

Titanic Disaster (1912)

## **Presentation Order**

- Introduction
- **O2** requirement and bacteria
- Anaerobic respiration
- Anaerobic atmospher
- Anaerobic systems
  - Anaerobic indicators
- Anaerobe ecology
- Anaerobe bakteria and infections

# Introduction

#### Some bacteria;

- Energy supply via non-fermentative way
- 1 mol glucose 38 ATP (380 kcal chemical + 308 kcal heat energy) or,
- 15 ATP by Kreb cycle (15 kcal energy)
- **During this events;** 
  - Flavins, cytochrome and iron containing substances are used
  - NAD and NAD+, oxidised to NADH2
- Last electron receiver on sytoplasmic membrane is O<sub>2</sub>
  - These are "aerobibic bakteria"

### Introduction

#### Some bacteria;

1 mol glucose 2 ATP



- Nitrate, sulphate or inorganic nitrogen compounds are the last electron receiver on membrane
- Fumarate, CO<sub>2</sub>, cyanide, carbon monoxite, polyhidric alcohol or other organic compounds
- Do not need  $O_2$  and also  $O_2$  inhibits growth
- These bacteria "anaerobic bacteria"

#### <u>Anaerobiosis</u>

- Atmospheric composition for anaerobic bacterial growth
- Obraining Growth conditions
- Obtaining, maintenance and monetarising reduction potential within culture
- Microbiologic systematics that cover incubation and isolation principles

# **Bacteria according to O**<sub>2</sub> **requirement**

### **Obligate aerobe**

- Can not grow without O<sub>2</sub> or small colonies
- Bacillus, Legionella, Pseudomonas and M. tuberculosis

### **Fakültative anaerobe**

- Originally aerobe but can grow anaerobically by an alternative metabolism
- *Enterobacteria* and known many other bacteria family
  Fakültative aerobe???
- Originally anerobe, but can grow aerobically by an alternative metabolism

# **Bacteria according to O**<sub>2</sub> **requirement**

### Microaerophilic

- Can tolerate 4-6 % O<sub>2</sub>and can grow
- After many days small colonies at room atmosphere (below 20%  $O_2$ )
- Better grow at anaerobic atmosphere
- Lactobacillus and Camphylobacter

#### Aerotolerant

- Originally obligate anaerobe but can grow with 2-8%  $O_2$
- The border between aerotolerant and microaerophilic bakteria is not clear

### Obligate anaerobe

 Without oxygen or can grow on medium below 0.5 % O<sub>2</sub> Clostridium haemolyticum, C. novyi tip B, Selenomonas ruminatum, Treponema denticola, Bacteroides gracilis

### Anaerobes



### Anaerobic bakteria;

- Do not have catalase, peroxidase and süperoxite dysmutase
- □ Some anaerobes have catalase enzyme
  - Tsierella preacutus, Fusobacterium bullosum, Selenomonas sputigena, Prevotella intermedia

"It is still unclear how these bacteria can protect themselves from oxygen that they produce"

## **Anaerobic Respiration**

- Starter electron that is necessary for electron transport chain;
  - Either from environmental H2
  - Or from piruvate that is obtained from breaking down of hexoses (Embden-Meyerhof-Parnas Way)
- □ Up to know, similar to other bacteria
- Hexose breaking products is special to anaerobes



## **Anaerobic Respiration**

*Clostridium* (*C. saccharobutyricum*) and *Butyribacterium* species,
 Butyrate, asetate, CO<sub>2</sub> and H<sub>2</sub> by fermentation of glucose

- Some Clostridum species(C. acetobutylicum and C. butyricum)
  - Butanol, acetone, izopropanol, formate and ethanol
- Propionibacterium species;
  - Propionic acid
- Veillonella species;
  - CO2, propionate, acetate and succinate

- Peptostreptococcus magnus µm
- Other some anaerobes (*Bacteroides ruminicola* and *Peptostreptococcus* species)
  - Oxaloacetate, malate, fumarate and propionate

### **Anaerobic Respiration**

- □ Last electron receiver for anaerobe bakteria;
- □ Nitrate (NO3), sulphate (SO4-2), fumarate, lactate, acetate, arsenic, CN or CO<sub>2</sub>
- **Commonly last electron receiver nitrate**
- Nitrate transfer to nitrite (NO2), nitrogen gas(N2) or amonnia (NH3) 4AH2
  + NO3> 4A + NH3 + 2H2O + Energy
- Lst electron receiver of *Fusobacterium* is sulphate
  - 4AH2 + H2SO4 ---> 4A + **H2S** + 4 H2O + Energy
- Last electron receiver of *Bacteroides, Eubacterium* and *Peptostreptococcus is* fumarate transform to succinate
  - AH2 + HOOC=CH-COOH ----> A +**HOOC-CH2-CH2-COOH** + Energy
- Last electron receiver of *Capnocytophaga* and *Archaebacteria* is CO2
  - 4 AH2 + CO2 ---> **CH4** + 2H2O + Energy (2 ATP)

### Anaerobic Atmosphere

### $\square$ Indoor air 80 %N<sub>2</sub>, 10 % H<sub>2</sub> , 10 % CO<sub>2</sub>

- When H<sub>2</sub> is given externally
- Mix with environmental O2
- Gas composition changes to 80 % N2, 10 % H2O, 10 % CO2

"Anaerobic atmosphere"



#### **Gas-Pack 100 Anaerobic systems**

- 60 min later O2 level becomes 0.2 0.5 %
- Eh potential become s -229 mV
- **O2** tolerant anaerobic bacteria can die within this period
- Pathogen anaerobes do not die with initial contact with O2
- Some can tolerate air contact 30-60 sometimes 100 min
- Jar method is poular for this reason
- Also practical and cheap



· Annerskie System



### **REDUCTION POTENTIAL (Eh):**

- Electron transmitter (donor, redactor or veya reductant)
  - Oxidising chemical substance within an ozidization event
  - Electron receiver (recipient, oksidant)
  - Reductor chemical substance within an oxidization event
  - This system is called redox system
- □ A redox system;
  - Electron chemicals in oxidising is called oxidation half cell Electron chemicals in reducing is called reduction half cell

- Measurable electric charge within system ölçülebilir
  Electrode potential
- Electron potential of oxidation half cell;
- **Oxidation potential**, positive
- Potaential of reduction half cell;
  Reduction potential (Eh), negative



- Anaerobe bakteria;
  - Produce Reduction potential in low düşük environments

#### □ Anaerobe media;

- Adding some substances (lower reduction potential (reductase)
  - L-cystine, cystein HCl, Na-thioglycolate, ascorbic acid, sodium bisulphide, glutathione glukoz, metallic iron, boiled beef
- Media is sensitive to oxygen
  - Shoud be used fresh
- If stocked, closed tightly
- **Boiled before used in order top remove soluble oxygen**
- Anaerobe bouillons should be freezed (at least 8 ml)



## **Anaerobe Indicators**

- During incubation;
  - Watch Eh potential of medium
  - Use Eh indicator stain if necessary
- Medium is in different colour if it is oxidised or reduced
- **r**esazurin, methylene blue and litmus
  - First they are colourless and become colourful when contact with O2
  - Resazurin become red when contact with O2, methylene blue become colourful

**These stains become clourless if they loss O2 by boiling** 

**Oxic zone** 

Anoxic zone

Figure 6-25 Brock Biology of Microorgan



- **Good bleeding tissue;** 
  - Generally do not produce anaerobic infection
  - Becouse, kanın Eh potential of blood is approximately +150 mV
- For an anaerobe infection;
  - Tissue should lose oxygen
- Anaerobic infections generally;
  - Can occur in necrosis, non bleeding tissue
  - In such tissu Eh voltage become lower than -250 mV and become an anerobic condition

- Mesentery, colons, appendix, bursa, ovarium, muscular tissue and peritoneum;
  - Anatomically no oxygen reach region
  - Any injury, sensitive to anaerobic infections



Anaerobic peritonitis

### Question

Can obligate abaerobic bacteria grow on condition with plenty of oxygen such as respiratory epithelial, conjuctiva or gingiva mucosa?

- □ Within and surface of tissue;
  - Regions that anaerobes can protect from O2
- Hiding from O2
  - Cilia on mucosa
  - Regions where host tissue secretions cover mucosa
  - Mucosa on nasal passage
- Teeth and saliva
- Surfactant like secretions in lung alveoli
- Crypt on tonsils
- Produce oxygen free surfaces

- □ Anaerobe bacteria;
  - More common in periapical lesions
  - But limited numbers in marginal gingivitis flora
    Becouse gingiva is not as close tissue as root canal and contact with O2
- Anaerobe bacteria colonization;
  - Depth of Gingiva
  - Bones that have periodontal tissue loss doku
  - Approximal surfaces of teeth

#### □ Also;

- Advanced periodontitis
- Bad prothetic restoration
- Relaxed or krone with hole and bridges
- Surfaces of total and partial prothesis on mucosa
- Tongue papilla
- Tartar and decay floor

Oxygen fail to reach and anaerobe ecology can produce

- Bad mouth hygiene and insufficient cleaning trigger anaerobic ecology
- Fusobacterium produce Vincent stomatiti and necrosis ulcerative gingivitis

- □ Other factors for anerobic ecology in host tissue;
  - Obligate aerobic bacteria of flora can use limited oxygen quickly
  - Thus, conditions will be suitable for anaerobic bacteria

### Necrotic tissues;

- Deep injuries,
- Crushed and ripped injuries
- İnjuries with foreign substances in it
- Decubitus ulcers

# **Anaerobic Bacteria and Anaerobic Infections**

### Clinically important anaerobes;

- Spore forming, Gram pozitive basilli:
  - Clostridium, Desulfotomaculum.
- Non spore forming, Gram pozitive basilli
  - Actinomyces, , Lactobacillus, Propinibacterium
  - Acetobacterium, Arcanobacterium, Bifidobacterium, Eubacterium, LachnospiraMethanobacterium,
- Non spore forming, Gram pozitive cocci:
  - Peptococcus, Peptostreptococcus, Caprococcus, Gemmiger, Ruminococcus, Sarcinia, Gamella



# **Anaerobic Bacteria and Anaerobic Infections**

- □ <u>Non spore forming, Gram negative basilli:</u>
  - Bacteroides, Fusobacterium, Porphyromonas, Prevotella, Acetivibrio, Acidaminobacter, Anaerovibrio, Anaerorhabdus, Anaerobiospirillum, Anaerobacter, Bilophila, Capnocytophage,
  - Desulfobacter, Desulfobulbus, Desulfococcus, Desulfosarcinia, Desulfomonas, Desulfuromonas, Desulfovibrio, Dichelobacter, Fibrobacter,
  - Leptotrichia, Megamonas, Mitsuokella, Mobilincus, Pelobacter, Pectinatus, Progiogenium, Propionispira, Rikenella, Roseburia, Ruminobacter, Sebaldella, Selenomonas, Serpula, Spirochaeta, Succinomonas, Succinovibrio, Tisierella, Wolinella.
- Non spore forming, Gram negative cocci :
  - Veillonella, Acidaminococcus, Megasphera

#### Reasons of Anaerobe infections

Low reduction potential Sufficient blood can not be found in tissues

#### □ Anaerobe infections;

- Nosocomial diarrhea, botulismus, diarrhea, clostridial myonecrosis, septic abortus, gas gangrene, actinomiycose apses, closed organ apses, aspiration pneumonia, apandicitis, cholecystitis, cellulitis,
- Diş kökü ve dişeti infeksiyonları, stomatit, endokardit, beyin apsesi, menenjit, osteomyelit, orta kulak iltihabı, peritonit, septik artrit, kronik sinüzit, ampiyem ve tetanoz

Infection Type	Anerobe (%)
Aspiration pneumonia, lung apses and necrotic pneumonia	85-93
Bacteremia	9-20
Sinusitis	50-100
Thoracic empyemata	76
Brain apses	83
Root canal infections	99
Gingivitis and Periodontitis	84
Appandicitis and colon surgical injuries	79-95
Subcutaneous apses	60
Nonclostridial crepitan cellulitis	75
Pilonidal sine	73
Diabetes ulcerand gangrene	63-85
Urinary system Infections	1

- Most common anaerobes
- B. fragilis, B. thetaiotaomicron
  (Penicillin and analogs, tetracyclines, 3. generation s-cefalosporin, quinolon and aminoglycoside resistance)
- **Clostridium** species, and *Fusobacterium*;
  - Assertive anaerobic infections
- Less common anaerobe infections;
- Actinomycosis (cronic, granulomatous and suppuratibe apses)
  - Most common agnets: *A. israelii, A. naeslundii, A. viscosus, A odontoliticus, A. meyeri.*

- Propinobacterium propionicum infections
  - Especially endocarditis in implant prothesis users

#### **Gram pozitive anaerobe cocci**

- Especially bone, joint and abdominal material (10%)
- Peptostreptococcus magnus, P. asaccharolyticus, P. prevotii, P. anaerobius ve Streptococcus intermedius





- □ Infective tooth root canal anaerobic pathogens;
- Fusobacterium nucleatum, Porphyromonas, Prevotella, Peptostreptococcus, Eubacterium, Lactobacillus, Wolinella recta, Streptococcus anginosus, Actinomyces israelii, Capnocytophage ochracea, Selenomonas sputigena, Veillonella parvula, Treponema denticola, Propinobacterium propionicum ve Acidaminococcus

