



ENVIRONMENTAL SOURCES FOR NON-TUBERCULOUS MYCOBACTERIAL INFECTION

WHERE IS IT?

**Pulmonary disease
Non-HIV Population**

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OCTOBER 2019

FINANCIAL DISCLOSURE

- **Insmed: Speakers bureau**

GOALS OF TALK

- Understand how understanding environmental factors is important in understanding the disease
- Understand why those factors are important in assessing the individual patient
- Gain perspective on how the *personal (external and internal)* environment is the pivotal factor in acquiring the infection
- Emphasis on **Biofilm** in environment, disease and treatment
- ****Address varying levels of audience experience with NTM

SEQUENCE OF REACTING TO THESE ORGANISMS FOR TODAY

- **Environment – A & A**
 - *Acquisition*
 - *Avoidance*
- ***Personal predispositions* – Research updates**
- **Non-pharmacologic *management* – Airway clearance**
- ***Medication* – Old and new approaches**

LARGE ENVIRONMENT TO LOCAL ENVIRONMENT

Geographic Distribution of NTM identified among Clinical Isolates in the US, 2009-2013

– Spaulding, et al. Annals ATS 2017

- Significant geographic variation exists in the distribution of NTM species in the US
- *M. avium* complex much more common in the South
- *M. abscessus* in the West

RELATIVE RISK OF CLUSTERS OF PULMONARY NTM AMONG MEDICARE BENEFICIARIES

- High risk

- Highlands, FL 1.9
- Santa Barbara, CA 2.0
- New York, NY 2.7
- Kalawao, HI 3.7
- Plaquemines, LA 6.5

- Low risk

- Washington, RI 0.5
- Iosco, MI 0.4
- Roane, WV 0.4

EVAPOTRANSPIRATION

“The process by which water is transferred from the land to the atmosphere by evaporation from the soil and other surfaces and by transpiration from plants”

NIH 2012 – Adjemian

- **ASIAN- PACIFIC > WHITES**
 - 228 VS. 116/ 100,000
- **WESTERN STATES > EASTERN**
 - 149 VS 131
- **WOMEN > MEN**
 - 1.4 TO 1.0

Within the same environment, *intrinsic* factors are operative as well

PREVALENCE: PROXIMITY TO WATER CF CHILDREN

Bouso et al. 2016

- **Retrospective chart review 65 children in Florida**
- **21(32.3%) had 2+ positive sputum cultures NTM**
- **3 year follow-up**
- **CF patients who lived within 500 meters of water were 9.4 times more likely to have NTM**
- **Other significant factors included hx of Aspergillus OR Pseudomonas**

SHOWERHEAD UPDATE

Annals ATS 10.23.2019

- **Purpose:** Test associations between MAC pulmonary disease (MAC-PD) and NTM colonization of five potential point-of-use sources of pathogen exposure in homes
- **Washington and Oregon residents clinically diagnosed MAC-PD**
- **Population age, gender, population matched controls**
- **Samples:**
 - Bathroom faucets
 - Kitchen faucets
 - Shower aerosols
 - Indoor soil
 - Outdoor soil

SHOWERHEAD UPDATE

Annals ATS 10.23.2019

- **Findings: More NTM colonization in shower aerosols collected from case homes compared to controls**
- **Other point-of-use sites did NOT exhibit this association**
- **The FIRST case-controlled study between human health and NTM exposure in residential environmental environments**
- ******This study did not match DNA strains of shower head DNA to patient secretion DNA**
- **Thus other considerations including the overall home environment that promotes NTM growth, etc. to be considered**

EPIDEMIOLOGY: HOSPITAL ACQUIRED INFECTION

- **M. chimaera isolated from multiple patients who had undergone bypass procedures**
- **Is it possible that non-sterile water used in hospital heating and cooling devices can cause contamination and clinical infection**

SAPROZOIC ORGANISMS

- **OPPP's: Opportunistic Premise Plumbing Pathogens**
- **Grow within **biofilms** and sediments, *not freely***
- **May be viruses, bacteria, fungi and protozoal diseases**
- **Legionella grows *within* free-living protozoa that reside in the biofilm**
- **Not all such organisms are pathogenic**

SAPROZOIC ORGANISMS CONTROL MEASURES

- **Central water reservoirs**
- **Regional water distribution systems**
- **Individual homes**
- **Hospitals**
- **Public spaces**

M. avium AS OPPP

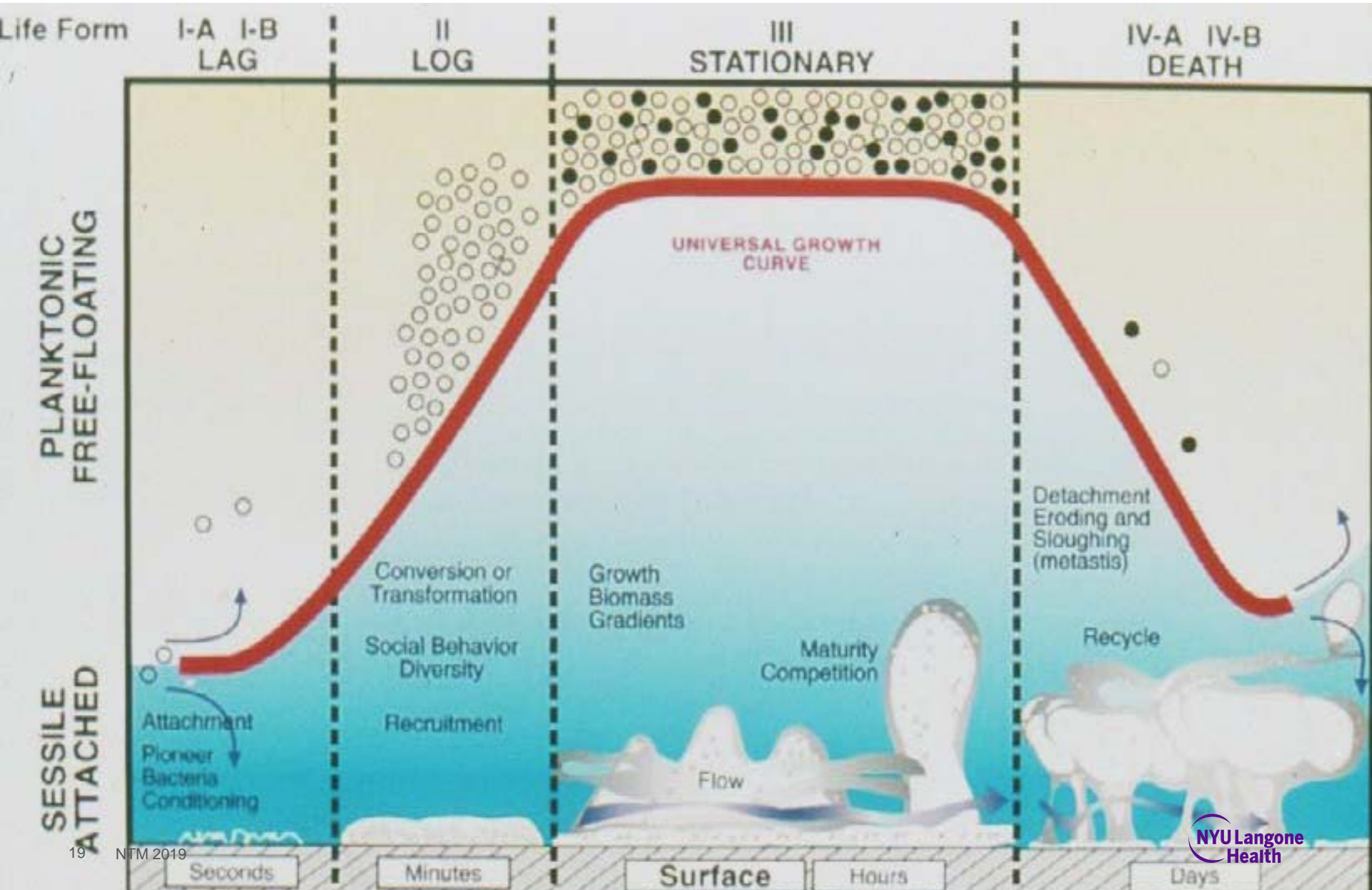
- **M. avium grows very slowly (1 generation per day) vs. 40 minutes for average bacteria (e.g. E. coli)**
- **Adheres to biofilm on pipe surfaces**
- **It is not washed out by water flow**
- **Chlorine resistant**
- **Heat resistant**
 - **90% survive at 125F for sixty minutes**
 - **Able to survive in hot water heaters**
- **Survive stagnancy**
 - **Able to grow in 6% and 12% oxygen as well as 21% oxygen (room air)**
- **Survives/ flourishes in amoebae rather than being killed by amoebae in water systems**

CHLORINE RESISTANCE OF OPPP'S vs. E.Coli

- Legionella – 83–fold
- Pseudomonas – 21 – fold
- M. avium – 567-fold (!!!!!)

–Resistance is increased in **biofilm state**

MICRBOIAL LIFE FORMS CYCLE



BACTERIAL BIOFILM

- **During biofilm assembly, bacteria secrete a substance (matrix) with polysaccharides, lipids and nucleic acids**
- **This matrix material allows for a biofilm architecture which is three dimensional**
- **Bacteria in biofilm achieve maximal replication rate**
- **Far higher concentrations of antibiotic required to kill biofilm bacteria than free-swimming bacteria of same strain (10-1000X)**
- **When nutrients run out, bacteria can rapidly disperse and colonize better locations where conditions are more favorable once more**

- **Very sophisticated system!!!**

BIOFILM – A SELECTIVE ENVIRONMENT

- **Biofilms are selective – certain surfaces inhibit certain organisms**
 - **Pseudomonas will not stick to copper pipe**
- **Copper pipe has to be “primed” by presence of certain proteins or other organisms**
- **M.avium is a “biofilm pioneer” (Falkinham)**
- **The fatty membrane, or hydrophobic membrane drives adherence to to surfaces *of all compositions***

BIOFILM AND NTM

- **M. abscessus less adherent than**
- **M. avium and M. intracellulare on surfaces**

MYCOBACTERIAL OUTER MEMBRANE

- The major determinant of *M. avium* complex ecology is the lipid and wax-rich outer membrane that surrounds the cell
- Long-chain fatty acids (C60-80) that make up 30% of the entire cell mass
- This membrane is responsible for slow growth (1 gen/day)
- Substantial amount of energy/ fuel is diverted to production of the fatty membrane
- This creates hydrophobic nature to the organism; a droplet of water forms a bead on the surface of *M. avium* cells
- The outer membrane is impermeable to nutrients – *clearly a down side*
- The outer membrane is at the same time resistant to disinfectants (chlorine) and other metals that are microbe toxic – *an advantage!!*

NTM HABITATS

- NATURAL WATERS
- DRINKING WATER
- HOUSEHOLDS
- AEROSOLS
 - Shower heads and water taps
- WATER FILTERS
- ROOM HUMIDIFIERS
- BIOFILM FEATURE KEY IN HUMAN WATER

- SOILS
- DUSTS

MAC RECOVERY FROM SOIL

- **In Europe, soil (indoor and outdoor) is a more prevalent reservoir of MAC than are tap water in North America and bathrooms in Japan**
- **Dust aerosolized in homes in Europe where soil contained MAC grew and aerosolized MAC**
- **Hypothesis: Individuals may carry MAC-containing dust from environment to environment**
- **New niches may form in this way**

NTM IN THE KITCHEN

- **NTM isolated kitchen sink biofilm, household refrigerator taps and home ice makers**
- **NTM has been isolated from certain foods and may be involved in the association between swallowing disorders and esophageal dysfunction (GERD and LPR)**

BIOFILM IN NTM DISEASE

- NTM LD (lung disease) often occurs in patients with underlying disease (old TB, silicosis, bullous disease, lung cavities)
- **NTM form biofilm in the cavities and progress to cause disease**
- This is more recently recognized in 1980's-90 re Lady Windermere Syndrome, including chronic bronchiectasis and Cystic fibrosis
- *****Mycobacterial biofilms have recently been identified in samples from lung cavitory disease**
- **Experimental data have shown that biofilm is important in the ability of NTM to invade bronchial epithelial cells**
- **Biofilm critical in catheter, dialysis infection and recent M. chimera infections in bypass surgery patients**

PERSONAL ENVIRONMENT ENVIRONMENTAL MYCOBACTERIAL LATENCY

Schraufnagel, 2017

- Reviewed study above of Ford noting that most patients ran into clinical trouble based on co-morbidities rather than NTM
- Studied country of origin of patients:
 - *M. fortuitum* increased in Asian-born
 - *M. lentiflavum* increased in African-born
- Pathology specimens indicate that NTM reside in sub-epithelia of small airways of bronchiectatic airways and biofilms

THUS: Is it possible that individuals harbor organisms far longer than we think AND that they cause bronchiectasis?

NTM: IMPORTANCE OF BETTER PREVENTION

- The infected stay infected
- The infected are persistently infected
- The infected are repeatedly infected

Worthwhile identifying source of infection

CONCLUSIONS FOR NOW

- Environmental **AND** host factors
- Water and water *vapor* involved
- Aerosol
- Biofilm

Uncertain which individual exposure(s) and behaviors are involved

CONTROL OF NON-TUBERCULOUS INFECTION

PROPOSED CONCLUSIONS

- **Mycobacterial transmission routes proceed from natural reserves to households via WDS's**
- **Global spread of pulmonary MAC disease may be caused by human activities as individuals carry organisms on their belongings**
- **Need to create living environments more comfortable to individuals and less comfortable to NTM organisms**
- **Need to disrupt biofilms**
 - **In water systems**
 - **In airways**

**THANK YOU FOR YOUR
ATTENTION**