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History of
Medical Microbiology

At a very early stage man developed concept that contagious disease was caused by invisible living things. Invention of the microscope proved it to be a reality. Antony van Leeuwenhoek (1632-1723) designed a single lens microscope and demonstrated the little agents of disease, which he designated as *animalcules*. These animalcules are now well established entities belonging to bacteria, viruses and several other pathogens. The organisms being invisible to naked eye are known as microorganisms.

For many years it was believed that the microorganisms arose from dead, especially decomposed organic matter. This was known as *theory of spontaneous generation*.

CONTRIBUTIONS OF LOUIS PASTEUR

Louis Pasteur (1822-1895), a French chemist generated strong evidence to show that the microorganisms did not rise *de novo* or spontaneously in the media but were introduced from without. Pasteur showed that these organisms were maximum in the dusty air of towns and minimum in air of hilly areas where human habitation did not exist.

Pasteur also showed that microorganisms were inactivated by

- boiling
- at 120°C under pressure (autoclaved)
- at 170°C (hot air oven)

Pasteur's demonstration of airborne microbes prompted Joseph Lister's (1827-1912) work on wound sepsis. He introduced the practice of protecting the

wounds from airborne microbes by applying antiseptic dressing and making medical and paramedical workers wash their hands with antiseptic solution before they touched any exposed part of a patient. He achieved strikingly successful results and brought down tremendously the mortality due to sepsis.



Fig. 1-1. Louis Pasteur—father of microbiology

Pasteur's achievements in the field of sterilization were closely followed by many other workers. Tyndall introduced the method of sterilization by repeated heating with appropriate intervals for germination of spores between them and their subsequent destruction. The method is known as *tyndallization* and practiced even today.

Pasteur developed vaccine against chicken cholera and anthrax by using attenuated suspension of bacteria.

In order to show that the process was akin to Jenner's use of cowpox, he referred to this as vaccination. These attenuated organisms, on injection into animals, protected them from the effects of virulent bacteria. Soon anthrax immunization was widely practised with an enormous reduction in mortality amongst sheep.

However, his epoch making discovery was development of rabies vaccine from the spinal cord of rabbits. It has been responsible for saving innumerable human lives consequent to bites by rabid animals.

The discoveries made by Pasteur can be summarised as follows

CONTRIBUTIONS OF LOUIS PASTEUR

- Microbial theory of fermentation and proving that all forms of life including microorganisms arise from their like and not spontaneously
 - Principles and practice of sterilization
- Development of initial bacteriological techniques
 - Control of diseases of silkworms
 - Development of vaccines against:
 - Anthrax
 - Chicken cholera
 - Rabies

CONTRIBUTIONS OF ROBERT KOCH

Robert Koch's first contribution to science was demonstration of the character and mode of growth of causative bacillus of anthrax.

In 1882, Koch discovered tubercle bacillus and in 1883 the cholera vibrio. For his manifold discoveries in bacteriology, Koch is considered as father of bacteriology.

Koch's Postulates

To confirm the claim that a microorganism isolated from a disease was indeed the cause of this, Koch postulated a set of criteria. According to these postulates, a microorganism can be accepted as a causative agent of an infectious disease only if the followings are satisfied:

- A. The isolate should be found in every case of the disease and under conditions which explain the pathological changes and clinical features
- B. It should be possible to isolate the causative agent in pure culture from the lesion
- C. When such pure culture is inoculated into appropriate laboratory animal, the lesion of the disease should be reproduced



Fig. 1-2. Robert Koch—father of bacteriology

- D. It should be possible to reisolate the causative agent in pure culture from the lesion produced in the experimental animal (Fig. 1.3).

Subsequently another criterion has been introduced which demands that specific antigens or antibodies to the bacterium should be detectable in the serum of the patient suffering from the disease.

Exceptions to Koch's Postulates

Some of the exceptions of these postulates are:

- a. Inability to grow *Treponema pallidum* and *Mycobacterium leprae*—known causative agents of syphilis and leprosy respectively on artificial media
- b. Inability to grow many viruses and rickettsial pathogens on artificial media

The lifelong achievements of Robert Koch are summarised as under:

CONTRIBUTIONS OF ROBERT KOCH

- Verification of germ theory of diseases
- Introduction of staining techniques for visualization of microorganisms
 - Discovery and use of solid medium in bacteriology
 - Discovery of causative agents of:
 - Tuberculosis
 - Cholera
 - Anthrax
 - Koch's postulates.
 - Use of laboratory animals for experimental infections

During the last quarter of the nineteenth century, succession of discoveries were reported which had bearing on the relation of bacteria to human and animal diseases. Table 1.1 shows some important discoveries.

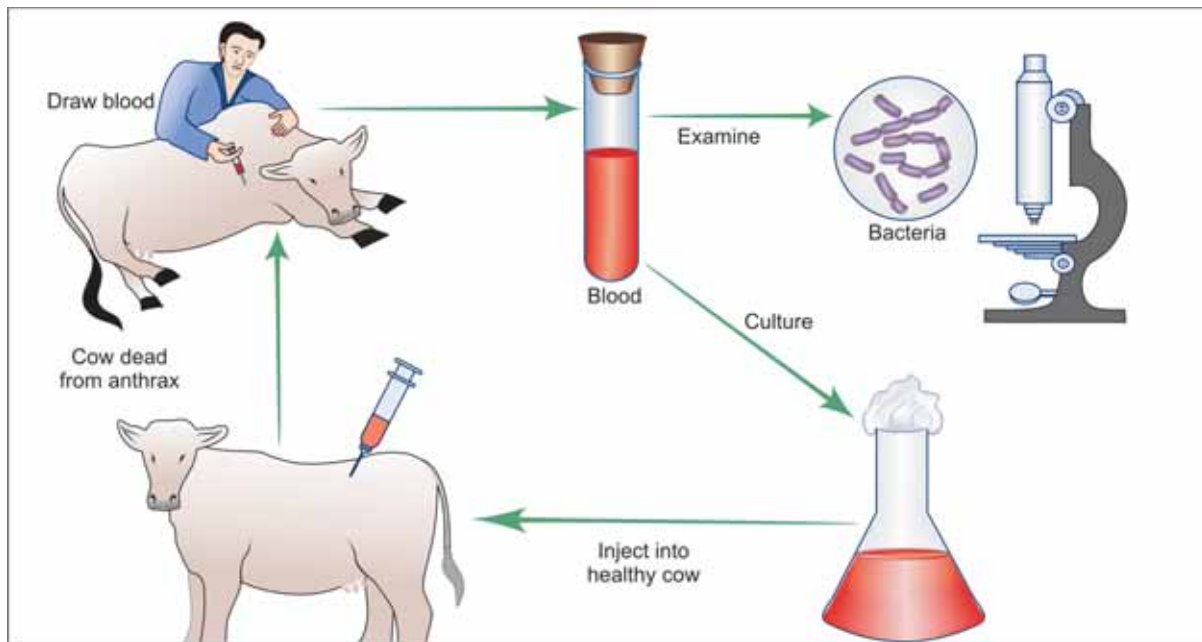


Fig. 1–3. Koch's postulates

Table 1–1. Discoveries of bacteria in 19th Century

| Year | Organism | Discovered by |
|------|-------------------------------|-----------------------|
| 1874 | <i>Mycobacterium leprae</i> | Hansen |
| 1879 | <i>Neisseria gonorrhoeae</i> | Neisser |
| 1880 | <i>Salmonella typhi</i> | Eberth |
| 1881 | <i>Staphylococcus</i> | Ogston |
| 1881 | <i>Pneumococcus</i> | Pasteur and Sternberg |
| 1882 | <i>M. tuberculosis</i> | Robert Koch |
| 1882 | <i>Bacillus glanders</i> | Loeffler and Shutz |
| 1883 | <i>Vibrio cholerae</i> | Robert Koch |
| 1883 | <i>Streptococcus</i> | Fehleisen |
| 1884 | <i>C. diphtheriae</i> | Loeffler |
| 1885 | <i>Clostridium tetani</i> | Nicolaier |
| 1887 | <i>Neisseria meningitidis</i> | Weichselbaum |
| 1887 | <i>Brucella melitensis</i> | Bruce |
| 1892 | <i>Haemophilus influenzae</i> | Pfeiffer |
| 1892 | <i>Clostridium welchii</i> | Welch and Nuttall |
| 1894 | <i>Yersinia pestis</i> | Yersin and Kitasato |
| 1896 | <i>Clostridium botulinum</i> | Ermengem |
| 1896 | <i>Shigella</i> | Shiga |

ANTIMICROBIAL AGENTS

With the identification and confirmation of bacteria as causative agents of human diseases, efforts were made to develop effective agents which could kill bacteria in the body of the man without damaging the host tissue. Pioneer work was done by Paul Ehrlich (Fig. 1.4) who is justly described as the father of chemotherapy. In

the 1900s he cured one form of trypanosomiasis in rats with the dye trypan red and another form in mice with an organic arsenic compound, atoxyl.

In 1910, Ehrlich successfully treated syphilis using compound '606' (dioxidiaminoarsenobenzol dihydrochloride) and called it Salvarsan. Fleming discovered penicillin and Waksman streptomycin. Subsequently, several fungi have been used as source of antimicrobial substances.



Fig. 1–4. Paul Ehrlich—father of chemotherapy

CONTRIBUTIONS OF PAUL EHRLICH

- Discovery of salvarsan as a chemotherapeutic agent against syphilis. This opened the new field of antimicrobial agents which has saved the lives of millions of people till date
- Identified that mycobacteria have acid fastness nature
- Proposed a theory for the production of antibody called as "side chain theory"
- Refined the science of staining the organisms
- Advocated standardization of biologicals including toxins and antitoxins to ensure uniformity

DISCOVERY OF VIRUSES

By the end of nineteenth century many infectious diseases had been proven to have a bacterial aetiology. The trend continued in twentieth century. But yet there remained many diseases of common occurrence for which no bacterium could be demonstrated. These included smallpox, chickenpox, measles and common cold. Advent of electron microscopy in 1934 by Ruska made morphological examination of viruses possible. The first human disease proven to have a virus aetiology was yellow fever.

Table 1–2. Nobel laureates in microbiology and immunology

| Year | Nobel Laureate | Contribution in/discovery of |
|------|-------------------------------|--|
| 1901 | Von Behring | Diphtheria antitoxin |
| 1902 | Sir Ronald Ross | Malaria |
| 1905 | Robert Koch | Tuberculosis |
| 1908 | Paul Ehrlich | Theories on immunity |
| 1908 | Metchnikoff | Phagocytosis |
| 1913 | Richet | Anaphylaxis |
| 1919 | Bordet | Immunity |
| 1928 | Nicolle | Typhus |
| 1930 | Landsteiner | Blood group |
| 1939 | Domagk | Prontosil as antibacterial |
| 1945 | Fleming, Chain & Florey | Penicillin |
| 1951 | Marx Theiler | Yellow fever |
| 1952 | Waksman | Streptomycin |
| 1954 | Enders, Weller and Robbins | Poliomyelitis |
| 1958 | Beadle, Tatum and Lederberg | Bacterial genetics |
| 1960 | Burnet and Medawar | Immunological tolerance |
| 1962 | Watson, Crick and Wilkins | Structure of DNA |
| 1965 | Jacob, Monod and Lwoff | Protein synthesis in bacteria |
| 1968 | Holley, Khorana and Nirenberg | Genetic code |
| 1969 | Delbruck, Hershey and Luria | Mechanism of viral infection of bacteria |
| 1972 | Edelman and Porter | Nature and structure of antibody |
| 1975 | Dulbecco, Temin and Baltimore | Reverse transcriptase and causation of cancer |
| 1976 | Blumberg and Gajdusek | Chronic viral infections and cancers |
| 1977 | Yalow | Radioimmunoassays |
| 1978 | Nathans, Smith and Arber | Restriction enzymes |
| 1980 | Benacerraf, Snell and Dausset | MHC genes and transplantation |
| 1983 | Barbara McClintok | Transposons |
| 1984 | Milstein, Kohler and Jerne | Monoclonal antibody |
| 1987 | Susumu Tonegawa | Genetics of antibody production |
| 1989 | Bishop and Varmus | Oncogenes |
| 1990 | Murray and Thomas | Use of immunosuppressive drugs in transplantation |
| 1993 | Sharp and Roberts | Gene splicing |
| 1996 | Doherty and Zinkernagel | Recognition of viruses by immune system |
| 1997 | Prusiner | Prions |
| 1999 | Gunter Blobel | Intrinsic signals in proteins |
| 2001 | Hartwell, Hunt and Nurse | Key regulators of cell cycle |
| 2002 | Brenner, Horvitz and Sulston | Genetic regulation of organ development and cell death |

Table 1-3. Recently recognized pathogenic microbes and infectious diseases

| Year | Microbe | Type | Disease |
|------|---|----------|---|
| 1973 | Rotavirus | Virus | Major cause of infantile diarrhoea worldwide |
| 1975 | Parvovirus B-19 | Virus | Aplastic crisis in chronic hemolytic anaemia |
| 1976 | <i>Cryptosporidium parvum</i> | Parasite | Acute and chronic diarrhoea |
| 1977 | Ebola virus | Virus | Ebola haemorrhagic fever |
| 1977 | <i>Legionella pneumophila</i> | Bacteria | Legionnaires disease |
| 1977 | Hantaan Virus | Virus | Haemorrhagic fever with renal syndrome (HRFS) |
| 1977 | <i>Campylobacter jejuni</i> | Bacteria | Enteric pathogen distributed globally |
| 1980 | Human T- lymphotropic virus I (HTLV-1) | Virus | T-cell lymphoma -leukaemia |
| 1981 | Toxin producing strains of <i>Staphylococcus aureus</i> | Bacteria | Toxic Shock Syndrome |
| 1982 | <i>Escherichia coli</i> O157:H7 | Bacteria | Haemorrhagic colitis; hemolytic Uremic syndrome |
| 1982 | HTLV-II | Virus | Hairy cell leukaemia |
| 1982 | <i>Borrelia burgdorferi</i> | Bacteria | Lyme disease |
| 1983 | HIV | Virus | AIDS |
| 1983 | <i>Helicobacter pylori</i> | Bacteria | Peptic ulcer disease |
| 1985 | <i>Enterocytozoon bieneusi</i> | Parasite | Persistent diarrhoea |
| 1986 | <i>Cyclospora cayatanensis</i> | Parasite | Persistent diarrhoea |
| 1988 | Human herpes virus-6 (HHV-6) | Virus | Roseola subitum |
| 1988 | Hepatitis E Virus | Virus | Enterically transmitted hepatitis |
| 1989 | <i>Ehrlichia chafeensis</i> | Bacteria | Human ehrlichiosis |
| 1989 | Hepatitis C Virus | Virus | Parenterally transmitted liver infection |
| 1991 | Guanarito virus | Virus | Venezuelan haemorrhagic fever |
| 1991 | <i>Encephalitozoon hellem</i> | Parasite | Conjunctivitis ;disseminated disease |
| 1991 | New sps. of <i>Babesia</i> | Parasite | Atypical babesiosis |
| 1992 | <i>Vibrio cholerae</i> O139 | Bacteria | New strain associated with epidemic cholera |
| 1992 | <i>Bartonella henselae</i> | Bacteria | Cat -scratch disease; bacillary angiomatosis |
| 1993 | Sin nombre virus | Virus | Adult respiratory distress syndrome |
| 1993 | <i>Encephalitozoon cuniculi</i> | Parasite | Disseminated disease |
| 1994 | Sabia virus | Virus | Brazilian haemorrhagic fever |
| 1995 | HHV-8 | Virus | Associated with Kaposi sarcoma in AIDS patients |
| 1999 | Nipah | Virus | Encephalitis |
| 2002 | SARS CoVirus | Virus | SARS |
| 2004 | Influenza virus H5N1 | Virus | Avian influenza |

In 1930s viruses could be grown in bacteria free, living chick embryo—a technique perfected by Goodpasteur. By 1940, growth in tissue culture of susceptible mammalian cells was established. The availability of well defined cell lines have now replaced tedious methods of growing viruses in the living animals.

NOBEL LAUREATES

A number of Nobel laureates in Medicine and Physiology were awarded this prize for their work in Microbiology and Immunology (Table 1.2).

Discovery of New Organisms

The discovery of new microorganisms is a continuous phenomenon. A large number of new organisms have been discovered in recent past (Table 1.3). Some of these have acquired considerable importance because of the mortality and morbidity caused by them (HIV, hepatitis B, hepatitis C) and others have the capability to cause international scare (SARS CoVirus)