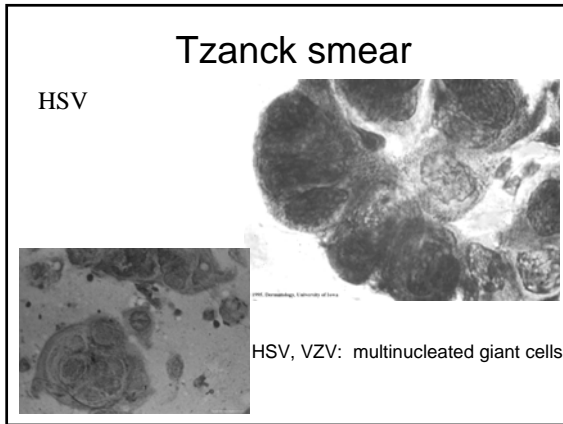
Adenovirus: cytomegaly, multinucleate cells, inclusions

### Inclusion bodies



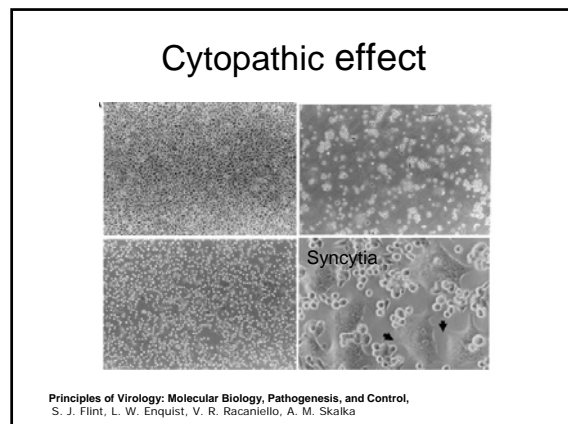
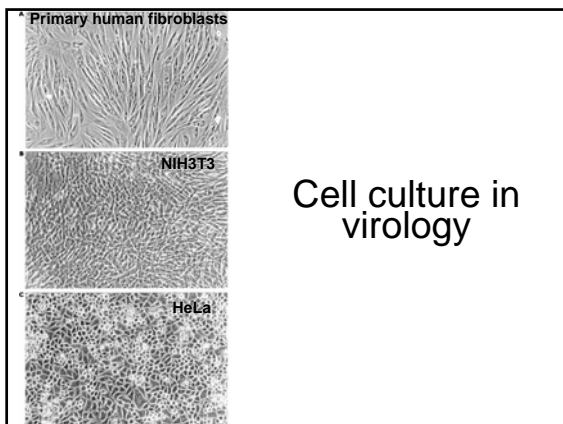
Hamster Adenovirus

Adenovirus: cytomegaly, multinucleate cells, inclusions



### III. Grow virus in culture

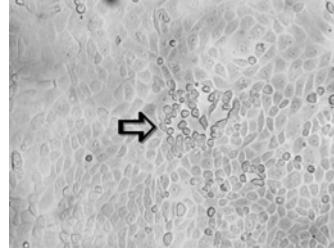
- ◆ Look for cytopathic effects (CPE) in culture
- ◆ Detect viral antigens by Shell vial culture



### Cytopathic effect

- Identify virus by type of cell it grows in, time to detection of CPE and morphology of CPE
- Rounding, syncytia, vacuoles etc
- Confirm with fluorescent-labeled antibodies
- Results in days to weeks

### Cytopathic effect



### Cell and Tissue-types for culture Screening cells

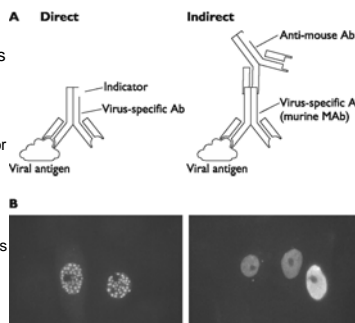
- Rhesus Monkey Kidney (1°)
  - ◆ Myxo-, Paramyxoviruses etc
- Human Embryonic Kidney (1°)
  - ◆ Very sensitive for adenovirus and important for lung transplants
- MRC-5 (human embryonic lungs)
  - ◆ CMV, VZV, HSV

### Cell-types for culture

- African Green Monkey Kidney
  - ◆ Rubella grows only on these
- Hep-2
  - ◆ RSV
- Vero
  - ◆ HSV
- Primary rabbit kidney
  - ◆ HSV, enteroviruses

### Cell culture plus IF

- Grow virus in culture
  - ◆ Detect viral antigens by Shell vial culture
  - Inoculate specimen into many vials (one for each virus to be tested)
  - Stain with specific antibody
  - Results in 1-2 days



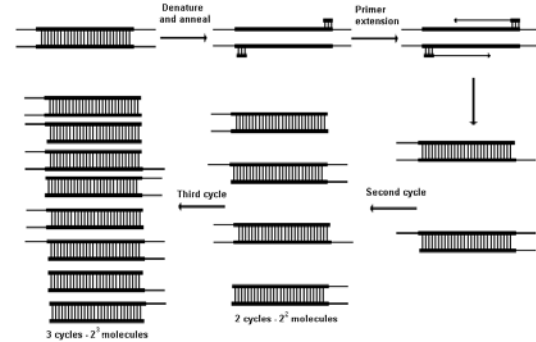
### Monoclonal antibodies (commercially available and FDA approved)

- |                          |                      |
|--------------------------|----------------------|
| ▪ HSV 1 and 2            | ▪ Adeno              |
| ▪ VZV                    | ▪ Mumps              |
| ▪ CMV                    | ▪ Measles            |
| ▪ Flu A and B            | ▪ Some enteroviruses |
| ▪ Parainfluenza 1, 2 & 3 | ▪ Chlamydia          |
| ▪ RSV                    |                      |

### Detect and analyze viral genomes

- ◆ PCR
- ◆ RT-PCR
- ◆ Quantitative PCR to detect viral load
- ◆ Branched DNA
- ◆ Hybridization, using microarrays
- ◆ Genotyping
- ◆ Phenotyping?

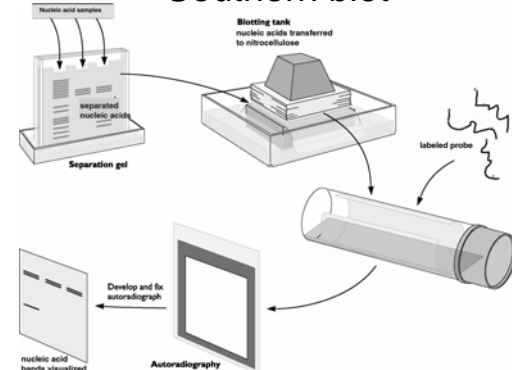
### Polymerase chain reaction



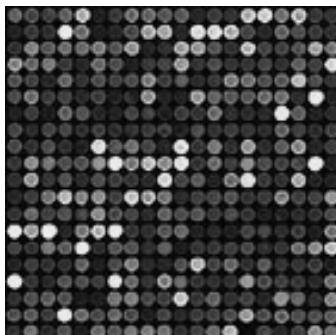
### Detect and analyze viral genomes

- ◆ PCR
- ◆ RT-PCR
- ◆ Quantitative PCR to detect viral load
- ◆ Branched DNA
- ◆ Southern blots
- ◆ Hybridization, using microarrays
- ◆ Genotyping
- ◆ Phenotyping?

### Southern blot



### Hybridization with microarrays



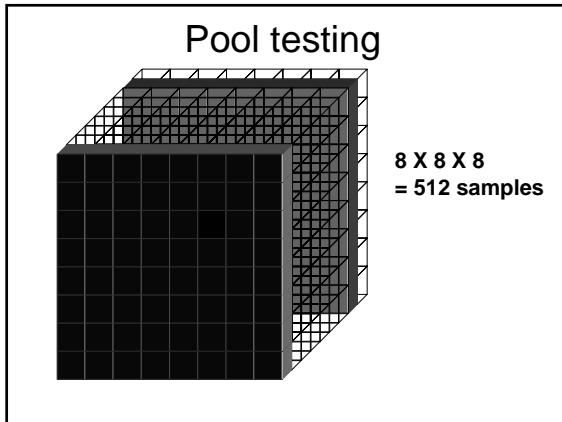
### Sensitivity of NAT

- Combination of PCR/Southern blot:  
95% confidence intervals

- ◆ HAV, 5-9 copies/ml
- ◆ HBV, 1-2 copies/ml
- ◆ HCV, 3-5 copies/ml

**Reduce risk of HCV transmission**  
**From 1:100,000 to**  
**1:500,000-1:1,000,000**

Data from National Genetics Institute, Labcorp



Other labs

- State Department of Health lab
- Centers for Disease Control
- Other commercial labs

NYDOH lab for viral encephalitis

- Herpes Simplex
- Varicella Zoster
- Cytomegalovirus
- Epstein-Barr Virus
- Enteroviruses
- St. Louis Encephalitis (SLE)
- Eastern Equine Encephalitis (EEE)
- California Encephalitis
- Powassan (POW)
- Rabies
- West Nile Virus

▪ Tests include: 1) PCR, and 2) ELISA.  
▪ Freeze leftover CSF at  $-70^{\circ}\text{C}$  in the event that PCR testing becomes necessary.

CDC

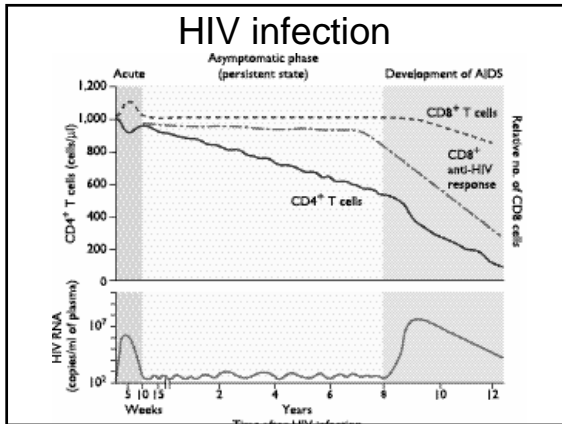
- Small pox, Hantavirus, Ebola etc
- Usually via the State labs

What specimen to collect?  
When?

Viremia

QuickTime™ and a  
TIF (TIFF) decompressor  
are needed to see this picture.

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- ### What specimen to collect? When?
- **Throat**
    - ◆ first presentation with fever (measles, mumps, rubella, also viral meningitis caused by enteroviruses and neonatal HSV). Vigorous swab, because you need cells.
  - **Nasopharyngeal swab or wash**
    - ◆ Flu, RSV, Rhino-, CMV (if lots of virus)
  - **Rectal**
    - ◆ entero- and adenoviruses (meningitis), rotavirus
  - **Urine**
    - ◆ Adenovirus (hemorrhagic cystitis)
    - ◆ MMR, after cleared from throat or sometimes concomitant
    - ◆ CMV and HSV (rare)

- ### What specimen to collect? When?
- **CSF**
    - ◆ PCR for HSV, VZV, CMV, adeno or flu
    - ◆ Rarely can grow coxsackie or echo
  - **Lesion**
    - ◆ VZV, CMV, measles (scrape for cells)
    - ◆ HSV, Tzanck smear
  - **Conjunctival**

- ### What specimen to collect? When?
- **Genital**
    - ◆ HSV, vulvar swab (not endocervical) in last month of pregnancy
  - **Buffy coats**
    - ◆ CMV (fresh specimen, <1hr)
  - **Bronchial and BAL wash**
    - ◆ RSV, Flu, Adeno-, CMV etc
  - **Other**
    - ◆ Biopsy, autopsy specimens

- ### Transport to lab
- Since we still depend on viral growth for diagnosis, rapid transport to lab is essential
  - Specimen on ice
  - Refrigerate if delay inevitable, DO NOT FREEZE
  - If need to store for more than 6 days, freeze at -70°C
  - Transport and store in viral transport medium
  - Enteroviruses more stable and will tolerate some delay
  - Hand delivery encouraged (also for better communication: viruses suspected, source of material)

- ### Web resources
- [www.cdc.gov](http://www.cdc.gov), get a free electronic MMWR subscription
  - [www.wadsworth.org](http://www.wadsworth.org)
  - HIV database: [hiv-web.lanl.gov](http://hiv-web.lanl.gov)
  - All the Virology on the WWW: [www.virology.net/garryfavwebindex.html](http://www.virology.net/garryfavwebindex.html)
  - Pan-American Society for Clinical Virology: [www.virology.org/](http://www.virology.org/)
  - [www.specialty.com](http://www.specialty.com)