病毒學國考總複習

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Virion Structure: Naked Capsid

Component

• Protein

Properties*

• Is environmentally **stable** to the following:

Temperature

Acid

Proteases

Detergents

Drying

• Is released from cell by lysis

Consequences*

- Can be spread easily (on fomites, from hand to hand, by dust, by small droplets)
- Can dry out and retain infectivity
- Can survive the adverse conditions of the gut (fecal-oral route transmission)
- Can be resistant to detergents and poor sewage treatment
- Antibody may be sufficient for immunoprotection

* Exception exist

Virion Structure: Envelope

Components

- Membrane
- Lipids
- Proteins
- Glycoproteins

Properties*

• Is environmentally **labile**—disrupted by the following:

Acid

Detergents

Drying

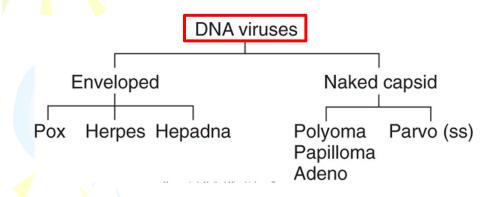
Heat

- Modifies cell membrane during replication
- Is released by budding and cell lysis

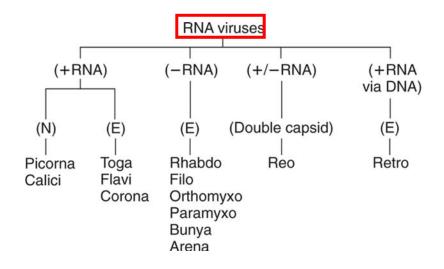
Consequences*

- Must stay wet
- Cannot survive the gastrointestinal tract
- Spreads in large droplets, secretions, organ transplants, and blood transfusions
- Does not need to kill the cell to spread
- May need antibody and cell-mediated immune response for protection and control
- Elicits hypersensitivity and inflammation to cause immunopathogenesis.

Families of DNA and RNA Viruses



DNA viruses: 7 families



RNA viruses: at least 13 families

Properties of DNA Viruses

- DNA is not transient or labile.
- Many DNA viruses establish persistent infections (e.g., latent, immortalizing).
- > DNA genomes reside in the **nucleus** (except for poxviruses).
- Most DNA viruses use the cell's **DNA-dependent Pol II and other enzymes to make mRNA**, but may encode their own transcriptional activators to regulate their gene expression. (but, poxvirus.....)
- Viral gene transcription is temporally regulated.
- Early genes encode DNA-binding proteins and enzymes.
- Late genes encode structural and other proteins.
- > DNA polymerases require a primer to replicate the viral genome.
- The larger DNA viruses encode means to promote efficient replication of their genome.

Properties of RNA Viruses

- RNA is labile and transient.
- (+)-RNA viruses vs. (-)-RNA viruses: what is the difference?
- (+) RNA can be used directly for protein translation; (-) RNA cannot. So, naked (+) RNA is infectious and naked (-) RNA is not.
- Most RNA viruses replicate in the cytoplasm. (except for bornavirus and Influenza virus)
- Cells cannot replicate RNA. RNA viruses must encode an RNA-dependent RNA polymerase (RdRP), which are prone to mutation → quasispecies of viruses.
- RNA viruses, except (+) RNA genome, must carry polymerases.
- All (-) RNA viruses are enveloped.

	Parvo	Polyoma
Virion structure	Icosahedral capsid, naked capsid	Icosahedral capsid, naked capsid
Genome	Linear, ssDNA, ~5 kb	Circular, dsDNA, ~5.3 kb DNA with minichromosome
Replication	 ITR as primer, strand displacement Cellular DNA polymerase + Rep proteins for replication and transcription Must replicate in mitotically active cells: prefer erythroid precursor cells 	 Bidirectional from Ori. Ts: early (T and t antigens) and late (VP1, VP2, and VP3) Cellular DNA Pol + LTAg for DNA replication, and Pol II for RNA Ts LTAg inactivates pRb and p53
Lytic and/or Latency (site)	Lysis by nuclear and cytoplasmic membrane degeneration	Permissive cells → cell death Non-permissive cells → transformation latent in kidney and lungs
Pathogenesis	B19 virus causes biphasic diseases: 1. Early infection phase, viremia: flu-like symptoms 2. Late infection phase, Immune-mediated: adults: rash and arthralgia children: erythema infectiosum (fifth disease) fetus: anemia-related disease and death (hydrops fetalis) Chronic hemolytic patients: life threatening aplastic crisis (再生不良性貧血)	JC and BK viruses: Ubiquitous infection in humans, rare diseases, unless in immunosuppressed patients: JC: CNS → PML, JCV partially transform astrocytes and kills oligodendrocytes, causing demyelination. BK: urinary tract → hemorrhagic cystitis (出血性膀胱炎)
Transmission	Respiratory and oral secretions	Respiratory transmission or oral route -> viremia to kidney or lung
viruses	B19, Bocavirus (acute respiratory disease), AAV (dependovirus, no disease)	BK, JC viruses, Merkel cell virus, SV40, polyoma
Others	Rash is due to immune complexes. B19 infection in utero causes spontaneous abortion	Virus is ubiquitous and infections are asymptomatic.

	Papilloma	Adenovirus
Virion structure	Icosahedral capsid, naked capsid	Icosadeltahedral capsid with fibers, naked capsid
Genome	Circular, dsDNA, ~8 kb DNA with minichromosome	Linear dsDNA, ~35 kb
Replication	 Bidirectional from Ori. Ts all in one direction Ts: early (E1-E7) and late (L1 and L2) E7 inactivates pRb; E6 inactivates p53 to promote cell growth 	 1.pTP (protein) as primer 2.Virus-encoded DNA polymerases 3.Strand-displacement mechanism 4.E1A inactivates pRb; E1B inactivates p53 to promote cell growth
Lytic and/or Latency (site)	The infectious cycle follows differentiation of epithelial cells: Persist in the basal layer and then produce virus in terminally differentiated keratinocytes	Lytic in mucoepithelial cells Latent in lymphoid tissues
Pathogenesis	Cutaneous HPV: skin warts Mucosal HPV: benign head and neck tumors, anogenital warts: HPV6, 11: Laryngeal papilloma, anogenital warts, condyloma acuminatum (尖形濕疣) HPV16, HPV18: cervical cancer	Diseases are determined by tissue tropisms of specific groups or serotypes, diseases: Acute respiratory disease Pharyngitis Conjunctivitis Hemorrhagic cystitis gastroenteritis
Transmission	Close contact (direct or sexual)	Aerosol, close contact, fecal-oral
viruses	HPV, many serotypes	Adenoviruses, many serotypes
Others	 Viral replication is determined by cell differentiation states. Vaccines are available for HPV 6, 11, and/or 16, 18. Pap smear: koilocytes 	Can be used as vectors for gene therapy. Ad virus transforms rodent cells, but not human cells.

		Human Herpesviruses			
	HSV (HHV-1, -2)	VZV (HHV-3)	EBV (HHV-4)	CMV (HHV-5)	
Virion / Genome/	HSV-1, HSV-2, Enveloped, Icosadeltahedral capsid ds linear DNA	Same as HSV	Same as HSV	Same as HSV	
replication	 early: bidirectional, late: rolling circle encodes its own polymerase and scavenging enzymes 				
Types	α	α	γ	β	
Lytic incells	Lytic: fibroblast, epithelial cells	Lytic: fibroblast, activated T, epithelial cells, epidermal cells	Lytic: activated B cells, epithelial cells	<u>Lytic</u> : epithelial cells, fibroblast, granulocyte	
Latent sites	Latent: neuron cells	Latent: neuron cells	Latent: memory B cells	<u>Latent</u> : myeloid cells, monocytes, lymphocytes,	
Pathogenesis	Labial and genital lesions, e.g., cold sore, pharyngitis, encephalitis, keratoconjunctivitis whitlow	 Varicellar (chickenpox) in children Zoster (shingles) in adults 	 Infectious mononucleosis (hetrophile Ab-positive), pharyngitis, Burkitt's lymphoma, nasopharyngeal carcinoma, Hodgkin's lymphoma 	 Most: asymptomatic Congenital defects, mononucleosis (heterophile Ab-negative) Opportunistic under immunosuppression 	
Transmission	Orally and sexually, close contact viruses in saliva, vaginal secretions, lesion fluid	Respiratory droplet, inhalation, close contact	Saliva, close contact	Orally, sexually, blood transfusion, tissue transplantation, in utero, at birth, by nursing	
Others	Cowdry type A inclusion body, syncytia + Anti-viral drugs available	Vaccine and anti- viral drugs are available	Atypical lymphocytes (Downey cells)	Large cell and owl's eye inclusion body Anti-viral drugs available	

	Human He	rpesviruses
	HHV6/7	HHV8
Virion / Genome/ replication	Same as HSV	Same as HSV
Types	β	γ
Latent sites	Latent: T cells and monocytes	Latent: B cells
Pathogenesis	Exanthem subitum (roseola infantum) (玫瑰 疹)	 Kaposi's sarcoma associated with AIDS Primary effusion lymphoma (a rare B lymphoma)
Transmission	Saliva The salivary gland is an in vivo reservoir for HHV-6	Blood and sexual transmission
Others	Lymphotropic (same as CMV) Rapid onset of high fever	

	Poxvirus
Viron structure	Enveloped, internal core (dumbbell) and lateral bodies
Genome	Linear, dsDNA with closed hairpin ends, no free 3' and 5' ends
DNA replication	1.self-priming 2.Replication in the cytoplasm 3.Virus-encoded DNA-dependent DNA and RNA polymerases, capping and polyadenylation enzymes 4.mRNAs do not contain introns
Lytic or latent	Cell lysis or exocytosis
Pathogenesis	 Smallpox virus: lytic, only infect humans, vesicle appears all at once, bioterror agent Molluscum contagiosum: wart-like growth, only infect humans Vaccinia: lytic viruses, zoonotic
Transmission	Smallpox: aerosols and direct contact All other poxviruses: contact
viruses	Variola, vaccinia, molluscum contagiosum
Others	The largest DNA virus in human Virus is completely eradicated by vaccine

	Picorna	Corona	Noro (Calici)
Virion structure	Naked capsid, (+) RNA	Enveloped, (+) RNA	Naked capsid, (+) RNA
Genome	VPg protein at 5' end, IRES at 5'-UTR, and poly-A at 3' end	Cap at 5 end and poly-A at 3' end, the largest RNA virus	VPg protein at 5' end and poly-A at 3' end,
Protein synthesis	1 polyprotein, IRES-dependent translation	Early proteins and late proteins	Early proteins and late proteins
RNA replication /transcription	(+) RNA → (-) RNA → (+) RNA Encodes RdRP	(+) RNA → (-) RNA → subgenomic RNAs and (+) RNA	(+) RNA → (-) RNA → subgenomic RNA and (+) RNA
Pathogenesis	Tissue tropic: Polio: encephalitis, paralysis Coxackie A: hand-foot-mouth, herpangina, meningitis Coxackie B (A, echo): myocarditis (心肌炎), pericarditis (心包炎), pleurodynia (肌肋痛) EV71: rash, HFMD, meningitis (腦膜炎), encephalitis HAV: hepatitis	CoV: Common cold (2 nd) SARS-CoV: pneumonia, diarrhea (bat → palm civets → human) MERS-CoV: pneumonia, renal failure (? → dromedary →human)	Diarrhea, nausea and vomit, and abdominal cramps
Transmission	Fecal-oral or Respiratory (rhinovirus)	Respiratory or Fecal-oral	Fecal-oral
viruses	Poliovirus, enterovirus, rhinovirus (1st common cold, >33°c cannot grow)	CoV: cannot grow >33°C SARS-CoV: replicate at 37°C MERS-CoV: replicate at 37°C	Norwalk-like viruses Caliciviruses Astroviruses
Others	 Virus is the pathologic effect OPV (live) vs. IPV (killed) vaccines Rarely cause enteric diseases 	Detergent resistant due to glycoprotein corona	

	Toga	Flavi	
Virion structure	Enveloped, (+) RNA	Enveloped, (+) RNA	
Genome	Cap at 5' end of RNA	HCV contains IRES at 5' end, others contain Cap	
Protein synthesis	Early / Late proteins	One polyprotein	
RNA replication /transcription	(+) RNA → (-) RNA → subgenomic RNA and (+) RNA	(+) RNA → (-) RNA → (+) RNA	
Pathogenesis	 Arboviruses (WEE, EEE, VEE): encephalitis Sindbis, Semliki Forest: subclinical Chikungunya: fever, arthritis, arthralgia Rubella (not arbovirus): German measles, rash, swollen glands (lymphadenopathy). Immune complexes most likely cause the rash and arthralgia. 	 Arboviurses Encephalitis viruses: St. Louis, West Nile, JEV Hemorrhagic diseases: Yellow fever virus: jaundice, hepatitis, black vomit Dengue virus: hemorrhagic fever, breakbone fever, dengue shock syndrome HCV (not arbovirus): chronic hepatitis 	
Transmission	Arthropod vector (<i>Aedes</i> and <i>Culex</i> mosquito Viruses spread in blood to neurons and brain Rubella virus: respiratory spread HCV: blood and sexual transmission	ctor (<i>Aedes</i> and <i>Culex</i> mosquitoes), reservoir in birds or small animals. d in blood to neurons and brain. respiratory spread	
viruses	Sindbis virus, semliki Forest, WEE, EEE, VEE, Chikungunya, and Rubella	Yellow Fever, JEV, dengue virus, Dengue virus, ZIKV, and HCV	
Others	Rubella: congenital diseases. Vaccine is available.	ZIKV: congenital diseases (microcephaly) Non-neutralizing Ab promotes dengue infection (ADE: Ab-dependent enhancement). Four serotypes.	

	Rhabdo	Filo	Borna	Paramyxo
Virion	Enveloped, (-) RNA	Enveloped, (-) RNA	Enveloped, (-) RNA	Enveloped, (-) RNA
segment	Non-segmented	Non-segmented	Non-segmented	Non-segmented
Replication cycle	(-) RNA → mRNA → (-) RNA replication and transcription	(-) RNA → mRNA → (-) RNA replication and transcription	(-) RNA → mRNA → (-) RNA replication and transcription	(-) RNA → mRNA → (-) RNA replication and transcription
Pathogenesis	 Rabies virus: encephalitis and neuron degenerate. Negri body in infected cells 	 Widespread hemorrhage (internal bleeding, liver damage, organ dysfunction) high mortality rate Virus replicates efficiently in EC, monocytes, DC, macrophages 	 neuropsychiatric disease, such as schizophrenia (精神分裂症), bipolar disorder (躁鬱症), depression (憂鬱), and autism (自閉症). 	 Measles virus: rubeola (麻疹), high fever and CCC+P (咳嗽,鼻炎,結膜炎,畏光), otitis (耳炎), croup (哮吼), bronchopneumonia, encephalitis (e.g., SSPE) Parainfluenza: mild cold, or lower RT disease (25%), or croup (2-3%) Mumps virus: parotitis (腮腺炎), orchitis (睪丸炎) Respiratory syncytia virus (RSV): highly fatal acute respiratory tract infection in infants and young children
Transmission	Zoonosis: animal bite aerosol (bat)	contact with blood, secretions, organs or bodily fluids	?? Olfactory route ?? Hematogenous transmission	Aerosol: respiratory Subacute sclerosing panencephalitis (SSPE) occurs several years after measles.
viruses	VSV, Rabies virus	Ebola virus, Marburg virus	Borna disease virus	Measles, parainfluenza, mumps, RSV, Hendra, Nipah, new castle disease virus
Others	 Hydrophobia Post-exposure prophylaxis is possible. 	Handle in BSL4	Replication in the nucleus	 Induce syncytia Mucous Koplik spots for measles Measles and mump virus: life-long immunity Paramyxovirus (parainfluenza and mumps): HN, used for HA assay Pneumovirus (RSV): G, will not agglutinate erythrocytes MMR vaccines: measles, mumps, rubella

	Orthomyxo	Bunya	Arena
Virion	Enveloped, (-) RNA	Enveloped, (-) RNA	Enveloped, (-) RNA
segment	8	3	2
Replication cycle	(-) RNA \rightarrow 10 mRNA \rightarrow (-) RNA replication and transcription in the nucleus	(-) RNA → mRNA → (-) RNA replication and transcription	(-) RNA → mRNA → (-) RNA replication and transcription
Pathogenesis	 Flu symptoms: due to virologic and immunopathologic effects Pneumonia by influenza or secondary bacterial infection 	 Encephalitis viruses: arbovirus Hantavirus (not arbovirus): pulmonary syndrome 	 LCMV: meningitis Lassa fever virus: hemorrhagic fever
Transmission	 Aerosol Annual epidemics due to mutations (drift) Pandemics due to reassortment of genome segments between human and animal viruses (shift) 	 Encephalitis viruses: insects Hantavirus: inhalation of aerosol from rodent urines or feces 	 inhalation of aerosol from rodent urines or feces LCMV: worldwide Lassa fever: Africa
viruses	Influenza A, B (no reassortment), C (no human disease)	Bunyavirus, Hantavirus	LCMV, Lassa
Others	 Have 2 spliced RNAs, cap is stolen from host in the nucleus HA and NA can elicit protective Ab H5N1 and H7N9 are avian influenza viruses, but occasionally infect human, high mortality rates Human influenza virus uses (SAα2,6Gal) receptor; Avian influenza virus uses (SAα2,3Gal) receptor Live attenuated or killed vaccines: two flu A and one flu B Neuraminidase inhibitors: Tamiflu, Relenza (release) M2 inhibitors: amantadine, rimantadine (uncoating) 	 Ambisense translation in some viruses cap is stolen from host in the cytoplasm Hantavirus is not an arbovirus 	 Ambisense translation Two circle RNA segments Viruses persist in specific rodents

	Reovirus	Retrovirus	Prion
Virion	Double capsid, dsRNA	Enveloped, diploid (+)RNA	Infectious protein aggregates, PrPsc
segment	10-12	diploid	
Replication cycle	±RNA → 10-12 mRNA → packaged, and (-)RNAs are synthesized and transcribed in the capsid	(+)RNA→reverse transcrition→cDNA→proviral DNA→mRNA and genomic DNA→assembly Simple retroviruses have three genes: gag. Pol, and env Complex retroviruses (HIV, HTLV): gag, pol, env and accessory genes	Prion binds to normal PrP, alter their conformation, and build fibrils in the brain
Pathogenesis	 Rotavirus: serious diarrhea in young children Colorado tick fever: arbovirus, DV-like disease 	 HIV: AIDS (when CD4 T cells drop below 200/μL) HTLV (long latency) and many other animal viruses (short latency): tumors 	 Spongiform encephalopathy CJD, Kuru, GSS disease, FFI
Transmission	Rotavirus: fecal-oral	Blood and sexual	Surgical device, injection, food, genetics
viruses	Rotavirus, reovirus	HIV, HTLV, and many animal retroviruses carrying oncogenes	
Others	 ISVP (infectious subviral particle) facilitates infection dsRNA remains in the core Reassortment is possible NSP4 is a toxin-like molecule causing diarrhea, dehydration 	 Virions carry RT, integrase, protease enzymes Cause syncytia HIV: CD4 is the receptor CCR5 (M-tropic, macrophage and memory T) and CXCR4 (T-tropic, naïve T) as co-receptors Tat/Tax transactivate viral gene expression Rev/Rex facilitates the transport of unspliced and singly spliced mRNA to the cytoplasm Nef: essential for AIDS Other accessory molecules: modulate cellular antiviral activities Treatment: HAART, nucleoside analogs, protease inhibitor 	 Resistant to protease, heat and UV radiation No immune response, no inflammation No means of prevention or control

Feature	Hepatitis A	Hepatitis B	Hepatitis C	Hepatitis D	Hepatitis E
Virus structure	Picornavirus; capsid, RNA	Hepadnavirus; envelope, DNA	Flavivirus; envelope, RNA	Viroidlike; envelope is from HBV, circular RNA	Hepevirus; capsid, RNA Calici-like virus
Transmission	Fecal-oral	blood, sexual	blood, sexual	blood, sexual	Fecal-oral
Onset	Abrupt	Insidious	Insidious	Abrupt	Abrupt
Severity	Mild	Occasionally severe; <10% chronicity in immune-competent adults	Usually subclinical; 70% chronicity	Coinfection with HBV occasionally severe; superinfection with HBV often severe	Normal patients, mild; pregnant women, severe
Mortality pregnant	<0.5%	1%-2%	~4%	High to very high	Normal patients, 1%-2%; pregnant women, 20%
Chronicity/ carrier state	No	Yes	Yes	Yes	No
Other diseases	None	Primary hepatocellular carcinoma, cirrhosis	Primary hepatocellular carcinoma, cirrhosis	Cirrhosis, fulminant hepatitis	None
Laboratory diagnosis	Symptoms and anti-HAV IgM	Symptoms and serum levels of HBsAg, HBeAg, and anti-HBc IgM Recovered: anti-HBs (+)	Symptoms and anti- HCV ELISA	Anti-HDV ELISA	-
Treatment or vaccine	Inactivated vaccine, hygiene	rHBsAg vaccine: anti-HBs(+) but anti-HBc(-)	Anti-viral drugs, no vaccine	Immunization for HBV	

HBV infection	Viral antigens or DNA	Anti-viral antibodies
Acute infection	eAg (+), sAg (+), DNA (+)	Anti-HBc IgM
Chronic infection	eAg (+) —————sAg (+), DNA (+)	→ Anti-HBe (+)
Recovered	-	Anti-HBc, anti-HBe, anti-HBs
vaccinated	-	Anti-HBs

HCV infection	RNA	Antiviral antibody
Chronic infection	RT-qPCR	ELISA for antiviral Ab

HDV infection	RNA	HDV infection
Chronic infection	RT-qPCR	ELISA for delta antigen

Viruses-induced Diseases

1. Oral and respiratory tract infections:

oral: stomatitis (HSV), herpangina, Hand-foot-and-mouth (Coxsackie A virus)

	Oral: Stomatitis (HSV), herpangina, Hand-loot-and-mouth (Coxsackie A virus)				
respiratory	common cold	pharyngitis	laryngitis, croup, tonsillitis, bronchitis	bronchiolitis	pneumonia
Etiologic agent	 Rhinovirus* Coronavirus* Influenza Parainfleun za Respiratory syncytial virus (RSV) Metapneu movirus Adenovirus Enterovirus 	 HSV EBV Adenovirus * Coxsackie A virus* (herpangin a, Hand- foot-and- mouth) and other enterovirus es 	 Parainflue nza virus 1* Parainflue nza virus 2* Influenza Adenoviru s EBV 	 RSV* (infants) Parainfluen za 3* (infants and children) Metapneu movirus Parainfluen za 1 and 2 	 RSV* (infants) Parainfluenza* (infants) Influenza virus* Adenovirus Metapneumovi rus VZV (primary infection of adults or immunocompr omised hosts)

2. Gastrointestinal tract infections

gastroenteritis, diarrhea, vomiting

Infants Rotavirus*, Adenovirus 40, 41, infants, children, and adults: Norwalk virus*, Calicivirus, Astrovirus, Rotavirus A and B, Reovirus

^{*} Most common causal agent

3. Exanthems and hemorrhagic fevers

maculopapular, nodules, vesicular, hemorrhagic fever

Conditions	Etiologic agent
Rash	
Rubeola	Measles virus
German measles	Rubella virus
Roseola infantum	Human herpesvirus 6
Erythema infectiosum	Human parvovirus B19
Boston exanthema	Echovirus 16
Infectious mononucleosis	EBV
	Also caused by enterovirus, DV, and other flaviviruses.
Vesicles	
Oral or genital herpes	Herpes simplex virus
Chickenpox/shingles	Varicella-zoster virus
Hand-foot-and-mouth disease, herpangina	Coxsackie A virus*
Papilloma, etc.	
Warts	Papillomavirus*
Molluscum	Molluscum contagiosum

Hemorrhagic fever Yellow fever virus Dengue virus Ebola virus Lassa fever Hantavirus

4. Hematologic diseases

mononucleosis (EBV or CMV), adult T-cell leukemia (HTLV), AIDS (HIV)

^{*}most common cause

5. Infections of the organs and tissues

Organs and diseases

Liver (hepatitis)

- Hepatitis A*, B*, C*, G, D, and E viruses
- Yellow fever virus
- Epstein-Barr virus
- Hepatitis in the neonate or immunocompromised person:
 - Cytomegalovirus
 - Herpes simplex virus
 - Varicella-zoster virus
 - Rubella virus (congenital rubella syndrome)

Heart (myocarditis)

Coxsackie B virus*

Kidney

Cytomegalovirus

Muscle

Coxsackie B virus (pleurodynia)

Glands

- Cytomegalovirus
- Mumps virus

Eye (conjunctivitis, keratoconjuctivitis)

- Herpes simplex virus
- Adenovirus*
- Measles virus
- Rubella virus
- Enterovirus 70
- Coxsackie A24 virus

6. Central nervous system infections

Central Nervous System Infection

Meningitis

Enteroviruses

Echoviruses

Coxsackie virus*

Poliovirus

- Herpes simplex virus 2
- Adenovirus
- Mumps virus
- Lymphocytic choriomeningitis virus
- Arboencephalitis viruses

Paralysis

- Poliovirus
- Enteroviruses 70 and 71
- Coxsackie A7 virus

Encephalitis

- Herpes simplex virus 1*
- Varicella-zoster virus
- Arboencephalitis viruses*
- Rabies virus
- Coxsackie A and B viruses
- Polioviruses

Transmission Routes

Transmitted through blood

- Hepatitis B, C, G, D
- Human immunodeficiency virus
- Human T-cell lymphotrophic virus 1
- Cytomegalovirus
- Epstein-Barr virus
- West Nile encephalitis virus

Sexually Transmitted

- Human papillomavirus 6, 11, 42
- Human papillomavirus 16 and 18 (associated with human cervical carcinoma)
- Herpes simplex virus (predominantly HSV-2)
- Cytomegalovirus
- Hepatitis B, C, and D viruses
- Human immunodeficiency virus
- Human T-cell lymphotrophic virus 1

Arboviruses and Zoonosis

Virus	Family	Reservoir/Vector
Eastern equine encephalitis	Toga	Birds/Aedes mosquito
Western equine encephalitis	Toga	Birds/Culex mosquito
West Nile encephalitis	Flavi	Birds/Culex mosquito
St. Louis encephalitis	Flavi	Birds/Culex mosquito
California encephalitis	Bunya	Small mammals/Aedes mosquito
La Crosse encephalitis	Bunya	Small mammals/Aedes mosquito
Yellow fever	Flavi	Birds/Aedes
Dengue	Flavi	Mosquito
Colorado tick fever	Reo	Tick
Lymphocytic choriomeningitis	Arena	Small mammals
Lassa fever	Arena	Rats
Sin Nombre virus	Hanta	Deer mice
Ebola	Filo	unknown
Rabies	Rhabdo	Bats, foxes, raccoons, etc.

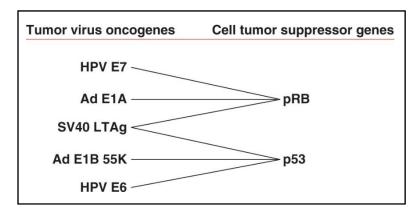
Chronic and Oncogenic Infection

Chronic infections (occur when the immune system has difficulty resolving the infection):

- latent infection: The DNA viruses (except parvovirus and poxvirus)
- chronic, productive infection: HBV, HDV, HCV, HDV, and retroviruses (CMV and some herpesviruses)

Transformations:

- **EBV:** Burkitt's lymphoma, Hodgkin's lymphoma, nasopharyngeal carcinoma
- HTLV: Adult T-cell Lymphocytic Leukemia (ATLL)
- Papillomavirus: Cervical carcinoma
- ➤ HBV/HCV: hepatocellular carcinoma
- > HHV-8: Kaposi's sarcoma



Prenatal, Neonatal and perinatal Infection

- Rubella, CMV, and ZIKV are examples of teratogenic viruses that can cause congenital infection and severe congenital abnormalities.
- > HSV acquired during passage at birth can result in life-threatening disseminated disease.
- > HIV acquired in utero or mother's milk initiates a chronic infection.
- > B19 acquired in utero can cause spontaneous abortion.

Examples of Targets for Antiviral Drugs

Replication step or target	Agent	Targeted virus
Attachment	Peptide analogue of attachment protein Neutralizing antibodies	HIV (CCR5 co-receptor antagonist) Most viruses
	Heparan and dextran sulfate	HIV, HSV
Penetration and uncoating	Amantadine, Rimantadine (against influenza M2 protein)	Infleuenza A virus
Protein synthesis	Interferon	HCVs, papillomavirus
DNA replication (viral polymerase)	Nucleoside analogues, e.g., acyclovir, AZT	Herpesviruses, HBV, poxviruses, etc
Nucleoside biosynthesis	Ribavirin	RSV, Lassa fever virus, HCV
Nucleoside scavenging enzyme	Nucleoside analogues	HSV, VZV
Glycoprotein processing	-	HIV
Assembly (protease)	Hydrophobic substrate analogues e.g., HAART for HIV	HIV, HCV
Assembly (neuraminidase)	Oseltamivir (Tamiflu), zanamivir (Relenza)	Influenza A, B virus

1. Drugs preventing attachment and entry of virions

- Pleconaril blocks many picornaviruses
- Enfuvirtide binds to HIV-1 virion, block gp41 conformational change
- Maraviroc binds to cellular HIV-1 co-receptor, CCR5
- > Amantadine and Rimantadine block M2 ion channels and inhibits uncoating of influenza virus

2. Replication inhibitors: nucleoside analogues: prevent chain elongation or induce inactivating mutation

- Acyclovir is selectively phosphorylated by herpesvirus thymidine kinases. The acyclovir triphosphate is preferentially incorporated by HSV and VZV DNA polymerase.
- Azidothymidine (AZT)-triphosphate is a more potent inhibitor of HIV reverse transcriptase than of human DNA polymerase.
- **Ribavirin** induces inactivating mutation in RNA viral genomes.

3. Protease inhibitors

- HCV and HIV protease inhibitors
- Cocktail therapy for HIV: HAART (highly active antiretroviral treatment) include protease inhibitor, AZT and a second non-nucleoside RT inhibitor.

4. Immunomodulators

 \rightarrow IFN- α , pegylated IFN- α : HBV, HCV, HSV

5. Rational design of neuraminidase inhibitors

Zanamivir (Relenza) and oseltamivir (Tamiflu) are designed to mimic sialic acid in order to fit in the active site of neuraminidase

Major types of antiviral vaccines

Live wild-type viruses

- Simple and effective
- Viruses may replicate poorly in non-natural host but share immunogenic determinants with related target viruses

Live attenuated viruses

Serial passage and in vitro cultivation of viruses reduces their pathogenicity

Inactivated viruses

Virus is grown, purified, and subjected to inactivation by treatment with chemicals or high temperatures

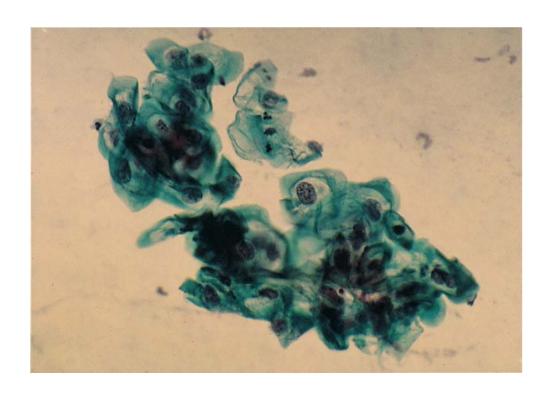
Subunit vaccines

Consists of purified viral proteins that are immunogenic

Live wild-type viruses	Vaccinia (cowpox) ^a
Live attenuated viruses	Adenovirus ^b
	Influenza A (cold adapted)
	Measles
	Mumps
	Polio (Sabin)
	Rotavirus (human-recombinant)
	Rubella (german measles)
	Varicella (chickenpox)
	Yellow fever
Whole inactivated	
viruses	Hepatitis A
	Influenza A
	Influenza B
	Polio (Salk)
	Rabies
	Tick-borne encephalitis
Subunit vaccine	Hepatitis B surface antigen
Virus-like particles	Human papillomavirus
Chimeric virus	Rotavirus (human-bovine)

^aSmallpox eradicated (supply of vaccine tenuous).

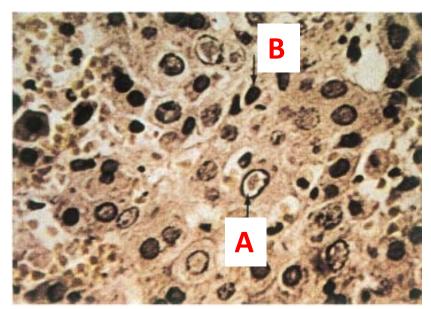
^bMilitary use only.



Perinuclear cytoplasmic vacuolization (Koilocytes), characteristic of human papillomavirus infection:

Squamous epithelial cells with clear halos around shrunken nuclei

- Characteristic histologic changes:
 Inclusion bodies in the nucleus or cytoplasm, margination of chromatin
- Syncytia: Multinucleated giant cells caused by virus-induced cell-cell fusion

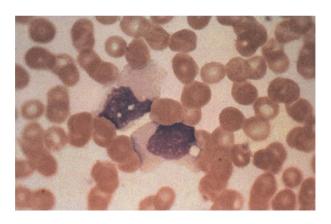


A: acidophilic Cowdry type A intranuclear inclusion body



B: smaller condensed nucleus (pyknotic) caused by HSV infection.

Downey cells



Cytomegalic cells



FIGURE 43-17 Cytomegalovirus-infected cell with basophilic nuclear inclusion body.

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Enlarged cells: dense, central, "owl's eye", basophilic intranuclear inclusion body



Functions of human retroviral accessory proteins

Gene	virus	Function
Tax	HTLV	Transactivation of viral and cellular genes
Tat	HIV-1	Transactivation of viral gene
Rex	HTLV	Regulation of RNA splicing and promotion of export to cytoplasm
Rev	HIV-1	Regulation of RNA splicing and promotion of export to cytoplasm
Nef	HIV-1	Decreases cell surface CD4; facilitates T cell activation, progression to AIDS (essential)
Vif	HIV-1	Virus infectivity, promotion of assembly, blocks a cellular antiviral protein (APOBEC-3G) to prevent it from hypermutating the cDNA
Vpu	HIV-1	Facilitates virion assembly and release by degrading a cellular antiviral protein (tetherin), induces degradation of CD4
Vpr	HIV-1	Transport of cDNA to nucleus, arrest cell growth at G2 phase, which is optimal for HIV replication

