

Role of Gallstones in *Salmonella* Typhi Stool Carriage and Shedding in an Urban Typhoid Endemic Setting in Nairobi, Kenya

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Typhoid Acute infection and Asymptomatic Carriage

- Typhoid fever has an estimated annual global incidence of 11-20 million cases and a mortality rate of 2–3% even with adequate antibiotic therapy.
- Approximately 5% of those infected fail to clear the bacteria and become carriers.
- In chronic carrier state, *S.* Typhi colonizes the biliary tract especially in patients presenting with **cholesterol gallstones** (GS); approximately 90% of chronically infected carriers have GSs.



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Study Area/Site

- Mukuru informal settlement-an endemic typhoid setting
- Mama Lucy Kibaki Hospital (MLKH)-county referral hospital



Study participants

- Confirmed (Blood and/stool culture positive) acute cases aged ≥ 12 yrs and their household contacts
- Follow-ups were done after treatment and Ultrasound scan done to detect Gallstones in Gallbladder.



Age distribution of Cases

• 23 acute cases and household contacts were successfully followed up

RESULTS: Shedding patterns of Cases and Household Contacts



Household Contacts Shedding S. Typhi

Age (Yrs)

	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
27737_C1												
48262_C1												
28549_C1												
20127_C4												
14681_C1	3x											
11673_C3	3x											
11829_C1												



Culture negative

With gallstones

Hotspots for S. Typhi Carriage in Nairobi/Within the Study Area



• Shedding/no gallstones

○ Shedding/gallstones present

• Not Shedding

Antimicrobial Resistance Patterns



Cases vs carriers

Antimicrobial Resistance Patterns



Conclusion

- Some patients fail to clear *Salmonella* Typhi immediately after treatment and go on to shed the bacterium.
- Cholesterol gallstones facilitate establishment of *S*. Typhi chronic carrier state, an important phase towards chronic shedding.
- Chronic shedding especially for MDR strains, is playing a major role in transmission and persistence of household and community typhoid infections
- Follow up analysis: WGS and phylogenetic relatedness for strains from cases, contacts and galls stones

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