

# Zebrafish as an infectious disease model: The *Mycobacterium marinum* case

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## Introduction

**Zebrafish** (*Danio rerio*) is a **multifaceted** animal model that is lately and increasingly being used to study human diseases such as **infections** [1,2]. One of those is **tuberculosis**, which is particularly interesting, because in zebrafish it is studied using its natural pathogen, *Mycobacterium marinum* [3]. In order to become familiar with the zebrafish model and have a closer approach to the zebrafish model a few examples of its applications are shown next.

## Infecting Zebrafish

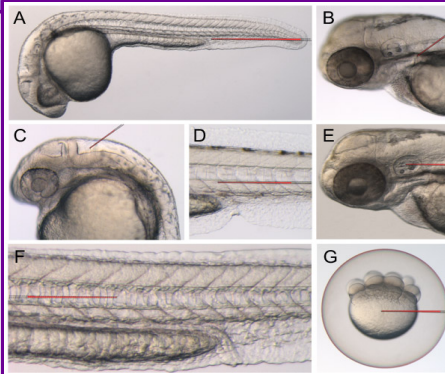


Figure 1. Overview of injection methods used to establish systemic or local infections in zebrafish embryos [4].

**Intravenous injections** to establish a rapid systemic infection are performed into:

- The **caudal vein** at posterior blood island at 1 dpf (Figure 1A).
- The **Duct of Cuvier** at 2-3 dpf (Figure 1B).

**Local injections** to study macrophage and neutrophil chemotaxis are performed into:

- The **hindbrain ventricle** at 1 dpf (Figure 1C).
- The **tail muscle** at 1-2 dpf (Figure 1D).
- The **otic vesicle** at 2-3 dpf (Figure 1E).
- The **notochord** at 1-2 dpf, which is inaccessible to phagocytes (Figure 1F).

To create an early systemic infection with slow growing bacteria can be performed into the **yolk** at 16-1000 cell stage (Figure 1G) [4]

## Granuloma formation in Zebrafish

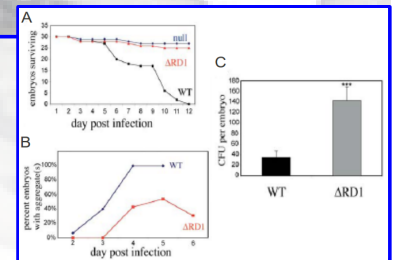
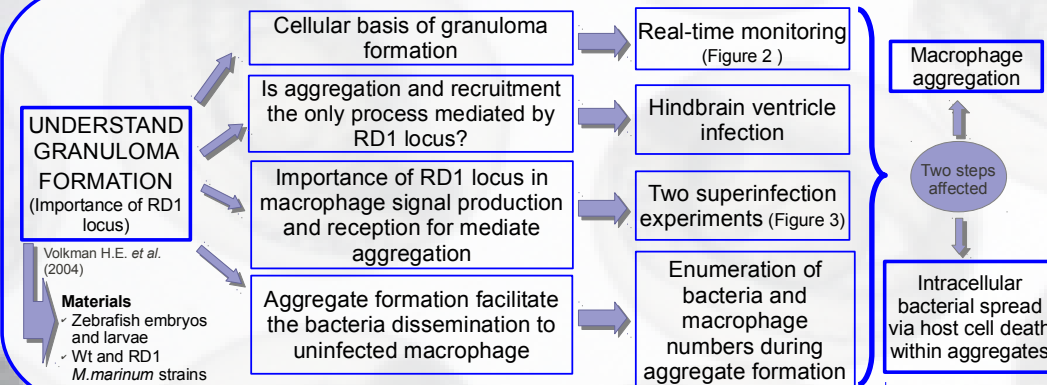


Figure 2. Real-time monitoring. Survival of embryos infected with  $\Delta$ RD1 or wt or non infected (A). Whole embryo bacterial counts of wt and  $\Delta$ RD1 infected embryos (B). Whole embryo bacterial counts of wt and  $\Delta$ RD1 infected embryos on day of aggregate formation [5].

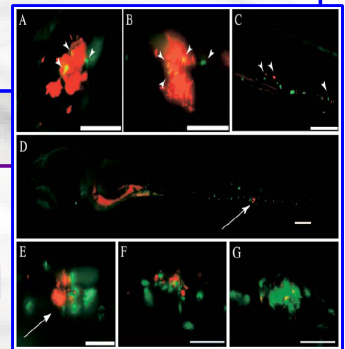
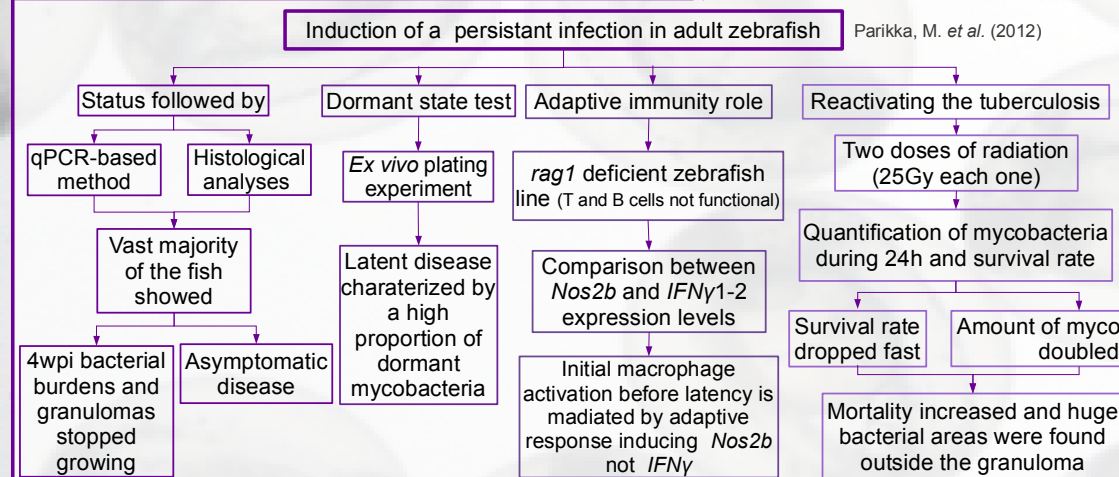


Figure 3. Superinfection with wt bacteria  $\Delta$ RD1 aggregation defect. Embryos with red-labelled aggregates are shown 4h after superinfection with green-fluorescent strains of  $\Delta$ RD1 (A) or wt (B) and followed for 24h post-secondary infection. (C) Embryo infected with green-fluorescent  $\Delta$ RD1 and then (D) infected with red-fluorescent wt. (E, F and G) Higher magnification of superinfections. Scale bar, 200μm [5].

## Latency, dormancy and reactivation studies in zebrafish



- References**
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  2. Meijer A.H., et al. 2001. Host-pathogen interactions made transparent with the zebrafish model 12: 1000-1017.
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  5. Volkman H.E., et al. 2004. Tuberculous granuloma formation is enhanced by *Mycobacterium* virulence determinant 2: 1046-1056.
  6. Berg R.D., et al. 2012. Insights into tuberculosis from the zebrafish model 18: 689-690
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## Advantages

- ✓ Optical transparency during embryonal and larval stages [2].
- ✓ The immune system matures at different stages [1,2].
- ✓ Relatively resistant to acute adverse effects caused by irradiation [3].
- ✓ A single pair of fish can have hundreds of progeny every week [2].
- ✓ Increasing availability of transgenic lines with immunity cell fluorescently labelled [6].

Great possibilities for *in vivo* imaging

## Disadvantages

- ✓ Some pathogens cannot be studied at zebrafish maintained temperature, 28°C [7].
- ✓ Lack of monoclonal antibodies to surface antigens of zebrafish immune cells [7].
- ✓ Comparing and validating human infection models can be difficult due to the unknown characteristics of zebrafish immune system [7].
- ✓ The maintenance of zebrafish requires a significant commitment of funds and personnel [8].

## Conclusions and Future prospects

- ✓ Zebrafish has made possible to reproduce the hallmarks of host-pathogen interactions.
- ✓ The model advantages can be critical points during the process of choosing the animal model.
- ✓ Immune system needs to be fully studied.
- ✓ The characterization of similarities and differences between zebrafish and mammalian immune system need to be complete.
- ✓ Zebrafish future in drug and inflammatory disease research is bright [2].