

SUPPORTING INFECTIOUS DISEASE RESEARCH

Product Information Sheet for NR-46481

Acanthamoeba byersi, Strain CDC:V621

Catalog No. NR-46481

For research use only. Not for human use.

Contributor:

Govinda S. Visvesvara, Ph.D., Centers for Disease Control and Prevention, National Center for Emerging and Zoonotic Infectious Diseases, Division of Foodborne, Waterborne and Environmental Diseases, Waterborne Disease Prevention Branch, Atlanta, Georgia, USA

Manufacturer:

BEI Resources

Product Description:

Protozoa Classification: Acanthamoebidae, Acanthamoeba

Species: Acanthamoeba byersi

Strain: CDC:V621

<u>Original Source</u>: Acanthamoeba byersi (A. byersi), strain CDC:V621 was isolated in 2010 from the brain and skin tissue of a male patient with granulomatous amebic encephalitis in California, USA.^{1,2}

Comment: A. byersi, strain CDC:V621 was deposited to BEI Resources as a pathogenic type T18 based on 18S ribosomal RNA gene sequence. Strain CDC:V621 is the type strain of the species.

Amoebae belonging to the genus Acanthamoeba inhabit a wide variety of environmental niches worldwide and have been isolated from soil, freshwater, air, humans, and animals, both domestic and feral, and are able to exist both as free-living amoebae and as parasitic pathogens.³⁻⁵ The Acanthamoeba life cycle consists of an active bacteriafeeding trophozoite stage and a dormant cyst formed in response to harsh environmental conditions. ^{4,5} In healthy humans, *Acanthamoeba* is the causative agent of Acanthamoeba keratitis, an increasingly-prevalent sightthreatening eye disease among contact lens wearers. 6,7 In immunocompromised individuals, Acanthamoeba can cause acanthamoebiasis, the fatal disease granulomatous amebic encephalitis and disseminated infections of other tissues. 3-7

Acanthamoeba are currently classified by twenty sequence types (T1 to T20) based on nuclear small ribosomal subunit RNA genotyping and divided into three morphological groups: Group I (T7, T8, T9, T17, T18), Group II (T1, T3, T4, T6, T11, T13, T16, T19, T20) and Group III (T2, T5, T6, T10, T12, T14, T15). Highly-specific PCR methods for subgeneric identification of isolates have been developed for both clinical and environmental applications. 10,11

A. byersi is the first description of a Group 1 *Acanthamoeba* isolate to demonstrate pathogenicity in humans.²

Material Provided:

Each vial of NR-46481 contains approximately 0.5 mL of culture in 7.5% DMSO. Please see Appendix I for cryopreservation instructions.

Packaging/Storage:

NR-46481 was packaged aseptically in screw-capped plastic cryovials and is provided frozen on dry ice. The product should be stored at cryogenic temperature (-130°C or colder), preferably in the vapor phase of a liquid nitrogen freezer. If liquid nitrogen storage facilities are not available, frozen cryovials may be stored at -70°C or colder for approximately one week. Note: Do not under any circumstances store vials at temperatures warmer than 70°C. Storage under these conditions will result in the death of the culture.

To insure the highest level of viability, the culture should be initiated immediately upon receipt. Any warming of the product during shipping and transfer must be avoided, as this will adversely affect the viability of the product. For transfer between freezers and for shipping, the product may be placed on dry ice for brief periods, although use of a portable liquid nitrogen carrier is preferred. Please read the following recommendations prior to using this material.

Growth Conditions:

Peptone Yeast Glucose (PYG) medium (ATCC® medium 712) (Appendix II) supplemented with 10% heat-inactivated fetal bovine serum (HIFBS)

Incubation:

Temperature: 35°C

Note: Acanthamoeba are usually cultured at 25°C. However, during production, it was discovered that strain CDC:V621 demonstrates optimal growth at 35°C.

Atmosphere: Aerobic

Propagation:

- Place the frozen vial in a 35°C to 37°C water bath and thaw for approximately 2 to 3 minutes. Do not agitate the vial. Do not leave the vial in the water bath after it is thawed.
- Immediately after thawing, aseptically transfer the contents of the vial to a T-25 tissue culture flask containing 5 to 10 mL PYG medium supplemented with 10% HIFRS
- Screw the cap on tightly and incubate the tube or flask at 35°C.

Maintenance:

- When the culture is at or near peak density, vigorously agitate or scrape the surface of the flask to detach adherent cells.
- Transfer approximately 0.25 mL to a fresh flask containing 5 to 10 mL fresh PYG medium supplemented with 10% HIFBS.
- 3. Screw the caps on tightly and incubate at 35°C.
- The amoeba will form an almost continuous sheet of cells on the bottom surface of the flask. Repeat steps 1 through 3 every 10 to 14 days.

BEI Resources www.beiresources.org E-mail: contact@beiresources.org
Tel: 800-359-7370

Fax: 703-365-2898



SUPPORTING INFECTIOUS DISEASE RESEARCH

Product Information Sheet for NR-46481

Citation:

Acknowledgment for publications should read "The following reagent was obtained through BEI Resources, NIAID, NIH: *Acanthamoeba byersi*, Strain CDC:V621, NR-46481."

Biosafety Level: 2

Appropriate safety procedures should always be used with this material. Laboratory safety is discussed in the following publication: U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, and National Institutes of Health. Biosafety in Microbiological and Biomedical Laboratories. 5th ed. Washington, DC: U.S. Government Printing Office, 2009; see www.cdc.gov/biosafety/publications/bmbl5/index.htm.

Disclaimers:

You are authorized to use this product for research use only. It is not intended for human use.

Use of this product is subject to the terms and conditions of the BEI Resources Material Transfer Agreement (MTA). The MTA is available on our Web site at www.beiresources.org.

While BEI Resources uses reasonable efforts to include accurate and up-to-date information on this product sheet, neither ATCC® nor the U.S. Government makes any warranties or representations as to its accuracy. Citations from scientific literature and patents are provided for informational purposes only. Neither ATCC® nor the U.S. Government warrants that such information has been confirmed to be accurate.

This product is sent with the condition that you are responsible for its safe storage, handling, use and disposal. ATCC® and the U.S. Government are not liable for any damages or injuries arising from receipt and/or use of this product. While reasonable effort is made to ensure authenticity and reliability of materials on deposit, the U.S. Government, ATCC®, their suppliers and contributors to BEI Resources are not liable for damages arising from the misidentification or misrepresentation of products.

Use Restrictions:

This material is distributed for internal research, non-commercial purposes only. This material, its product or its derivatives may not be distributed to third parties. Except as performed under a U.S. Government contract, individuals contemplating commercial use of the material, its products or its derivatives must contact the contributor to determine if a license is required. U.S. Government contractors may need a license before first commercial sale.

References:

- 1. Visvesvara, G. S., Personal Communication.
- Qvarnstrom, Y., T. A. Nerad and G. S. Visvesvara. "Characterization of a New Pathogenic Acanthamoeba Species, A. byersi n. sp., Isolated from a Human with Fatal Amoebic Encephalitis." J. Eukaryot. Microbiol. 60 (2013): 626-633. PubMed: 23879685.

- Booton, G. C., et al. "Identification and Distribution of Acanthamoeba Species Genotypes Associated with Nonkeratitis Infections." <u>J. Clin. Microbiol.</u> 43 (2005): 1689-1693. PubMed: 15814986.
- D'Auria, A., et al. "Cutaneous Acanthamoebiasis with CNS Involvement Post-Transplantation: Implication for Differential Diagnosis of Skin Lesions in Immunocompromised Patients." J. Neuroparasitology 3 (2012): 1-7.
- Marciano-Cabral, F. and G. Cabral. "Acanthamoeba spp. as Agents of Disease in Humans." <u>Clin. Microbiol. Rev.</u> 16 (2003): 273-307. PubMed: 12692099.
- Visvesvara, G. S. "Amebic Meningoencephalitides and Keratitis: Challenges in Diagnosis and Treatment." <u>Curr.</u> <u>Opin. Infect. Dis.</u> 23 (2010): 590-594. PubMed: 20802332.
- Walochnik, J., et al. "Discrimination between Clinically Relevant and Nonrelevant Acanthamoeba Strains Isolated from Contact Lens-Wearing Keratitis Patients in Austria." J. Clin. Microbiol. 38 (2000): 3932-3936. PubMed: 11060047.
- Corsaro, D., et al. "Acanthamoeba Misidentification and Multiple Labels: Redefining Genotypes T16, T19, and T20 and Proposal for Acanthamoeba micheli sp. nov. (Genotype T19)." Parasitol. Res. 114 (2015): 2481-2490. PubMed: 25869957.
- Corsaro, D. and D. Venditti. "Phylogenetic Evidence for a New Genotype of *Acanthamoeba* (Amoebozoa, Acanthamoebida)." <u>Parasitol. Res.</u> 107 (2010): 233-238. PubMed: 20411277.
- Schroeder, J. M., et al. "Use of Subgenic 18S Ribosomal DNA PCR and Sequencing for Genus and Genotype Identification of Acanthamoebae from Humans with Keratitis and from Sewage Sludge." <u>J. Clin. Microbiol.</u> 39 (2001): 1903-1911. PubMed: 11326011.
- Ledee, D. R., et al. "Advantages of Using Mitochondrial 16S rDNA Sequences to Classify Clinical Isolates of Acanthamoeba." <u>Invest. Opthalmol. Vis. Sci.</u> 44 (2003): 1142-1149. PubMed: 12601042.

ATCC[®] is a trademark of the American Type Culture Collection.

BEI Resources

www.beiresources.org

E-mail: contact@beiresources.org
Tel: 800-359-7370

Fax: 703-365-2898



Product Information Sheet for NR-46481

APPENDIX I: CRYOPRESERVATION

- 1. Harvest Acanthamoeba from multiple agar plates by scraping the surface of the flask with a cell scraper to detach adhering trophozoites.
- 2. Transfer the cell suspensions to 15 mL or 50 mL plastic centrifuge tubes.
- 3. Adjust the cell concentration to 1.0 x 10⁶ to 2 x 10⁷ cells/mL with fresh PYG medium.

 Note: If the concentration of cells is too low, centrifuge at 1300 x g for 10 minutes and resuspend in a smaller volume of fresh medium to yield the desired cell concentration.
- 4. Mix equal volumes of cell suspension and fresh medium containing 15% DMSO to yield a final concentration of 1.0 x 10⁶ to 2 x 10⁷ cells/mL in 7.5% DMSO. The freezing process should start 15 to 30 minutes following the addition of cryoprotective solution to the cell suspension.
- 5. Dispense 0.5 mL aliquots into 1 to 2 mL sterile plastic screw-capped vials for cryopreservation.
- 6. Place the vials in a controlled rate freezing unit. From room temperature cool the vials at -1°C/min to -40°C. If the freezing unit can compensate for the heat of fusion, maintain rate at -1°C/min through this phase. At -40°C, plunge vials into liquid nitrogen. Alternatively, place the vials in a Nalgene 1°C freezing container. Place the container at -80°C for 1.5 to 2 hours and then plunge vials into liquid nitrogen.
- 7. Store in either the vapor or liquid phase of a nitrogen refrigerator (-130°C or colder).

APPENDIX II: Peptone Yeast Glucose (PYG) MEDIUM (ATCC® MEDIUM 712)

- 1. Prepare the Basal medium (see recipe below), autoclave for 20 minutes at 121°C, and allow to cool.
- 2. Prepare each of the five inorganic stock solutions (listed below), autoclave for 20 minutes at 121°C, and allow to cool.
- 3. Prepare the 2 M glucose stock solution (see recipe below) and filter sterilize.

Basal Medium		Inorganic Stock Solutions	Inorganic Stock Solutions 2 M Glucose Stock Solution	
Proteose Peptone	20.0 g	0.4 M MgSO ₄ -7H ₂ O	Glucose	18.0 g
Yeast Extract	1.0 g	0.05 M CaCl ₂	Sodium Citrate-2H ₂ O	1.0 g
Distilled water	900.0 L	$0.005 \text{ M Fe}(NH_4)_2(SO_4)_2-6H_2O$	Distilled Water	50.0 mL
		0.25 M Na ₂ HPO ₄ -7H ₂ O		
		0.25 M KH ₂ PO ₄		

4. Aseptically prepare the PYG Medium by adding the components listed below to the Basal Medium in the following order:

Basal medium	900.0 mL
0.4 M MgSO ₄ -7H ₂ O	10.0 mL
0.05 M CaCl ₂	8.0 mL
0.005 M Fe(NH ₄) ₂ (SO ₄) ₂ -6H ₂ O	10.0 mL
0.25 Na ₂ HPO ₄ -7H ₂ O	10.0 mL
0.25 M KH ₂ PO ₄	10.0 mL
2 M glucose stock solution	50.0 mL

- 5. Adjust the pH of the complete medium to 6.5 with sterile solutions of 1N HCL or 1N NaOH.
- Bring the final volume up to 1 L with sterile distilled water.

BEI Resources www.beiresources.org E-mail: contact@beiresources.org

Tel: 800-359-7370 Fax: 703-365-2898