molecular characterization

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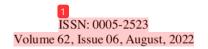
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Molecular Characterization of Acanthamoeba spp. on **Contact Lens and Household Water Sources of Contact** Lens Users in Jakarta, Indonesia

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ABSTRACT

Acanthamoeba keratitis is a disease affecting the cornea caused by unicellular protozoa Acanthamoeba spp. that live freely in nature. This study aims to termine the potential for transmission and genetic characteristics of Acanthamoeba spp. from contact lens cleaning solutions and household water sources for contact lens users. The was a cross-sectional study that was conducted in January-May 2019. The collected samples were contact lens and tap water from 53 lens users in Jakarta. Acanthamoeba spp was detected microscopically from culture and molecularly by PCR-sequencing. From 53 contact lenses samples, there were 2 positive samples of Acanthamoeba sp and thre positive samples of other free-living amoebae. From the culture of 53 tap water samples, there were 5 positive cultures of Acanthamoeba spp. and 34 positive cultures of free-living amoeba. From the positive PCR results on contact lenses and tap water, it was found that there was a similarity in 1 sample of contact lenses and tap water from 1 subject. Sequencing analysis found that only 1 contact lens sample was Acanthamoeba castellani genotype T4. Meanwhile, from the tap water sample, there were 5 samples that could be sequenced. The sequencing analysis results showed that 2 samples were Acanthamoeba lenticulata genotype T5 and 3 were Acanthamoeba jacobsi genotype T15.





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1. Introduction

Acanthamoeba spp. is a protozoan parasite that lives freely in soil and water. It may cause infectious diseases when in contact with the eyes and cause Acanthamoeba keratitis. The prevalence of Acanthamoeba keratitis is low, but if it is not immediately treated, it can negatively impact clinical symptoms until blindness (11), [2]. Acanthamoeba keratitis mostly occurs in individuals who wear contact lenses [3]. Therefore, contact lens hygiene is essential to prevent the transmission of this infection.

Acanthamoeba spp. can be classified molecularly by knowing the genotype to identify pathogen isolates. Several species of the genus Acanthamoeba spp. have been k with the cause Acanthamoeba keratitis. Up to now, 20 genotypes have been identified (genotype T1-20) based on diagnostic analysis of fragment 3 (DF3), part of the ribosomal DNA (rDNA) of the Acanthamoeba gene [4]. DF3 encycles a variable to identify the 18S rDNA small subunit gene. Acanthamoeba species group II consisting of A. castellanii (T4), A. griffinii (T3), A. hatchetti, A. polyphaga and A. stevensoni (T11) were reported to be the cause of infection in humans, namely Acanthamoeba keratitis or keratitis amoeba and granumolatosa amoebic encephalitis (GAE). Based on the study of [5] in Argentic in 2017, all contact lens samples collected were the T4 genotype. In research by [6] in Tehran, Iran, 6 of 90 (6.7%) sample howed positive results for Acanthamoeba spp. from tap water sources. The diagnosis was made based on the morphological characteristics of a double-walled cyst and molecular analysis showed genotypes T4 (83%) and T11 (17%). [7] also reported that the T4 genotype is the most common genotype in the environment and a pathogen that causes eye disease with risk factors for lack of hygiene in contact lens users and contamination of tap water sources in residential homes. Research conducted by [3] on a contact lens cleaning solution found A. castillanii genotype T4.

It is known that the distribution of *Acanthamoeba*, which is cosmopolitan so that it can be found anywhere, especially in water, air, and soil causes transmission of humans. A study in Turkey, found that some tap water in Sivas district identified free-living amoeba species such as *A. castellanii*, *H. vermiformis*, and *A. polyphaga* in the collected water samples [8] In Indonesia, contact lens user numbers increase by more than 15% annually [9]. It is important that research is needed to assess the risk factors for transmission of *Acanthamoeba*, such as contact lens cleaning solution and tap water sources in contact lens users by molecular identification [8]. This study was conducted to know whether there is a potential for transmission of *Acanthamoeba* spp. from water sources usually used to clean contact lenses.

2. Material and Method

The contact lens and tap waters samples was collected from 53 contact lens users of Faculty of Medicine of Krida Wacana Christian University (UKRIDA) students. Microscopic examination was performed after 14 days incubation of Page Salt Agar culture samples [10]. The positive *Acanthamoeba* samples were then extracted using Promega Kit (Wisconsin, USA) and amplified with the 18s rRNA gene of JDP1 forward primers (5'-GGCCCAGATCGTTTACCGTGAA-3') and JDP2 reverse primers (5'TCTCACAAGCT GCTAGGGGAGTCA-3') [11]. Amplicon was carried out then visualized on agarose gel with UV light and the results of the amplicon length was expected to be 450 bp. The PCR products were then sequenced for genotyping analysis. Alignment and phylogenetic analysis were generated by MEGA XI software [12].

Research has been reviewed and granted ethical permission by the Health Research Ethics Committee of the Faculty of Medicine, Universitas Indonesia No. 0712 / UN2.F1 / ETIK / 2018.

3. Result

3.1 Microscopic examination from Page Salt Agar Culture

Microscopic examination of the Page Salt Agar culture from contact lenses and tap water found two and five positive *Acanthamoeba* spp. cyst respectively. The morphological description of *Acanthamoeba spp* cyst stage is round and has a single core and exocyst double wall (wrinkled outer wall) and endocyst (starshaped inner wall) as described in figure 1.



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Figure 1. Acanthamoeba spp. cysts of S48 LK contact lens sample in 40x magnification

3.2 Molecular Analysis

All positive culture examination were successfully amplified Sequencing analysis such as alignment and phylogenetic analysis ((Figure 2) was using MEGA XI software. The sequencing results were then compared with the reference sequences of *Acanthamoeba* spp. published on GenBank. The strain of the contact lenses samples S25 and S48 are *A. castellani* genotype T4 and *A. lenticulata* genotype T5, respectively (Table 1). Moreover, genotypes of the tap water are *A. lenticulata* genotype T5 for S11 and S48, *A. jacobsi* genotype T15 for S40, S41, and S44.

Table 1. The genotype of Contact lenses and tap water

0 71	*
Contact lens	Tap water
-	A. lenticulata genotype T5
A. castellani genotype T4	-
-	A. jacobsi genotype T15
-	A. jacobsi genotype T15
-	A. jacobsi genotype T15
A. lenticulata genotype T5	A. lenticulata genotype T5
	A. castellani genotype T4

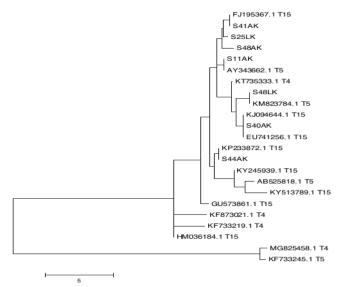


Figure 2. Phylogenetic analysis of the *Acanthamoeba* sample. Phylogenetic tree based on 18SrDNA sequencing was generated by Tamura-Nei method 500 replicates.

The results of the sample identification support the statement from previous studies that the *Acanthamoeba* genotype T4 is the cause of Acanthamoeba keratitis. *A. lenticulata* genotype T5 found in the environment can also be pathogenic and potentially cause keratitis. In addition, *Acanthamoeba* genotype T15 is also found in the environment.

Discussion

Acanthamoeba keratitis (AK) is a disease caused by one of the free-living amoeba, *Acanthamoeba* spp. It can cause comea infection due to contamination of the contact lenses used and contact lens waste and tap water [2]. FLA can live in all types of water, such as brackish water, seawater, tap water, groundwater, river water, wastewater, pool water, and contact lens cleaning solutions that are potentially contaminated with *Acanthamoeba* spp. [1].

From the positive PCR results on contact lenses and tap water, it was found that there was a similarity in 1 sample of contact lenses and tap water from 1 subject, namely the S48 sample. This can be due to the possibility of using tap water to clean the contact lenses. Other possible causes were not washing hands before handling contact lenses, not using special contact lens cleaning solutions, or if they are using special contact lens cleaning solutions that are ineffective in killing *Acanthamoeba*. Water that is distributed to the population and used for daily needs has been contaminated by *Acanthamoeba* spp.

From the results of sequencing analysis, it was found that only 1 contact lens sample was *Acanthamoeba* [13] tellani genotype T4. These results are in accordance with the research conducted by [5] in Argentina that the T4 genotype is the most common genotype which is the pathogen that causes eye disease, and similar to the research conducted by [3], the *Acanthamoeba castellanii* genotype T4 was detected in contact lens samples and lens cleaning solutions. Meanwhile, there were 5 samples that could be sequenced from the tap water sample. The results of the sequencing analysis showed that 2 samples were *Acanthamoeba lenticulata* genotype T5 and 3 samples were *Acanthamoeba jacobsi* genotype T15. This is slightly different from the research conducted by [6], which found that *Acanthamoeba* spp. from tap water sources were the T4



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genotype (83%) and T11 (17%). There is a possibility that some of the tap water sources in Indonesia have been contaminated by *Acanthamoeba* spp genotypes T5 and T15. One of the 2 subjects had similarities in the results of sequencing between contact lenses and tap water, namely *Acanthamoeba lenticulata* genotype T5. This may indicate transmission and contamination. The source of tap water that has been contaminated by *Acanthamoeba lenticulata* genotype T5 may transmit keratitis in humans. There were no complaints in contact lens users may indicate that *Acanthamoeba* spp. genotype T5 and T15 were not virulent.

5. Conclusion

The finding of similar genotypes in contact lenses and the household tap water of the user may imply that there is potency for transmission of *Acanthamoeba* spp. from the household water sources to the contact lens users and the contact lens used as well.

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