SESSIÓ 1

Lessons learnt from a norovirus outbreak caused by bottled mineral water

Guix S^{1*}, Blanco A¹, Pintó RM¹, Fuentes C¹, Rodríguez Garrido V², Alonso M², Bartolomé B², Cornejo T², Pumarola T², Bosch A¹

¹Enteric Virus Laboratory, Department of Genetics, Microbiology and Statistics, University of Barcelona, Barcelona, Spain; Institute of Nutrition and Food Safety, University of Barcelona, Barcelona, Spain. ²Microbiology Department, Hospital Universitari Vall d'Hebron, Barcelona, Spain. *Presenting author

Background and objectives:

A norovirus gastroenteritis outbreak affecting 4,136 individuals was reported in Catalonia (Spain) in April 2016. The Catalonian Public Health Agency pointed towards drinking spring water bottled in Andorra as the source of infection. The company producing the bottled water recalled as a precautionary measure more than 6,150 water coolers. The water complied with all requirements of the European Commission directive on the exploitation and marketing of natural mineral waters. Our objective was to estimate the risk of infection in conditions of natural exposure.

Methodology:

A questionnaire on water consumption and occurrence of symptoms was performed on 26 exposed individuals. Saliva samples were collected to determine norovirus susceptibility (secretor status). Water analysis was performed RTqPCR following ISO/TS 15216-1:2013, and treatment with a viability dye prior to RTqPCR was included to provide a better estimation of the infectious viral titer.

Results and conclusions:

GII infections were only detected in secretor individuals, while GI infections were detected in both secretors (73%) and non-secretors (27%).

High levels of total genome copies (gc) per liter of both norovirus genogroup I (1.1×10^3) and II (5.8×10^3) were detected in the water samples. Infectivity of GI viruses was higher than for GII. ID₅₀ causing illness may be figured for an ingested dose of ~400 gc/day for GI, and of ~3000 gc/day for GI. The use of PMA indicated that only 0.3-5.6% of genomes detected by regular RTqPCR contained undamaged capsids, rendering much lower illness doses.

Management of microbial risks of commercially produced mineral waters could benefit from additional analysis for relevant viral pathogens such as norovirus.

Acknowledgements:

We are grateful to M. Jané-Checa and A. Martínez-Mateo for providing epidemiological data and useful discussion. We acknowledge the useful collaboration with A. Canals. This work was supported in part by projects Food-FP7-311846 (European Union) and XRB-Biotechnology Reference Network (Generalitat de Catalunya).