

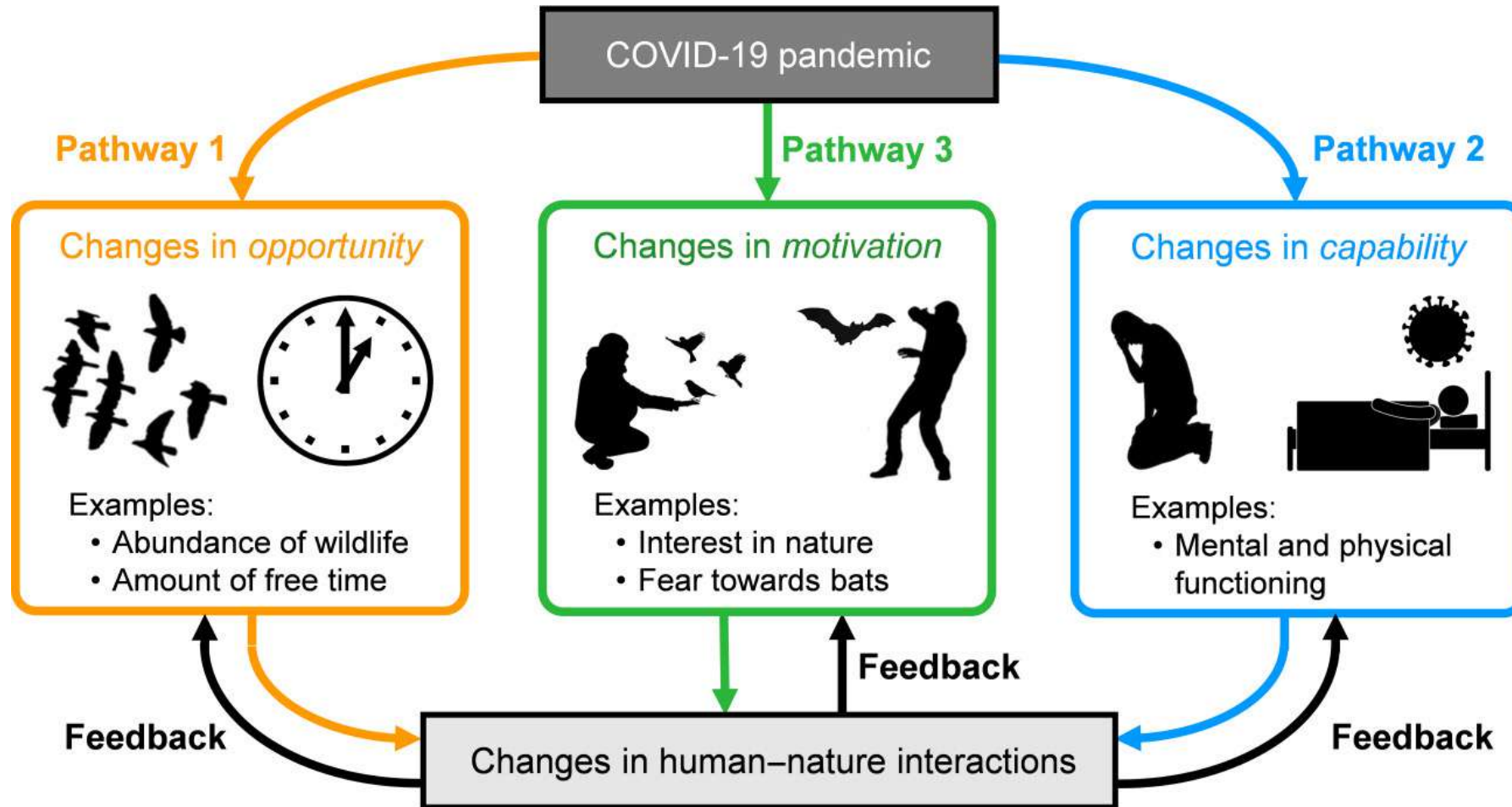
Çevresel Örneklerin Viral Surveyansta Kullanımı

Fusun Can

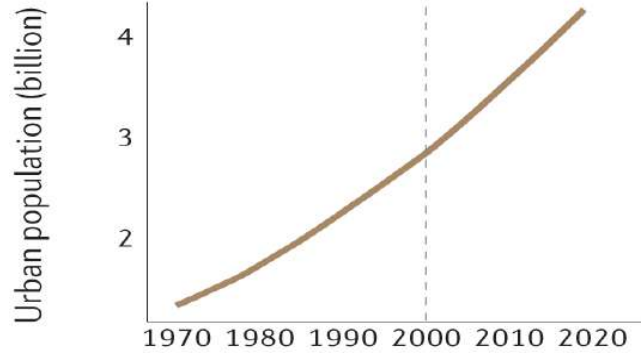
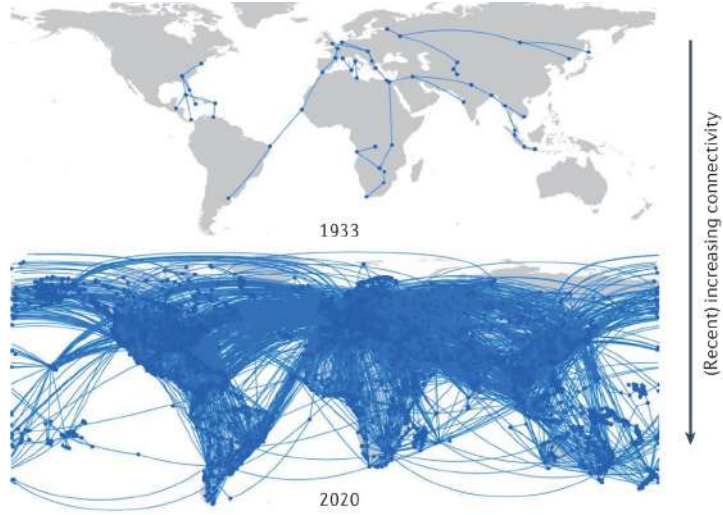
Koç Üniversitesi Tıp Fakültesi

Tıbbi Mikrobiyoloji AD

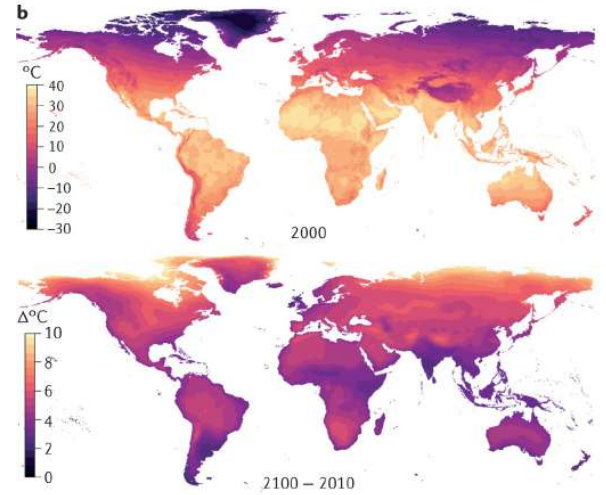
COVID-19 Pandemisinin Etkileri



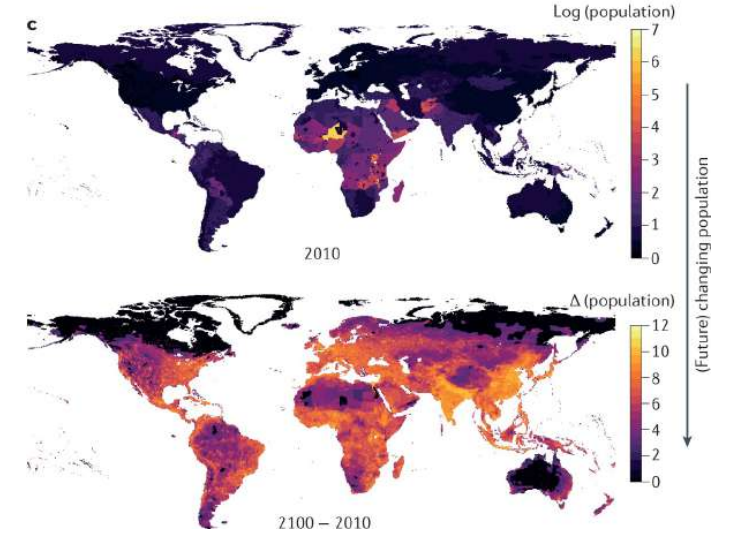
Şehirleşme, seyahat ve iklim değişikliği



Sıcaklık Değişikliği



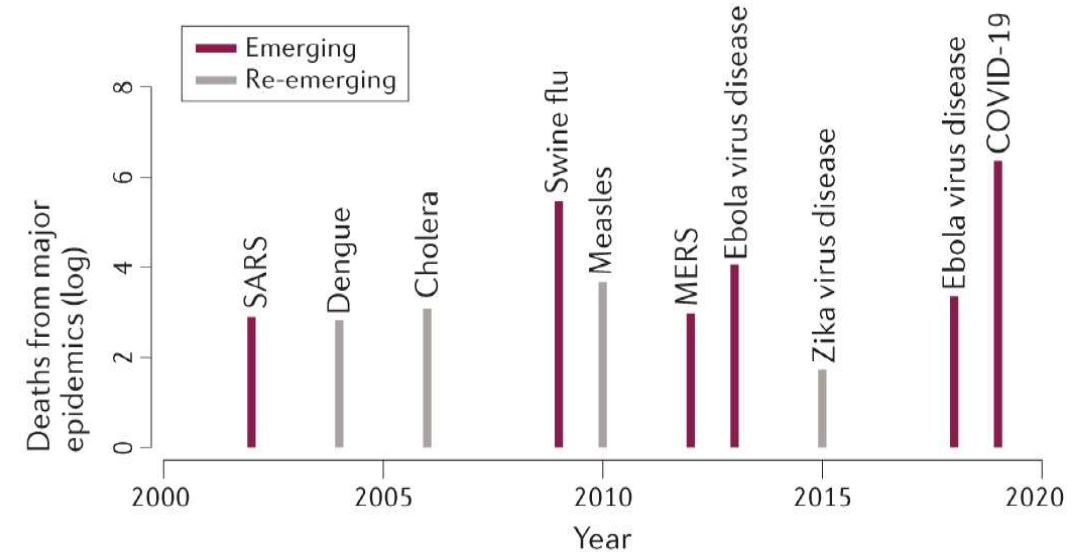
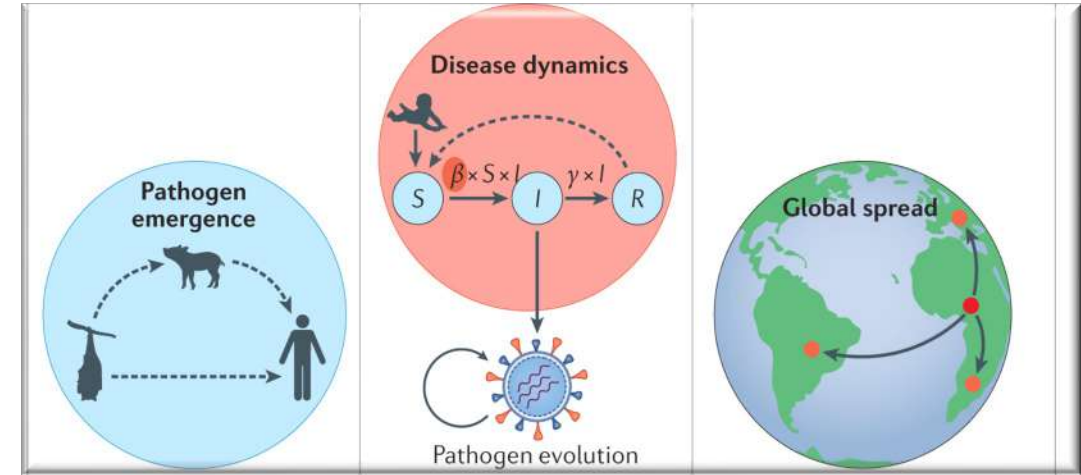
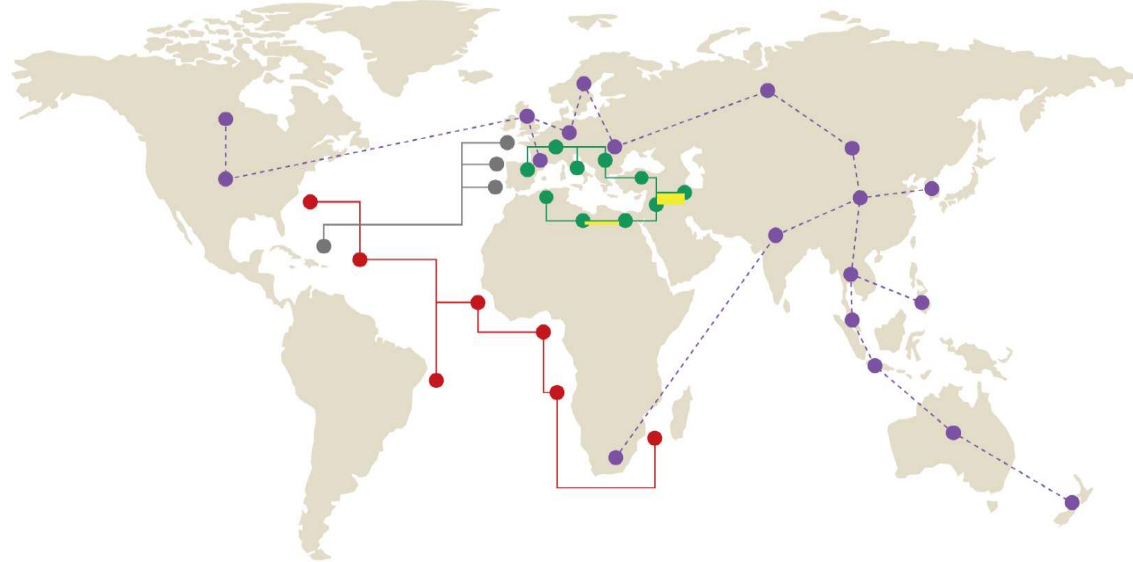
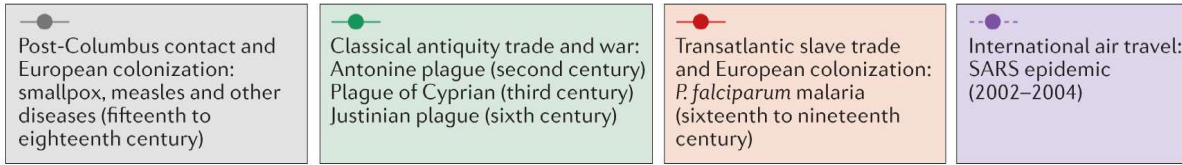
Nüfus değişikliği



Şehirleşme artıyor Seyahatler artıyor Sıcaklıklar artıyor

Küresel Değişim Çağında Enfeksiyon Hastalıkları

a



Yeni COVID19 Pandemileri Olabilir mi

1. Bilimsel Evrim

- Büyük Verilerle çalışmak
- Serolojik Surveyans
- Genomik Surveyans
- AI ve matematik modelleme

2. Erken Tanımlama

- Etkin Enfeksiyon Kontrol

Çevresel Örneklerin Taranması

- İç ortam hava
- Atık su
- Kritik yüzeyler

Klinik veya Çevresel Örnekler ile Sürveyans

Klinik Tarama Testleri

Hasta bireyleri saptar

Yorum için çok sayıda örnek gerekir, pahalı

Yalnız semptomatik kişilerden toplanır, asemptomatik vakaları yakalamaz

Gönüllü gerekli, etik izinler

Test güvenirliliği daha yüksek

Salgınlar geç farkedilir

Çevresel Örneklerin Taranması

Toplum düzeyinde salgınlarının mekansal ve zamansal eğilimlerini ve zirvelerini gösterir

Tek örnek tüm toplum bilgisini verebilir, nispeten ucuz

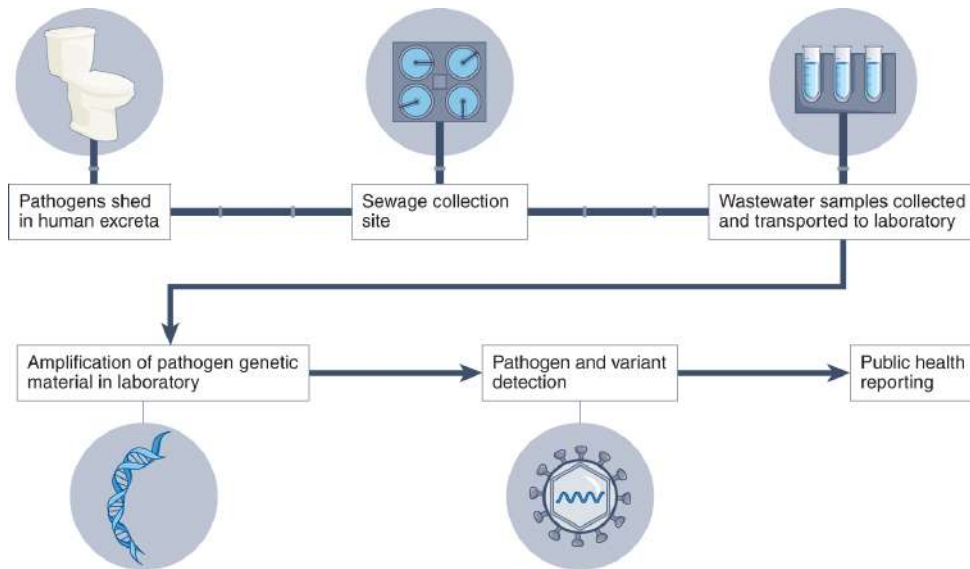
Virüs partikülleri saçan tüm enfekte bireyleri (semptomatik, asemptomatik pre-semptomatik ve post-semptomatik vakalar) hedefler.

Gönüllü gerekli değil


False negatif ve false pozitif veriler

Salgınlara erken tanınması olasıdır


Atık Su Bilimi



Diamond, M.B., Keshaviah, A., Bento, A.I. et al. . *Nat Med* (2022).



The Lancet Infectious Diseases
Volume 15, Issue 10, October 2015, Pages 1236-1242



Personal View

The Israeli public health response to wild poliovirus importation

PERSPECTIVES
Silent reintroduction of wild-type poliovirus to Israel, 2013 – risk communication challenges in an argumentative atmosphere

E Kaliner (ehud.kaliner@moh.health.gov.il)¹, **J Moran-Gilad**^{2*}, **I Grotto**^{3*}, **E Somekh**^{4*}, **E Kopel**⁵, **M Gdalevich**^{1,5}, **E Shimron**⁶, **Y Amikam**⁶, **A Leventhal**¹, **B Lev**¹, **R Gamzu**^{6*}

1. Public Health Services, Ministry of Health, Jerusalem, Israel
 2. Faculty for Health Sciences, Ben-Gurion University of the Negev, Beer-Sheva, Israel
 3. Paediatric Infectious Diseases, Wolfson Medical Center, Holon, Israel
 4. Sackler Faculty of Medicine, Tel-Aviv University, Tel Aviv, Israel
 5. South District Health Office, Ministry of Health, Beer Sheva, Israel
 6. Ministry of Health, Jerusalem, Israel

Phase 1: population risk analysis	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	June to August, 2013
Phase 2: pathogen risk analysis	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	June to August, 2013
Phase 3: determining the viral transmission epicentre	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	June, 2013, to January, 2014
Phase 4: pinpointing reservoir of infected individuals for intervention planning	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	June, 2013, to January, 2014
Phase 5: emergency response and intervention	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	June, 2013, to January, 2014
Phase 6: intervention effectiveness evaluation	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	September, 2013, to July, 2014
Phase 7: verification of transmission interruption	<div style="background-color: #6a3d9a; height: 15px; width: 100%;"></div>	January to September, 2014

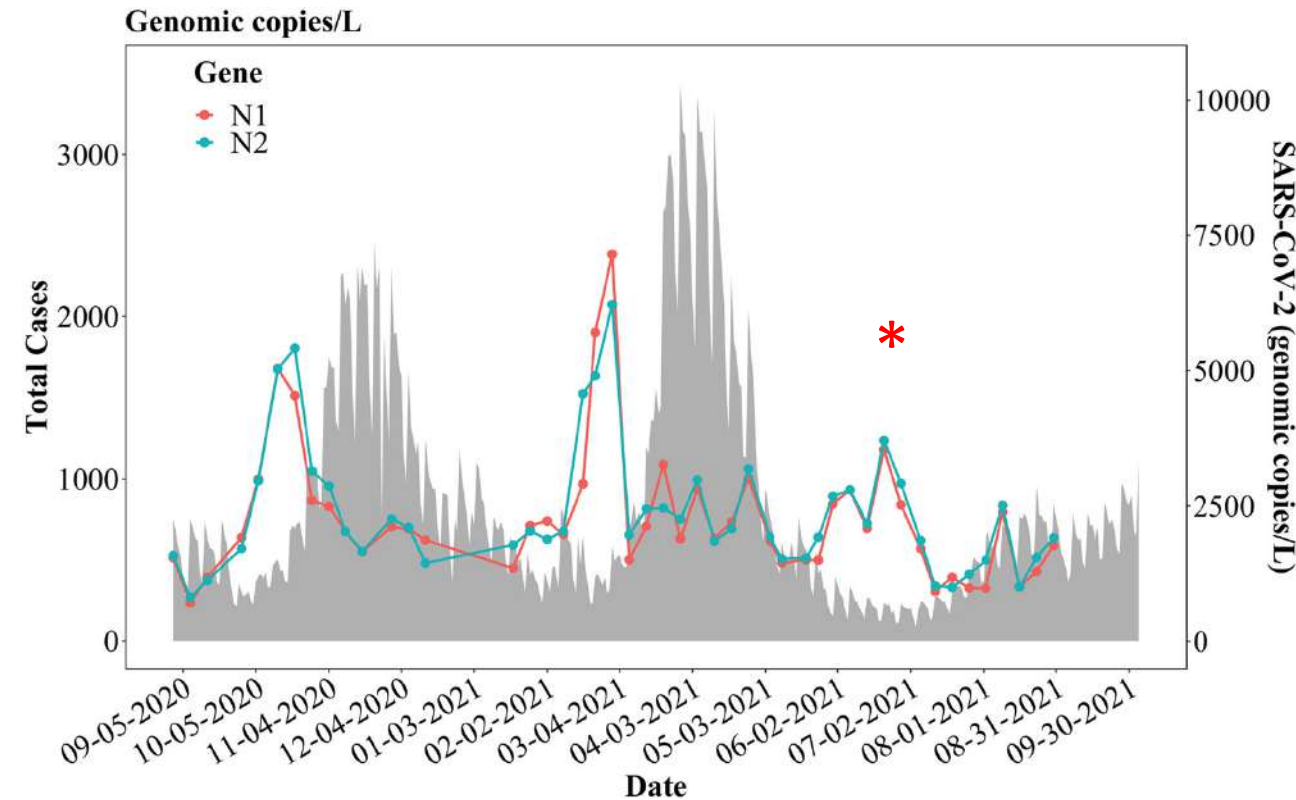
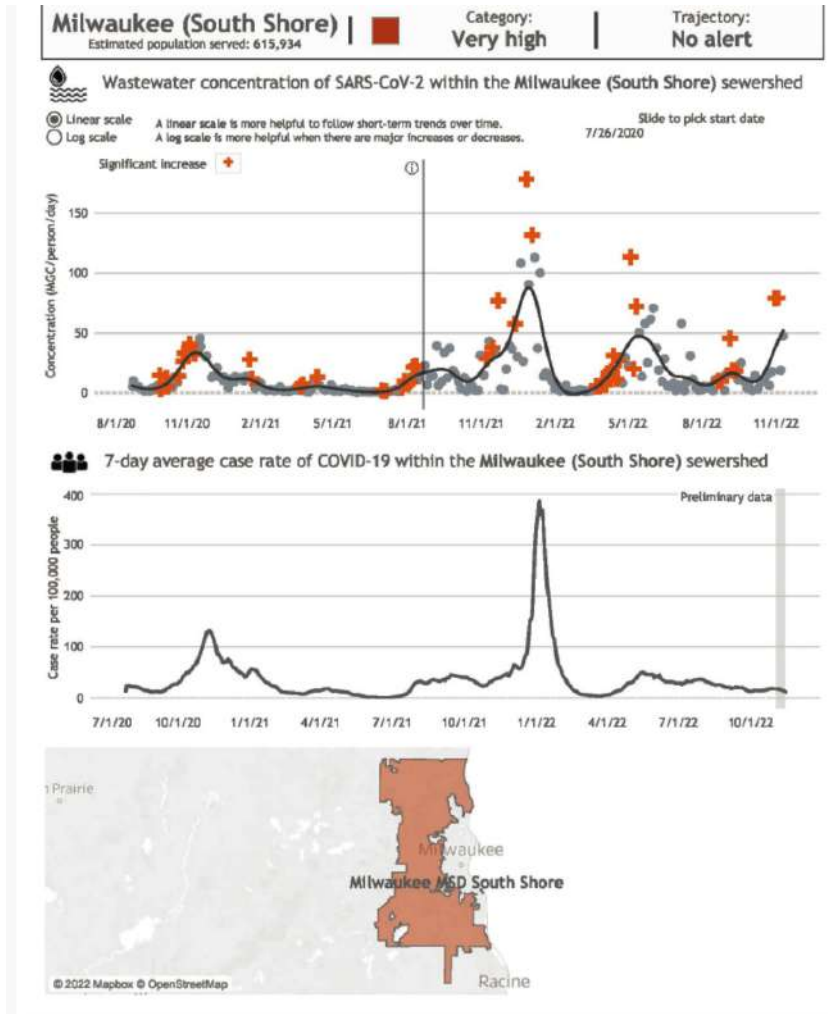
May 28, 2013: first detection of silent WPV1 transmission
Aug 5, 2013: South District first bOPV SIA
Aug 18, 2013: national bOPV SIA
Oct 7, 2013: South District second bOPV SIA
Jan 1, 2014: supplementary two-dose bOPV added to routine vaccine programme
April 3, 2014: last WPV1-positive site became WPV1-negative
April 28, 2015: recertification of Israel as polio free

CoVID-19 Atik Su Surveyans



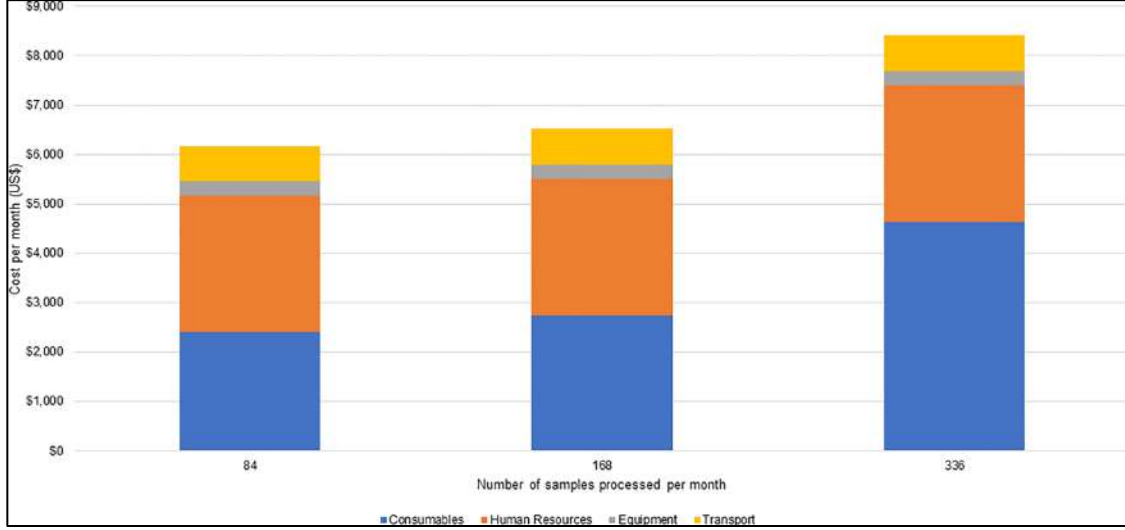
Five-week warning of COVID-19 peaks prior to the Omicron surge in Detroit, Michigan using wastewater surveillance

Liang Zhao ^a, Yangyang Zou ^a, Yabing Li ^a, Brijen Miyani ^a, Maddie Spooner ^a, Zachary Gentry ^a, Sydney Jacobi ^a, Randy E. David ^b, Scott Withington ^b, Stacey McFarlane ^c, Russell Faust ^d, Johnathon Sheets ^e, Andrew Kaye ^e, James Broz ^e, Anil Gosine ^f, Palencia Mobley ^f, Andrea W.U. Busch ^g, John Norton ^g, Irene Xagorarakis ^a

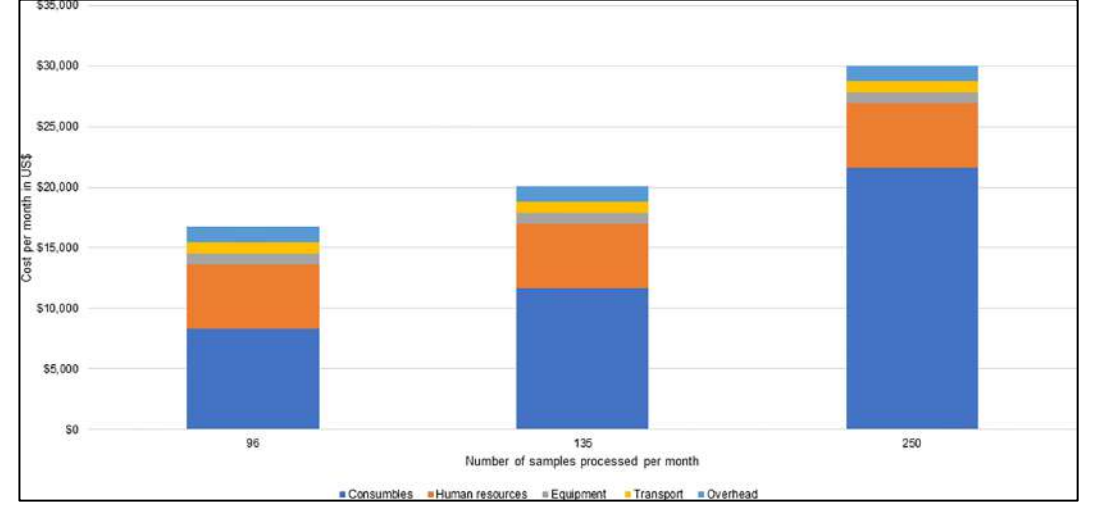


Atık Su Sürveyans Taramasının Maliyeti

Malawi, Katmandu ve Nepal



Blantyre



Nepal

Bölgede kişi başı maliyet: \$0.07 - \$0.13.

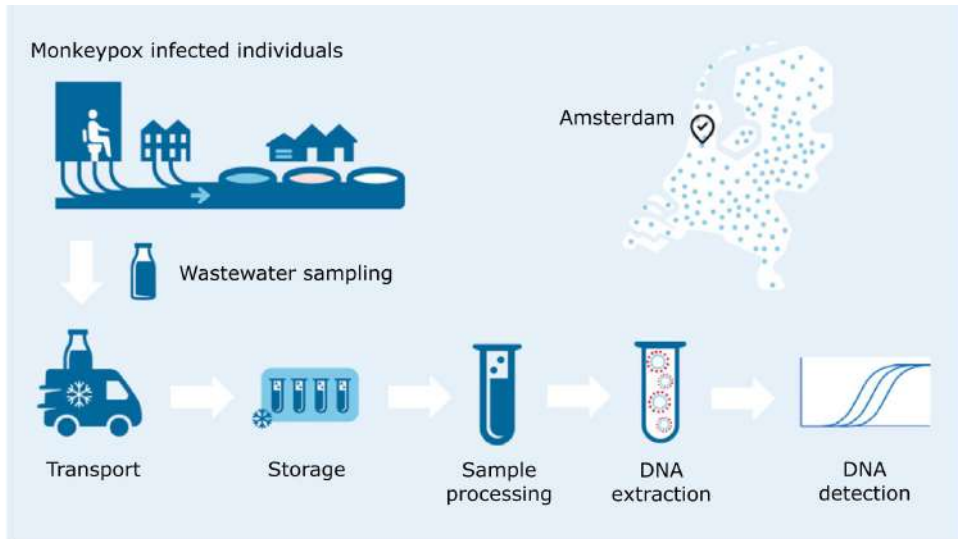
İstanbul için yıllık maliyet: 1.6 milyon dolar



The detection of monkeypox virus DNA in wastewater samples in the Netherlands

Eline F. de Jonge, Céline M. Peterse, Jaap M. Koelewijn, Anne-Merel R. van der Drift, Rudolf F.H.J. van der Beek, Erwin Nagelkerke, Willemijn J. Lodder*

Centre for Infectious Disease Control, National Institute for Public Health and the Environment (RIVM), Bilthoven, the Netherlands



- Atık su surveyans çalışması ile viral salgın riski erken tanımlanabilir
- Bölgesel yoğunluklar izlenebilir

Table 1

Monkeypox virus DNA detection in the wastewater samples taken at different locations from 16 May-3 July 2022 ($n = 108$). Shown are the average Ct values of the generic and the West-African specific assay, respectively.

	Date	WWTP Amsterdam Westpoort		WWTP Amsterdam West				Schiphol Airport	
		CD-1 64,000 ^a	WWTP 310,762	CD-2 16,000	CD-3 49,000	CD-4 118,000	CD-5 121,000	WWTP 648,560	WWTP. ^c
Week 20	16 May		n.d.					n.d.	
	17 May		n.d.					n.d.	n.d.
	18 May	n.d.		n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
	19 May								
	20 May		n.d.					n.d.	
Week 21	21 May								
	22 May								38.1/39.4
	23 May		n.d.					n.d.	n.d.
	24 May								n.d.
	25 May	n.d.		n.d.	n.d.	n.d.	n.d.		
Week 22	26 May								
	27 May		n.d.					n.d.	
	28 May		n.d.						
	29 May								38.1/37.4
	30 May		38.8/39.6						n.d.
Week 23	31 May		n.d.						39.0/38.0
	1 Jun	n.d.	41.8 ^b /42.1 ^b	n.d.	n.d.	n.d.	42.9/42.4	39.5/39.9	
	2 Jun							39.3/39.2	
	3 Jun		39.1/37.4					40.2/39.3	
	4 Jun							38.7/38.3	n.d.
Week 24	5 Jun								n.d.
	6 Jun		38.2/37.4					n.d.	n.d.
	7 Jun								
	8 Jun	n.d.	40.6/38.2	n.d.	39.8/39.2	n.d.	n.d.	n.d.	n.d.
	9 Jun		38.6/37.6						n.d.
Week 25	10 Jun		40.3/38.6					39.0/39.2	n.d.
	11 Jun							38.9/39.1	n.d.
	12 Jun								
	13 Jun		36.5/36.1					n.d.	n.d.
	14 Jun		39.8/38.0					40.0/39.0	n.d.
Week 26	15 Jun	n.d.	n.d.	40.6/40.5	37.0/37.0	40.0/37.9	39.0/37.9	39.1/38.4	n.d.
	16 Jun								
	17 Jun		n.d.					n.d.	
	18 Jun								
	19 Jun								40.1/39.5
Week 27	20 Jun		38.8/38.7						n.d.
	21 Jun		37.7/37.7					39.7/40.9	n.d.
	22 Jun	40.9/41.4	35.9/36.6	n.d.	n.d.	39.1/39.8	35.7/35.8	39.3/38.6	n.d.
	23 Jun								
	24 Jun		n.d.					42.1/41.4	n.d.
Week 28	25 Jun							n.d.	n.d.
	26 Jun								
	27 Jun		n.d.					39.5/38.9	
	28 Jun		n.d.					38.6/38.3	39.8/38.2
	29 Jun	n.d.	n.d.	n.d.	n.d.	39.4/38.8	39.6/39.6	41.0/40.5	n.d.
Week 29	30 Jun								
	1 Jul		40.6/39.4					40.8/40.7	
	2 Jul								
	3 Jul								37.9/38.4
Total	7	26	7	7	7	7	24	23	

CD: Amsterdam city district; n.d.: sample tested, monkeypox virus DNA not detected.

^a The number of inhabitants connected to each sampling location.

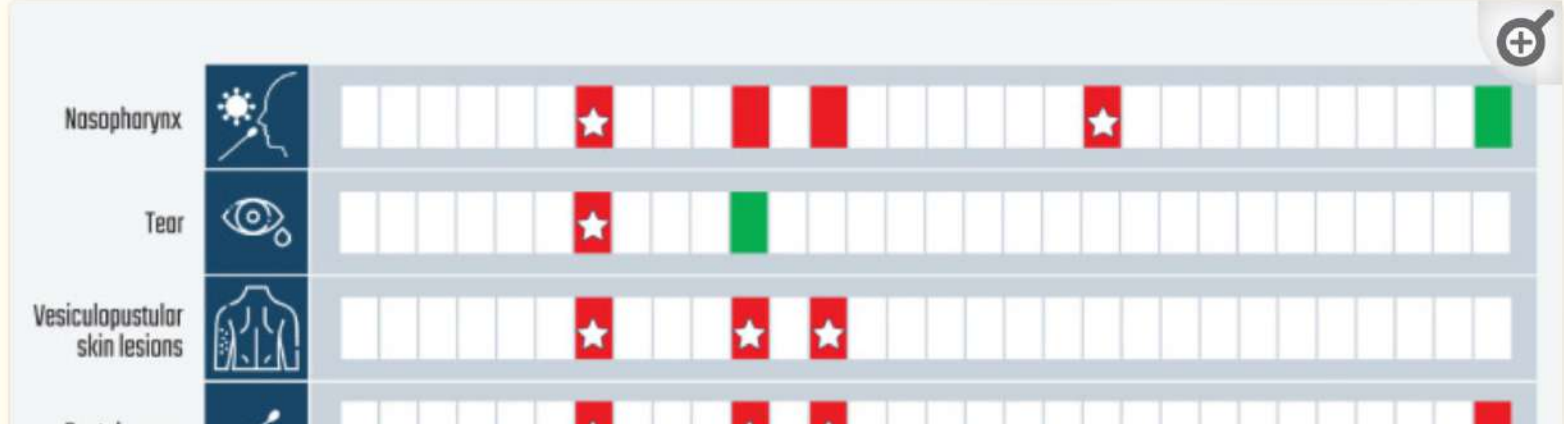
^b Results from the 10-times diluted sample when the undiluted sample yielded no result.

^c No number of inhabitants is associated with the WWTP of Schiphol Airport since it has no permanent inhabitants.

A complicated case

Mahir Kapmaz,^{a,b} Derya Şiran Keske,^{a,b} Mert Kuş

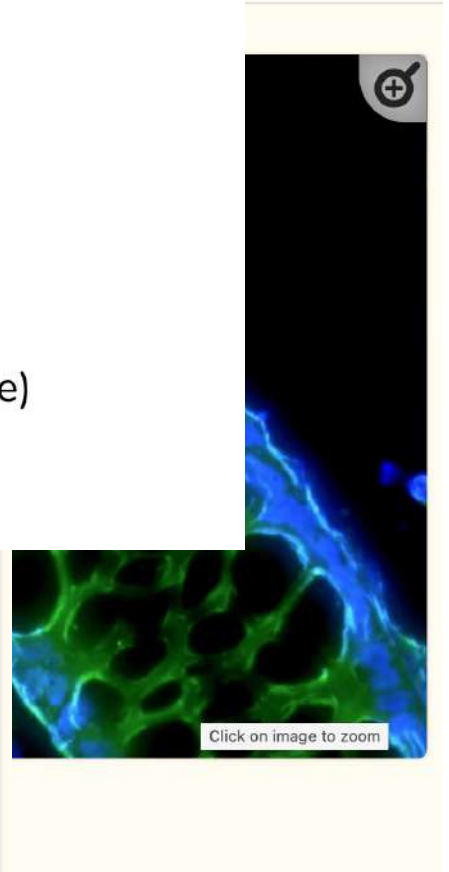
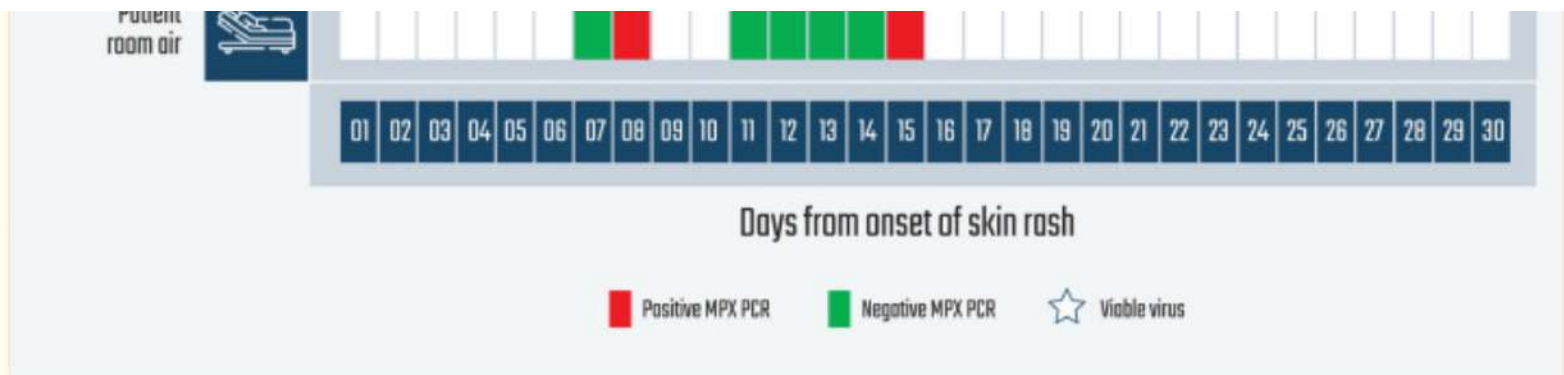
▶ Author



Personal Protective Equipment (PPE)

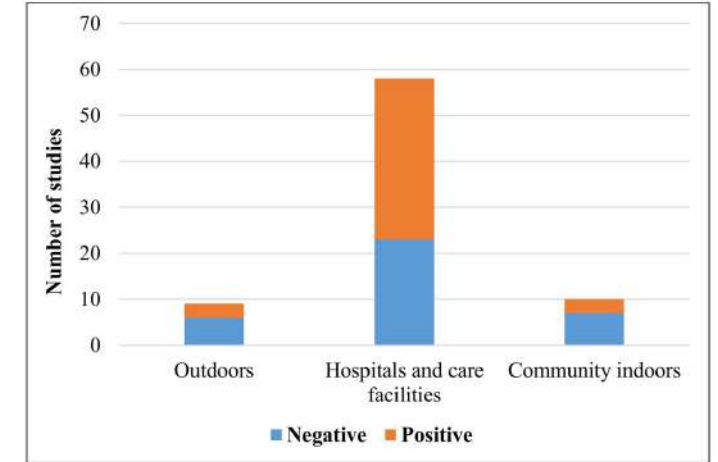
PPE used by healthcare personnel who enter the patient's room should include:

- Gown
- Gloves
- Eye protection (i.e., goggles or a face shield that covers the front and sides of the face)
- NIOSH-approved particulate respirator equipped with N95 filters or higher



A review on measurements of SARS-CoV-2 genetic material in air in outdoor and indoor environments: Implication for airborne transmission

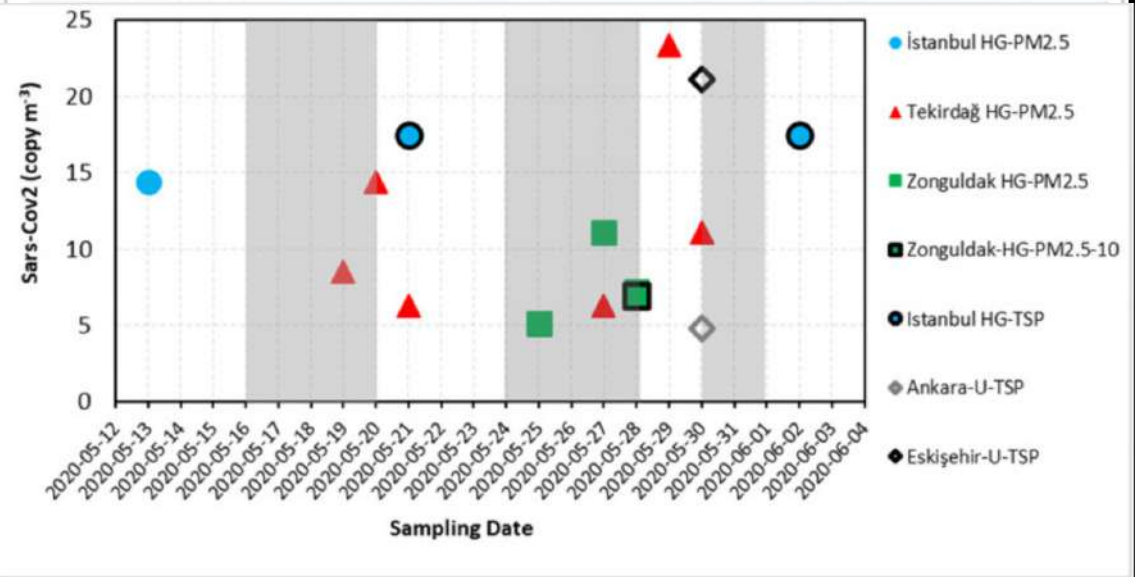
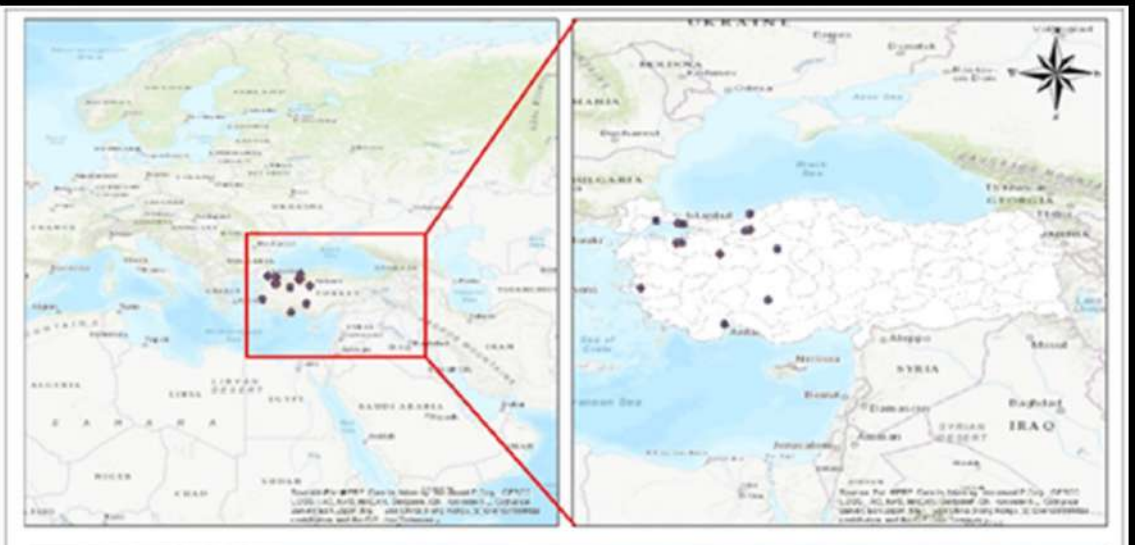
Adelaide Dini^a, Matteo Feltracco^{b,c}, Daniela Chirizzi^d, Sara Trabucco^e, Marianna Conte^{a,f}, Elena Gregoris^{b,c}, Elena Barbaro^{b,c}, Gianfranco La Bella^d, Giuseppina Ciccacese^d, Franco Belosi^e, Giovanna La Salandra^d, Andrea Gambaro^c, Daniele Contini^a



En yüksek hastane iç ortam
Hava toplama sistemi önemli

Existence of SARS-CoV-2 RNA on ambient particulate matter samples: A nationwide study in Turkey

- 13 Mayıs-14 haziran 2020 203 hava örneği
- RT PCR: RdRp ve N1 gen hedefleri
- Pozitiflik %9.8



Omicron Positivity in Air of Hospital Settings Gathered COVID-19 Patients, Vaccinated/Unvaccinated Populations

Zeynep Ece Kuloğlu^{1,2}, Zeynep Bengi Eren^{3*}, Bedirhan Haykar^{3*},
Cansel Vatansever², Tayfun Barlas², Mert Ahmet Kuskucu^{2,4},
Gülen Güney-Esken², Füsün Can^{2,5*}

¹ Koc University School of Medicine, Graduate School of Health Sciences, Istanbul, Turkey
² Koc University IsBank Research Center for Infectious Diseases (KUISCID), Istanbul, Turkey
³ Koc University School of Medicine, Istanbul, Turkey
⁴ Department of Medical Microbiology, Cerrahpasa School of Medicine, Istanbul, Turkey
⁵ Department of Medical Microbiology, Koc University School of Medicine, Istanbul, Turkey

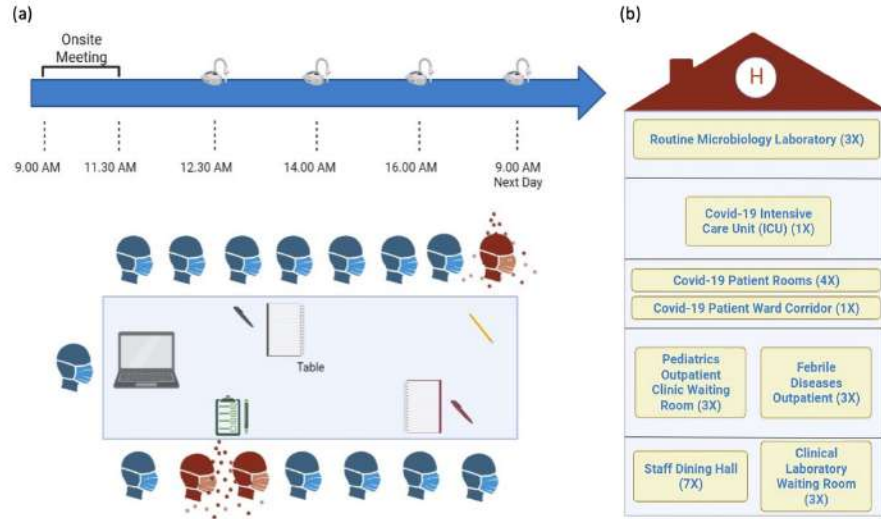
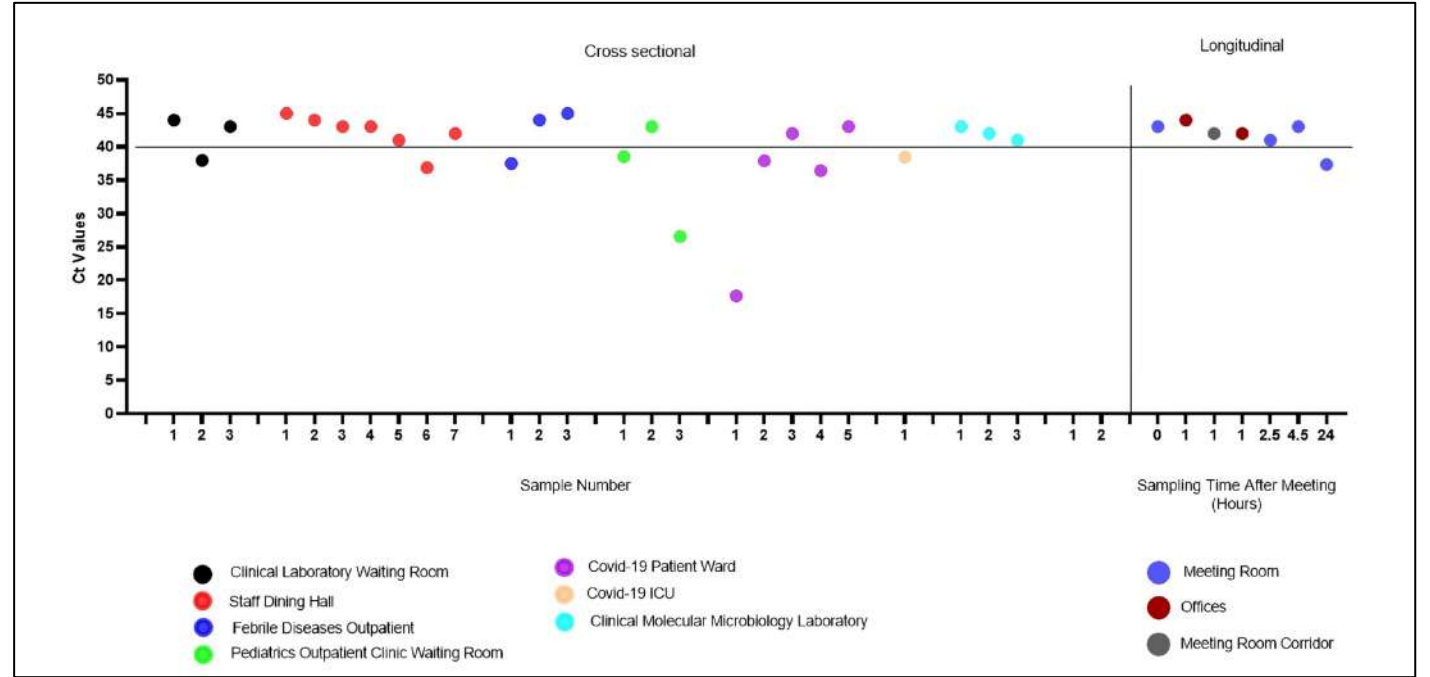


Fig. 1. (a) Distribution of COVID-19 positive participants during the onsite meeting and timings. (b) The cross-sectional sampling areas in the hospital. A central air conditioning system was active in each section.



En yüksek pozitiflik:

- COVID-19 hasta odaları
- Pediatri polikliniği
- Enfeksiyon hastalıkları poliklinik bekleme alanı

Surveillance of respiratory viruses by aerosol screening in indoor air as an early warning system for epidemics

Zeynep Bengi Eren¹, Cansel Vatansver², Berk Kabadayı¹, Bedirhan Haykar¹, Zeynep Ece Kuloğlu^{2,3}, Sedat Ay¹, Kamila Nurlybayeva¹, Gül Eyi kudamacı^{2,3}, Tayfun Barlas², Erhan Palaoğlu⁴, Yeşim Beşli⁴, Mert Ahmet Kuşucu^{2,5}, Önder Ergönül^{2,6}, Fusun Can^{2,5}

Affiliations + expand
PMID: 38982659 PMCID: PMC11233404 DOI: 10.1111/1758-2229.13303

N=276,
17 Ekim 2022, 3 Mart 2023, iç ortam hava
Pozitiflik

- Kampüs %55
- Hastane %38

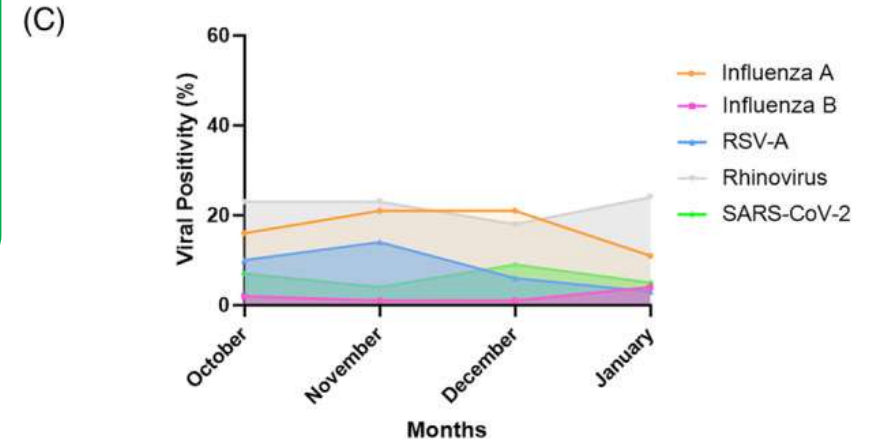
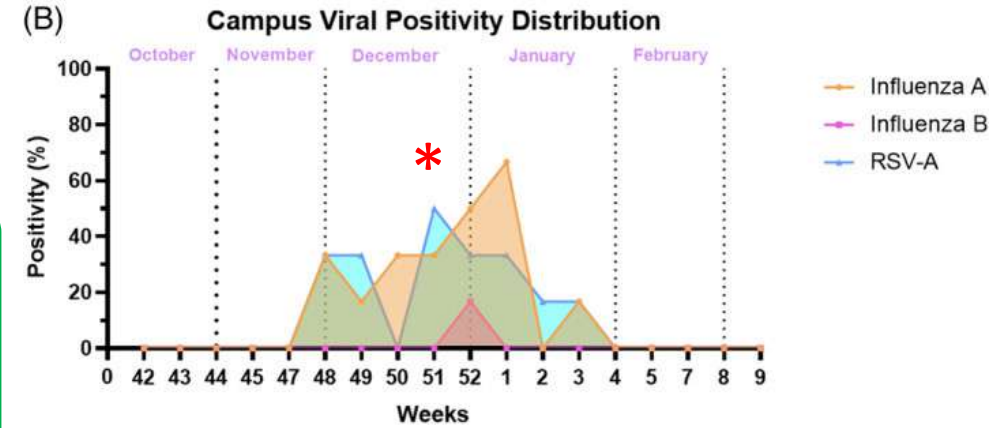
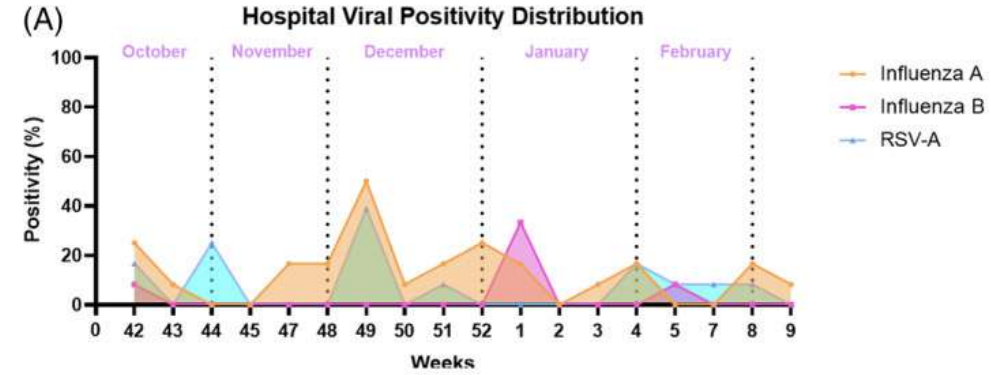
TABLE 1 The positivity of respiratory viruses in indoor air of different areas in campus and hospital.

Main area	Locations	Total positivity (%)	Influenza A positivity (%)	RSV-A positivity (%)	SARS-CoV-2 positivity (%)	Influenza B positivity (%)	Human rhinovirus RNA positivity (%)	Mean, C _t	Room temp.	Mask use ^a	Crowding index ^b
Campus	University student social centre	13.00% (13/100)	30.00% (6/20)	30.00% (6/20)	0.00%	5.00% (1/20)	0.00%	32,835	23.5	No	0.02387775
	University dining hall	11.00% (11/100)	25.00% (5/20)	30.00% (6/20)	0.00%	0.00%	0.00%	32,28	23.5	No	0.02970297
	Medical student classroom	5.00% (5/100)	20.00% (4/20)	5.00% (1/20)	0.00%	0.00%	0.00%	34,402	22.5	No	0.0494382
Hospital	Radiology patient waiting room	8.30% (15/180)	22.20% (8/36)	8.30% (3/36)	2.80% (1/36)	5.60% (2/36)	2.80% (1/36)	34,67	22.1	Yes	0.22962963
	Staff dining hall	6.60% (12/180)	11.10% (4/36)	13.90% (5/36)	8.30% (3/36)	0.00%	0.00%	31,428	22.1	No	0.25806452
	Clinical laboratory patient waiting room	6.10% (11/180)	13.90% (5/36)	8.30% (3/36)	2.80% (1/36)	2.80% (1/36)	2.80% (1/36)	31,382	22.1	Yes	0.18253968
	Student office	4.40% (8/180)	16.70% (6/36)	2.80% (1/36)	0.00%	2.80% (1/36)	0.00%	34,562	22.1	No	0.03162055
	Paediatrics outpatient clinic waiting room	3.30% (6/180)	8.30% (3/36)	5.60% (2/36)	0.00%	2.80% (1/36)	0.00%	32,907	22.1	Yes	0.09545455
	Ear nose throat patient waiting room	1.70% (3/180)	2.80% (1/36)	5.60% (2/36)	0.00%	0.00%	0.00%	33,582	22.1	Yes	0.1080402

Note: Colour shade represents the positivity ratio rates. Hence, darker regions show a higher positivity compared to lighter shaded regions.

^aThe Turkish Ministry of Health has announced the end of mask requirements in all closed areas, except public transportation and healthcare institutions starting 27 April 2022.

^bThe crowding index was calculated by the average number of people divided by the volume (m³).



Rhinovirus???

Çevresel Örnekler ile Sürveyans

- Eş zamanlı moitorizasyona olanak sağlıyor,
- Virüs tip ve varyantları tesbit edilebiliyor,
- Erken uyarı sistemi olarak kullanılabilir,

- Ancak,
- Deneyimli ekip ve laboratuvar gerektiriyor
- Teknik validasyon önemli
- Lokal ve merkezi yönetimlerin desteği gerekli

Teşekkürler.....