Rotavirus

Viral diarrhea and vaccine development

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- First discovered in 1973
 - Detected by EM
- Major etiologic agents of diarrhea in infants and young children
- In developing countries, most frequently detected pathogen in children under the age of 2





Transmission of rotaviruses

- Efficient
- Large number of shed particles
- Resistance to physical inactivation
 - Environmental contamination

Clinical features

- Most common in children 2 months to 3 years old
- Diarrhea 98% frequency
- Vomiting 87%
- Fever 84%
- Abdominal pain
- Malnutrition increases severity of symptoms
- Symptoms associated with severe volume depletion





Complications

- Dehydration
- Very young children intussusception of the small bowel
- Aspiration of vomitus

Diagnosis

- Laboratory diagnosis is usually not needed for self-limited infections
- ELISA
- Culture
- EM
- Latex agglutination









Group A rotaviruses

- Cause most human disease
 - Further subdivided into subgroups
- Principal etiologic agent of severe gastroenteritis in infants and young children
- Responsible for 1 billion cases of severe diarrhea

• Major cause of mortality among the young



Viral structure

- Mature virion
 - Rota wheel
 - Triple layered virions
- Non-enveloped, with 3 structural layers
- Two capsids surround the RNA genome
 - 11 double stranded RNA segments

Rotavirus particles











- Maladsorption
- Secretory diarrhea
 - NSP4 enterotoxin
 - Enteric nervous system
 - Inflammatory responses
 - Calcium mobilization







Epidemiology of Rotavirus infections

- Epidemics during cold months
- Infants protected 2-3 months from severe disease due to transplacental acquisition of maternal antibodies
- Over 3 years of age infections are mild or asymptomatic with acquired in the family setting



- Careful handwashing



Intussusception

- Blockage of the bowel
- Death is rare with prompt treatment
- In the U.S., intussesception affects 70 of 100,000 infants yearly
- Seen in infants between 3 and 9 months

