



Virology for 2nd Year MD Students

(02) Virus Classification, Replication & Pathogenesis

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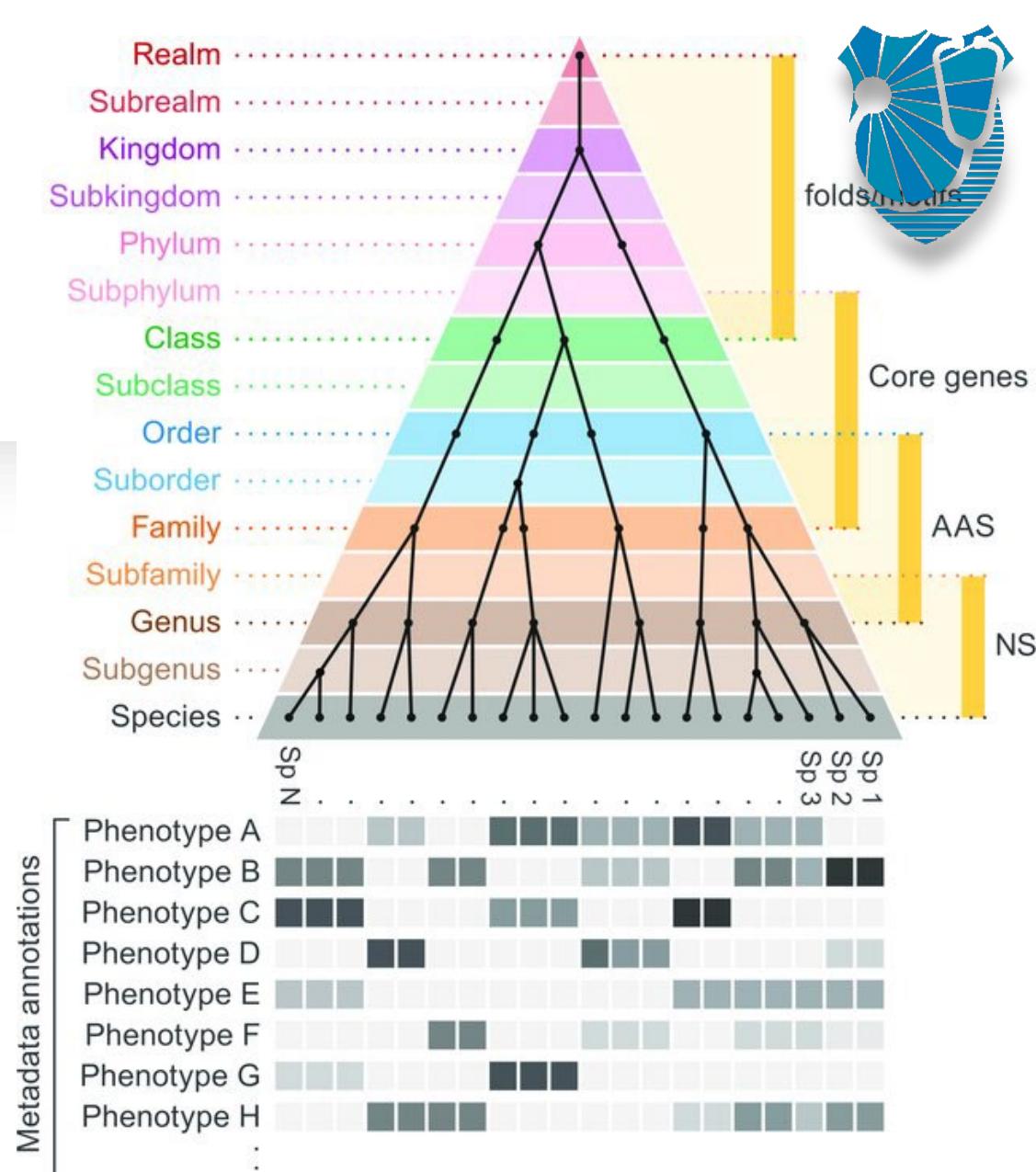
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Virus Classification

- Classification of viruses can be based on shared features:
 - Virus family (the name ends in viridae). Example: Coronaviruses are classified in the family **Coronaviridae**.
 - Virus sub-family (the name ends in ^{virinae}). Example: SARS coronavirus 2 is classified in the subfamily **Orthocoronavirinae**.
 - Virus genus (the name ends in virus). Example: monkeypox virus is classified in the **Orthopoxvirus** genus.



Source: Simmonds P, Adriaenssens EM, Zerbini FM, Abrescia NGA, Aiewsakun P, et al. (2023) Four principles to establish a universal virus taxonomy. *PLOS Biology* 21(2): e3001922. <https://doi.org/10.1371/journal.pbio.3001922>

Old (historical) classification methods

- ① Host preference (animal, plant, insects, human)
- ② Target organ (Respiratory, Liver, GI, etc)
- ③ Vector transmission (Arboviruses)

عن طريف كانت صي مثل البعوض ثم القراد

شرح د. محمد التميمي

These old methods were problematic, why?

1. Overlapping (Some Virus can be in many groups)
2. Inconsistent (Not accurate) phage - caine -

Modern classification

1. Molecular biology of the genome DNA / RNA, single/double strand
2. Biophysical structure lipoproteins, nucleoproteins, capsid, viral envelope

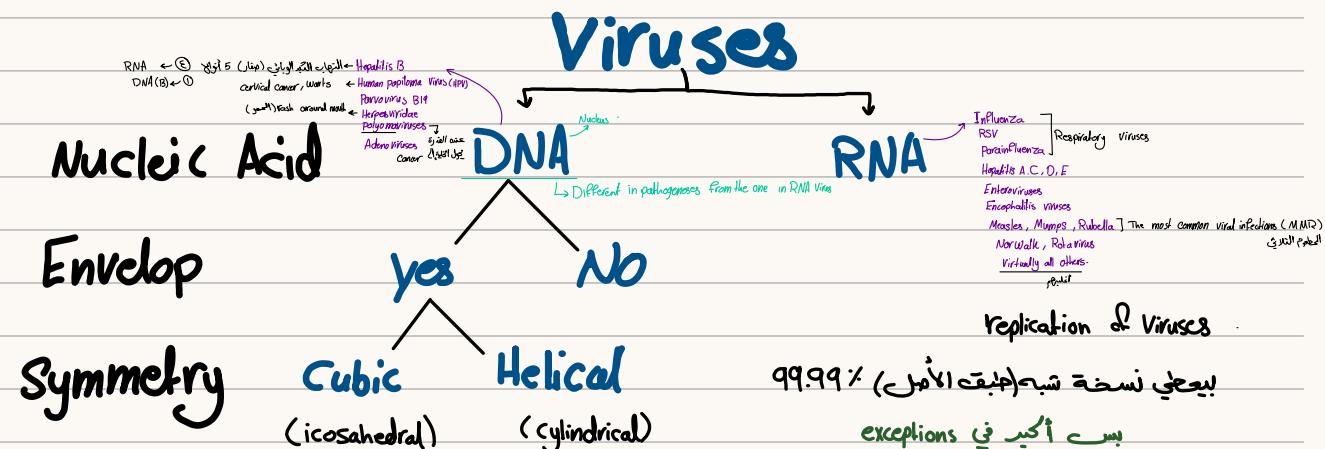
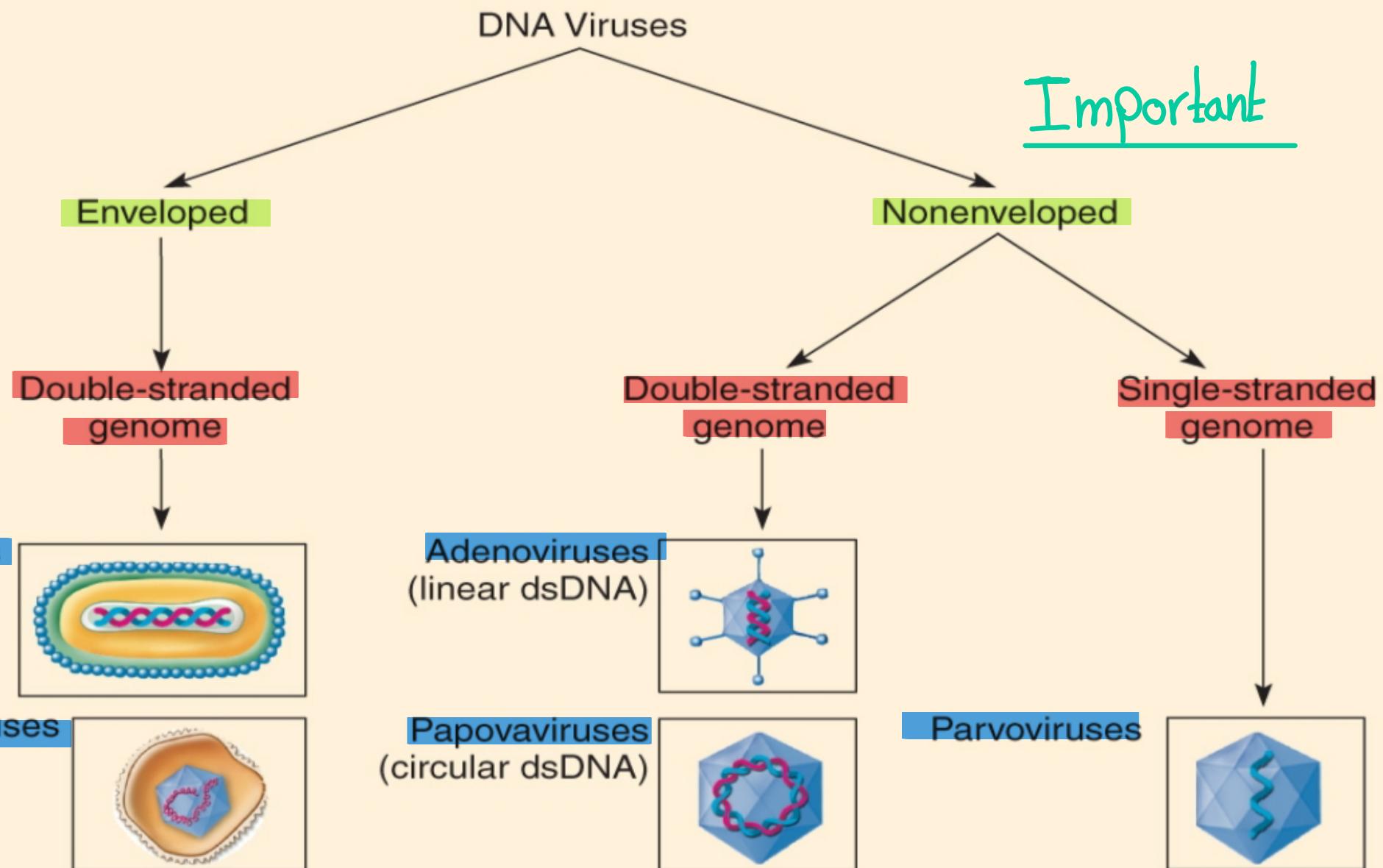


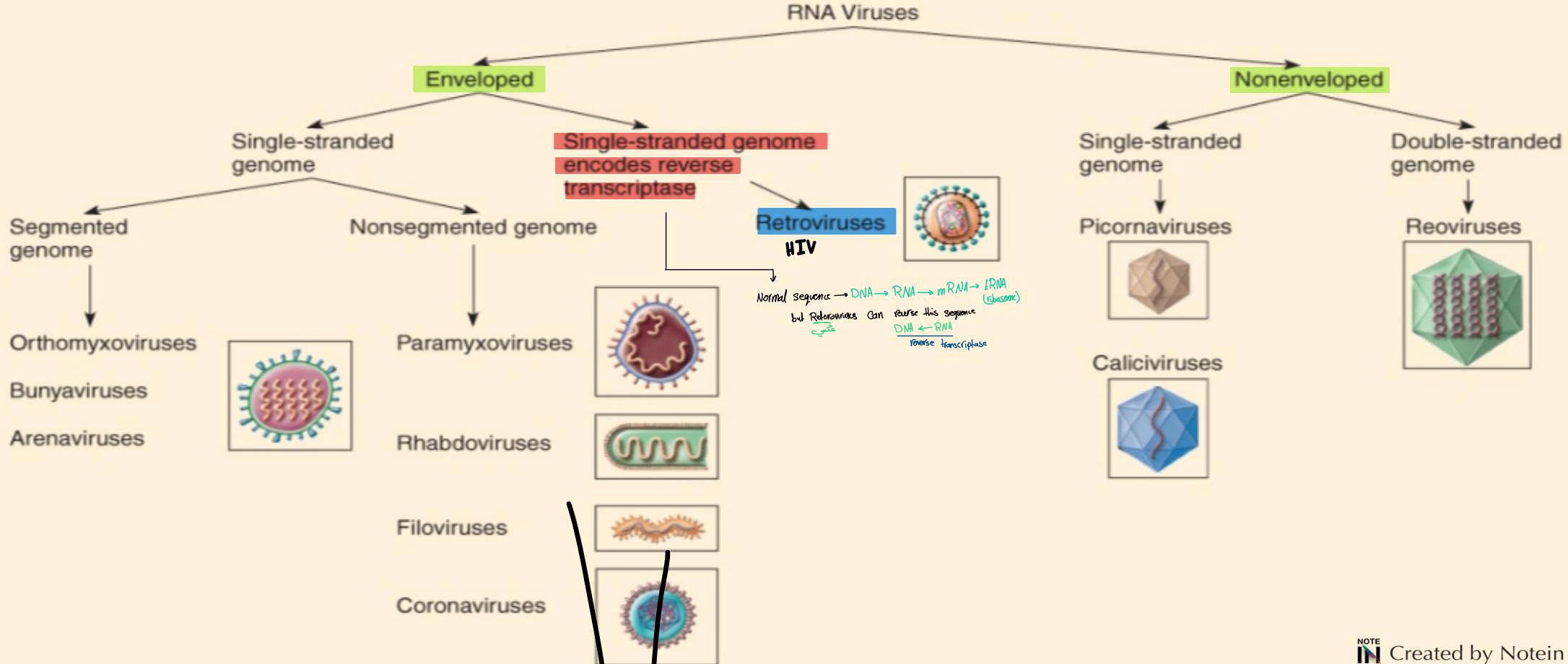
TABLE 6.2**Medically Relevant DNA Virus Groups**

Double Strand → replication Jeudi



Source: Adapted from: *Poxviridae* from Buller et al., National Institute of Allergy & Infectious Disease, Department of Health & Human Services.

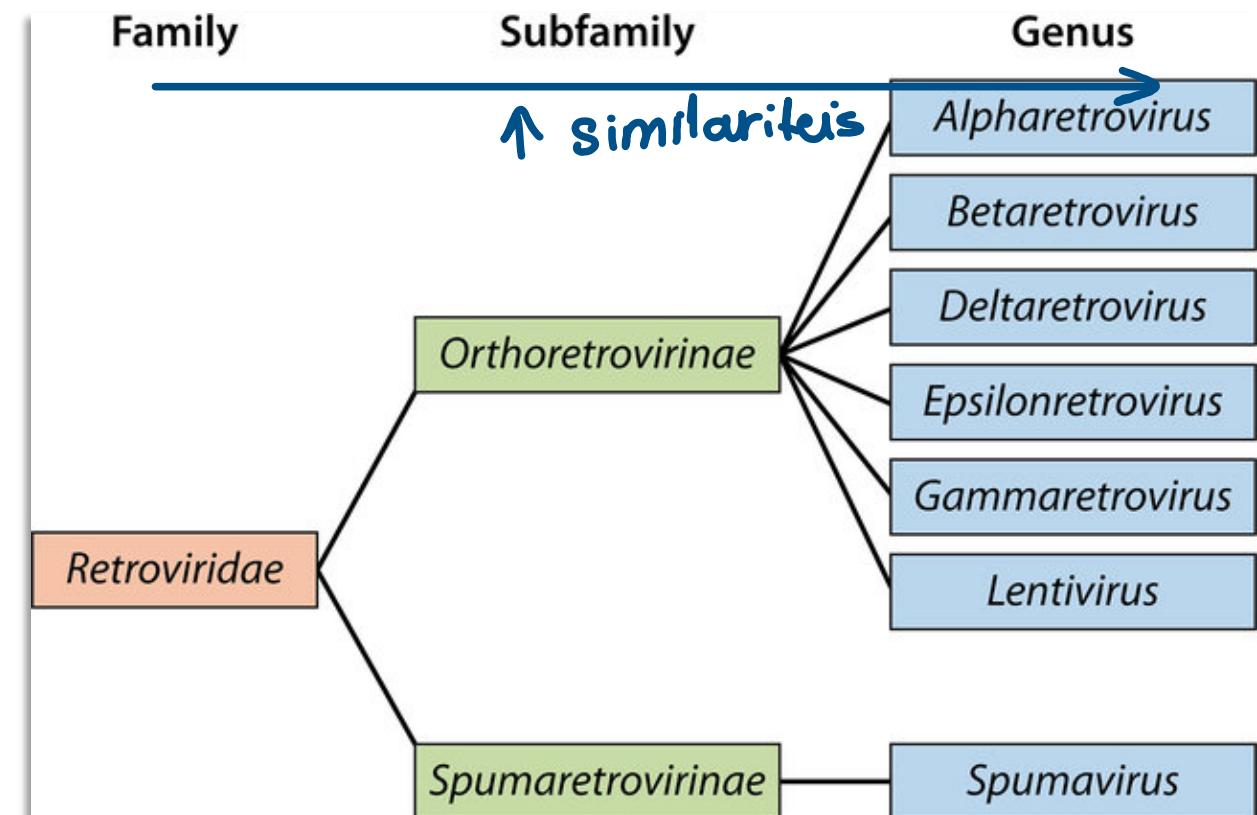
TABLE 6.3 Medically Relevant RNA Viruses





Virus Classification

- There are **shared features** among the members of the **same family**.
- **Similarities increase** among the members of the **same subfamily**.
- The features become very **similar** among the members of the **same genus**.



Source: Greenwood AD, Ishida Y, O'Brien SP, Roca AL, Eiden MV. 2018. Transmission, Evolution, and Endogenization: Lessons Learned from Recent Retroviral Invasions. *Microbiol Mol Biol Rev* 82:10.1128/mmbr.00044-17. NOTE: Created by Notein https://doi.org/10.1128/mmbr.00044-17



Virus Replication

Attachment: The virus recognizes a cell receptor and binds it.

Penetration: The virus enters the cell.

entry

Uncoating: The virus genome is exposed.

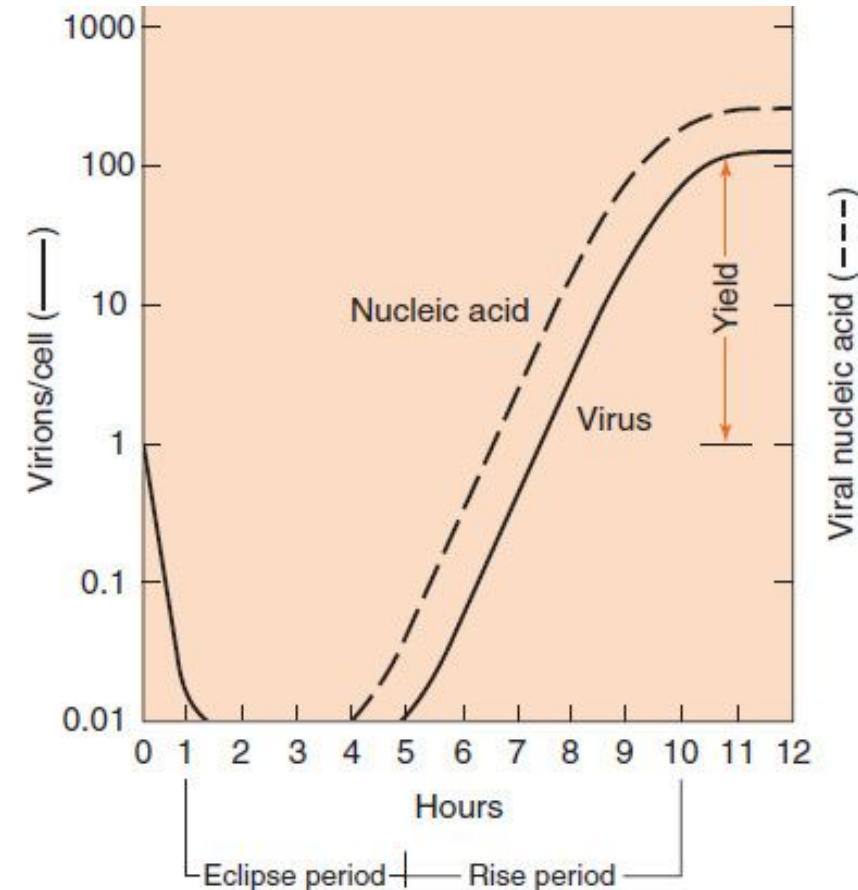
Early transcription and early translation: Production of the early mRNA and its translation into early virus proteins involved in virus replication.

Virus genome synthesis.

Late transcription and late translation: Production of the late mRNA and its translation into late virus proteins involved in virus structure.

Virus assembly: The virus genome and capsid come together.

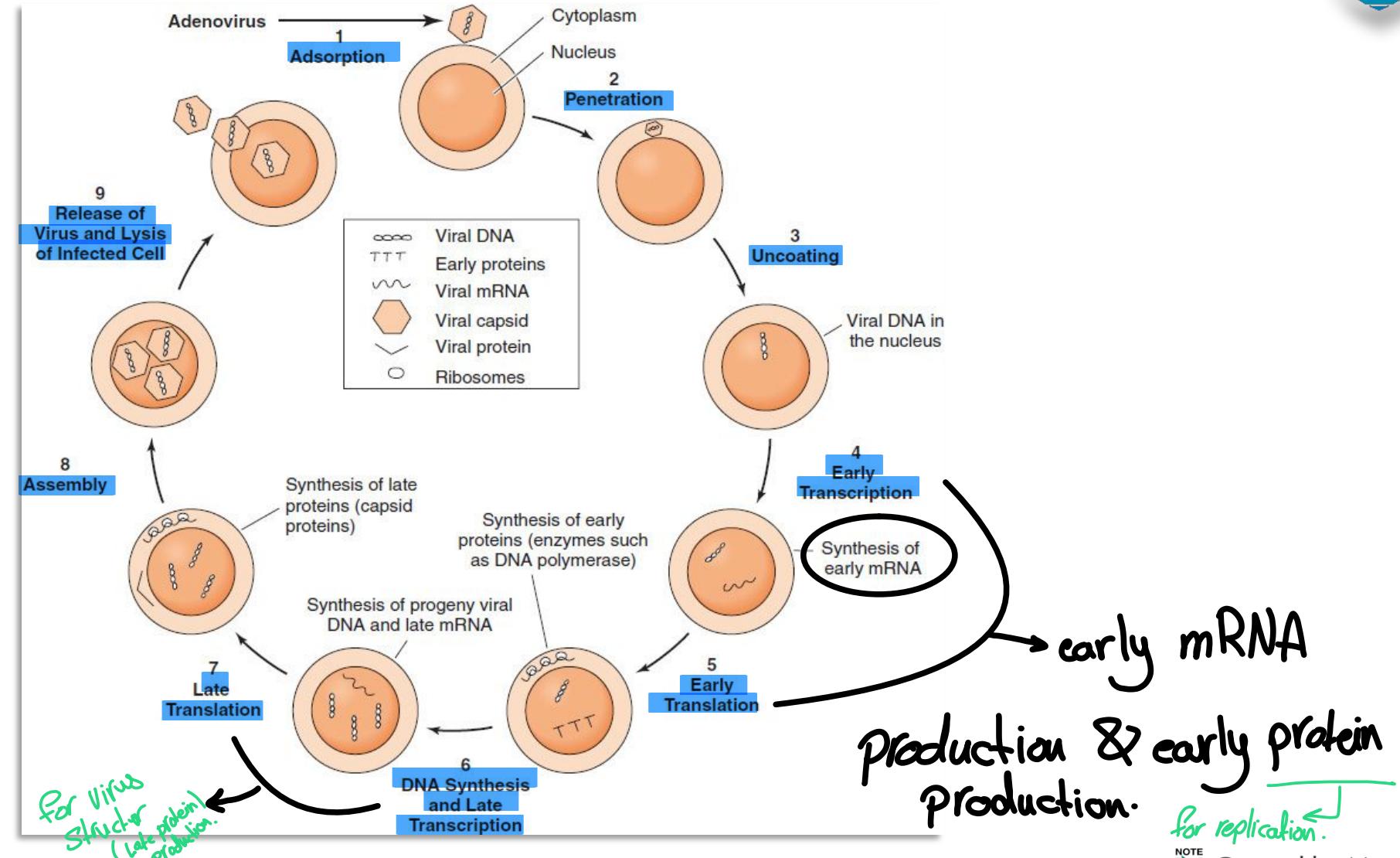
Virus release from the infected cell.



Source: Joklik WK et al. Zinsser Microbiology. 20th ed.
 Created by Notein



Virus Replication

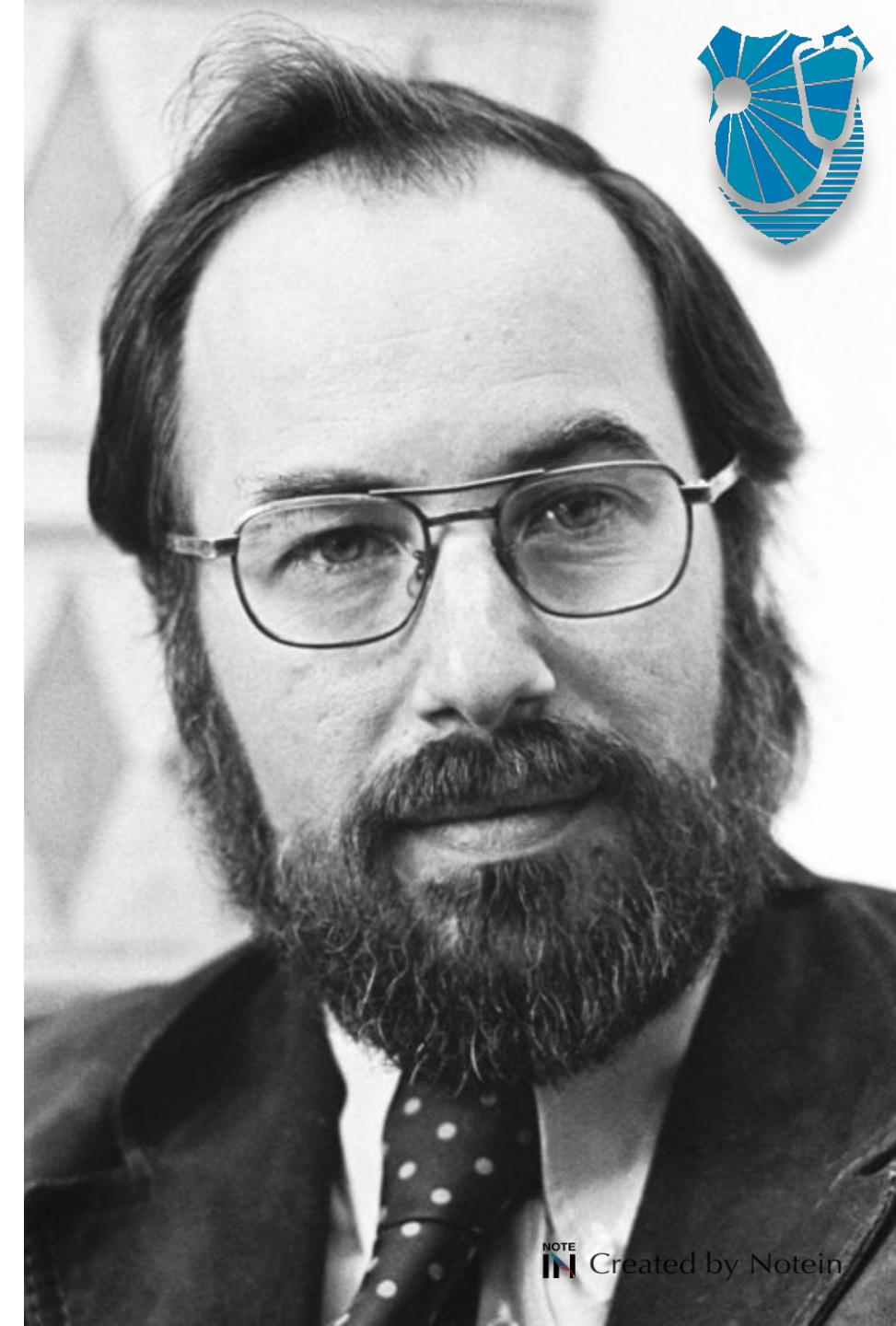




Baltimore Classification

- Baltimore classification of viruses depends on genome type:
 - A) DNA vs. RNA
 - B) double stranded vs. single stranded
 - C) reverse transcription
- Note: transcription is the conversion of DNA into RNA. So, reverse transcription is the conversion of RNA into DNA.

Retroviruses



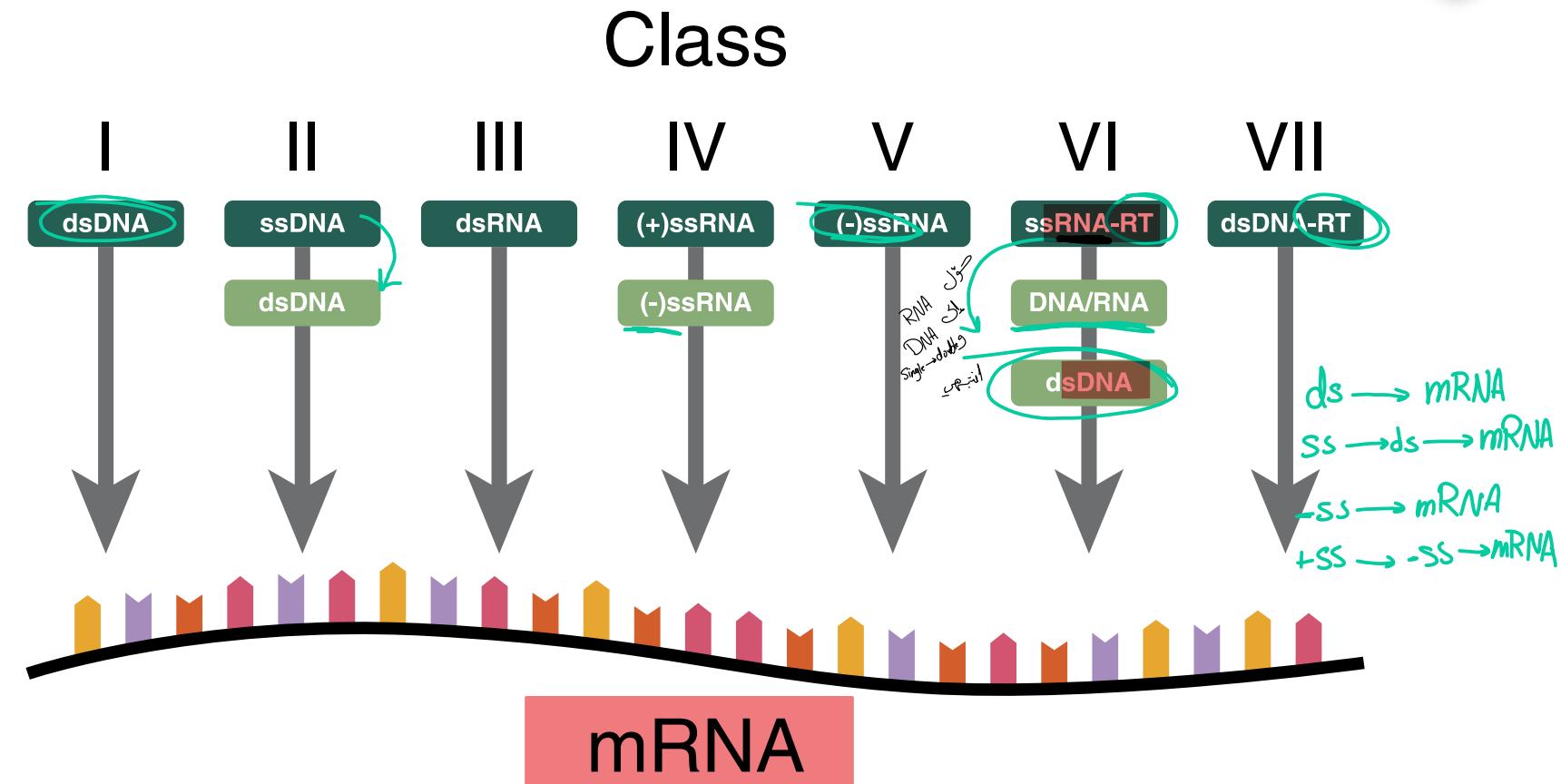


Baltimore classification system

Group	Description
1 <i>dsDNA</i>	Double-stranded DNA
2 <i>ssDNA</i>	Single-stranded DNA
3 <i>ds RNA</i>	Double-stranded RNA
4 <i>ssRNA +</i>	Positive-sense single-stranded RNA
5 <i>ssRNA -</i>	Negative-sense single-stranded RNA
6 <i>ssRNA reverse</i>	Positive-sense single-stranded RNA with reverse transcription
7 <i>dsDNA reverse transcript</i>	Double-stranded DNA with reverse transcription



Baltimore classification system





Pathogenesis of virus infections

Pathogenesis of virus infections involves the processes including **direct virus effect** and host responses.

Pathogenic viruses **cause disease**. So, non-pathogenic viruses do not cause disease.

Virulent viruses cause more severe disease.





What are the possible outcomes of exposure to viruses?

1. Exposure without virus attachment and without infection.
2. Virus infection but without obvious damage: **Asymptomatic** infection
3. Infection with cell damage or cell transformation **Symptomatic** disease.
Sometimes this can lead to **fatality**

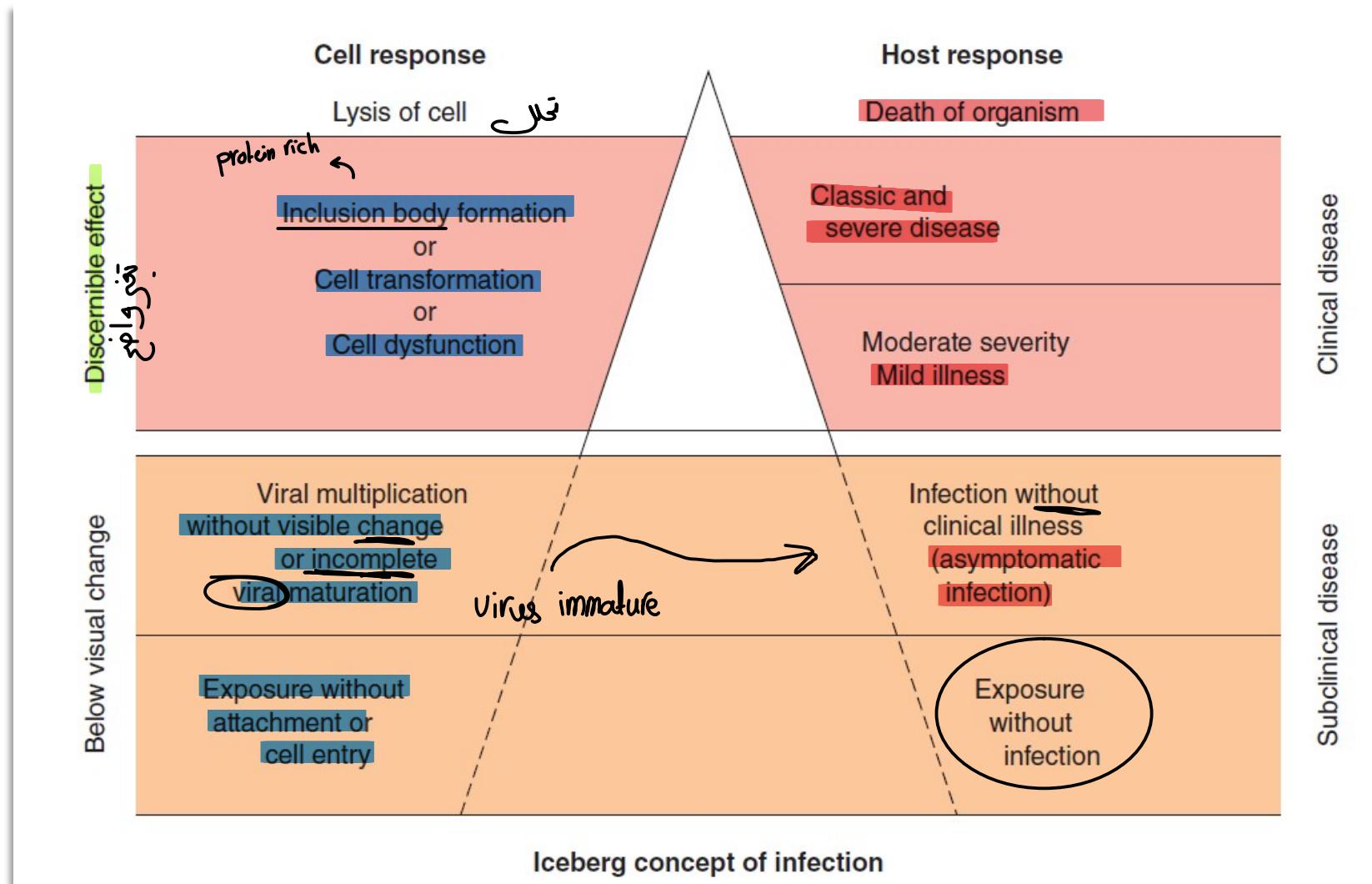
So, the possible clinical outcomes of acute virus infection can be:

- A. Acute infection with **complete virus clearance**.
- B. Acute infection followed by **chronic infection**.
- C. Acute infection followed by **silent persistence and periodic reactivation**.
- D. Acute infection followed by **death**.

مُنْتَهٍ لـ **herpesvirus**
بعُونَةٍ مُتَخَفِّيَّةٍ بَعْدَ اِنْجِعَاجٍ



What are the possible outcomes of exposure to viruses?





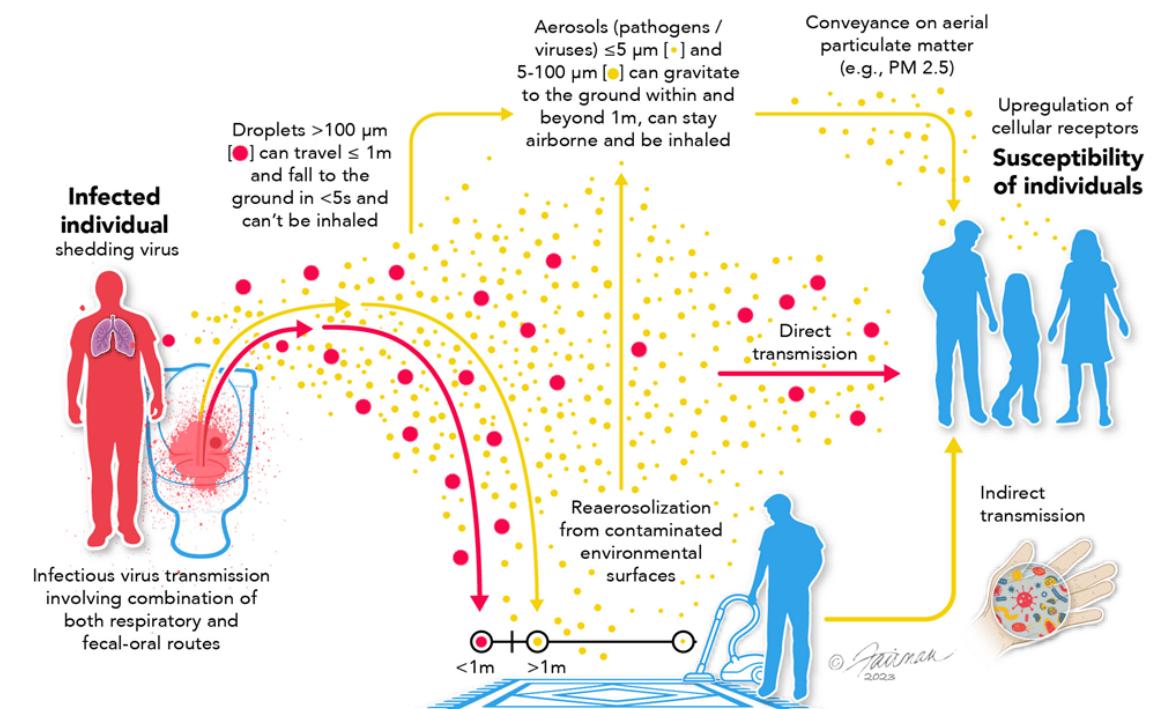
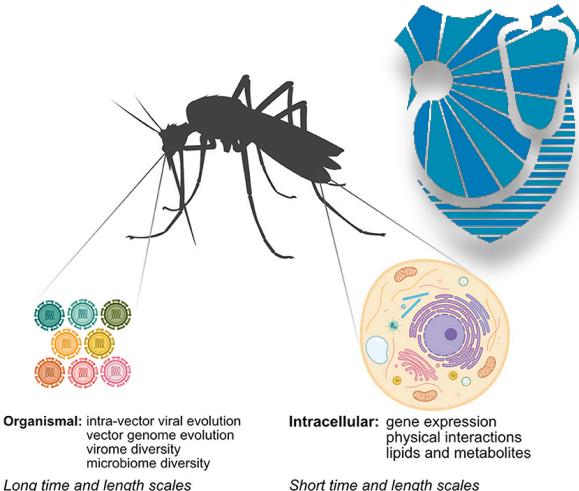
How can viruses enter the body?

- A. **Direct:** Skin contact. Respiratory aerosols or droplets. Blood. Genital secretions. Saliva.
- B. **Indirect:** Fomites (non-living object) or Vector (e.g. insects).

Viruses are **foreign entities**. Upon entry into the body, the **immune system** will react. The **immune response to virus infection** can contribute to the disease process.



What is a fomite?





Thank You...
Wishing you all the best!