

National Center for Emerging and Zoonotic Infectious Diseases



Environmental Surveillance for Typhoid in Kibera, an Informal Settlement in Nairobi, Kenya

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Environmental Surveillance for *Salmonella* and Antimicrobial Resistance Genes (AMR) Symposium

March 26, 2019

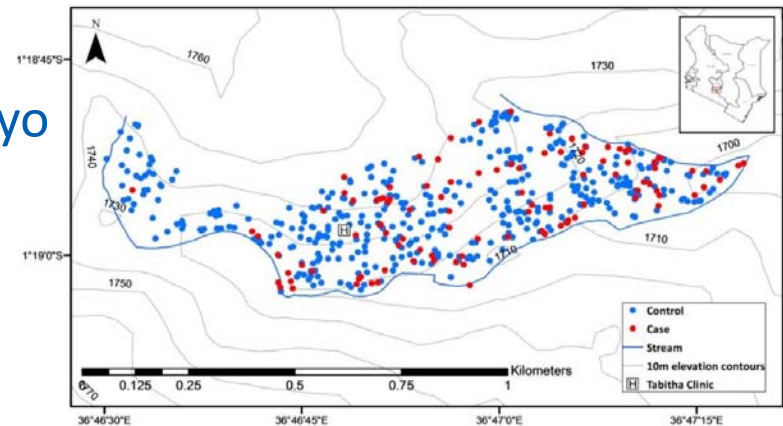
Kibera, Nairobi, Kenya

- Large urban informal settlement in Nairobi, Kenya
 - Densely populated
 - Inadequate sanitation
 - Water primarily obtained from vendors with unregulated connections to municipal water pipes



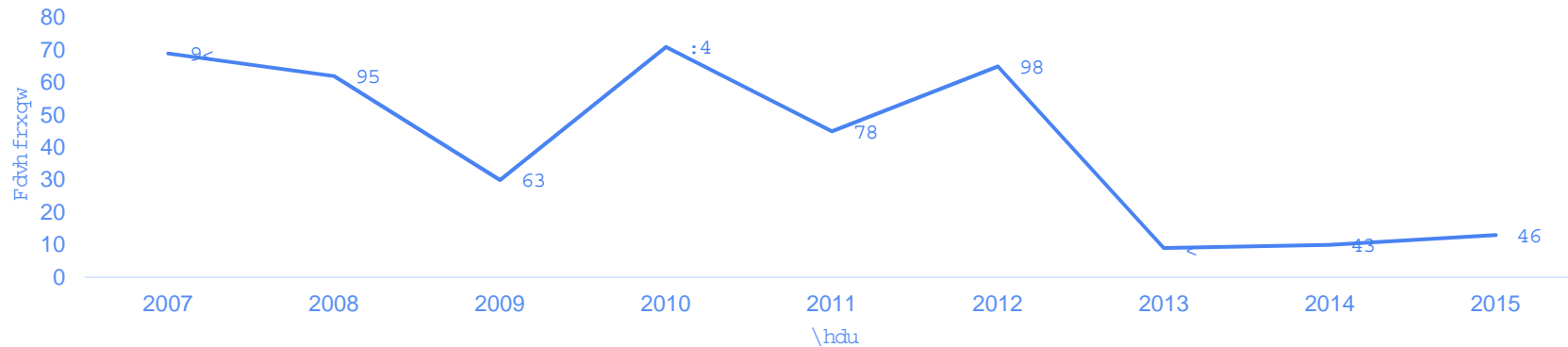
Typhoid fever in Kibera

- Population-based infectious disease surveillance (PBIDS) showed high burden of typhoid fever 03/2007- 02/2009
 - Crude incidence 247/100,000 person-years (pyo)
 - Adjusted 822/100,000 pyo
 - In aged 2-4 years 2,243/100,000 pyo
- Higher risk of disease in lower elevation
 - Among children <10 years



Decline in typhoid fever in Kibera

- In 2013, incidence reduced by ~80%
 - Has remained at low levels
- Reasons for decline unclear
 - Improved water/sanitation? Population dynamics? Shift in strains?



Kibera Typhoid Project

- Aimed at understanding decline in typhoid fever
- Strengthened surveillance
 - Optimize detection of typhoid fever cases
 - Water/sanitation data collected from participating households
- Whole genome sequencing of blood isolates from typhoid fever cases
- Environmental surveillance for *Salmonella*
 - Drinking water and sewage
- Statistical and mathematical modeling



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Why Environmental Surveillance?

- Gain insight in potential environmental exposure pathways
 - Geographic elevation
 - Comparison with case patient strains
- Develop tools for environmental monitoring
 - High genomic resolution for trace back to clinical cases
 - Identifying and assessing rapid remediation strategies



Environmental Surveillance

- 4 Major Objectives
 1. Collect samples from sewage-impacted drainage streams and drinking water in both low and high elevation areas in Kibera and use both culture-based and molecular-based methods to detect *S. Typhi*.



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 3. **Perform molecular-based analysis of DNA obtained from environmental samples and compare DNA obtained from both patient cases and environmental samples.**



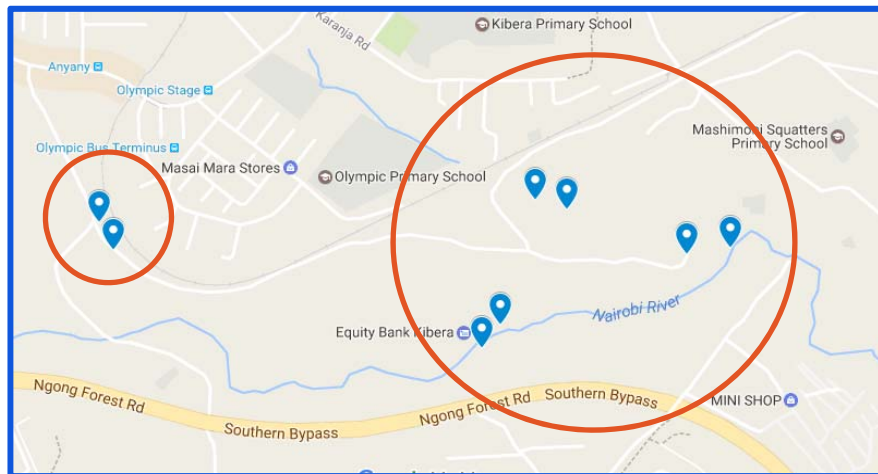
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 3. Perform molecular-based analysis of DNA obtained from environmental samples and compare DNA obtained from both patient cases and environmental samples.
 4. **Develop and refine new molecular diagnostic tools for detecting low-concentration pathogens directly from environmental samples.**



Sampling

- Collect samples from in both low (n=3) and high (n=1) elevation sites in Kibera 6 times from November 2017 – December 2018



Open drainage stream



Vended drinking water

Sampling

- Large-volume water samples, in triplicate, via dead-end ultrafiltration (DEUF)
 - Drainage stream: 10 L (or until clogging occurs)
 - Drinking water: 20 L



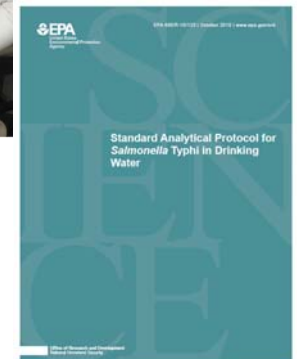
Sampling

- Large-volume water samples, in triplicate, via dead-end ultrafiltration (DEUF)
 - Drainage stream: 10 L (or until clogging occurs)
 - Drinking water: 20 L
- Small-volume water samples, in duplicate, for additional water quality parameters



Sample Processing

- In the Kibera laboratory:
 - Ultrafilter backflush → EPA culture method
 - Universal pre-enrichment (UPE) broth
 - Selenite cysteine (SC) broth
 - Bismuth sulfite (BS) agar and xylose lysine deoxycholate (XLD) agar



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 - Grab samples
 - IDEXX Colilert-18 for *E. coli*
 - IDEXX Enterolert for *Enterococci*

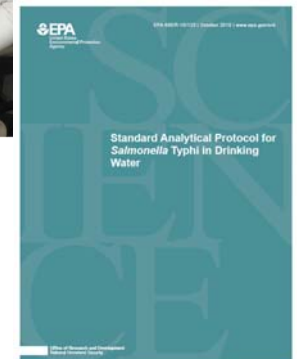


Photo: idexx.co.au

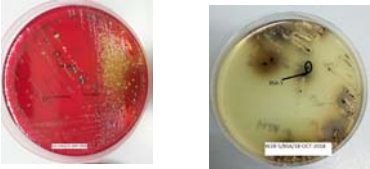
Sample Preservation



Ultrafilter
backflush



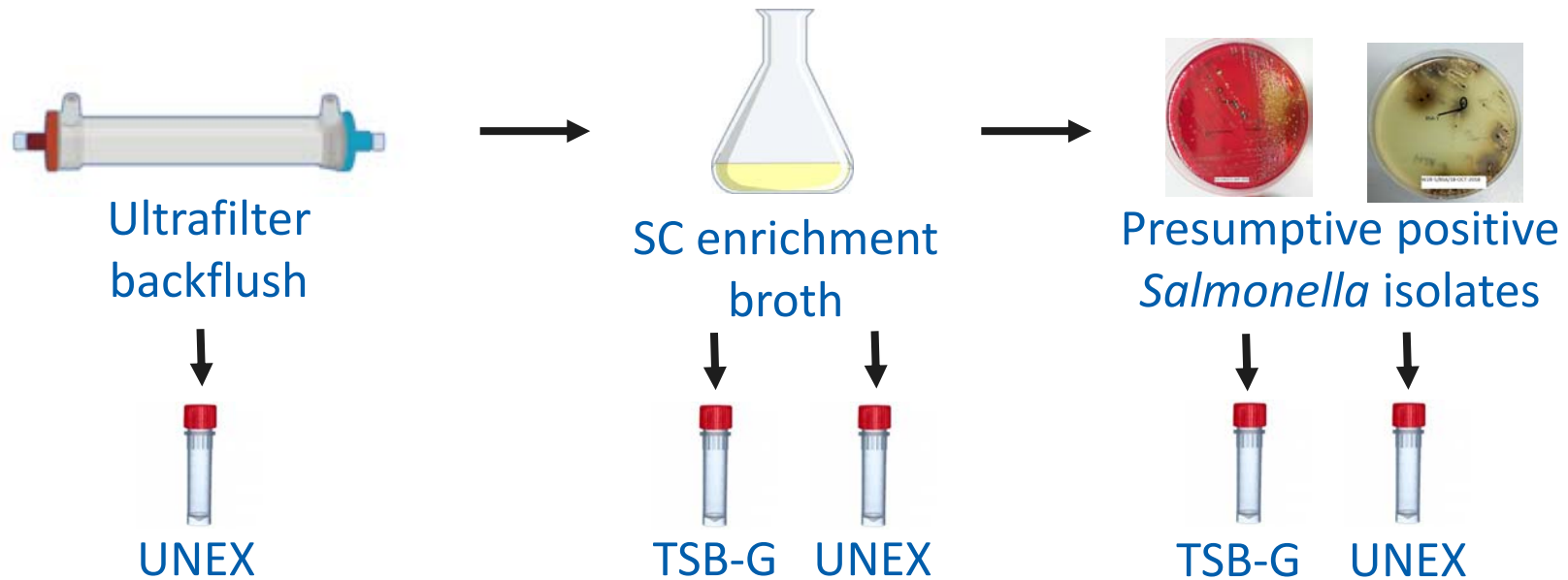
SC enrichment
broth



Presumptive positive
Salmonella isolates



Sample Preservation



- Universal nucleic acid extraction (UNEX) buffer at ambient temperature
- Tryptic soy broth with 15% glycerol (TSB-G) at -20 °C

Physicochemical Results

Table 1: Median (range) physicochemical water quality measures

	Drainage Water (n=24)	Drinking Water (n=24)
Turbidity (NTU)	673.5 (12.6 - >1000)	0.9 (0.5 - 8.6)
pH	7.8 (6.5 - 8.6)	8.1 (6.5 - 8.6)
Temperature (°C)	21.8 (19.1 - 25.8)	21.8 (17.6 - 26.5)
Conductivity (µS/cm)	1005 (236 - 17800)	97.9 (79.9 - 280.0)
Free chlorine residual (mg/L)	n/a	0.17 (<0.02 - 0.52)

NTU: Nephelometric Turbidity Units



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Fecal Indicator Bacteria Results

Table 2: Fecal indicator bacteria measures

	Drainage Water (n=24)	Drinking Water (n=24)
# Samples <i>E. coli</i> -positive* (range, MPN/100 mL)	24 ($10^5 - 10^9$)	5 (<1.0 - 33.6)
# Samples <i>Enterococci</i> -positive* (range, MPN/100 mL)	24 ($10^5 - 10^7$)	2 (<1.0 - 1.0)

*at least 1 of 2 replicates positive



Presumptive Positive Isolate Testing

- CDC Environmental Microbiology (EM) laboratory currently uses a modified version of the CDC Enterics Laboratory's *S. Typhi* assay for isolates

	<i>fimA</i> (<i>Salmonella</i> spp)	<i>fliC-d</i>	<i>viaB</i>	<i>tyv</i>
<i>Salmonella Typhi</i>	+	+	+	+
<i>Salmonella Paratyphi A</i>	+	-	-	-
<i>Salmonella Enteritidis</i>	+	-	-	+
<i>Salmonella Typhimurium</i>	+	-	-	-

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- Presumptive-positive isolates from **83%** (60 of 72) of drainage samples
 - Isolates from **90%** (26 of 29) of samples tested to-date are PCR-positive for *Salmonella* spp. (*fimA*)

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 - **No isolates tested to-date are PCR-positive for *S. Typhi***

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- Presumptive-positive isolates from 60 (83%) of 72 drainage samples
 - Isolates from 26 (90%) of 29 samples tested to-date are PCR-positive for *Salmonella* spp. (*fimA*)
 - No isolates tested to-date are PCR-positive for *S. Typhi*
- Presumptive-positive colonies isolated from 15% (11 of 72) drinking water samples

Environmental Sample PCR Assay Development

- *S. Typhi* is challenging to isolate from the environment
 - Dilution, competition in the culture process, viable but non-culturable state (VBNC)



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- *S. Typhi* is challenging to isolate from the environment
 - Dilution, competition in the culture process, viable but non-culturable state (VBNC)
- Real time PCR screening → more accurate representation
 - Selective enrichments reduce competition and increase target
- PCR assays developed for clinical samples provide a good starting point for environmental assay development
- However, infected clinical specimens differ considerably from environmental samples
 - Are relatively “clean” (e.g., blood) or well-characterized (e.g., stool) matrices
 - Have high concentration of target nucleic acids
 - Rarely have multiple species or serotypes of the same pathogen



Environmental Sample PCR Assay Development

- Challenges with complex environmental samples



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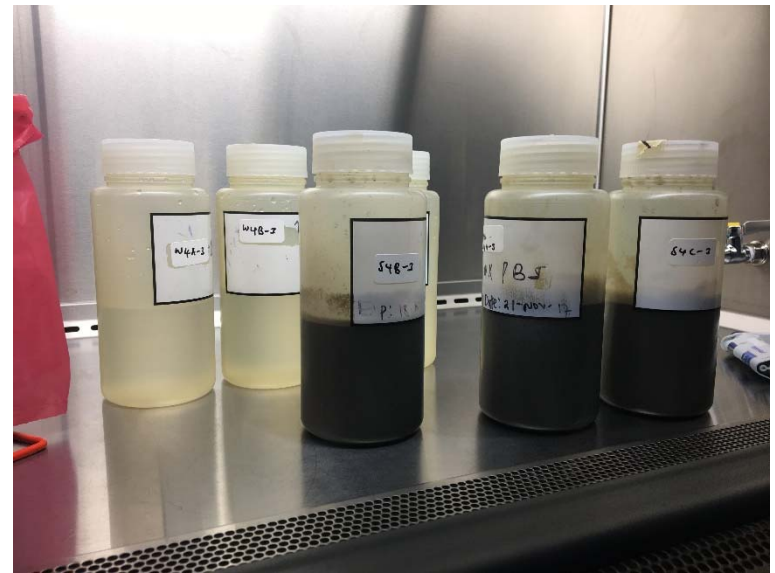
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 - Vast array of uncharacterized nucleic acids that may be amplified (false positives)
 - Compounded when assays are multiplexed
 - Primer interactions
 - Relative abundance of targets per cell and across closely-related organisms
 - Competition for reagents within the reaction



Environmental Sample PCR Assay Development

- Ideal environmental PCR assay
 - Singleplex
 - Sensitive and specific within known genomic databases
 - **Thoroughly vetted via performance testing in relevant environmental samples**



Environmental Sample PCR Assay Development

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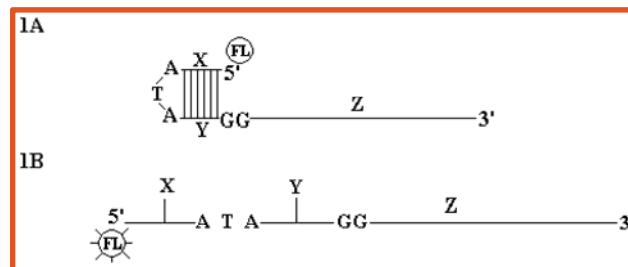
(+) real time PCR positive (-) real time PCR negative

- **Not ideal for environmental samples**
 - Other environmental microorganisms may carry one or more of these genes
 - Relative abundance of different genes in complex matrix can affect interpretation of non-detects



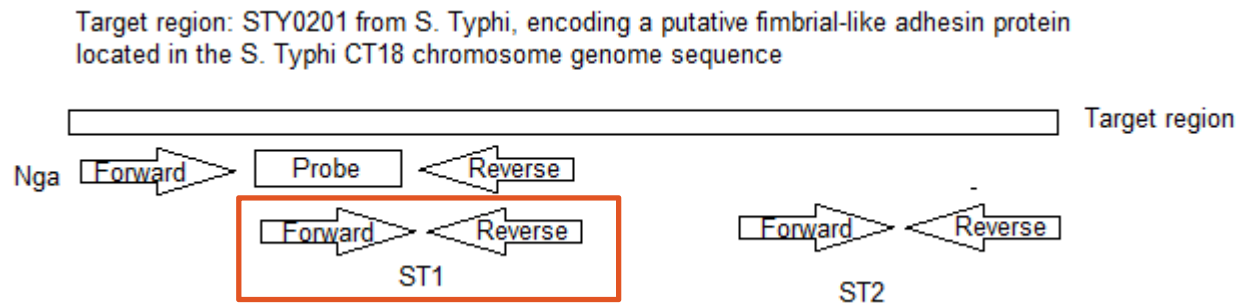
S. Typhi PCR Assay for Environmental Samples

- Started with effective clinical singleplex *S. Typhi* method
- Created photo-induced electron transfer (PET) PCR assay
 - Designed for use in malaria control and elimination programs
 - Self-quenching fluorogenic primers (no internal probes or dyes)
 - Less expensive, less complex
 - Potential for use large scale screening in surveillance and epidemiological studies



S. Typhi PCR Assay for Environmental Samples

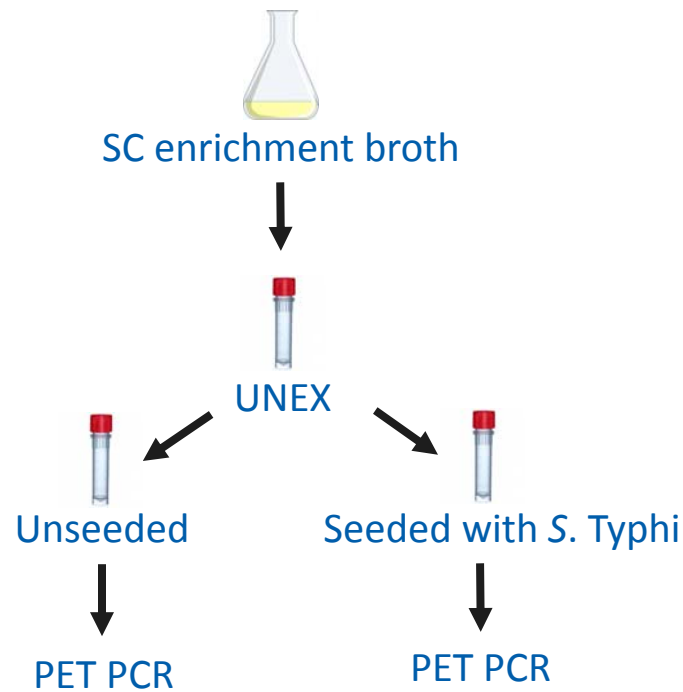
- Modified Nga primers → PET PCR primers



- In silico* analysis of PET PCR target “ST1”
 - CDC clinical *S. Typhi* genomes
 - CDC *S. enterica* subsp. *enterica* genomes
 - All NCBI bacteria
 - CDC curated human stool database of 330 bacterial genome sequences

Performance Testing in Environmental Samples

- 4 Kibera drainage enrichments seeded with *S. Typhi* (91 CFU / PCR reaction)



Seeded Study Results

Table: PET PCR Threshold cycle (Ct) for ST1, unseeded and seeded Kibera enrichments

Sample	ST1 Ct	
	Un	Seeded
1	39.4	37.0
2	36.4	36.1
3	39.6	39.6
4	39.0	36.3
dH ₂ O	n/a	36.1

- Inhibition apparent in 1 sample (#3)
- ST1 detected in all 4 unseeded enrichments



Seeded Study Results

Table: PET PCR Threshold cycle (Ct) for ST1 and four target assay, unseeded and seeded Kibera enrichments

Sample	ST1 Ct		<i>fimA</i> Ct		<i>tyv</i> Ct		<i>viaB</i> Ct		<i>fliC-d</i> Ct	
	Un	Seeded	Un	Seeded	Un	Seeded	Un	Seeded	Un	Seeded
1	39.4	37.0	+	+	+	+	-	+	+	+
2	36.4	36.1	+	+	+	+	+	+	+	+
3	39.6	39.6	+	+	-	+	+	+	+	+
4	39.0	36.3	+	+	-	+	+	+	+	+
dH ₂ O	n/a	36.1	n/a	+	n/a	+	n/a	+	n/a	+

- Enrichment 2 is also positive for each of the four additional assays → likely *S. Typhi*; sequence confirmation needed



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2	36.4	36.1	+	+	+	+	+	+	+	+
3	39.6	39.6	+	+	-	+	+	+	+	+
4	39.0	36.3	+	+	-	+	+	+	+	+
dH ₂ O	n/a	36.1	n/a	+	n/a	+	n/a	+	n/a	+

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- Enrichments 1, 3, and 4: unclear (detection limit: 40 cycles)

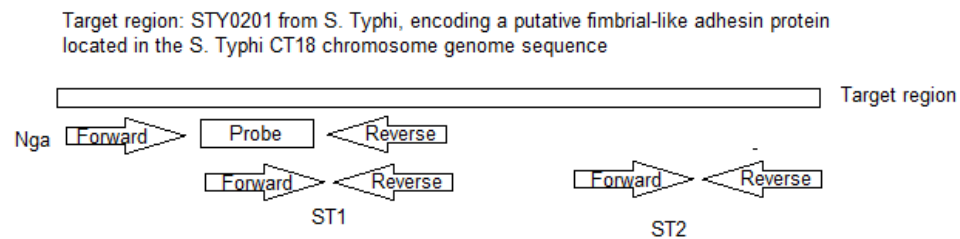
Next Steps

- Complete analyses of presumptive positive isolates



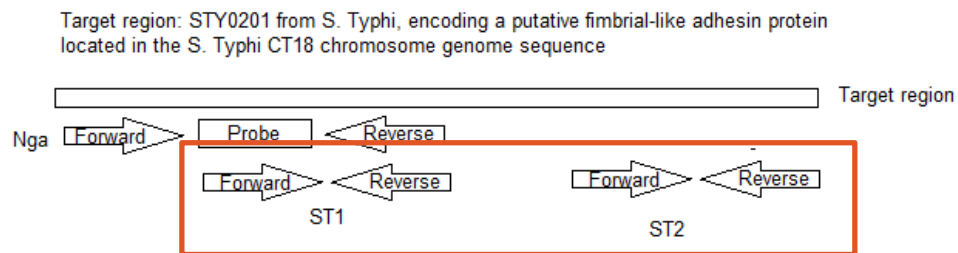
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 - Limitation: ST1 is a short target ≠ sequencing



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- Complete analyses of presumptive positive isolates
- Continue optimization for PET PCR:
 - Wet lab confirmation of *in silico* sensitivity and specificity
 - Limitation: ST1 is a short target \neq sequencing
 - “ST2” appears to be highly sensitive and specific
 - Sequence longer amplicon for sequence confirmation



Next Steps

- Continue *S. Typhi* screening of unenriched and enriched water concentrates with sequence confirmation to identify optimal surveillance sample processing methods



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- Continue *S. Typhi* screening of unenriched and enriched water concentrates with sequence confirmation to identify optimal surveillance sample processing methods
- **Additional funding for environmental surveillance design method development:**
 - Geographical representative sampling sites (e.g., high vs low elevation)
 - Person-denominator for each sample directing public health action



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Thank you!

Questions?

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

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