

Introduction to Medical Microbiology

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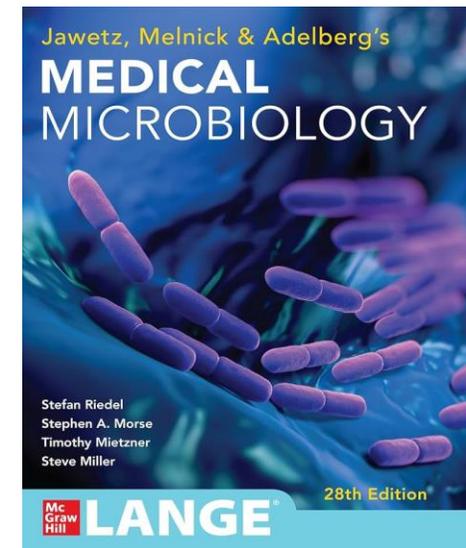
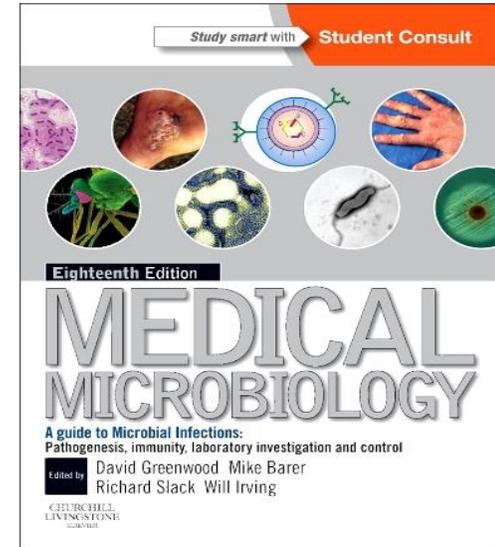


Course Details

- Course name: General medical microbiology
- Second year (MD program)
- Credit hours: 3 (2 theory, 1 practical)
- Lectures: Sunday and Tuesday for 1 hour
- Lab: Monday, and Wednesday 12:15 -2:15
- Course instructors:
 - Dr. Hala Altarawneh
 - Dr. Sulaiman Bani Abdel-rahman
 - Dr. Mohammad Odaibat
- Exams MID and FINAL

Course Resources

- Lecture and lab notes
- Reference textbook:
 - Greenwood D. *Medical Microbiology: A Guide to Microbial Infections: Pathogenesis, Immunity, Laboratory Diagnosis and Control*. 19th ed. Elsevier, 2012.
 - Carroll KC. *Jawetz, Melnick & Adelberg's Medical Microbiology*. 28th ed. McGraw-Hill, 2019.



Outline

- Definitions (microbe, microbiology, medical microbiology)
- History of medical microbiology
- Importance of medical microbiology
- Classification of Microorganisms:
 - Bacteria, Viruses, Fungi, Parasites, and Prions
 - Major differences between prokaryotes and eukaryotes

What is a microbe?

Small organisms visible only
under **microscope**





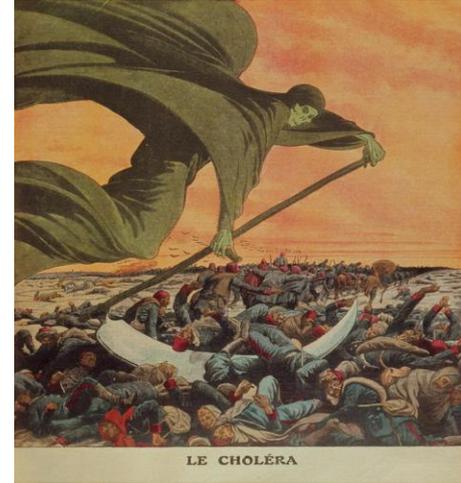
What is Medical Microbiology?

- **Microbiology** is the study of microorganisms — tiny living organisms invisible to the naked eye, including bacteria, viruses, fungi, and parasites.
- **Medical microbiology** is a branch of microbiology that focuses on **the study of microorganisms** that **cause diseases in humans** and the ways to **diagnose, treat, and prevent** these infections.

Medical Microbiology: Historical background

Ancient times – ~mid-1800s

- Ancient beliefs often explained disease by:
 - Imbalance of the four humors (blood, phlegm, yellow bile, black bile) — from Hippocrates and Galen.
 - Miasma theory: “bad air” or foul-smelling vapours caused disease.
 - Supernatural causes: punishment from gods, evil spirits, or witchcraft.



Medical Microbiology: Historical background

Ancient times – ~mid-1800s

- No concept of microorganisms or infectious agents.
 - Some observed contagiousness (plague, smallpox), but no understanding of the mechanism.
- Early public health measures (without understanding cause):
 - Quarantine, isolation, sanitation efforts — sometimes worked, but people didn't know why.

Medical Microbiology: Historical background

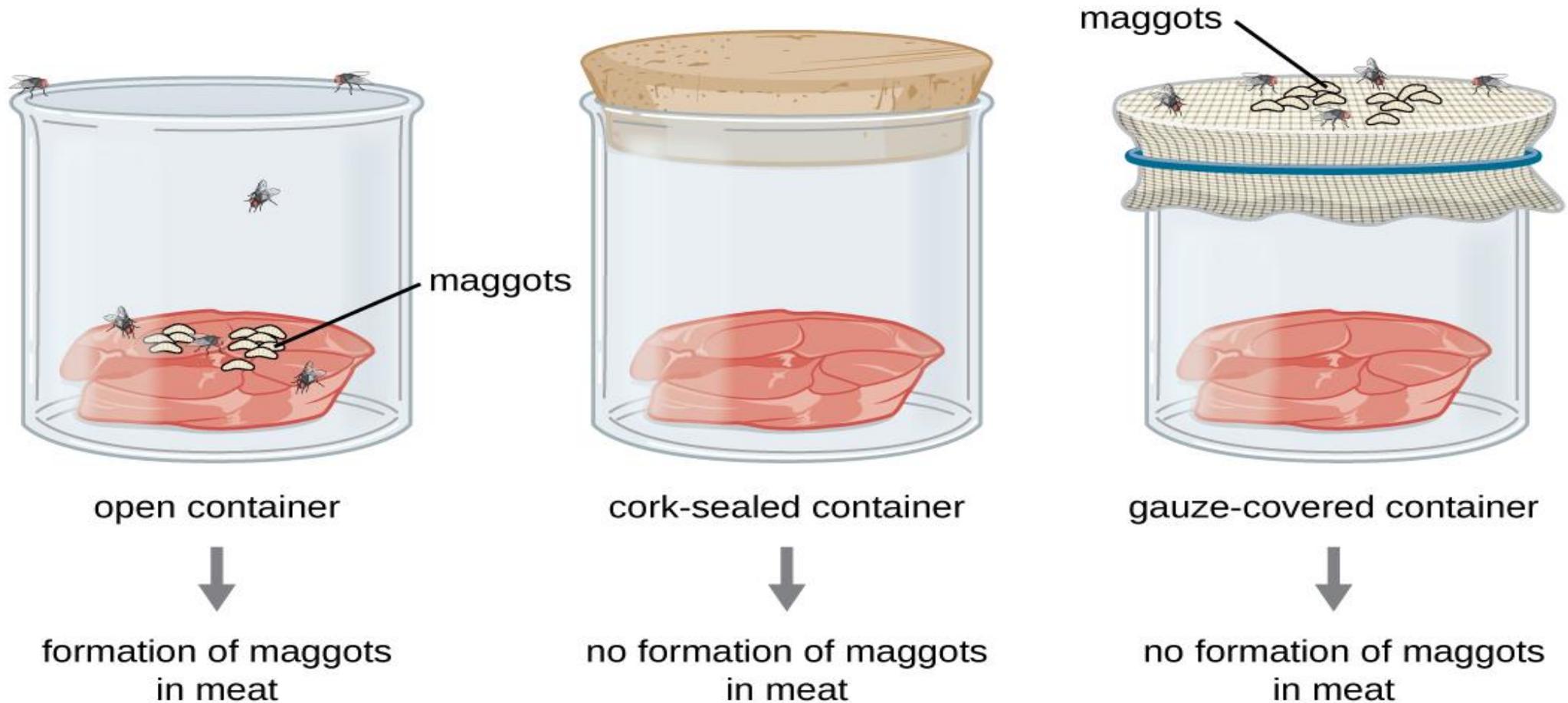
Discovery of Microorganisms (~1670s–1700s)

- Antonie van Leeuwenhoek (1674–1683): First to observe and describe bacteria and protozoa, using handcrafted microscopes.
- However, he **didn't connect them to disease.**

Medical Microbiology: Historical background- Disproving spontaneous generation

- Old belief: life arises spontaneously from non-living matter. Common examples believed at the time: Maggots appear from rotting meat.
- Challenged by experiments: Francesco Redi (1668): Maggots come from flies, not meat.
- Disproving spontaneous generation paved the way for the germ theory of disease.

Medical Microbiology: Historical background- Disproving spontaneous generation



Medical Microbiology: Historical background

Germ Theory of Disease

- Definition: the idea that specific microorganisms are the cause of specific infectious diseases.
- Key breakthroughs: Robert Koch: proved microbes cause disease (e.g., TB, anthrax); developed **Koch's postulates**.
- Main principles of germ theory:
 - Microorganisms are living agents of disease.
 - Diseases are not caused by “bad air” or mystical forces.
 - Transmission can be controlled (hygiene, sterilization, vaccination).

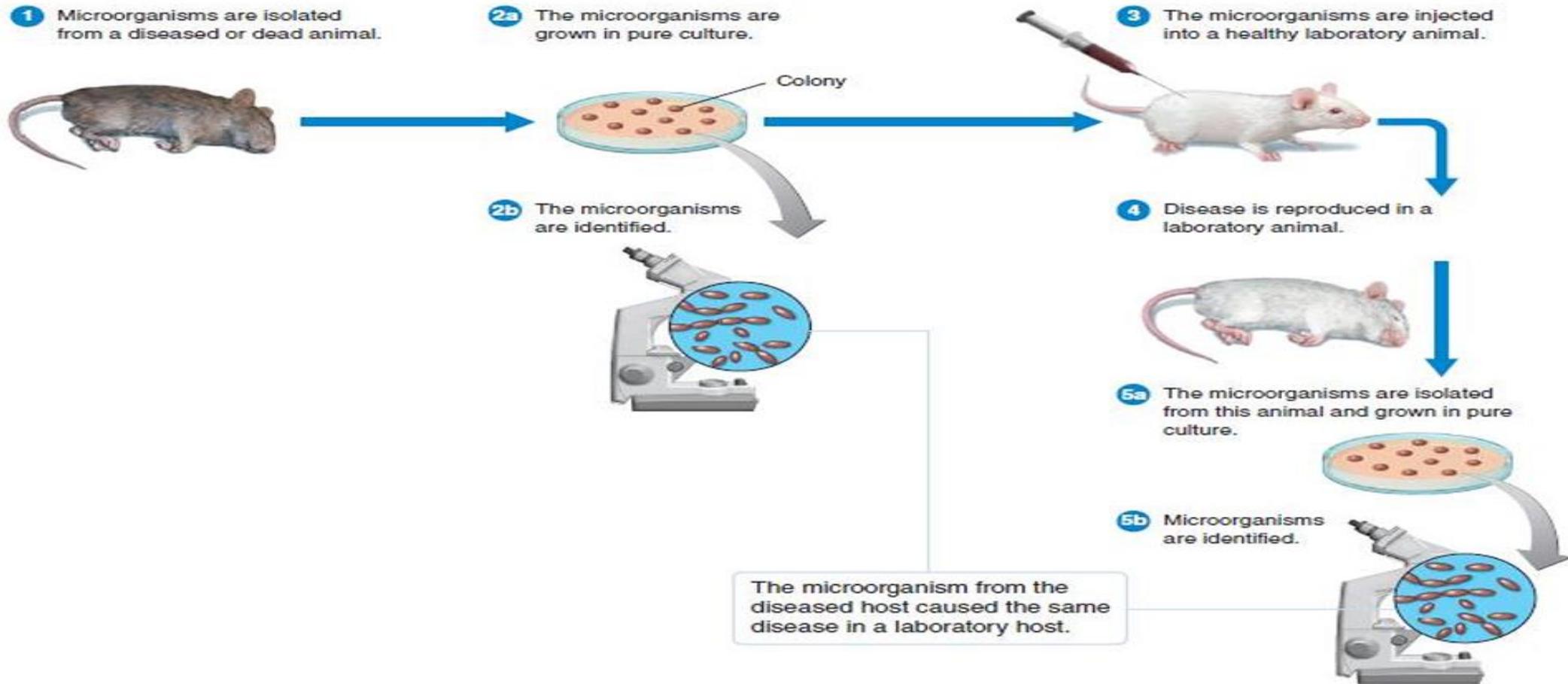
Medical Microbiology: Historical background- Germ Theory of Disease

Robert Koch's Anthrax Experiment

- Observed *Bacillus anthracis* in blood of anthrax-infected animals.
- Cultured bacteria outside the animal (pure culture).
- Injected cultured bacteria into healthy animals → disease reproduced.
- Re-isolated *Bacillus anthracis* from experimentally infected animals.

Medical Microbiology: Historical background- Germ Theory of Disease

Robert Koch's Anthrax Experiment



Medical Microbiology: Importance and scope in medicine

- Infectious Diseases: A Leading Cause of Death Worldwide
- Number of COVID-19 deaths reported to WHO (cumulative total) about **7.1 million**.
- In 2019:
 - Common bacterial infections were the **second-leading cause of death**
 - 33 bacterial pathogens caused **13.7 million deaths**
- In 2021:
 - lower respiratory infections **~2.5 million** deaths

Medical Microbiology: Importance and scope in medicine

Medical microbiology studies microorganisms that **cause human disease**

- Enables accurate diagnosis and targeted treatment of infections
- Guides antibiotic selection and management of antimicrobial resistance
- Supports infection control and hospital hygiene practices
- Vaccine development and outbreak response
- Monitoring antimicrobial resistance developments

Classification of Microorganisms

Classification of Microorganisms

Cellular (living cells)

Prokaryotes

A single-celled microorganism that lacks a nucleus

→ Bacteria

Eukaryotes

any cell or organism that possesses a clearly defined nucleus

→ Fungi, Parasites

Acellular

Viruses

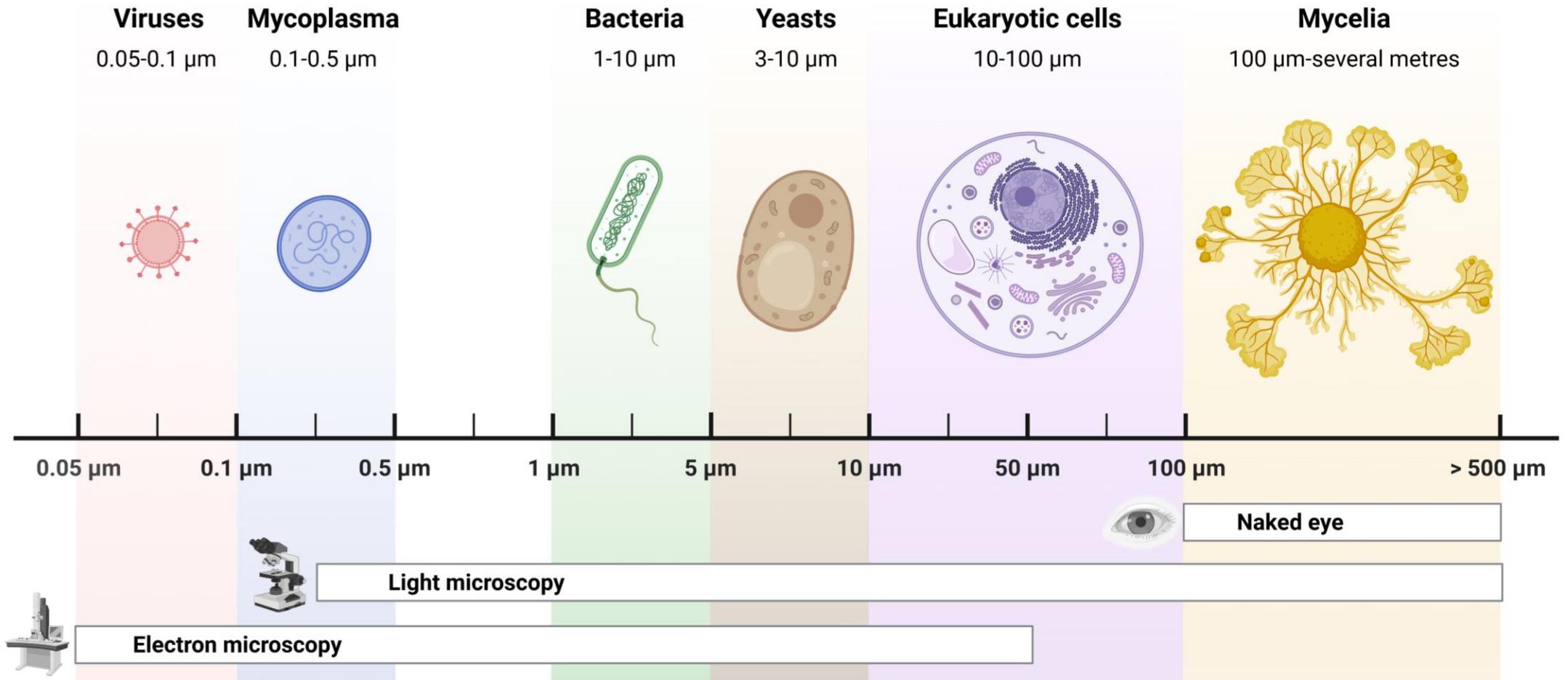
Acellular infectious agents with DNA or RNA in a protein coat; replicate only inside host cells

Prions

A misfolded protein that induces misfolding in normal variants of the same protein

Classification of Microorganisms

Relative sizes of viruses, bacteria, yeasts, mammalian cells, and fungal mycelia

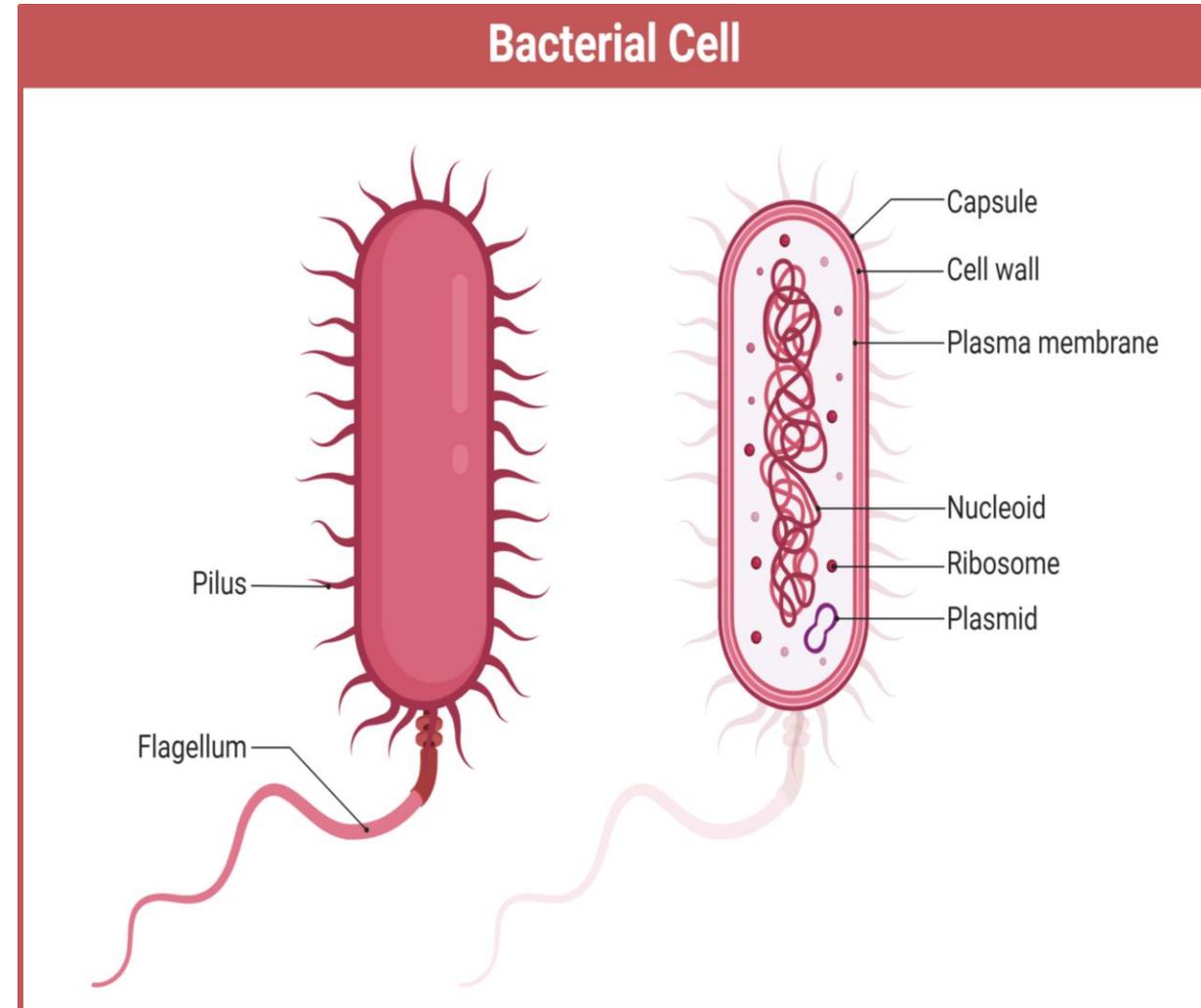


Classification of Microorganisms: Prokaryotes

Prokaryotes

Pro = Before
karyon = Nucleus

- Literal meaning:
→ “**before the nucleus**” →
cells **without** a nucleus.
- DNA in nucleoid



Classification of Microorganisms: Prokaryotes

- **Definition:** **Unicellular** organisms **without a nucleus** or **membrane-bound organelles**
 - ✓ No nucleus; DNA in nucleoid (usually circular).
 - ✓ Ribosomes: 70S (30S + 50S).
 - ✓ Size: ~0.5–5 μm ; divide by binary fission; rapid growth.
 - ✓ Energy: No mitochondria— electron transport chain (ETC) on cell membrane.
- Prokaryotes are primarily organisms belonging to the domains of life called **Bacteria** and Archaea.

Classification of Microorganisms: Eukaryotes

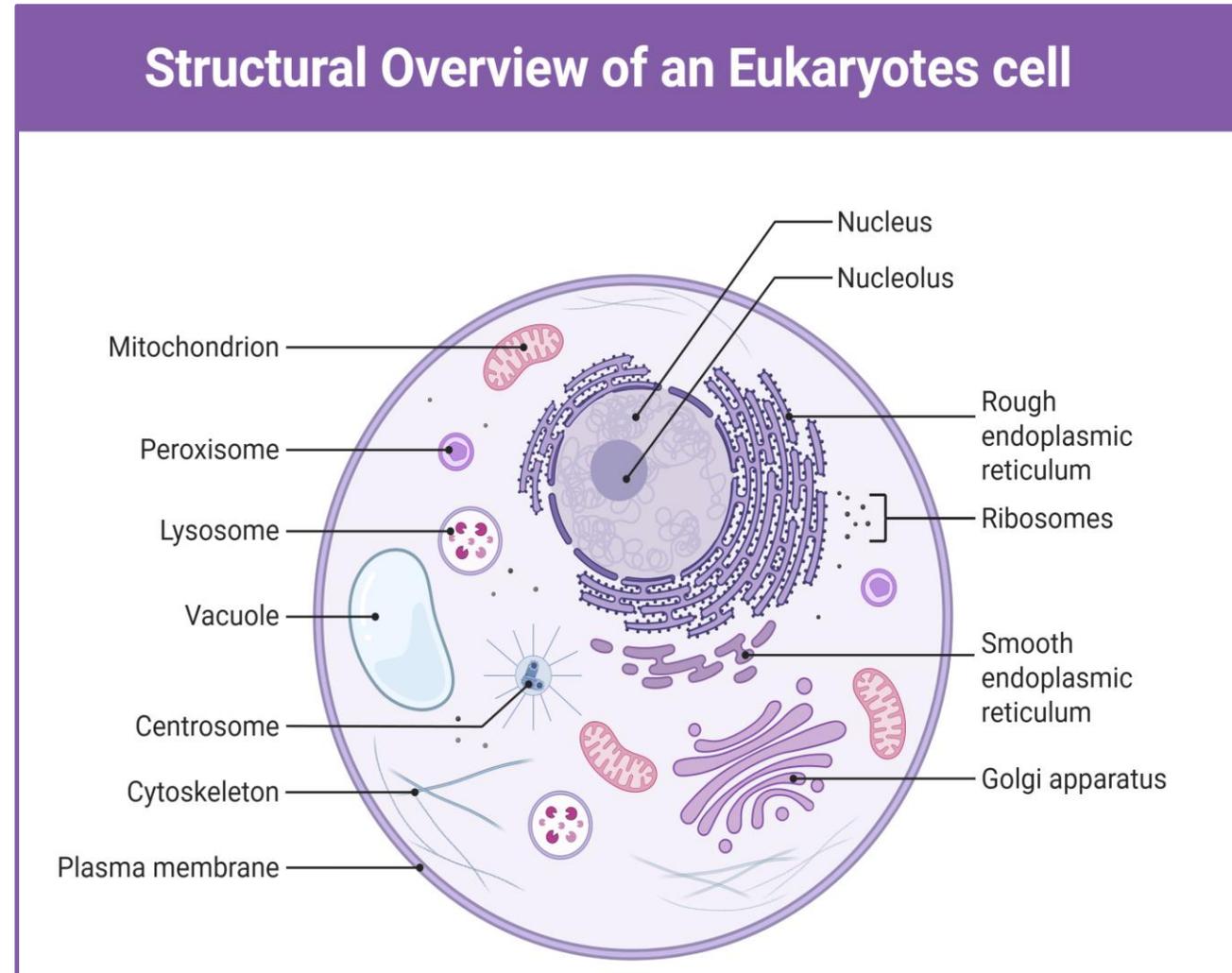
Eukaryotes

Eu = True

Karyon = Nucleus

• Literal meaning:

→ “**true nucleus**” → cells with a nucleus.



Classification of Microorganisms: Eukaryotes

- **Definition:** Cells with **a nucleus** and **membrane-bound organelles** (mitochondria, endoplasmic reticulum, Golgi apparatus); 80S cytosolic ribosomes.
- **Core features:**
 - ✓ Genome: multiple linear chromosomes; transcription in nucleus, translation in cytoplasm.
 - ✓ Ribosomes: 80S
 - ✓ Energy: Mitochondria (oxidative phosphorylation)
 - ✓ Division: mitosis (\pm meiosis/sex in many).
 - ✓ Size: typically, $\geq 5\text{--}100\ \mu\text{m}$

Prokaryotes vs Eukaryotes — Quick Compare”

Feature	Prokaryotes	Eukaryotes
Nucleus	— (nucleoid)	✓ (true nucleus)
Chromosomes	Usually single, circular ± plasmids	Multiple, linear
Ribosomes	70S	80S
Organelles	—	✓ (mitochondria, ER, Golgi)
Cell wall	Peptidoglycan (most)	Fungi: chitin/β-glucan ; protozoa: lack ture cell wall
Division	Binary fission	Mitosis (± meiosis)
Size	~0.5–5 μm	≥5–100 μm

* Exceptions: Vibrio (2 chromosomes); Borrelia (linear); Mycoplasma (no wall, has sterols).

Classification of Microorganisms: Prions

- Prions are **infectious**, **misfolded** forms of a normal human **protein** (PrP)
- It propagates by **templating other** PrP molecules **to misfold**
- **PrP^c** (“**cellular**” **PrP**): normal host protein on neurons; α -helix–rich, soluble, **protease-sensitive**, non-pathogenic.
- **PrP^{sc}** (“**scrapie**”/**pathogenic PrP**): misfolded form; β -sheet–rich, aggregates, **protease-resistant**, infectious.

Classification of Microorganisms: Prions

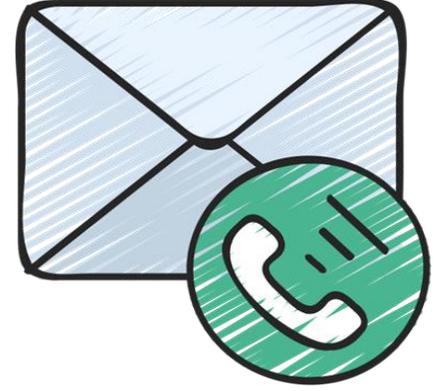
- Accumulation of PrP^{sc} in CNS → spongiform change (vacuoles), neuronal loss.
- No inflammation and no immune response (it's a self protein, not foreign) → Result: rapidly **progressive, fatal neurodegeneration**.
- **Notable examples:**
 - Bovine spongiform encephalopathy (BSE) – “mad cow disease” in cattle
 - Creutzfeldt–Jakob disease (CJD) – in humans
- **Transmission:**
 - Transmitted by ingestion.
 - Sometimes iatrogenic route e.g. blood transfusion, reuse of needles or IV sets

Thank You
For Your Attention!

Any Questions



How to Reach Me



-  Best way: Microsoft Teams (chat)
-  Or send me an email: hala.altarawneh@mutah.edu.jo
-  You can find me in my office – Third Floor
-  I'm available on **Sundays & Wednesdays, 11:00 AM – 1:00 PM**

Just message me first before dropping by ✨