

MINISTRY OF HEALTH CARE OF UKRAINE Kharkiv
National Medical University D.P. Gryniov department of
microbiology, virology and immunology

STANDARD PROTOCOLS

TO LABORATORY CLASSES IN SPECIAL VIROLOGY

for the II and III year English media students

student _____ *year* _____ *group*

Surname _____

Teacher _____

Kharkiv 2018

Standard protocols to laboratory classes in special virology for the II and III year English media students of medical and dentistry faculties / M.M. Mishyna, N.I. Kovalenko, Yu.A. Mozgova, V.L. Tkachenko, T.M. Zamazyi, O.O. Vovk. – Kharkiv: KNMU, 2018. – 84 p.

Standard protocols are related to the program of Ministry of Health of Ukraine and is recommended to students of medical and dentistry faculties of high medical schools of III-IV accreditation level.

Standard protocols to laboratory classes in special virology includes demonstrative information according laboratory diagnosis of viral infections in humans. Standard protocols contain practical aspects together with theoretical information. They are structured and directed for individual work of students

Special virology.

Protocol № 22

Theme: The main properties of viruses. Methods of laboratory diagnosis of viral diseases.

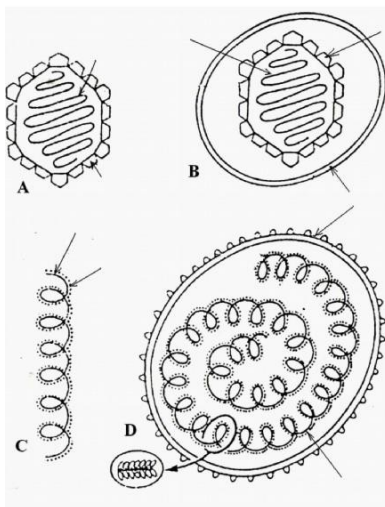
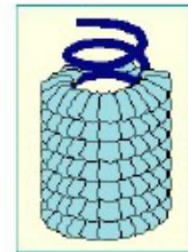
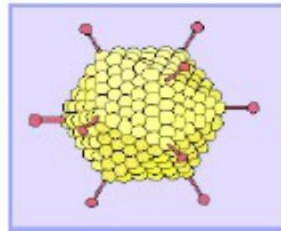
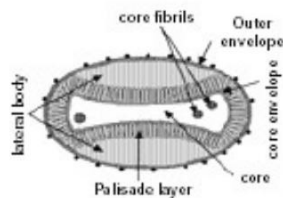
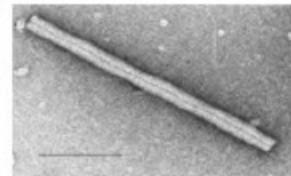
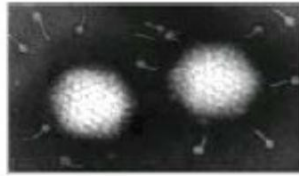
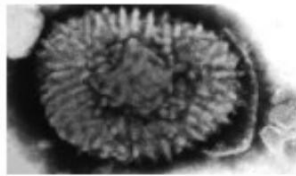
I. Morphology and the main properties of viruses.

THREE TYPES OF SYMMETRY

COMPLEX or BINAL

ICOSAHEDRAL or CUBIC

HELICAL or RADIAL



A. _____

B. _____

C. _____

D. _____

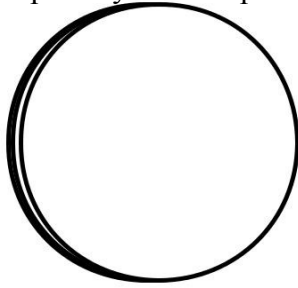
II. Methods of cultivation of viruses.

- 1). _____.
- 2). _____.
- 3). _____.

III. Cell cultures that are used for cultivation of viruses:

1. **Primary cell cultures** (Rhesus monkey kidney cell culture, Human amnion cell culture, Chick embryo fibroblast cell culture).
2. **Semi-continuous Cultures** (WI-38 – Human embryonic lung cell strain, HL-8 - Rhesus embryo cell strain).
3. **Continuous Cell Cultures** (HeLa – Human carcinoma of cervix cell line, HEP-2 – Human epithelioma of larynx cell line, McCoy – Human synovial carcinoma cell line, KB – Human carcinoma of nasopharynx cell line, Vero – Vervet monkey kidney cell line, BHK-21 –Baby Hamster kidney cell line).

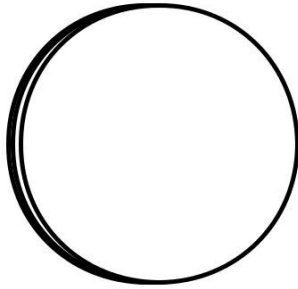
IV. Observe the smears below. Study cytopathic effects of viruses on cell culture. Using appropriately colored pencils draw the following cells.



Control of the tissue

Multinucleated giant cell

Rounded cells

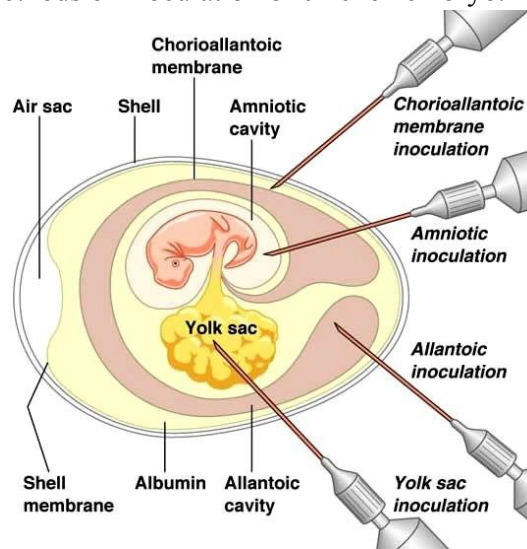


Lysis of cells

Intracytoplasmic inclusion

**Babesh bodies
(Lenz stain)**

V. Study the structure and methods of inoculation of chicken embryo.



VI. Methods of indication and identification of viruses:

1. Recognition of viral growth in cell culture:
 - a. Cytopathic effect (CPE);
 - b. Hemadsorbtion.
2. Assay of viruses:
 - a. Biological:
 - 1). Plaque assay;
 - 2). Transformation.
 - b. Physical, biochemical:
 - 1). Hemagglutination;
 - 2). Immunological tests for proteins;
 - 3). Assay for nucleic acid (PCR);
 - 4). Enzymatic (reverse transcriptase for retroviruses).

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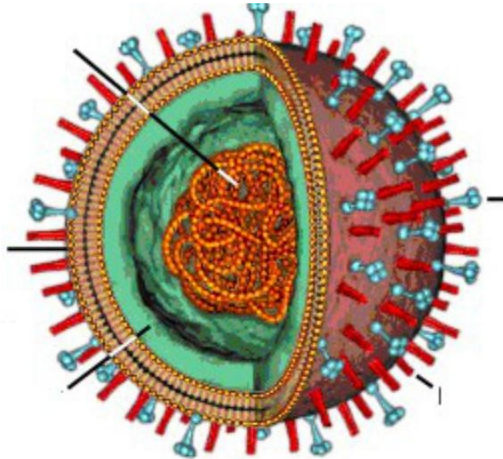
Protocol № 23, part 1

Theme: Laboratory diagnosis of influenza and acute respiratory viral infections.

I. Study classification of viruses - causative agents of respiratory viral infections.

| Family | Viruses |
|-------------------------|--|
| RNA viruses | |
| <i>Orthomyxoviridae</i> | Influenza viruses A, B and C |
| <i>Paramyxoviridae</i> | Parainfluenza, measles, mumps, and respiratory syncytial viruses |
| <i>Picornaviridae</i> | Rinoviruses, Cocsaky A and B viruses, ECHO viruses |
| <i>Coronaviridae</i> | Coronaviruses |
| <i>Reoviridae</i> | Reoviruses |
| DNA viruses | |
| <i>Adenoviridae</i> | Adenoviruses |

II. Describe the scheme of influenza virus structure:



type A, B, C : NP, M protein
sub-types: HA or NA protein

III. Study classification of influenza viruses

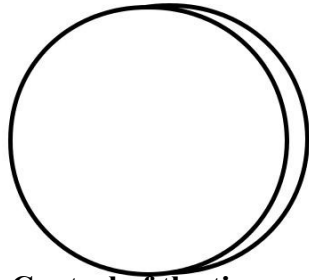
| Type | Subtype | Years of circulation |
|----------|---------|----------------------|
| A | H1N1 | 1918-1957 |
| | H2N2 | 1957-1967 |
| | H3N2 | 1968- |
| | H1N1 | 1977- |
| B | - | 1940- |
| C | - | 1949- |

IV. Describe the following definitions of genetic variations of influenza viruses:

Antigenic drift _____

Antigenic shift _____

V. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of the tissue
(Hematoxylin and eosin stain)

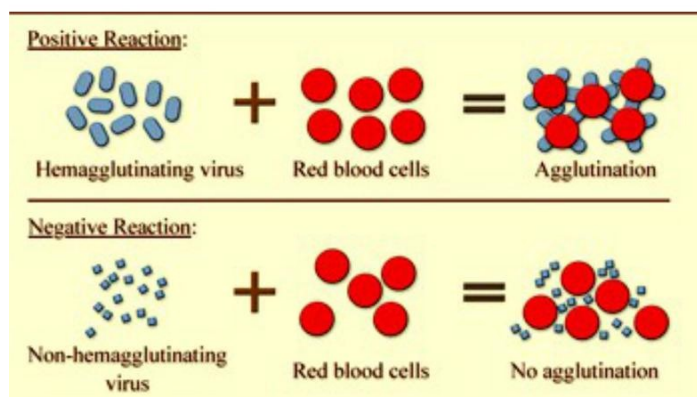
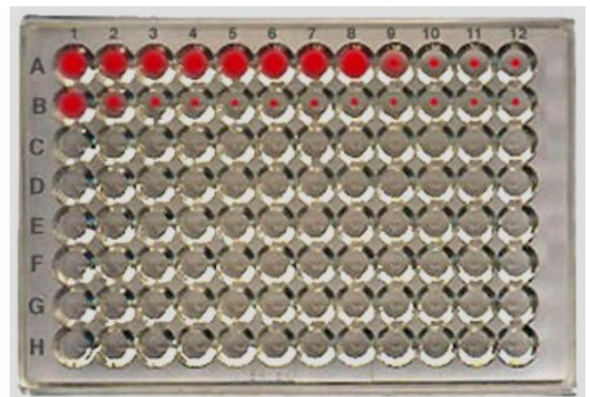
Intracytoplasmic inclusions of influenza virus
(Hematoxylin and eosin stain)

VI. Study of the mode of inoculation of chicken embryo with nasopharyngeal swab of influenza patient. Candling of chicken embryo and removing allantoic fluid.

VII. Performing of haemagglutination tests and interpretation the results.

Haemagglutination test is based on the ability of certain viruses to clump (agglutinate) red blood cells obtained from animals of definite species. Influenza and some other viruses with supercapsid membrane contain the surface antigen haemagglutinin responsible for the erythrocyte agglutination.

The HA test is performed on special plexiglass plates. A virus-containing specimen is double-diluted in 0.5 ml of isotonic saline. Half a millilitre of erythrocyte suspension thrice washed in isotonic saline is added into all test tubes, and 0.5 ml of erythrocyte suspension is mixed with an equal volume of virus-free isotonic sodium chloride solution, to be used as control. The mixture may be incubated at 37°, 20° or 4°C, depending on the properties of the tested virus.



Test results are assessed at 30-60 min after complete erythrocyte sedimentation in the control, with the findings reading as follows:

(++++), intense and rapid erythrocyte agglutination with a star-like, marginally festooned sediment ("umbrella"); (++4-), residue of erythrocytes has clearings; (++) , a less marked residue; (+), a floccular sediment surrounded with lumps of agglutinated erythrocytes, and (-), a markedly localized erythrocyte sediment ("rouleaus"), as in the control.

VIII. Study biological preparations for specific prophylaxis and therapy of influenza: inactivated virus, live and subunits vaccines, human immunoglobulin, human interferon.

IX. Study the scheme of laboratory diagnosis of influenza.

Specimen: the nose and the throat swab.

1. **Detection of antigen by immunofluorescence (IF) and ELISA.**

2. **The virus isolation** in cell culture or chicken eggs.

Identification of influenza strain and type: **hemagglutination inhibition (HAI) and hemadsorption inhibition (HadsI).**

3. **Serology: HAI, neutralization test (NtT), ELISA, CFT in paired sera.**

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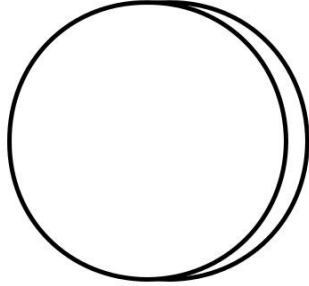
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Protocol № 23, part 2

Theme: Laboratory diagnosis of adenoviruses infections.

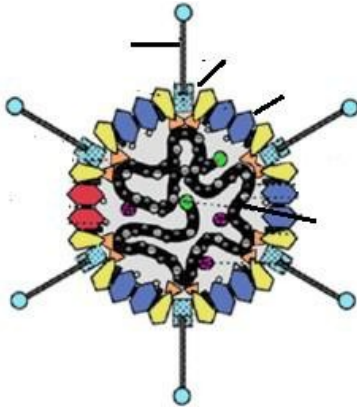
I. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of the tissue

CPE of adenoviruses – rounding of cells

II. Describe the scheme of adenonoviruses structure:



III. Describe the types of adenoviruses infections:

Productive infection _____.

Abortive infection: Virus interaction with a host cell can be blocked at many different steps, thus leading to an incomplete or abortive cycle.

Latency and persistence _____.

Transformation: Soon after infection, the viral genome may be inserted into selective sites of the cellular genome. The initial steps of viral malignant transformation could involve insertional mutagenesis at a certain number of selective cellular sites. Cells from a number of rodent species and humans can be transformed in culture by adenoviruses. Tumorigenic potential has been attributed to the capacity of some adenoviruses (e.g., Ad12) to turn off the expression of genes of the major histocompatibility complex and thus to allow the transformed cells to overcome host defenses and grow into solid tumors.

IV. Study the scheme of laboratory diagnosis of adenoviruses infections.

1. **Detection of antigen** from pharyngeal and eye secretions and feces by:

IF, ELISA and polymerase chain reaction.

2. **The virus isolation** in cell culture.

Cytopathic effects (CPE) include swelling and rounding of cells.

Identification: **HAI, CFT; type virus – by NtT.**

3. **Serology (rise in antibody titer): HAI, NtT, CFT.**

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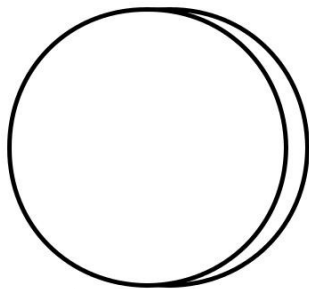
Protocol № 24

Theme: Laboratory diagnosis of enteroviruses infections.

I. Study classification of picornaviruses.

| Genus | Viruses |
|--------------------|--|
| <i>Enterovirus</i> | Polio viruses 1, 2, 3, Coxacki viruses A and B, ECHO viruses |
| <i>Rhinovirus</i> | Rinoviruses more then 100 types |
| <i>Hepatovirus</i> | Hepatitis A virus |
| <i>Aphtovirus</i> | Foot anf mouth disease cloven footed animals |
| <i>Cardiovirus</i> | Encephalomyocarditis viruses |

II. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of tissue

CPE – lysis of cells

III. Study mechanism of “color test”.

IV. Study immunobiological preparations for diagnosis of enteroviruses infections:

- a) typespecific polio sera 1-3 types for neutralization test and CFT;
- б) typespecific Coxacki sera for neutralization test.

V. Study immunobiological preparations for prophylaxis of enteroviruses infections:

- a) live Sebine’s vaccine I-III types;
- б) inactivated Solk’s vaccine.
- в) human immunoglobulin for treatment and prophylaxis of poliomyelitis.

VI. Study the scheme of laboratory diagnosis of enteroviruses infections.

Specimen: from feces, pharyngeal swabs, saliva, nasal aspirates, skin lesions, conjunctiva, cerebrospinal fluid, spinal cord, brain, heart, and blood.

1. Culture and isolation of viruses:

| Virus | Tissue culture | Suckling mice |
|--------------------------|----------------|---------------|
| Polioviruses | + | - |
| Coxsackieviruses group A | - | + |
| Coxsackieviruses group B | ± | + |
| Echoviruses | + | - |

Identification: NtT, CFT, ELISA, HAIT.

2. **Serology** (four-fold or greater rise in neutralizing antibody titer between paired sera or high IgM titers to a single serotype): **NT; CFT; IF; ELISA; HAIT.**

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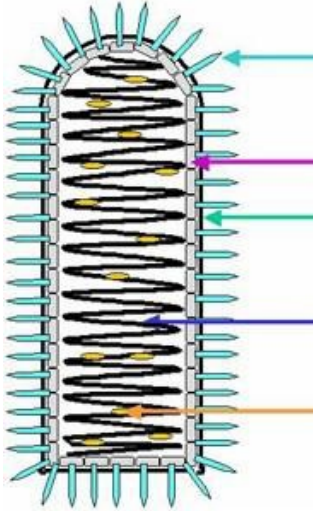
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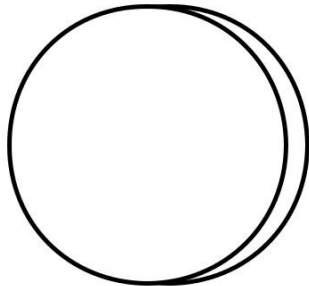
Protocol № 25

Theme: Laboratory diagnosis of rabies.

I. Describe the scheme of rabies virus structure:



II. Observe the smears below. Using appropriately colored pencils draw the following cells.



**Babesh-Negri bodies
(Lenz stain)**

**Babesh-Negri bodies
(Turevich stain)**

III. Study immunobiological preparations for prophylaxis of rabies:

- a) inactivated rabies vaccine.
- b) immunoglobulin.

IV. Study immunobiological preparations for diagnosis of rabies:

- a) immuofluescens serum for detection of rabies virus antigen in immunofluorescence .

V. Study the scheme of laboratory diagnosis of rabies.

1. **Detection of rabies antigen:** direct immunofluorescence:

Antemortem: on a skin biopsy from the nape of the neck. Postmortem: on a brain biopsy.

2. **Detection of rabies virus-neutralizing antibody.**

3. **Cytology:** detection of Babesh-Negri bodies.

4. **Detection of viral RNA.**

5. **Isolation of virus** from saliva after inoculation of neuroblastoma cells or laboratory rodents; this is generally most successful during the first 2 to 3 weeks of illness.

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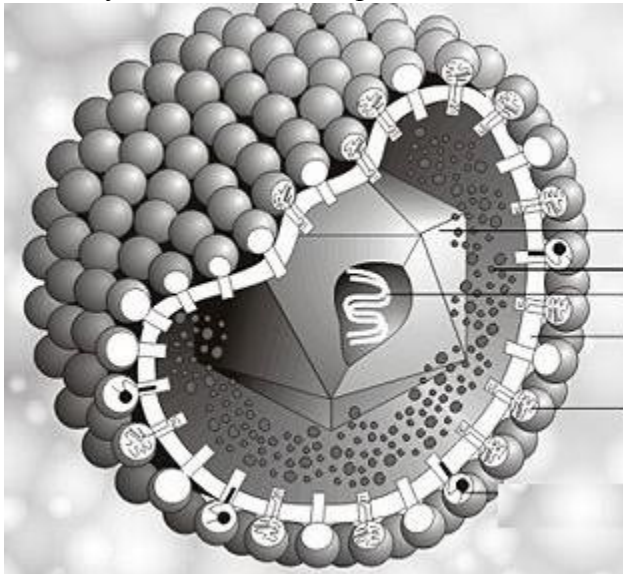
Protocol № 26

Theme: Laboratory diagnosis of herpes viruses infections.

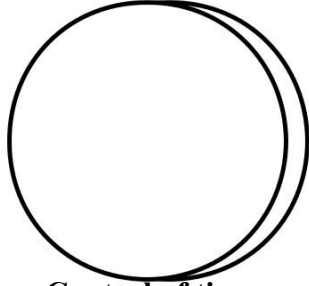
I. Study classification of herpes viruses:

| Taxonomy | Virus | Disease |
|---------------------------------|---|--|
| Family Herpesviridae | | |
| Subfamily Alphaherpesvirinae | Herpes simplex viruses 1 and 2 types | gingivostomatitis, ceratoconjunctivitis, encephalitis, genital herpes, herpes of newborn, cervix cancer |
| | Varizella-zoster (HV 3 type) | Varizella-zoster |
| Subfamily Betaherpesvirinae | Cytomegalovirus (HV 5 type) | Mononucleosolike syndrome, congenital cytomegalovirus infection, dessiminated infection in immunocompromised patients. |
| | Herpes virus 7 type | Chronic fatigue syndrom |
| Subfamily Gammaherpesvirinae | Epstain Barr virus (HV 4 type) | Infectious mononucleosis, Berkitt lymphoma, B-cell lymphoma, nasopharyngeal carcinoma |
| | Herpes virus 6 type | B-cell lymphoma |
| | Herpes virus 8 type | Kaposi sarcoma |

II. Study the scheme of herpes virus structure:



III. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of tissue

CPE of herpesviruses – multinucleated cells

IV. Study immunobiological preparations for specific prophylaxis of herpes viruses infections:

- a) Live varicella-zoster vaccine.
- b) Varizella-zoster immunoglobulin.

V. Study immunobiological preparations for therapy of herpes viruses infections

HSV-1 and HSV-2: Acyclovir, famcyclovir, valacyclovir, threofluridin.

Cytomegalovirus: Gancyclovir, foscarnet.

Varicella-zoster virus: Acyclovir, famcyclovir, valacyclovir.

VI. Study the scheme of laboratory diagnosis of herpes viruses infections.

1. Direct Detection:

Tzanck smear (multinucleated giant cells).

Immunofluorescence of skin scrappings.

PCR.

2. Virus Isolation on cell culture

Identification: IF, ELISA

3. **Serology:** (IgG in paired acute and convalescent sera; IgM tests are likely to prove invaluable in determining the nature of congenital varicella infections): ELISA, IF, CFT.

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Protocol № 27, part 1

Theme: Laboratory diagnosis of arboviruses infections.

I. Study classification of arboviruses:

| Family | Disease | | |
|--------------------------------------|--------------------------------|----------------------|--------------------------|
| | Encephalitis | Fevers | Hemorrhagic fevers |
| <i>Togaviridae</i> (Alphaviruses) | Western equine encephalitis | Chikungunya | Chikungunya |
| | Eastern equine encephalitis | Sindbis | |
| | Venezuelan equine encephalitis | Rose River Fever | |
| <i>Flaviviridae</i> | Japanese encephalitis | Dengue | Dengue |
| | Tick-borne encephalitis | West Nile Fever | Yellow fever |
| | Murray Valley encephalitis | | Kyassanur Forest disease |
| | | | Omsk Fever |
| <i>Bunyaviridae</i> | Californian encephalitis | Rift valley Fever | Congo-cremean |
| <i>Reoviridae</i> | | Coloradic tick Fever | |
| <i>Rhabdoviridae</i> | | Vesicular stomatitis | |

- II. Study immunobiological preparations for specific prophylaxis of arboviruses encephalitis: a) killed culture vaccine against tick born encephalitis, b) immunoglobulin against tick born encephalitis, c) live and killed vaccines against japanese aencephalitis, d) immunoglobulin against japanese encephalitis.

III. Study the scheme of laboratory diagnosis of tick born encephalitis.

Specimen: blood or from brain, liver, and other organs postmortem.

- Isolation of virus** during the viremic phase in mammalian or insect cell cultures.
- Serology:** (demonstration the presence of IgM antibody or a fourfold rise in titer of IgG antibody between acute- and convalescent-phase serum): HIT, ELISA, CFT, immunofluorescence.
- Detection of RNA by RT-PCR.**

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Protocol № 27, part 2

Theme: Laboratory diagnosis of hemorrhagic fevers.

I. Study classification of hemorrhagic fevers viruses:

| Group | Family | Disease |
|-----------|---------------------|---------------------------------------|
| Tick born | <i>Bunyaviridae</i> | Congo-cremean hemorrhagic fever |
| | <i>Flaviviridae</i> | Omsk Hemorrhagic fever |
| | <i>Flaviviridae</i> | Kyassanur Forest disease |
| Mosquito | <i>Flaviviridae</i> | Yellow fever |
| | <i>Flaviviridae</i> | Dengue |
| | <i>Togaviridae</i> | Chikungunya |
| Contact | <i>Bunyaviridae</i> | Hemorrhagic fever with renal syndrome |
| | <i>Arenaviridae</i> | Lassa hemorrhagic fever |
| | <i>Filoviridae</i> | Ebola hemorrhagic fever |
| | <i>Filoviridae</i> | Marburg hemorrhagic fever |

II. Study immunobiological preparations for specific prophylaxis of hemorrhagic fevers:

Congo Cremean hemorrhagic fever:

- a) specific immunoglobulin from blood of reconvalescents or immunized people;
- b) killed vaccine.

Yellow fever:

- a) live vaccine 17 D and «Dacar».

Dengue hemorrhagic fever:

- a) specific immunoglobulin from blood of reconvalescents.

Hemorrhagic fever with renal syndrome:

- a) human immunoglobulin;
- b) killed culture vaccine K-27.

VI. Study the scheme of laboratory diagnosis of hemorrhagic fevers.

Specimen: blood, urine, or throat washings

1. Isolation of virus during the viremic phase in mammalian or insect cell cultures.

2. Serology: (demonstration the presence of (IgM) or a fourfold rise in titer of IgG between acute- and convalescent-phase sera): CFT, HAI, ELISA, immunofluorescence.

3. Detection of RNA by RT-PCR.

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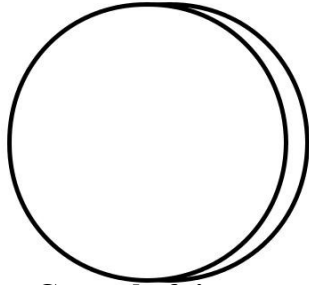
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Protocol № 28

Theme: Paramyxoviruses (morbilliviruses). Laboratory diagnosis of measles and rubella.

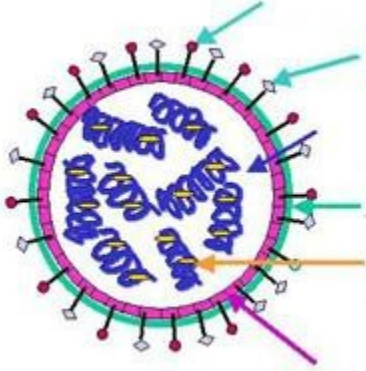
I. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of tissue

CPE of measles virus – multinucleated cells

II. Describe the scheme of measles virus structure:



III. Study immunobiological preparations for specific prophylaxis of measles and rubella:

- live measles vaccine;
- human immunoglobulin;
- live vaccine against rubella;
- live vaccine against measles, rubella and parotitis.

IV. Study the scheme of laboratory diagnosis of **measles**.

1. **Detection of antigen** from nasopharyngeal aspirates and throat swab by IF.

2. **The virus isolation in cell culture.**

CPE: giant multinucleated cells formation.

Identification: HAI, IF, NtT.

3. **Serology (detection of antibodies):** HAI, NtT, CFT.

V. Study the scheme of laboratory diagnosis of **rubella**.

1. **Serology:** HAI, CFT, NtT, IF (rising Ig G antibody titres - 4-fold or greater). Presence of rubella-specific IgM: ELISA.

2. **Isolation the virus in cell cultures** from respiratory tract secretions and, in infants with congenital infection, from urine, cerebrospinal fluid, and blood.

Identification: viral interference, HAI, IF, ELISA.

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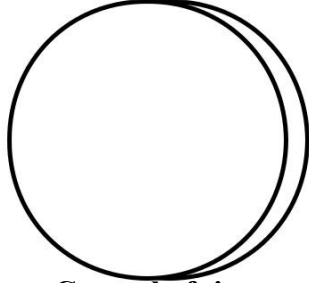
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Protocol № 29

Theme: Paramyxoviruses. Laboratory diagnosis of mumps and parainfluenza.

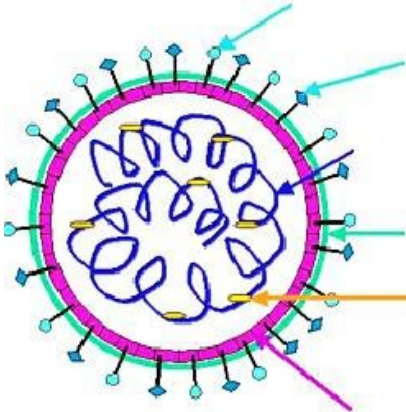
I. Observe the smears below. Using appropriately colored pencils draw the following cells.



Control of tissue

CPE – inclusion body

II. Describe of paramyxoviruses structure:



III. Study immunobiological preparations for diagnosis of mumps and parainfluenza:

- a) typespecific parainfluenza sera for CFT and HAI
- b) immuofluprescent serum for detection of parainfluenza virus in immunofluorescence.

IV. Study immunobiological preparations for specific prophylaxis of mumps and parainfluenza:

- a) live mumps vaccine;
- b) live vaccine against measles, parotitis and rubella (MMR).

V. Study the scheme of laboratory diagnosis of **mumps**.

1. **The virus isolation** from the saliva, liquor or urine in cell culture (or chicken eggs).

CPE: giant multinucleated cells formation.

Identification: HAI, NtT, IF, CFT.

2. **Serology:** HAI, NtT, ELISA, CFT (demonstrating IgM in the first serum and detecting IgG rise in paired sera).

VI. Study the scheme of laboratory diagnosis of **parainfluenza**.

1. **Detection of antigen** from nasopharyngeal aspirates and throat swab by IF and PCR.

2. **The virus isolation in cell culture.**

Indication: Haemadsorption of erythrocytes on the surface of cells infected with virus.

Identification: HadsI, HAI, NtT, CFT.

3. **Serology:** NtT, ELISA, CFT, HAI (detection of rise in titer of IgG in pared sera).

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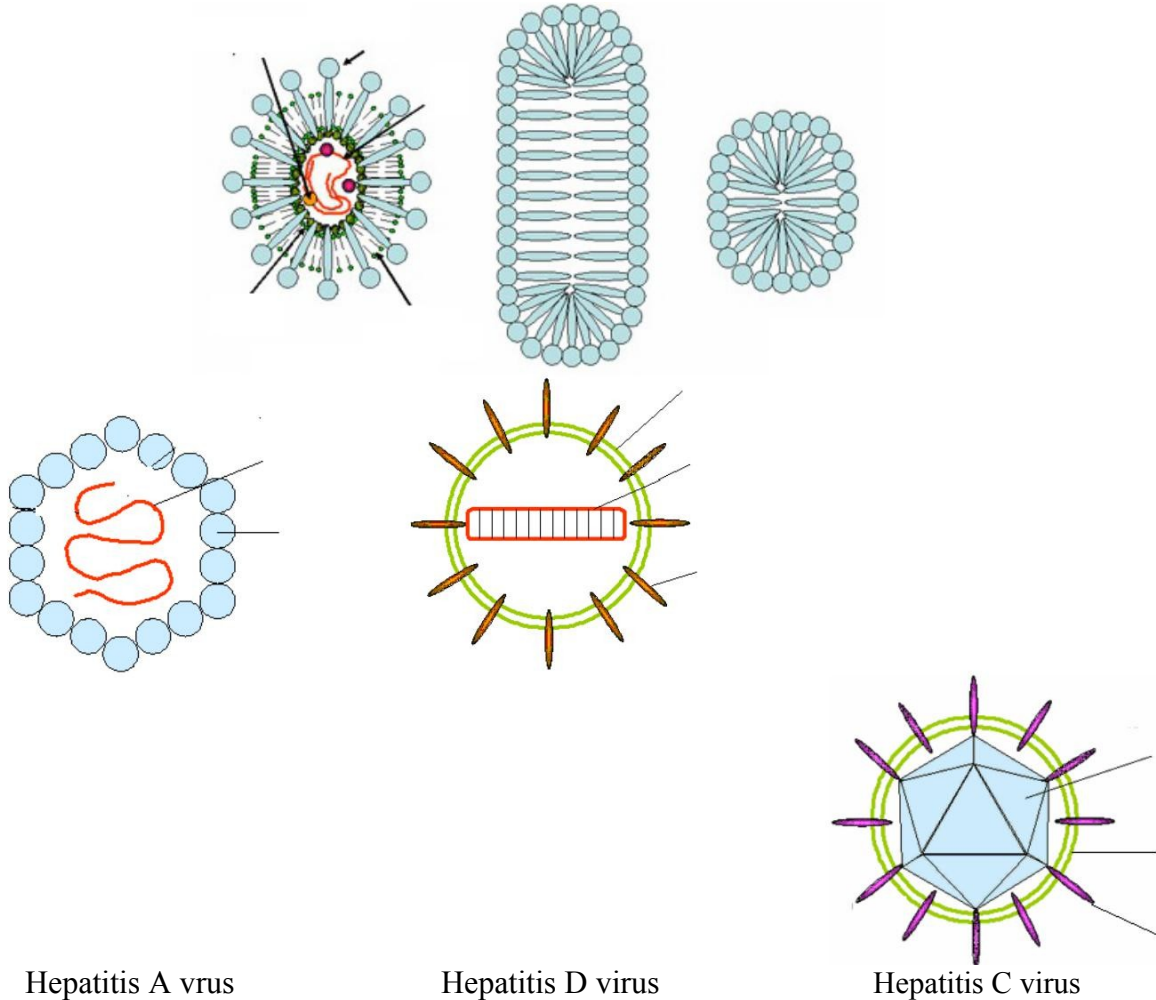
Protocol № 30

Theme: Laboratory diagnosis of viral hepatitis.

I. Study classification of hepatitis viruses:

| Virus | Family | Nucleic acid | Envelope |
|---------------------|------------------|--------------|----------|
| Hepatitis virus A | Picornaviridae | RNA | No |
| Hepatitis virus B | Hepadnaviridae | DNA | Yes |
| Hepatitis virus C | Flaviviridae | RNA | Yes |
| Hepatitis virus G | Flaviviridae | RNA | Yes |
| Hepatitis virus D | Genus Deltavirus | RNA | Yes |
| Hepatitis virus E | Hepeviridae | RNA | No |
| Hepatitis virus TTV | Circinoviridae | DNA | No |
| Hepatitis virus SEN | Circoviridae | DNA | No |

II. Describe the scheme of hepatitis A, B, C, and D viruses structure:



III. Study immunobiological preparations for specific prophylaxis of viral hepatitis:

- a) killed vaccine against hepatitis A;
- b) recombinant vaccine against hepatitis B;
- c) human immunoglobulin.

IV. Serological markers of hepatitis B.

| Markers | Disease state | | | Healthy state | |
|---------|---------------|---------|------------|---------------|------------|
| | Acute | Chronic | Late acute | Resolved | Vaccinated |
| | | | | | |

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| | | | | | |
|---------------|---|---|----------|---|---|
| Anti HBe | - | + | <u>+</u> | + | - |
| Anti HBc | - | - | <u>+</u> | + | - |
| Anti HBc Ig M | + | - | - | - | - |
| Anti HBs | - | - | - | + | + |
| HBeAg | + | + | - | - | - |
| HBs Ag | + | + | + | - | - |
| DNA | + | + | + | | |

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Protocol № 31

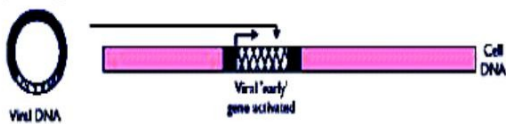
Theme: Oncogenic viruses. Antitumor immunity.

I. Study classification of oncogenic viruses:

| Taxonomy | Virus | Disease |
|------------------------------|--|---|
| DNA viruses | | |
| Family Herpesviridae | | |
| Subfamily Alphaherpesvirinae | Herpes simplex viruses type 2 | Cervix cancer |
| Subfamily Betaherpesvirinae | Cytomegalovirus | Transformation of human cells in vitro |
| Subfamily Gammaherpesvirinae | Epstein-Barr virus | Berkitt's lymphoma, B-cell lymphoma, nasopharyngeal carcinoma |
| | Herpes virus type 6 | B-cell lymphoma |
| | Herpes virus type 8 | Kaposi sarcoma |
| Family Hepadnaviridae | Hepatitis B virus | Hepatocellular carcinoma |
| Family Papovaviridae | Papillomaviruses | warts, condilomas, cervix carcinoma, carcinoma of larynx |
| Family Adenoviridae | Adenoviruses | Nondefertiated tumors of rodents |
| Семејство Poxviridae | Contagious mollusc virus, mankey pox virus | Benign conguctive tissue tumors of rodents and mankeys |
| RNA viruses | | |
| Family Flaviviridae | Hepatitis C virus | Hepatocellular carcinoma |
| Family Retroviridae | Human lymphotropic viruses HTLV-1, HTLV-2 | T-cell leucosis, hairlike leucosis |

II. Mechanism of viral cancerogenesis:
by DNA viruses:

A. Integrated viral DNA carries an oncogene into a cell and permanently expresses "early" viral genes



B. Viral DNA integration destabilises cellular genome and/or activates adjacent cellular oncogenes



by retroviruses:

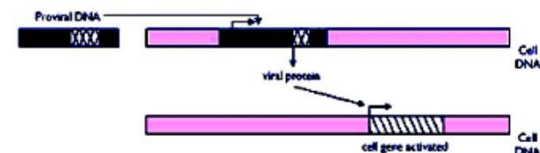
A. Integrated provirus activates adjacent cellular oncogene.



B. Provirus carries a "captured" cellular oncogene.



C. Provirus-coded protein activates cellular genes.



III. Antitumor immunity:

Humoral factor: complement, antibodies.

Cellular factors: dendrites cells, neutrophils, macrophages, NK cells, T cells.

Cytokines: transforming growth, factor beta (TGFβ), cytokines (IL-10, IL-12), γ-interferon.

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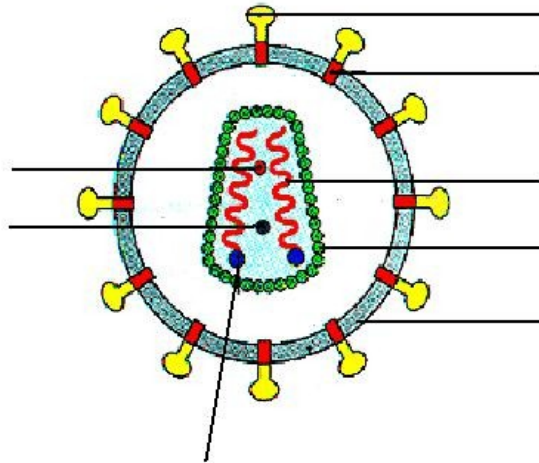
Protocol № 32

Theme: Retroviruses. *Human immunodeficiency virus.*

I. Study classification of retroviruses:

| Genus | Viruses |
|--------------------------|---|
| Alpharetrovirus | Rous sarcoma virus |
| Betaretrovirus | Mouse mammary tumor virus |
| Gammaretrovirus | Monkey and mice sarcoma and leukemia virus |
| Deltaretrovirus | Human T-lymphotropic viruses HTLV-1, HTLV-2, HTLV-5 |
| Epsilonretrovirus | Skin sarcoma virus |
| Lentivirus | Human immunodeficiency viruses HIV-1, HIV-2 |
| Spumavirus | Human foamy virus |

II. Describe the scheme of HIV structure:



III. Study drugs for therapy of HIV infection:

Nucleoside-Analog Reverse Transcriptase Inhibitors (NRTI) inhibit viral RNA-dependent DNA polymerase and are incorporated into viral DNA (they are chain-terminating drugs).

- Zidovudine (ZDV, Retrovir) first approved in 1987
- Stavudine
- Lamivudine etc.

Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs) inhibit HIV replication directly by binding non-competitively to reverse transcriptase.

- Nevirapine
- Delavirdine

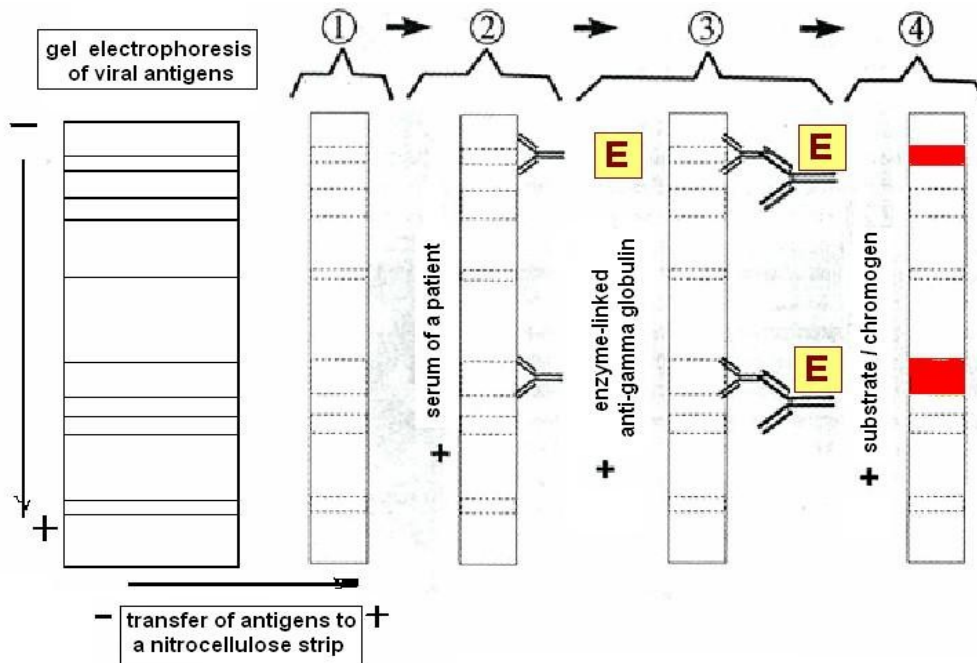
Protease Inhibitors are specific for the HIV-1 protease and competitively inhibit the enzyme, preventing the maturation of virions capable of infecting other cells.

- Saquinavir (Invirase) first approved in 1995
- Ritonavir
- Indinavir etc.

IV. Study the scheme of laboratory diagnosis of HIV-infection.

1. **Antigen detection:** ELISA (core antigen p24). In the first few weeks after infection and in the terminal phase, the test is uniformly positive.
2. **Virus isolation:** from the peripheral lymphocytes by co-cultivation of the patient's lymphocytes with uninfected lymphocytes in the presence of interleukin-2. It is not suitable as a routine diagnostic test.
3. **Polymerase chain reaction.** The gold standard for diagnosis in all stages of HIV infection. It becomes necessary particularly in the course of treatment.
4. **Antibody detection:** IgM antibodies appear in about 4-6 weeks to months after infection, to be followed by IgG antibodies.
 - **Screening test:** ELISA assay.
 - **Confirmatory test:** Western blot.

V. Study principle of Western blot to diagnosis of HIV-infection:



Strip A – Positive control
 Strip B – Light positive control
 Strip C – Negative control
 Strip D – Positive specimen
 (antibodies against HIV-1 are detected)

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QUESTIONS TO EXAMINATION IN MICROBIOLOGY, IMMUNOLOGY AND VIROLOGY

SPECIAL VIROLOGY

1. Morphology and ultrastructure of viruses. Types of symmetries. Chemical composition, functions of components of viruses.
2. Principles of classification of viruses. Main families of viruses of man and animals.
3. Factors of antiviral immunity: humoral and cell-mediated immunity.
4. Nonspecific factors of protection of the macroorganism against viral agents, their characteristic. Interferons, mechanism of their action, interferonogens.
5. Methods for cultivation of viruses and their identification.
6. Use of cell cultures in virology, their classification. Types of interaction of viruses and cells. Stages of productive interaction. Cytopathic effect of viruses on cell cultures.
7. Methods for revealing viruses. Reactions of viral hemagglutination and hemadsorption. Mechanism, practical use and diagnostic value.
8. The reaction of virus neutralization, its mechanism, principles of use, diagnostic value.
9. The complement fixation test, its mechanism, principles of use, diagnostic value.
10. Orthomyxoviruses. Biological properties, antigenic structure, classification of influenza viruses. Pathogenesis and immunity in influenza. Role of specific and nonspecific mechanisms in influenza immunity. Specific prophylaxis and therapy. Methods of laboratory diagnosis of influenza.
11. Adenoviruses. Antigenic structure. Cultivation. Pathogenesis and laboratory diagnosis of adenoviral infections. Immunity, specific prophylaxis.
12. The family of Picornaviridae, its general characteristic. Biological properties. Antigens. Significance in pathology of man.
13. Viruses of poliomyelitis, its characteristics and classification. Pathogenesis and immunity. Laboratory diagnosis, specific prophylaxis.
14. The genus of enteroviruses, their general characteristics. The viruses of Coxsackie and ECHO. Their biological properties and the role in pathology of man. Diagnosis of enteroviral infections.

15. Rhabdoviruses. The virus of rabies, its structure. Pathogenesis of the disease. Specific prophylaxis. Laboratory diagnosis. Differentiation of the fixed and wild viruses of rabies.

16. The family of paramyxoviruses, general characteristics. The viruses of parainfluenza, measles and epidemic parotitis, their biological properties. Their role in pathology of man. Laboratory diagnosis of the diseases. Specific prophylaxis.

17. Rubella virus, its biological properties. Pathogenesis of the disease. Specific prophylaxis. Laboratory diagnosis.

18. Herpesviruses, their classification and biological properties. Significance in pathology of man. Laboratory diagnosis of the diseases.

19. Arboviruses, their classification and biological properties. Significance in pathology of man. Laboratory diagnosis of the diseases. Specific prophylaxis.

20. Hepatitis viruses, their general characteristics. Significance in pathology of man. Laboratory diagnosis of viral hepatitis. Specific prophylaxis of viral hepatitis.

21. Oncogenic viruses, their classification. Viral-genetic theory of the origin of tumors proposed by Zilber. Retroviruses, their biological properties. Mechanism of the viral cancerogenesis. Anti-tumor immunity.

22. Human immunodeficiency virus. Structure, antigens. Pathogenesis, mechanism of immunodeficiency. Clinical stages. Laboratory diagnosis. Treatment.

23. Prions, properties, functions of normal prions, proliferation. Prion diseases, transmission, pathogenesis, laboratory diagnosis.

28. *Haemophilus influenzae*, its morphological, cultural and antigenic properties. Microbiological diagnosis and specific prophylaxis of *haemophilus* infection.

29. Opportunistic microorganisms, their biological properties and role in pathology of man. *Pseudomonas aeruginosa* and *Proteus*. Etiological role in purulent processes. Significance in etiology of hospital infections. Microbiological diagnosis.

30. The family of Spirochaetaceae: *Leptospira* and *Borrelia*, their characteristics and classification. Pathogenesis of the disease, immunity, microbiological diagnosis of the diseases. Specific prophylaxis, therapy.

31. The causative agent of syphilis. Morphological and cultural characteristic. Pathogenesis and immunity. Microbiological diagnosis and specific therapy of syphilis.

32. Pathogenic protozoa, biological properties. Classification, role in pathology of man.

33. *Toxoplasma gondii*, their morphology, peculiarities of cultivation. Pathogenesis of the diseases. Microbiological diagnosis. Specific prophylaxis.

34. *Plasmodia malariae*, their characteristics. Pathogenesis of malaria. Microbiological diagnosis. Specific prophylaxis, therapy.

35. *Entamoeba histolytica*, its morphology. Pathogenesis of the diseases. Microbiological diagnosis. Therapy.

36. *Trichomonas vaginalis*, its morphology. Pathogenesis of the diseases. Microbiological diagnosis. Therapy.

37. *Giardia lamblia*, its morphology. Pathogenesis of the diseases. Microbiological diagnosis. Therapy.

38. *Leishmania*, species, morphology. Pathogenesis of the diseases. Microbiological diagnosis. Therapy.

39. *Mycoplasmatales*, classification. Biological properties, methods of cultivation. Role in pathology of man. Microbiological diagnosis of mycoplasmoses.

40. *Chlamydia*, classification. Biological properties, methods of cultivation. Role in pathology of man. Microbiological diagnosis of chlamydias.

41. *Rickettsiae*, their biological properties. Classification. *Rickettsiae* as causative agents of diseases in man. Pathogenesis of the disease, laboratory diagnosis, specific prophylaxis.

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