

Gram Negative Cocci and Coccobacilli

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Neisseria

- *Neisseria* spp. are fastidious intracellular Gram negative diplococci which are oxidase positive
- *Neisseria* grow best on blood/chocolate agar at 37 °C in presence of humidity and 5-10% CO₂
- It is highly susceptible to dryness and low/high temperature and hence does not survive long in the environment
- Although many *Neisseria* spp. colonize humans, only *N. gonorrhoeae* (gonococcus) and *N. meningitidis* (meningococcus) are pathogenic to humans

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Neisseria

- *Neisseria gonorrhoeae*:
 - Characterized by presence of pilli and produce IgA protease which enable it to colonize mucous membranes; mainly in genital tract and anal canal
 - Gonococcal infection is often asymptomatic in females (as asymptomatic carriers that act as the main reservoir)
 - Gonococcus is transmitted via direct contact (i.e. sexual contact and hence considered STD) and mainly infects sexually active young adults. It can also transmitted to neonates during birth
 - Gonococcus causes gonorrhoea; an STD that mainly affects the genital tract in both males and females, it can also affect other body parts such as joints, skin and eyes

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Neisseria

- *Neisseria gonorrhoeae*:
 - In males, gonorrhoea causes acute urethritis characterized by dysuria and purulent discharge. It can ascend to cause epididymitis, prostatitis and orchitis resulting in infertility
 - In women, it causes cervicitis, urethritis and salpingitis; where it can also result in sterility
 - In neonates, it causes ophthalmia neonatorum, an infection of the conjunctiva
 - Gonorrhoea is mainly treated with penicillins or fluoroquinilones. Tetracyclines usually added since *N. gonorrhoeae* frequently co-infects with *Chlamydia*

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Neisseria

- *Neisseria meningitidis*
 - Meningococcus mainly inhabits the nasopharynx and transmitted by respiratory droplets or direct contact (i.e. kissing)
 - Based on their polysaccharide capsule meningococcal strains are divided into different serotypes; A, B and C are the most invasive
 - It causes meningococcal meningitis; a rapidly fatal disease that is usually accompanied by septicemia (i.e. meningococemia). It is characterized by hemorrhage, DIC and hematoma (i.e. petechiae)
 - Meningococcal meningitis is usually treated with penicillin G and 3rd generation cephalosporins (e.g. ceftriaxone). To prevent meningococcal outbreaks, close contact also treated with antibiotics (typically rifampin)
 - Vaccine is available for serogroups A and C but not B

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Moraxella

- Most important is *Moraxella catarrhalis*; a Gram –ve diplococcus that is catalase and oxidase positive
- Normal flora in the upper respiratory tract
- Opportunistic bacteria, common cause of sinusitis and otitis media. It can also cause pneumonia especially in COPD patients
- Often treated with amoxicillin-clavulanate or macrolides

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Haemophilus

- Most important is *Haemophilus influenzae*; a large fastidious Gram –ve coccobacillus that grows only in enriched media (i.e. blood agar containing X- and V-factors)
- Type b capsulated serotype (Hib) is most virulent
- Normal flora in the upper respiratory tract but as an opportunistic bacteria it causes many infections, some of which can be serious, including:
 - Upper RTI: sinusitis, otitis media, pharyngitis and epiglottitis
 - Lower RTI: pneumonia
 - CNS: meningitis
- Hib vaccine: highly recommended for children below 5
- Traditionally treated with a broad spectrum penicillin (e.g. amoxicillin) but since many strains are β -lactamase producing it is often replaced by amoxicillin-clavulanate, 2nd & 3rd generation cephalosporins, macrolides or fluoroquinolones

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Bordetella

- Most important is *Bordetella pertussis*, a fastidious Gram –ve coccobacillus
- Produces pertussis toxin and tracheal cytotoxin: damage ciliated cells
- Causes pertussis (whooping cough); a highly contagious infection that affects both upper and lower respiratory tracts and characterized by paroxysmal cough
- Pertussis occurs in stages:
 - Incubation period → catarrhal stage → paroxysmal stage (most severe) → convalescent phase
 - Most contagious during symptomatic stages (respiratory droplets)
- Vaccine is available; part of DTP (or DTaP)
- Usually treated with macrolides or sulfonamides (also for close contacts)

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Brucella

- Intracellular non-motile non-capsulated Gram –ve coccobacillus
- Three pathogenic species are known, most important is *Brucella melitensis* which is mainly present in goats and sheep
- Transmitted by unpasteurized milk/dairy products, undercooked meat and direct contact with animals secretions
- Causes brucellosis; a chronic zoonotic disease that affects many body parts
- Treated with antibiotic combination, usually including rifampin and tetracyclines

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