

LEPTOSPIRA: Morphology, Classification and Pathogenesis

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Abstract

Leptospirosis, caused by the pathogenic leptospires, is one of the most widespread zoonotic diseases known. Leptospirosis cases can occur either sporadically or in epidemics, Humans are susceptible to infection by a variety of serovars. These bacteria are antigenically diverse. Changes in the antigenic composition of lipopolysaccharide (LPS) are thought to account for this antigenic diversity. The presence of more than 200 recognized antigenic types (termed serovars) of pathogenic leptospires have complicated our understanding of this genus. Definitive diagnosis is suggested by isolation of the organism by culture or a positive result on the microscopic agglutination test (MAT). Only specialized laboratories perform serologic tests; hence, the decision to treat should not be delayed while waiting for the test results.

Keywords: *Leptospirosis*; *Leptospira*; Serovar; Morphology; Pathogenesis

Introduction

Leptospirosis is a bacterial zoonotic disease of global importance. It is caused by infection with pathogenic *leptospira* species : helical shaped motile spirochetes which belong to the family leptospiraceae. Leptospirosis encompasses a wide spectrum of clinical and subclinical disease in both humans and animals. Rats and other rodents are the most important sources [1]. Livestock farming plays an important role as a major occupational risk factor for human leptospirosis and farmed deer is one of the contributing factors.

This genus *Leptospira* is divided into two species with different metabolic properties: *L. interrogans* which includes pathogenic strains and *L. biflexa* including saprophyte strains isolated from the environment. These two species are themselves divided into serovars defined by agglutination techniques in the presence of homologous antigen (approximately 60 serovars for *L. biflexa*, more than 225 for *L. interrogans*). Serological methods have identified more than 300 serovars more than 200 of which are considered pathogenic [1-3]. Alongside this phenotypic classification, genotyping classification of *Leptospira* has been established in which more species including the same serovars as previously have been described. In the absence of correlation with the data of pathogenicity of different strains, this classification is little used. However, the new genomic classification system has revealed pathogenic species, which can contain both pathogenic and nonpathogenic serovars [4] as well as intermediate species such as *L. meyeri*, *L. inadai* and *L. fainei* [5,6]. The disease follows a trend in small outbreaks or sporadic. Spread over the whole year, it shows a marked increase summer-autumn [7]. Clinical presentations of leptospirosis among humans range from asymptomatic infection to potentially fatal zoonosis. The majority of human infections are mild, systemic illnesses that bring headache, chills, fever, conjunctival suffusion and muscle pain [8].

All Animal pathogenic serovars can also be pathogenic to humans, Transmission to humans occurs through penetration of the organism into the blood stream via cuts, skin abrasions or mucus membranes.

This review describes the taxonomy and classification of leptospira, biology and pathogenesis.

Morphology of *Leptospira*

Leptospires are corkscrew-shaped bacteria, which differ from other spirochaetes by the presence of end hooks. They belong to the order of Spirochaetales, family Leptospiraceae, genus *Leptospira*. about 0.1 µm in diameter by 6–20 µm in length [1].

Leptospires are mobile, their bodies are small diameter requiring the use of dark field microscopy or phase contrast for observation. These bacteria are aerobic, do not resist drought or hypertonicity, however, they support alkalization to pH 7.8.

Leptospira species are also divided serologically through the cross-reaction of cell antigens using the crossagglutinin absorption test (CAAT); over 200 serovars have been described for the genus [2].

Leptospires have distinctive hooked ends (Figure 1A & 1B). Two periplasmic flagella with polar insertions are located in the periplasmic space and are responsible for motility; the FlaA and FlaB proteins constitute the flagellar sheath and core respectively. Electron microscopy showed a flaB mutant to be deficient in endoflagella and non-motile. Leptospires have a typical double membrane structure in which the cytoplasmic membrane and peptidoglycan cell wall are closely associated and are overlaid by an outer membrane [10]. Within the outer membrane, the LPS constitutes the main antigen for *Leptospira*. It is structurally and immunologically similar to LPS from Gram negative organisms. Their visualization is achieved after metal impregnation (silver staining) or after artificial thickening by immunoperoxidase or immunofluorescence (Andre-Fontaine1992).

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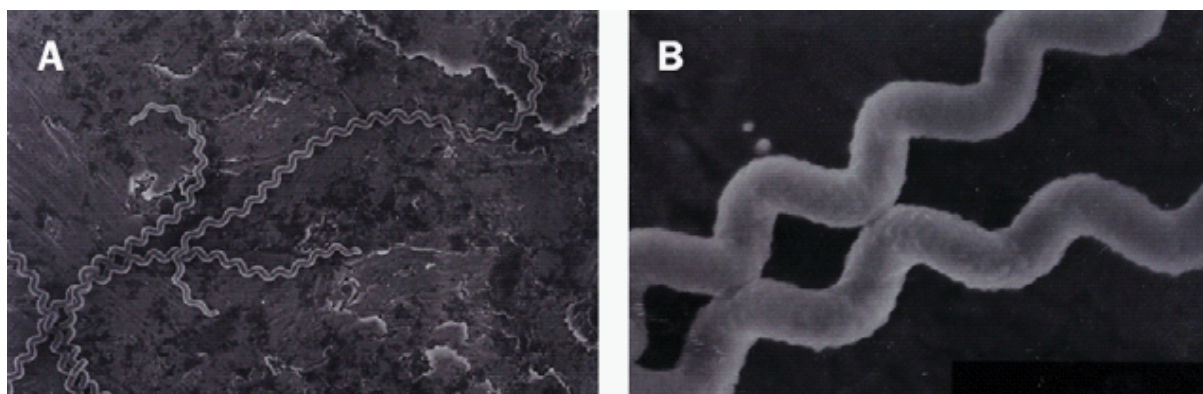


Figure 1: High-resolution scanning electron micrograph of *Leptospira interrogans* serovar copenhageni (Ajay R et al, 2003). (A) Note characteristic hooked ends. (B) At high magnification the surface of the spirochete seems ruffled and beaded.

Leptospire are obligate aerobes with an optimum growth temperature of 28–30°C. They grow in simple media enriched with vitamins B₁ and B₁₂, long-chain fatty acids, and ammonium salts. Long-chain fatty acids are utilized as the sole carbon source and are metabolized by β -oxidation [1]. Growth of leptospire is often slow on primary isolation, and cultures have to be retained for about 13 weeks before being discarded. Agar may be added at low concentrations (0.1–0.2%). In such semisolid media, growth reaches a maximum density in a discrete zone beneath the surface of the medium, which becomes increasingly turbid as incubation proceeds. This growth is related to the optimum oxygen tension and is known as a Dinger's ring or disk. Leptospiral cultures are maintained by repeated subculture or by storage in semisolid agar containing hemoglobin. Long-term storage in liquid nitrogen also yields good results and is the preferred method of storage for maintaining virulence. Molecular diagnostic methods are increasingly being used for clinical diagnosis in endemic areas because of their sensitivity and specificity. PCR amplification techniques should help to characterize any *Leptospira* DNA sequences present. Especially in the early stage of an outbreak, it can be extremely valuable to characterize further any diagnostic DNA sequences that have been amplified in order to confirm the amplification as being definitively derived from *Leptospira* and not due to an anomalous amplification. This can be done by hybridization, restriction endonuclease digestion or DNA sequencing. Each of these approaches, however, requires the use of additional reagents and equipment and thus adds to the complexity of the diagnostic process.

Classification

The spirochetal are an order of bacteria dividing itself into two families: Spirochaetaceae and Leptosiraceae. Within the family Spirochaetaceae, we can find *Treponema* types, *Serpulina* and *Borrelia*. The agent of leptospirosis, the genus *Leptospira*, belongs to the family of Leptosiraceae [10].

Classification of *Leptospira* is based on the expression of the surface-exposed epitopes in a mosaic of the lipopolysaccharide (LPS) antigens, while the specificity of epitopes depends on their sugar composition and orientation.

Leptospira is divided into several species and subspecies, called serogroups and serovars, usually associated with a natural host (Table 1).

Clinical and Serological classification

Leptospire are bacteria which can be either pathogenic (i.e. having the potential to cause disease in animals and humans) or saprophytic (i.e. free living and generally considered not to cause disease) [11,12]. The saprophytes are supposed not to cause disease. They are occasionally found in cultures from clinical materials, but the significance of their presence is uncertain. Their main importance in medical microbiology is as contaminants in supposedly sterile or at least saprophyte-free materials.

Saprophytic species of *Leptospira* include *L. biflexa*, *L. meyeri*, *L. yanagawae* (genomospecies 5), *L. kmetyi*, *L. vanthielii* (genomospecies 4), and *L. wolbachii*, and contain more than 60 serovars.

Since both of two species are morphologically indistinguishable they have to be differentiated to prevent false positive result. Conventionally, the differentiation between pathogenic and saprophytic leptospire is carried out by tests like pathogenicity to animals, growth response to 8-azaguanine (225 μ g/ml) at low temperature, conversion spherical forms by 1M NaCl. The low temperature test makes use of the fact that the minimum growth temperature ranges from 13 to 15°C for pathogenic leptospire and 5–10°C for saprophytes; however this criterion could be misleading as some pathogenic *Leptospira* like serovar Icterohaemorrhagiae can also grow at 10°C [13]. Hence, alternative simple, rapid methods are the need of hour and polymerase chain reaction is one such method.

The precise identification and classification of *Leptospira* spp. is important for epidemiological and public health surveillance, as different serovars can exhibit different host specificities and may not be associated with a particular clinical form of infection.

Genotypic Classification

The genotypic classification of leptospire is supported by Multi-locus Enzyme Electrophoresis (MLEE) data [14]. The new genomic classification system has revealed pathogenic species, which can contain both pathogenic and nonpathogenic serovars as well as intermediate species such as *L. meyeri*, *L. inadai* and *L. fainei* [5,6].

Genotypic classification will eventually supplant the phenotypic classification. Indeed, it is based on taxonomic databases more relevant than the serological classification. In addition, it will allow progress on

<i>Leptospira</i> serovars I	Usual host
<i>icterohaemorrhagiae</i> and <i>ballum</i>	rats
<i>ballum</i>	mice
<i>grippotyphosa</i> and <i>hardjo</i>	dairy cattle
<i>pomona</i> and <i>tarassovi</i>	pigs
<i>pomona</i> and <i>hardjo</i>	sheep
<i>canicola</i>	dogs

Table 1: Reservoirs of different serovars present in wildlife and cattle [3].

the diagnosis, this new classification will also be sufficient to compare the isolates with reference strains. The coexistence of the two classifications is not confusing. Thus the species *L. biflexa* and *L. interrogans* in the phenotypic model are also génomospecies in the genotypic model.

Biology of Leptospire

Leptospire require special conditions for their development. They are able to survive in alkaline soil, mud, swamps, streams, rivers organs and tissues of live or dead animals and diluted milk. Survival of pathogenic leptospire in the environment is dependent on several factors including pH, temperature, and the presence of inhibitory compound. In general, they are sensitive to dryness, heat, acids and basic disinfectants [1]. Under laboratory conditions, leptospire in water at room temperature remain viable for several months at pH 7.2 to 8.0 [15]. *Leptospira* spp. do not multiply outside the host. In the environment, they require high humidity for survival and are killed by dehydration or temperatures greater than 50°C. They can remain viable for a few to many weeks or months in contaminated soil and for several weeks in cattle slurry. They can remain viable in water for several months under laboratory conditions, but do not survive in river water under natural conditions. They grow in simple media enriched with vitamins (vitamins B₂ and B₁₂ are growth factors), long-chain fatty acids, and ammonium salts [12]. Leptospiral lipopolysaccharide has a composition similar to that of other gram-negative bacteria, but has lower endotoxic activity [16]. Leptospire may be stained using carbol fuchsin counterstain. They grow in simple media enriched with vitamins (vitamins B₂ and B₁₂ are growth factors), long-chain fatty acids, and ammonium salts. Long-chain fatty acids are utilized as the sole carbon source and are metabolized by β-oxidation.

Pathogenesis

Leptospire enter the host via small abrasions, breaches of the surface integument, conjunctiva, mucous membrane and genital track. This requires chemotaxis mechanisms for adhesion and transmembrane passages. The bacteria are then required to win the vascular compartment. However, they may settle in the convoluted tubules of the kidneys and be shed in the urine for a period of a few weeks to several months and occasionally even longer. After the number of leptospire in the blood and tissues reaches a critical level, lesions due to the action of undefined leptospiral toxin(s) or toxic cellular components and consequent symptoms appear. Endotoxin activity has been reported in several serovars of leptospire. Leptospiral LPS (leptospiral lipopolysaccharide) preparations exhibit activity in biological assays for endotoxin similar to other Gram-negative bacteria.

Hemolysins have been suggested to be phospholipases, that act on erythrocytes [17] and other cell membranes containing the substrate phospholipids, leading to cytolysis [18].

The doubling time under optimal conditions is 6-8h and the density is 10⁹ cells / ml. Culture in solid medium is slow (except for

saprophytes). The maintenance of virulence requires a regular passage of a susceptible animal.

The primary lesion is damaged to the endothelium of small blood vessels leading to localized ischemia in organs, resulting in renal tubular necrosis, hepatocellular and pulmonary damage, meningitis, myositis and placentitis.

The incubation period depends on infective dose, growth rate of organisms, their toxicity, and immunity.

The correct characterization of leptospiral pathogenicity is strengthened by using a polyvalent analytical approach that minimizes uncertainties encountered from individual tests especially when phenotypic analysis does not strictly equate with genotypic speciation [19].

In particular, the molecular basis for virulence remains unknown, due mainly to the absence, until recently, of genetic tools for the manipulation of *Leptospira*. The recent availability of genome sequences from pathogenic and saprophytic *Leptospira* spp. [20,21] coupled with the recent development of mutagenesis systems [22] has allowed a more detailed and genetically defined investigation of cellular and molecular pathogenic mechanisms in leptospirosis. The humoral immune response appears in the first week of infection, it activates the process of phagocytosis by neutrophils and macrophages. Complement activation is also involved in lysis of the leptospire.

In susceptible hosts such as humans, systemic infection can produce severe multi-organ manifestations. Initial symptoms, which may include chills, fever, headache (severe and persistent), diarrhea, or a rash [23], myalgia, malaise, prostration, retro-orbital pain, conjunctival suffusion [24], muscle tenderness and lung involvement, appear quite abruptly after an incubation period of about 10 days (range 4 to 19 days). Cases that also have other symptoms [8] such as meningitis, hemorrhage into skin and mucous membranes, jaundice, hepatorenal failure [25] and myocarditis may be misdiagnosed.

References

- Faine SB, Adler B, Bolin C, Perolat P (1999) *Leptospira* and Leptospirosis. Melbourne, Australia: MediSci.
- Levett PN (2001) Leptospirosis. Clin Microbiol Rev 14: 296–326.
- Bharti AR, Nally JE, Ricaldi JN, Matthias MA, Diaz MM (2003) Leptospirosis: a zoonotic disease of global importance. Lancet Infect Dis, 3: 757–771.
- Brenner DJ, Kaufmann AF, Sulzer KR, Steigerwalt AG, Rogers FC, et al. (1999) Further determination of DNA relatedness between serogroups and serovars in the family Leptospiraceae with a proposal for *Leptospira alexanderi* sp. nov. and four new *Leptospira* genomospecies. Int J Syst Bacteriol 49 : 839-858.
- Levett PN (2003) *Leptospira* and Leptonema. In : Manual of Clinical Microbiology, (8th ed). Murray PR, Baron EJ, Pfaller MA (eds) ASM Press, Washington DC, 929-936.
- Morey RE, Galloway RL, Bragg SL, Steigerwalt AG, Mayer LW, et al. (2006) Species-specific identification of Leptospiraceae by 16S rRNA gene sequencing. J Clin Microbiol 44: 3510-3516.
- Haraji Mohammed, Nozha Cohen, Hakim Karib, Aziz Fassouane, Rekia Belahsen (2011b) Epidemiology of Human Leptospirosis in Morocco. Asian Journal of Epidemiology, in press.
- Haraji Mohammed, Nozha Cohen, Hakim Karib, Abdelaziz Fassouane, Rekia Belahsen (2011c). LEPTOSPIROSIS : Epidemiology and usual manifestations. Bacteriology Journal, in press.
- Cullen PA, Haake DA, Adler B (2004) Outer membrane proteins of pathogenic spirochetes. FEMS Microbiol Rev 28: 291–318.
- Kososey-Vrain C (2004) Canine leptospirosis: a review. Thesis Med. Vét. ENVA, N°135:15.

11. S. Faine, N. D. Stallman (1982) Amended descriptions of the genus *Leptospira* Noguchi 1917 and the species *L. interrogans* (Stimson 1907) Wenyon 1926 and *L. biflexa* (Wolbach and Binger 1914) Noguchi 1918. Int. J. Syst. Bacteriol 32:461–463.
12. Johnson RC, Faine S (1984) *Leptospira*, In NR Krieg and JG Holt (ed) Bergey's manual of systematic bacteriology. Williams & Wilkins, Baltimore 1: 62–67.
13. Kmety E, Plesko I, Bakoss P, Chorvath B (1966) Evaluation of methods for differentiating pathogenic and saprophytic *leptospira* strains. Ann Soc Belges Med Trop Parasitol Mycol Trop 46: 111-122.
14. M. Letocart, P. Boerlin, F. Boerlin-Petzold, J. Goudet, G. Baranton, et al. (1999) Genetic structure of the genus *Leptospira* by multilocus enzyme electrophoresis. Int J Syst Bacteriol 49: 231-238.
15. Crawford RP, Heinemann JM, McCulloch WF, Diesch SL (1971) Human infections associated with waterborne leptospires, and survival studies on serotype pomona. J Am Vet Med Assoc 159: 1477-1484.
16. Shimizu T, Matsusaka E, Takayanagi K, Masuzawa T, Iwamoto Y (1987). Biological activities of lipopolysaccharide-like substance (LLS) extracted from *Leptospira interrogans* serovar *canicola* strain Moulton. Microbiol Immunol 31:727-735.
17. Thompson JC, Manktelow BW (1986) Pathogenesis and red blood cell destruction in haemoglobinemic leptospirosis. J Comp Pathol, 96: 529-540.
18. Lee SH, Kim S, Park SC, Kim MJ (2002) Cytotoxic activities of leptospira interrogans hemolysin SphH as a pore-forming protein on mammalian cells. Infect Immun 70: 315-322.
19. Georgies F, Mgode, Robert S. Machang'u, Margarida Collares-Pereira, Maria Luisa Vieira, Marga G. A. Goris, et al. (2010) Challenges in determining the pathogenicity status of *Leptospira* isolates with phenotypic methods: The need for a polyvalent approach. African Journal of Microbiology Research 4: 2528-2533.
20. Bulach DM, Zuerner RL, Wilson P, Seemann T, McGrath A, et al. (2006) Genome reduction in *Leptospira borgpetersenii* reflects limited transmission potential. Proc Natl Acad Sci U S A 103: 14560–14565.
21. Picardeau M, Bulach DM, Bouchier C, Zuerner RL, Zidane N (2008) Genome sequence of the saprophyte *Leptospira biflexa* provides insights into the evolution of *Leptospira* and the pathogenesis of leptospirosis. PLoS ONE 3, e1607.
22. Bourhy P, Louvel H, Saint Girons I, Picardeau M (2005) Random insertional mutagenesis of *Leptospira interrogans*, the agent of leptospirosis, using a mariner transposon. J Bacteriol 187: 3255–3258.
23. Mansour-Ghanaei F, Sarshad A, Fallah MS, Pourhabibi A, Pourhabibi K (2005) Leptospirosis in Guilan, a northern province of Iran: assessment of the clinical presentation of 74 cases. Med Sci Monit 11:219-23.
24. Haraji MN, Cohen H, Karib A, Fassouane Y, Dinar, et al. (2011) A new case of Weil disease confirmed in El Jadida, Morocco Microbiol J 1: 71-75.
25. Maha MS, Abd El latif, M Daoud Eitedal, MS abd el latif Lobna, A El lithy Nabila (2007) Urinary Epidermal Growth Factor excretion: A useful prognostic marker for progression of renal damage in children; J Med Sci 7: 1171-1176.
26. Levett PN, Morey RE, Galloway RL, Steigerwalt AG (2006) *Leptospira broomii* sp. nov., isolated from humans with leptospirosis. Int J Syst Evol Microbiol 56: 671–673.
27. Perolat P, Chappel RJ, Adler B, Baranton G, Bulach DM (1998) *Leptospira fainei* sp. nov., isolated from pigs in Australia. Int. J. Syst. Bacteriol 48: 851–858.
28. Slack AT, Dohnt MF, Symonds ML, Smythe LD (2005) Development of a multiple-locus variable number of tandem repeat analysis (MLVA) for *Leptospira interrogans* and its application to *Leptospira interrogans* serovar Australis isolates from Far North Queensland, Australia. Ann Clin Microbiol Antimicrob 4 : 10.
29. Yasuda, P.H., A.G. Steigerwalt, K.R. Sulzer, A.F. Kaufmann, F. Rogers, D.J. Brenner, 1987. Deoxyribonucleic acid relatedness between serogroups and serovars in the family *Leptospiraceae* with proposals for seven new *Leptospira* species. Int J Syst Bacteriol., 37: 407–415.