**Family and Community Medicine Dept**

**Prof Dr Najlaa Fawzi Jamil**

**Fourth Grade/ 2019-2020 (1st group)**

**Principles of Communicable Diseases Epidemiology-2**

**LEARNING OBJECTIVES**

-Describe the different means of portal of exit and entry

-Compare and identify contact, vector, and vehicle modes of transmission

-Identify important disease vectors

**Portal of exit**

**Portal of exit is the path by which an agent leaves the source host.**

The portal of exit usually corresponds to the site at which the agent is localized.

Pathogens often leave hosts in materials the body secretes or excretes.

**Modes of transmission**

An infectious agent may be transmitted from its natural reservoir to a susceptible host in different ways.

There are different classifications for modes of transmission.

**WHY IS THIS IMPORTANT?**

Understanding the mode of transmission for a given disease is vital for developing methods to prevent the spread of disease.

**Three groups of transmission**

* + Contact transmission
		- Direct
		- indirect
		- Droplet
	+ Vehicle transmission
		- Airborne
		- waterborne
		- Foodborne
		- Blood borne
	+ Vector transmission
		- Biological
		- Mechanical

**Single & multiple modes of transmission:**

some infectious diseases spread by one means only:

Meningococcal meningitis – droplet infection

Cholera, Typhoid – ingestion infection

Malaria – arthropod borne infection

Tetanus, rabies – contact infection

Some infectious diseases spread by more than one means which maybe either is equally important, or one mean gets the upper hand, while the others are also important or rare. Poliomyelitis: respiratory &ingestion infection.

Brucellosis: ingestion infection (mainly), inhalation & contact (occasionally).

**Contact Transmission:**

A host is exposed to infectious agents by making contact with the agent or items contaminated with the pathogen so it can reach a portal of entry into the host.

There are three types of contact transmission:

* Direct contact
* Indirect contact
* Droplet

There is no intermediary between infected and uninfected individuals.

It includes such things as touching, kissing, and sexual interactions.

Diseases transmitted through direct contact include:

Hepatitis A

Smallpox

Staphylococcal infections

Mononucleosis

Sexually transmitted diseases.

**Direct contact can be categorized as**

 Vertical

 Horizontal

 Droplet transmission

**Vertical direct contact transmission** occurs when pathogens are transmitted from mother to child during pregnancy, birth, or breastfeeding.

**Horizontal direct contact transmission**: Often, contact between mucous membranes is required for entry of the pathogen into the new host, although skin-to-skin contact can lead to mucous membrane contact if the new host subsequently touches a mucous membrane.

 Contact transmission may also be site-specific; for example, some diseases can be transmitted by sexual contact but not by other forms of contact.

AIDS and gonorrhea are spread from person to person by direct contact.

Direct contact also refers to contact with soil or vegetation harboring infectious organisms. Hookworm is spread by direct contact with contaminated soil.

**Direct droplet transmission**

When an individual coughs or sneezes, small droplets of mucus that may contain pathogens are ejected.

Droplets traditionally defined as > 5 µm.

This leads to direct droplet transmission, which refers to droplet transmission of a pathogen to a new host over distances of one meter or less.

A wide variety of diseases are transmitted by droplets, including influenza and many forms of pneumonia. Pertussis and meningococcal infection are examples of diseases transmitted from an infectious patient to a susceptible host by droplet spread.

Transmission over distances greater than one meter is called airborne transmission.

**Indirect transmission:** Indirect transmission holds a variety of

mechanisms including the traditional 5Fs “flies, fingers, fomites, food, and fluid.

Nonliving intermediates that act as the agents of transmission by indirect contact are referred to as fomites, vehicles for transmission.

**Essential requirement:**

The infectious agents must be capable of surviving outside the human host in the external environment and retain its basic properties of pathogenesis and virulence till it finds new host.

Factors determining external survivability of disease agent:

* Characteristics of the agent
* Non-living object
* Influence of environmental factors like temp and humidity
* Drug resistance

**Vehicle- borne Transmission**

The term vehicle transmission refers to the transmission of pathogens through vehicles such as water, food, blood, and air.

Waterborne disease remains a serious problem in many regions throughout the world. The World Health Organization (WHO) estimates that contaminated drinking water is responsible for more than 500,000 deaths each year. Similarly, food contaminated through poor handling or storage can lead to foodborne transmission of disease.

The infectious agent may have multiplied or developed in the vehicle before being transmitted; or only passively transmitted in the vehicle.

Examples:

 Diseases transmitted by water and food acute Diarrhea, typhoid fever, cholera, hepatitis A, food Poisoning& intestinal parasites.

Disease transmitted by blood: hepatitis B, C.

**Airborne transmission** occurs when infectious agents are carried by dust or droplet nuclei suspended in air. Airborne dust includes material that has settled on surfaces and become resuspended by air currents as well as infectious particles blown from the soil by the wind.

Airborne Transmission via aerosols (airborne particles <5µm) that contain organisms in droplet nuclei or in dusts.

In contrast to droplets that fall to the ground within a few feet, droplet nuclei may remain suspended in the air for long periods of time and may be blown over great distances.

Measles, for example, has occurred in children who came into a physician’s office after a child with measles had left, because the measles virus remained suspended in the air.

special ventilation systems are required to prevent airborne transmission.

**Vector Transmission:**

Diseases can also be transmitted by a mechanical or biological vector, an animal (typically an arthropod) that carries the disease from one host to another.

**Mechanical transmission** is facilitated by a mechanical vector, an animal that carries a pathogen from one host to another without being infected itself.

For example, a fly may land on fecal matter and later transmit bacteria from the feces to food that it lands on; a human eating the food may then become infected by the bacteria, resulting in a case of diarrhea or dysentery.

**Biological transmission** occurs when the pathogen reproduces within a biological vector that transmits the pathogen from one host to another.

Biological insect vectors include mosquitoes, which transmit malaria and other diseases, and lice, which transmit typhus.

There are also important non-arthropod vectors of disease, including mammals and birds. Various species of mammals can transmit rabies to humans, usually by means of a bite that transmits the rabies virus. Chickens and other domestic poultry can transmit avian influenza to humans through direct or indirect contact with avian influenza virus A shed in the birds’ saliva, mucous, and feces.

**Portal of entry:**

The portal of entry refers to the manner in which a pathogen enters a susceptible host.

The portal of entry must provide access to tissues in which the pathogen can multiply or a toxin can act.

Often, infectious agents use the same portal to enter a new host that they used to exit the source host.

For example, influenza virus exits the respiratory tract of the source host and enters the respiratory tract of the new host. In contrast, many pathogens that cause gastroenteritis follow a so-called “fecal-oral” route because they exit the source host in feces, are carried on inadequately washed hands to a vehicle such as food, water, or utensil, and enter a new host through the mouth.

Other portals of entry include the skin (hookworm), mucous membranes (syphilis), and blood (hepatitis B&C, human immunodeficiency virus).

**Susceptible Host:** The final link in the chain of infection is a susceptible host.

A person or animal lacking sufficient resistance to a particular pathogenic agent to prevent disease if or when exposed. Occurrence of infection and its outcome are in part determined by host factors.

**Why an individual may have more than one attack of a particular infectious disease?**

True second attack due to agent or host factors

**Agent Factors**

1-Causative agent has a number of antigenic sero -types, streptococcus haemolyticus.

2-With organisms characterized by antigenic changes, shift and drift of influenza virus.

**Host Factors**

1-After an attack, the acquired immunity level may decline by time, until becoming non-protective.

2-When specific chemotherapy is given early in the disease, before infection stimulate efficient immune response; enteric fever.

 3-in pulmonary TB and other diseases, where treated cases, (by specific chemotherapy) is not cured, but becomes inactive & may be exposed to reactivation under adverse predisposing conditions

4-cases having impaired or deficient immune response:

\* acquired by severe malnutrition, or under immune suppression therapy.

\*genetic agammaglobulinemia, or hypo gammaglobulinemia rarely.