

Invasive *Salmonella* infections in Africa

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Te Whare Wānanga o Ōtāgo



Centre for
International
Health

Overview

- ***Salmonella* basics**
- **Typhoidal *Salmonella* in Africa**
- **Invasive non-typhoidal *Salmonella* disease in Africa**
 - **Hazards Associated with Zoonotic enteric pathogens in Emerging Livestock meat pathways (HAZEL)**

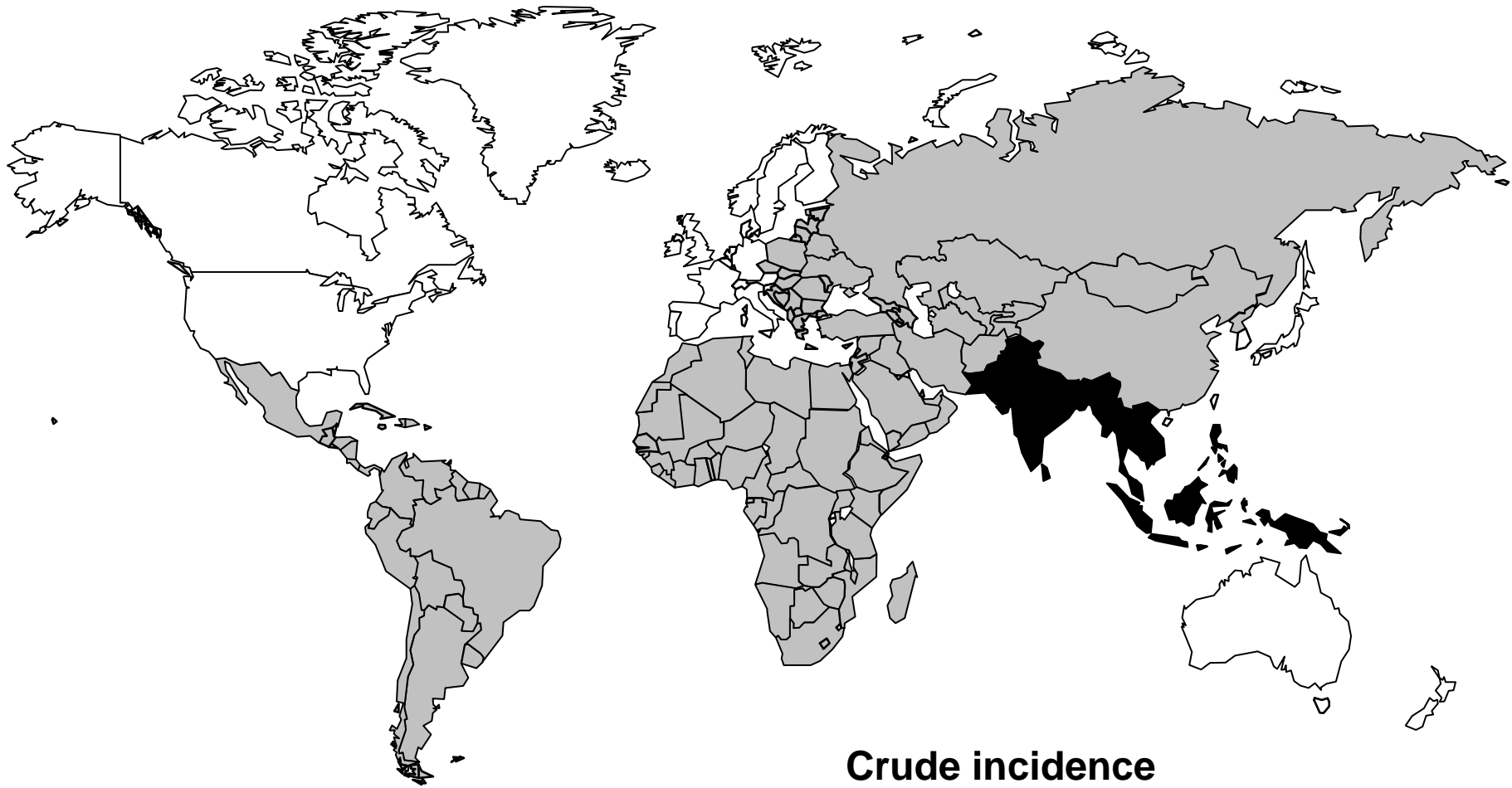
***Salmonella enterica* basics**

- **Typhoidal *Salmonella***
 - *Salmonella enterica* serovars Typhi, Paratyphi A
 - Human host restricted
 - Fever, bloodstream infection: typhoid and paratyphoid (enteric) fever
 - Case fatality ratio ~1%
- **Non-typhoidal *Salmonella***
 - >2,500 serovars e.g., Typhimurium, Enteritidis
 - Non-human animals: generalist, host adapted, host restricted
 - Diarrheal disease in industrialized countries
 - Fever, bloodstream infection in Africa, ~20% case fatality ratio

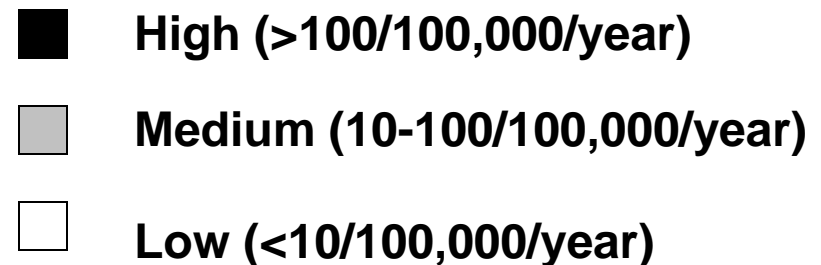
Typhoidal *Salmonella* in Africa

- **Typhoid incidence in Africa south of Sahara lower than south and south east Asia**
- **Expanded surveillance studies**
 - **Incidence higher than previously thought in some areas**

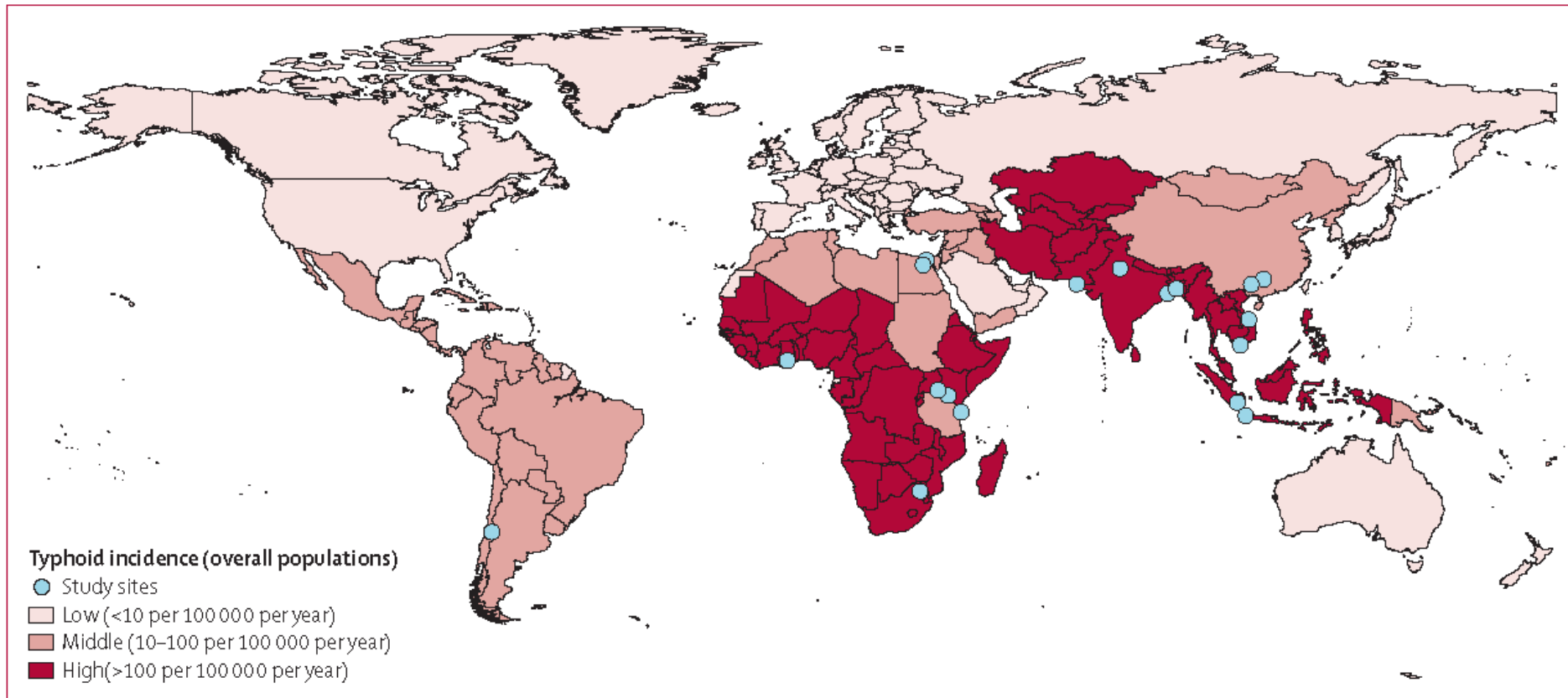
Typhoid fever incidence by country, 2000



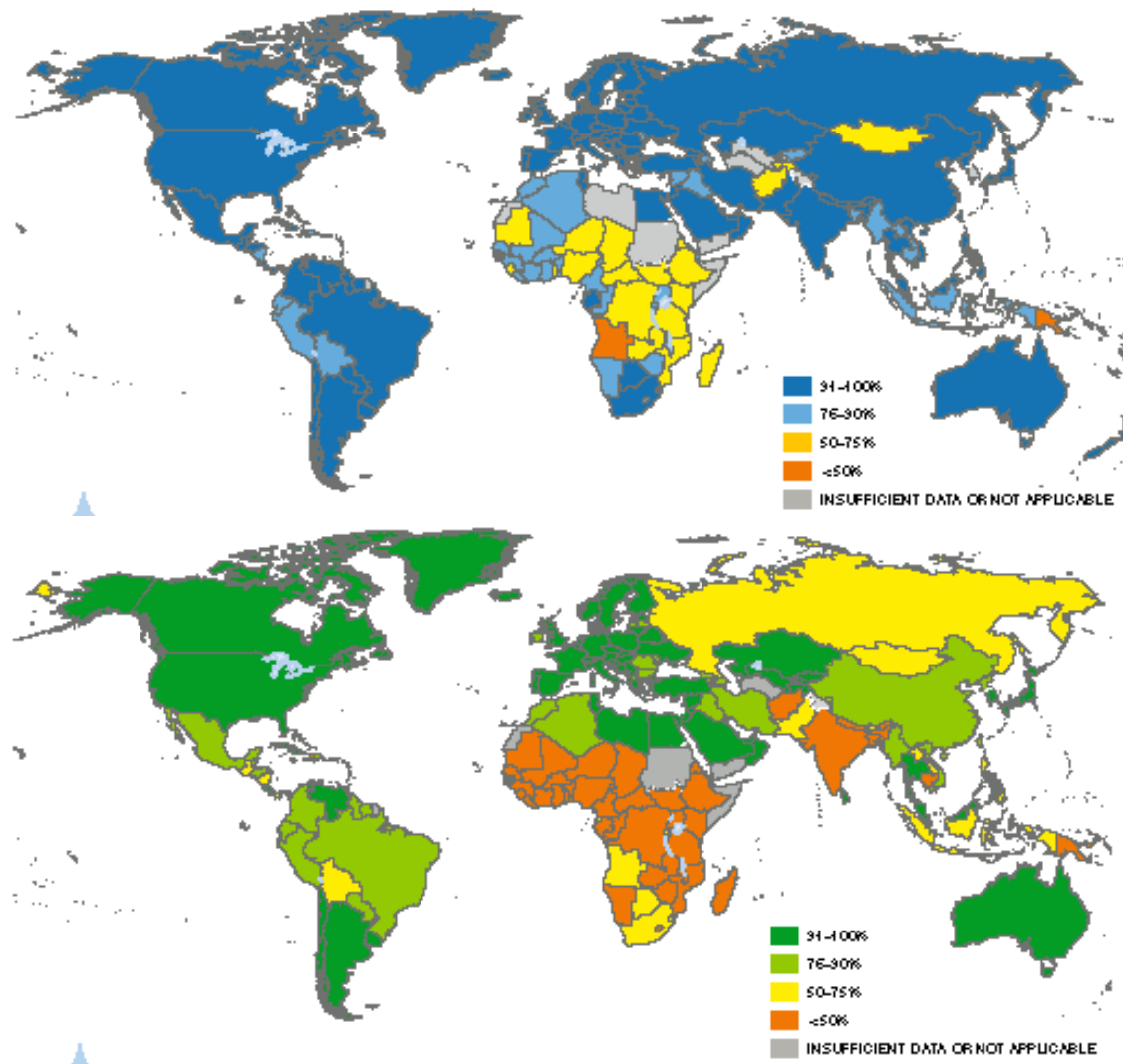
Crude incidence



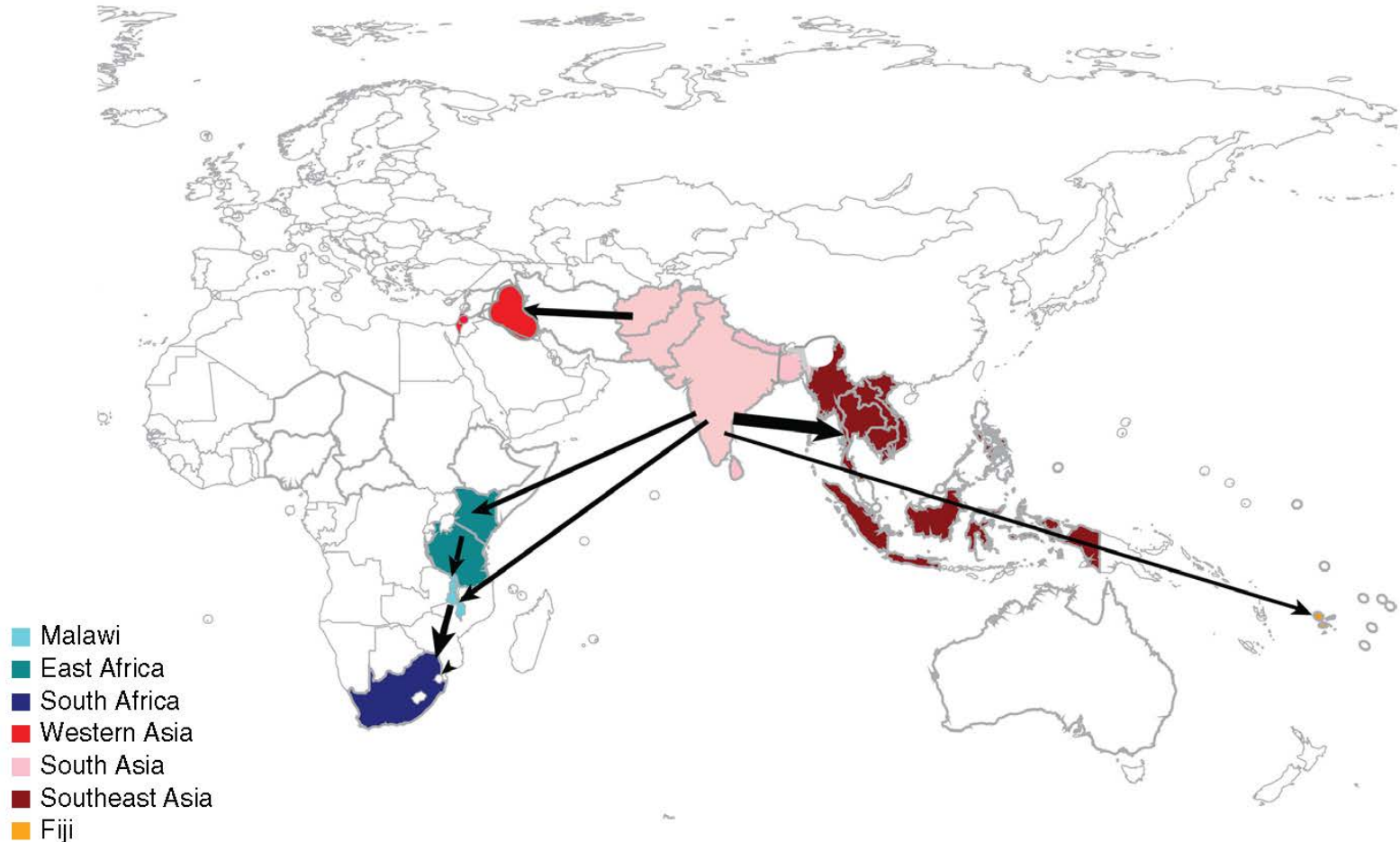
Typhoid fever incidence by country, 2010



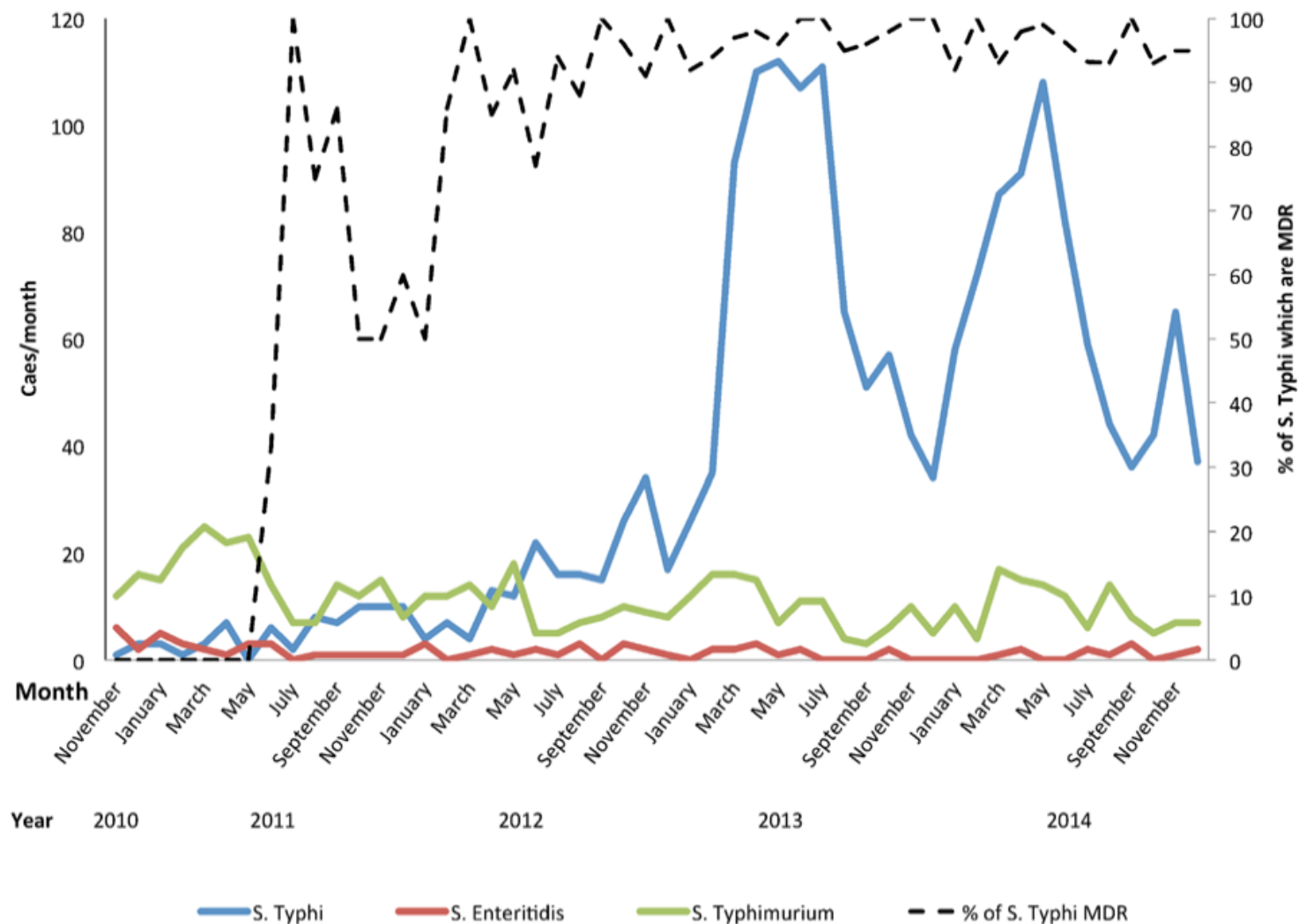
Proportion of population with access to improved drinking water and sanitation, 2015



Major geographical transfers of *Salmonella* Typhi H58



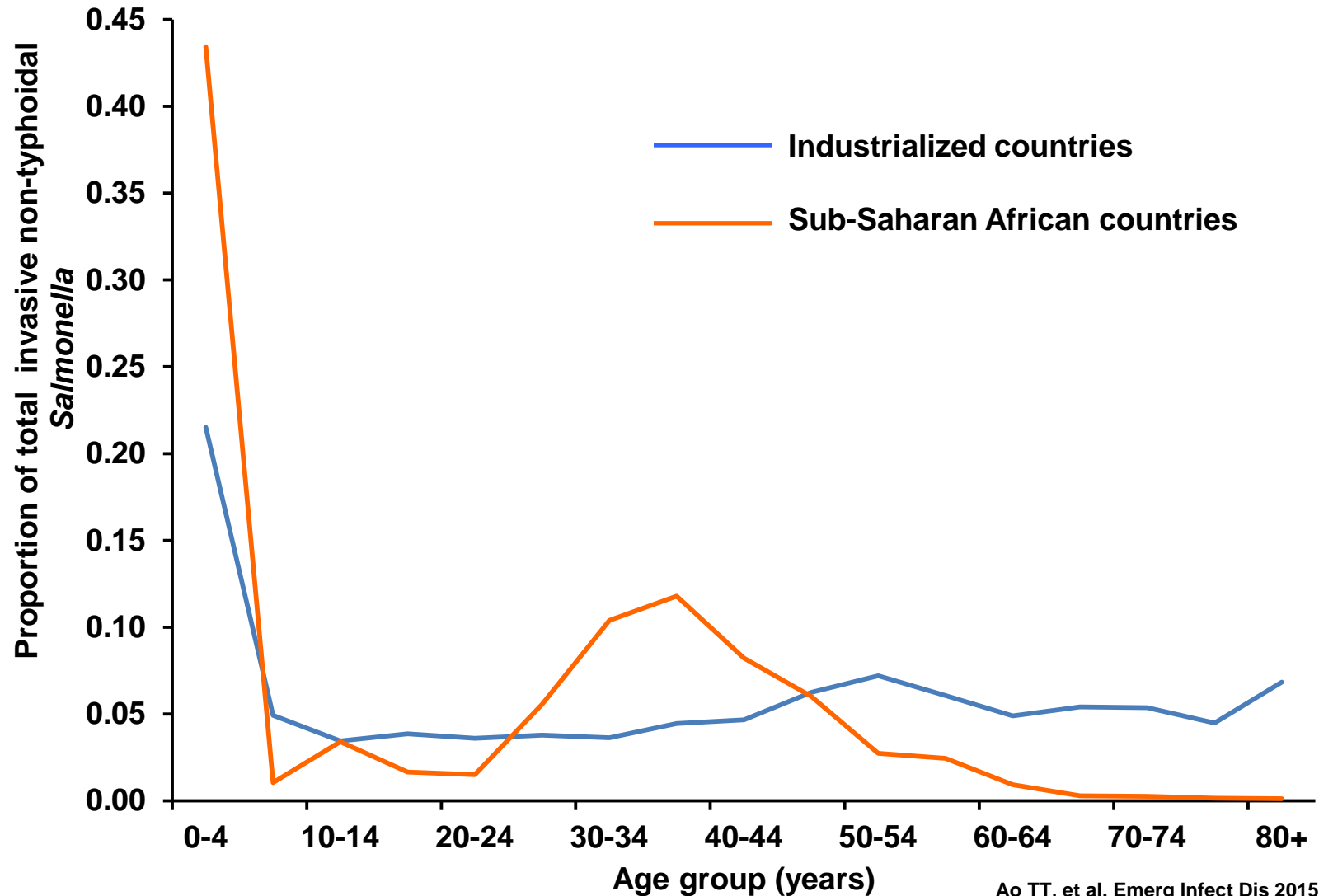
Monthly trends *Salmonella* bloodstream infections, Blantyre, Malawi, 2010-2014



Non-typhoidal *Salmonella* infection in humans

- **Industrialized countries**
 - Foodborne transmission
 - Common cause of self-limited diarrhea
 - Occasionally invasive disease: infants, elderly, immunocompromised
- **Sub-Saharan Africa**
 - Transmission vehicles poorly understood
 - Leading community-acquired bloodstream infection
 - Uncommon cause of moderate to severe diarrhea

Proportion invasive NTS by age, industrialized and sub-Saharan African countries



Global incidence of enteric and invasive NTS, 2009 and 2010

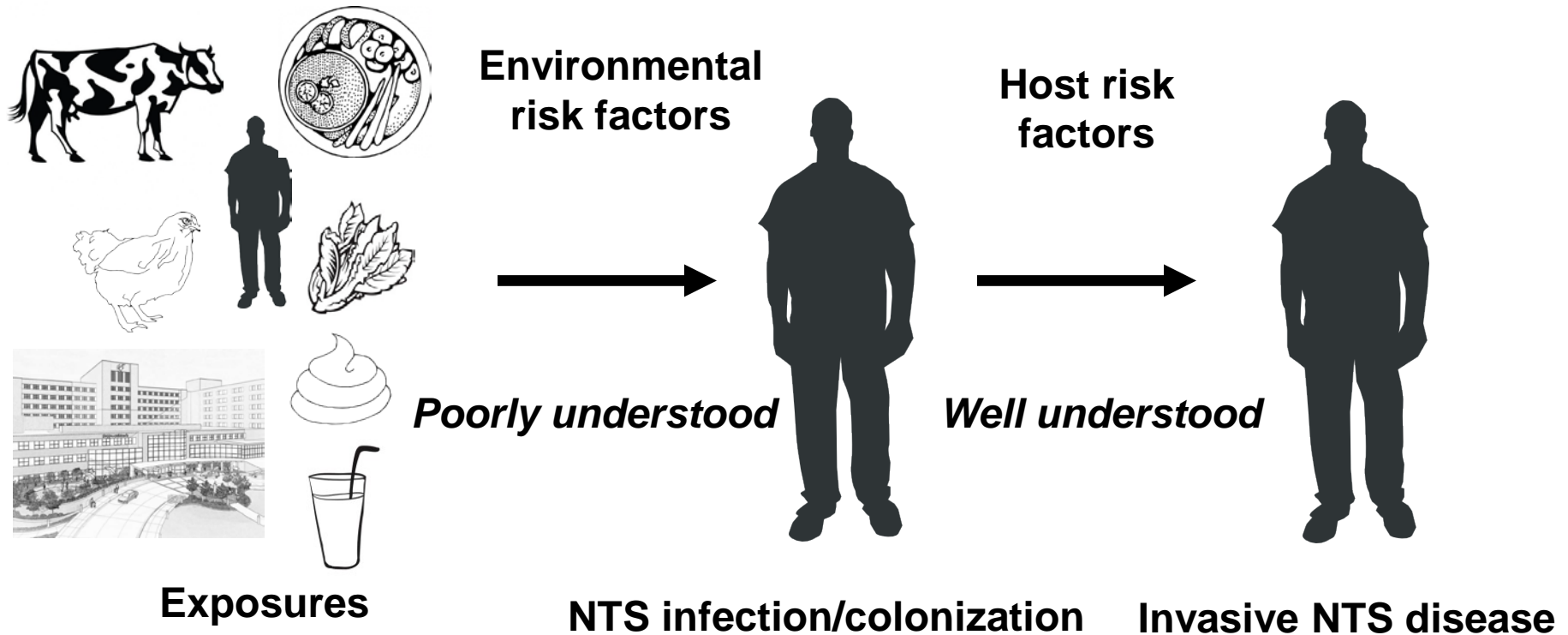
Region	Enteric NTS 2009			Invasive NTS 2010		
	Population (000s)	Cases	Incidence (/100,000)	Population (000s)	Cases	Incidence (/100,000)
North Africa/Middle East	410,800	563,000	140	446,721	3,617	<1
Africa	767,239	2,458,000	320	854,091	1,942,776	227
Asia/Oceania	1,628,815	53,610,000	3,280	1,693,046	13,920	<1
Southeast Asia	2,072,274	29,839,000	1,440	2,220,248	472,263	21
Europe	738,071	5,065,000	690	746,372	763,191	102
Americas	888,437	2,222,000	250	934,132	210,811	23
GLOBAL	6,511,638	93,757,000	1,140	6,894,610	3,406,579	49

Invasive non-typhoidal *Salmonella* death estimates in context

Condition	Year	Source	Deaths
Enteric NTS	2009	Majowicz SE	155,000
Typhoid and paratyphoid fevers	2010	GBD	190,200
Invasive NTS disease	2010	Ao TT	681,316
Protein-energy malnutrition	2010	GBD	599,800
Malaria	2010	GBD	1,169,500
HIV	2010	GBD	1,465,400

Majowicz SE, et al. Clin Infect Dis 2010; 50: 882–889
Ao TT, et al. Emerg Infect Dis 2015; 21: 941–
Lozano R, et al. Lancet 2012; 380: 2095-128

Pathway to invasive NTS in sub-Saharan Africa



Conclusions

- **Typhoid fever appears to be a growing problem in Africa**
 - Highly receptive due to poor improved water and sanitation coverage
 - Arrival of *Salmonella* Typhi H58 coincides increased incidence, epidemics
- **Invasive non-typhoidal *Salmonella* disease**
 - Highest incidence in infants, young children, and young adults
 - Large number of deaths
 - Incomplete understanding of sources, limiting prevention efforts

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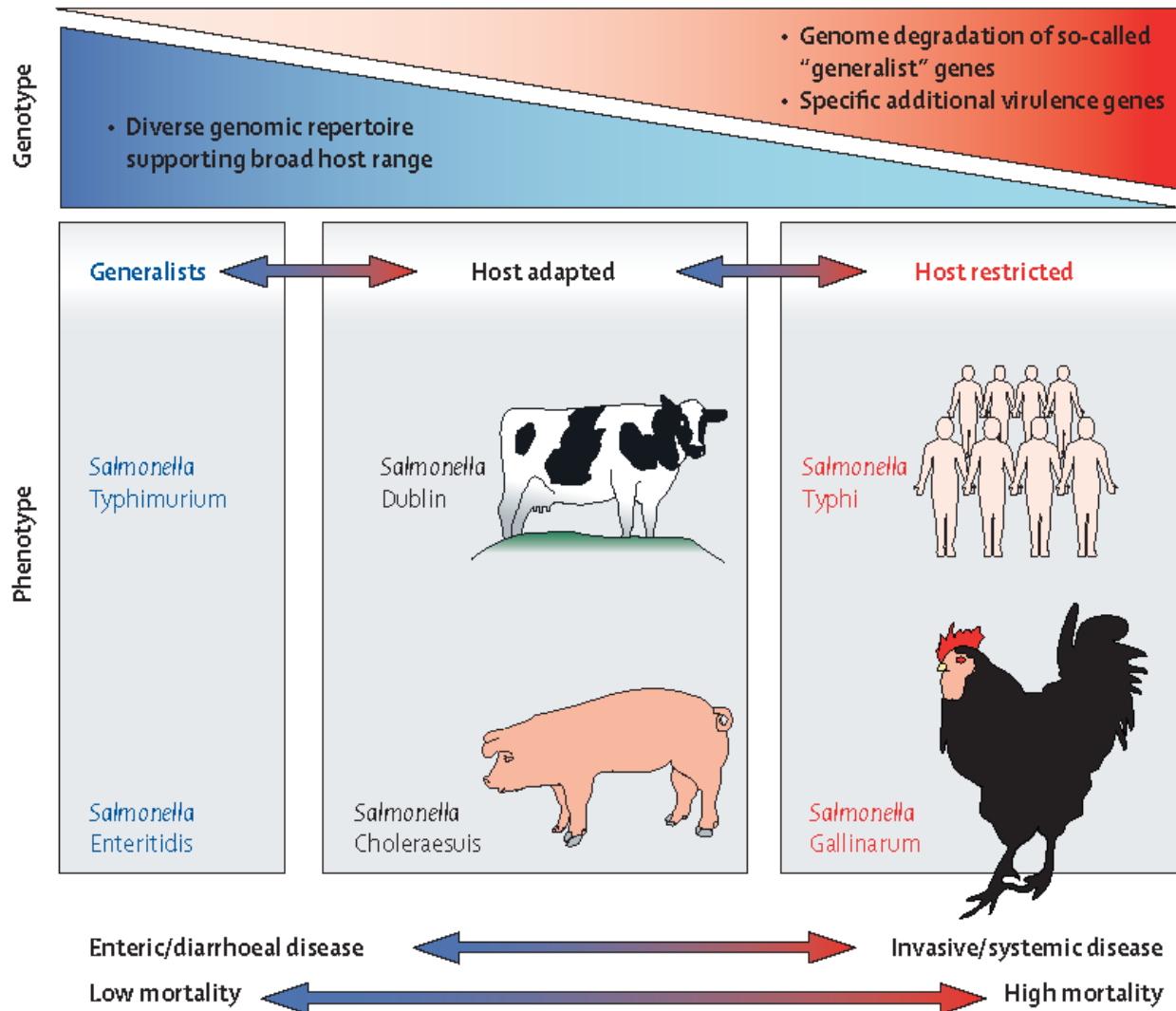
Invasive *Salmonella* Disease in Africa



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A Supplement to *Clinical Infectious Diseases*

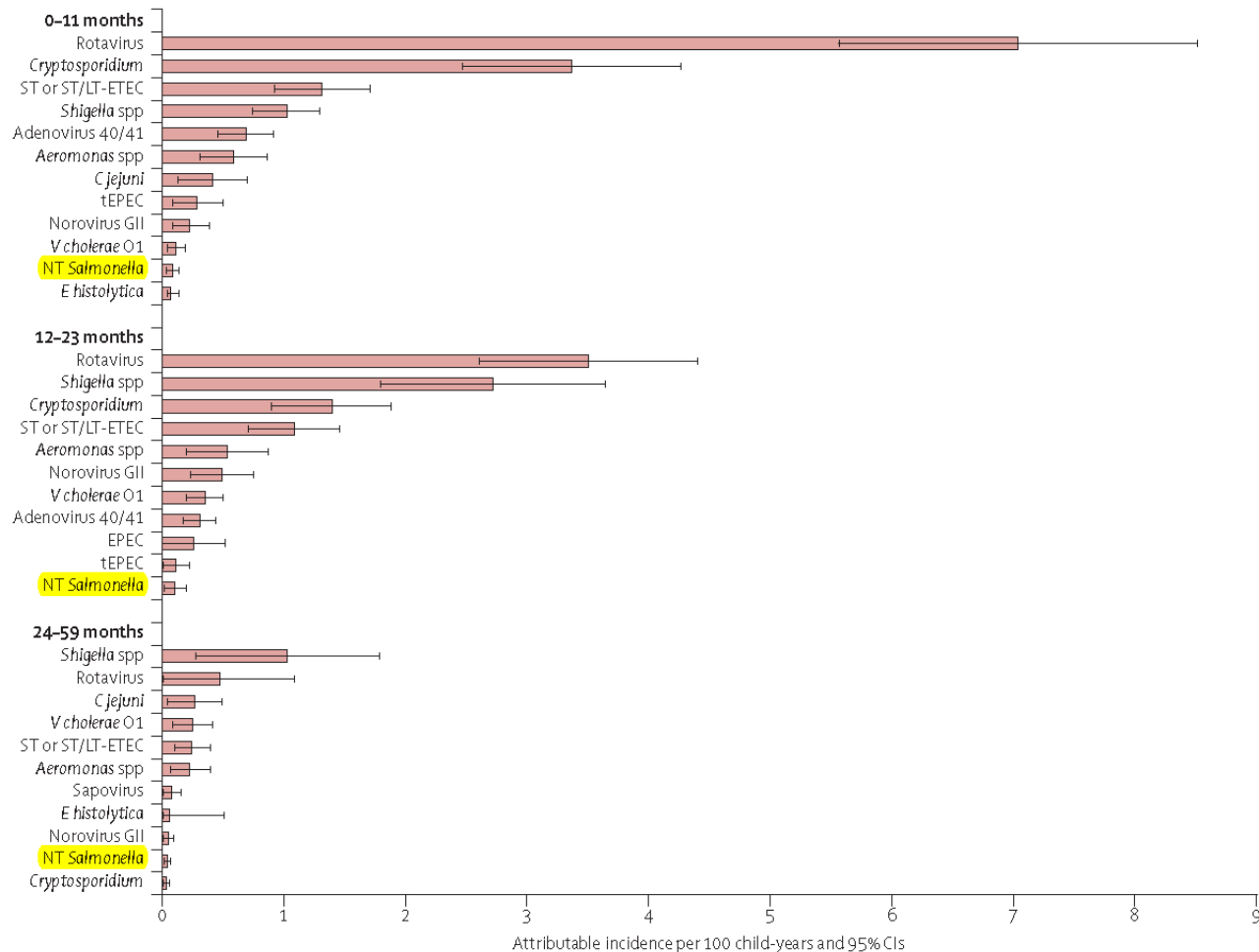
Host adaptation among *Salmonella* and clinical syndrome in the host



Clinical disease

- **Bacteremia with sepsis**
 - Fever 95%
 - No apparent focus 35%
- **Non-specific presentation**
 - Diarrhea 20-50%, not prominent
 - Pneumonia 60% children, 30% adults
 - Splenomegaly 30-45%
 - Hepatomegaly 15-35%
- **Case fatality ratio high**
 - 20-25%
- **Recurrence 20-30%**
 - 80% due to recrudescence

Attributable incidence of pathogen-specific moderate-to-severe diarrhea per 100 child-years by age stratum, all sites combined



Host risk factors

- **Age**
 - Infants and young children
- **Malaria**
 - Recent malaria > current malaria
 - Severe malarial anemia
 - Sickle cell disease
 - Not with cerebral malaria
- **Malnutrition**
 - Severe acute malnutrition
- **HIV**
 - CD4-positive T-lymphocyte count <200 cells/mm³

Section of Tropical Diseases and Parasitology.

[November 7, 1929.]



Paratyphoid C an Endemic Disease of British Guiana : A Clinical and Pathological Outline. *B. paratyphosum* C as a Pyogenic Organism : Case Reports.

By GEORGE GIGLIOLI, M.D.

of which 80 were confirmed bacteriologically by isolation of the specific organism from the blood during life, or from the spleen post mortem. The disease appears to be endemic in the Colony, with a tendency to occasional epidemic outbursts, two of which were observed in 1924 and 1926 respectively, in coincidence with important malarial outbreaks.

DEC.—TROP. DIS. 1

THE JOURNAL OF INFECTIOUS DISEASES • VOL. 155, NO. 6 • JUNE 1987
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***Plasmodium falciparum* Malaria and *Salmonella* Infections in Gambian Children**



Malaria and invasive NTS

- **Invasive NTS incidence varies in space with malaria transmission intensity**
 - Moshi vs. Teule, Tanzania
 - Nairobi vs. Kisumu, Kenya
- **iNTS incidence varies in time with malaria transmission intensity**
 - Rising malaria: Kisumu, Kenya
 - Declining malaria: Fajara and Basse, Gambia; Teule, Tanzania

Mechanism for malaria and invasive NTS association

- **Hemolysis-associated neutrophil dysfunction**
- **Parasite-induced IL-12 reduction**
- **Free iron**
- **Increased gut permeability**
- **Perturbation of the gut flora by sulfadoxine-pyrimethamine**

HIV and invasive NTS

- **Proportion of invasive NTS cases with HIV-infection**
 - Infants and children: 20%
 - Adolescents and adults: 95%
- **Mechanisms**
 - Loss on IL-17 producing CD4 cells in gut mucosa
 - Excess anti-LPS IgG inhibiting serum killing of extracellular *Salmonella*
 - Dysregulation of proinflammatory cytokine response allowing intracellular survival and persistence

The pathogen

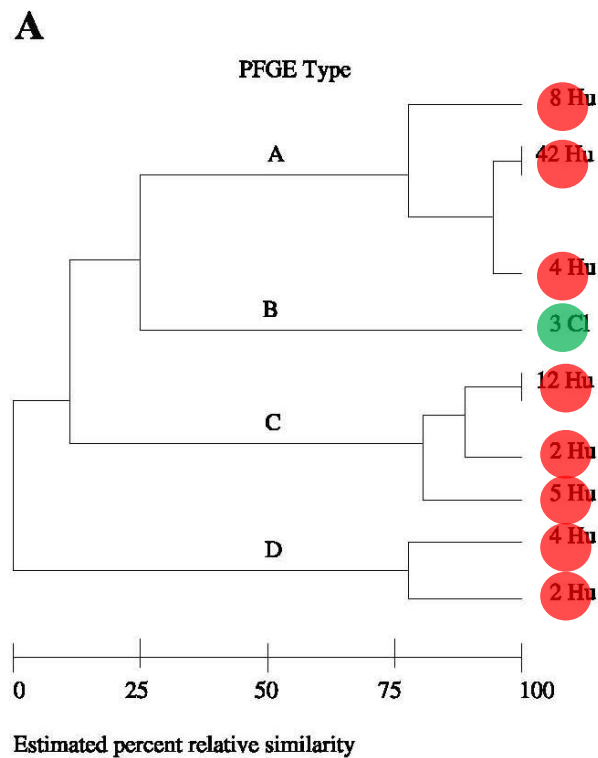
- ***Salmonella* Typhimurium ST 313**
- **Genomic features of human host adaptation**
 - Genome degradation
 - Not host restricted
 - Will infect and cause disease in poultry
- **Antimicrobial resistance**
 - Ampicillin, trimethoprim-sulfamethoxazole, chloramphenicol
 - Fluoroquinolones
 - Extended spectrum cephalosporins

Environmental risk factors

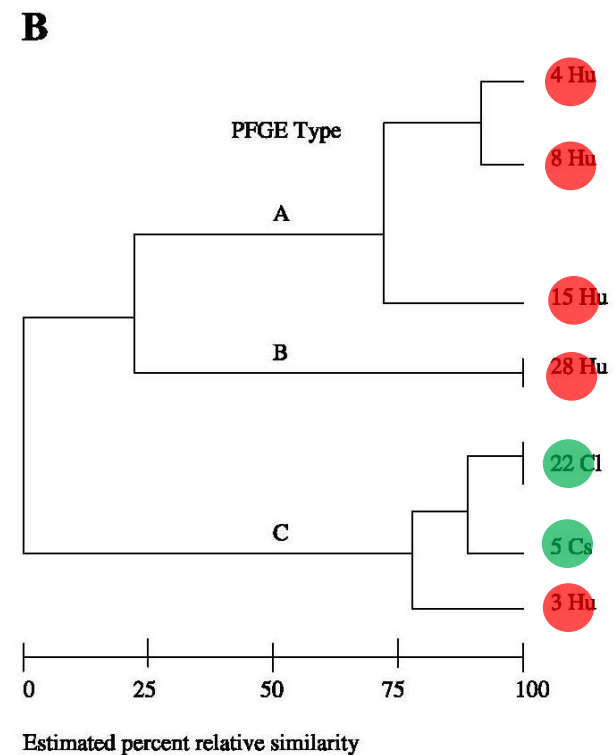
- **Industrialized country paradigm**
 - Food animal products
 - Feces contaminated produce and water
 - Direct and indirect animal contact
- **Sub-Saharan African country challenges**
 - Little epidemiologic research
 - Understanding infection/colonization
 - Genomic data suggest human host adaptation

Molecular relatedness of NTS isolated from humans and their peridomestic animals

Salmonella Typhimurium



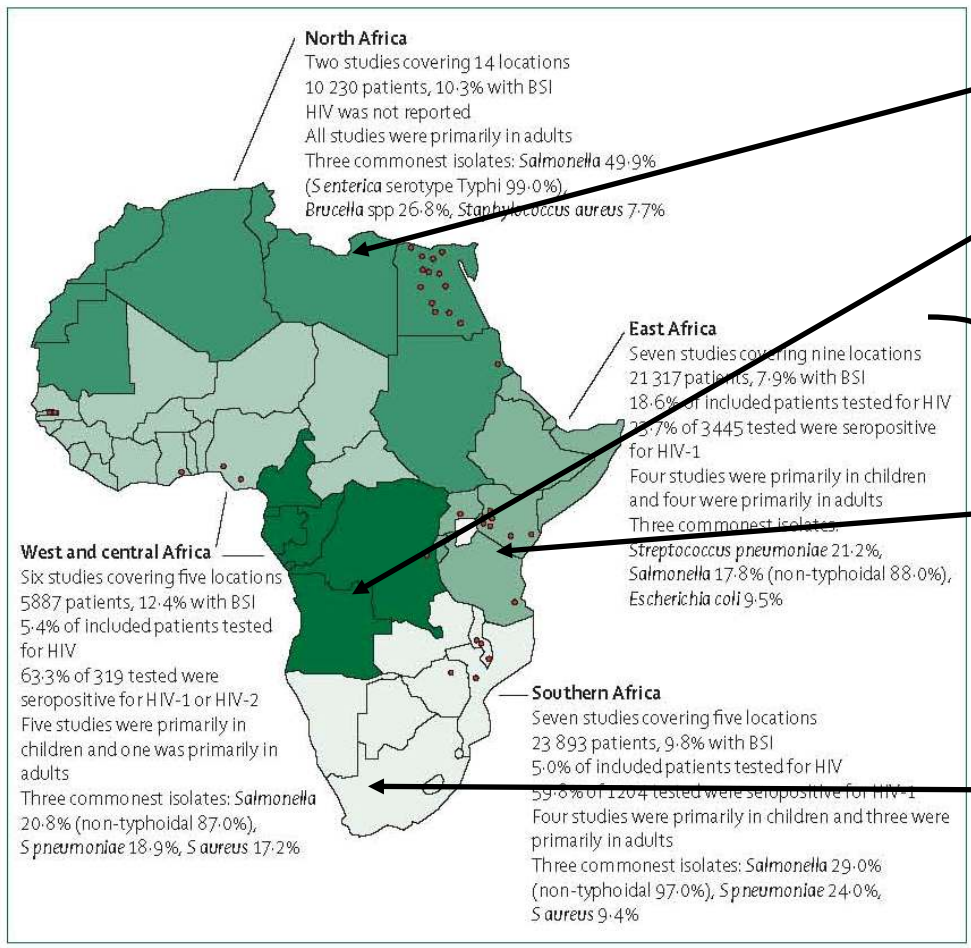
Salmonella Enteritidis



Vaccines

- **Polysaccharide Vi**
 - Glycoconjugate polysaccharide-protein
 - Expand to relevant O and H antigens
- **Live attenuated Ty21a**
 - New live attenuated vaccines, multiple serovars
- **Whole cell inactivated**
 - Generalized Modules for Membrane Antigens (GMMA)
 - Recombinant purified protein
 - Select cross-protecting recombinant or purified proteins
- **Host factors**
 - Immunogenicity
 - Safety (live attenuated)

Community-acquired bloodstream infections, Africa



North Africa (n=10,230)

***Salmonella enterica* 50% (99% Typhi)**

***Brucella* spp 27%**

West and central Africa (n=5,887)

***Salmonella enterica* 21% (87% NTS)**

***Streptococcus pneumoniae* 19%**

***Staphylococcus aureus* 17%**

Non-typhoidal *Salmonella* serovars

East Africa (n=21,317)

***Typhimurium** 21%**

***Streptococcus pneumoniae* 21%**

***Enteritidis** 18% (88% NTS)**

***Stanleyville* 17%**

***Escherichia coli* 17%**

Dublin

Isangi

Southern Africa (n=23,893)

***Salmonella enterica* 29% (97% NTS)**

***Streptococcus pneumoniae* 24%**

***Staphylococcus aureus* 9%**

Global Enterics Multi-center Study (GEMS)

- **Etiology of moderate to severe diarrheal disease among infants and children <5 years of age in low-income countries**
- **3-year prospective, age stratified, matched case-control study with 7 sites**
 - **9,439 cases and 13,129 controls**
- **Calculated adjusted population attributable fraction**
 - **Accounting for presence of putative pathogens in control group**

NTS and diarrhea in developing countries

Age group (months)	Adjusted attributable fraction (95% CI)						
	Basse The Gambia	Bamako Mali	Manhica Mozambique	Nyanza Kenya	Kolkarta India	Mirzapur Bangladesh	Karachi Pakistan
0-11	-	-	-	-	-	4.2 (2.2, 6.2)	-
12-23	-	-	-	3.2 (0.5, 6.0)	-	-	-
24-59	-	-	-	3.7 (1.2, 6.1)	-	-	-