CYANOBACTERIA

AKA BLUE-GREEN ALGAE

WHAT WE KNOW ABOUT EXPOSURES AND HEALTH EFFECTS

Topics to Discuss

- 1. Who/what are the main players?
- 2. Cyanobacteria Exposure and Effects: Incidents and Studies
- 3. Risk assessment for exposure to cyanobacteria toxins

1. Who/What are the Main Players?

Most taxa are not a problem...

- They occur in all lakes and streams and are a natural part of the environment.
- Some are used as food supplements (Spirulina)

but.....

Cyanobacteria* known to produce toxins

| Neurotoxins | Hepatotoxins | Dermatotoxins | General Cell Toxin | Irritant |
|--------------------|--------------------|---------------|-----------------------|--------------|
| Anabaena | Microcystis | Lyngbya | Cylindrospermopsis | Most species |
| Aphanizomenon | Anabaena | Planktothrix | Raphidiopsis | |
| Oscillatoria | Cylindrospermopsis | Schizothrix | Aphanizomenon | |
| Cylindrospermopsis | Oscillatoria | | Anabaena | |
| Synechocystis | Nostoc | | | |
| Pseudanabaena | | | | |
| Lyngbya | | | | |
| Nodularia | | | | |
| Nostoc | | | | |

*partial list

Microcystis



Cylindrospermopsis





Compounds of potential concern for cyanobacteria exposure*

| Neurotoxins | Hepatotoxins | Dermatotoxins | General Cell Toxin | Irritants |
|-------------|---------------------|---------------|---------------------|-----------|
| Anatoxins | Microcystins** | Lyngbyatoxins | Cylindrospermopsins | LPS |
| Saxitoxins | Cylindrospermopsins | Aplysiatoxins | | |
| BMAA | Nodularins | | | |

* Partial list

**more than 60 varieties

Potency of Various Toxins

| Toxin | LD_{50} |
|---------------------|----------------|
| | (ug/Kg)* |
| Microcystin | 20 - >1500 |
| Cylindrospermopsin | 200 |
| Nodularins | 30-60 |
| Anatoxin-a(s) | 20-40 |
| Anatoxin-a | 200-250 |
| Lyngbyatoxin | 250 |
| Saxitoxin | 6 |
| Strychnine | 1500-2000 |
| Ricin | 2-30 |
| Dioxin | 22,000 |
| Western Diamondback | 2,000 - 18,500 |

*<50 ug/Kg is considered "highly toxic"

Microcystin



Cylindrospermopsin



2. Cyanobacteria Exposure & Effects:

Incidents and Studies

Some notable reports.....

Case Report - Exposure to Cyanobacterial Toxins

Carauaru, Brazil

- Hemodialysis reagent prepared with water from a reservoir contaminated with toxic cyanobacteria
 - Microcystis, Anabaena, Anabaenopsis, Aphanizomenon, Oscillatoria
- 126 patients treated
- 126 patients became ill
- 108 patients with liver injury
- 60 died (mostly from liver injury)

Case Report - Exposure to Cyanobacterial Toxins

Paulo Alfonso, Brazil

- High levels of Anabaena and Microcystis in drinking water reservoir
- Hundreds of hospital admissions
- ~6 deaths/month from gastroenteritis

 Many other studies have linked illness with drinking HAB contaminated water.

Canadian Study of Health Effects from Cyanobacteria Exposure Levesque (2009)

| Variables | | | |
|---|---------------|------|----------|
| Drink <i>Treated</i> Water from Lake with HAB | | RR | 95% CI |
| No | | 1.00 | |
| Yes | Ear symptoms | 6.10 | 2.5-15.0 |
| | Skin symptoms | 2.65 | 1.1-6.4 |
| | Muscle pain | 5.16 | 2.9-9.1 |

What do we know about recreational exposure?

- Swimmer, skier, boaters, etc. can be exposed to water by:
 - Dermal contact
 - Ingestion
 - Inhalation





Recreational Exposure The Historical Record

- Three types of evidence for recreational impacts:
 - Incident/case reports
 - Epidemiologic studies
 - Controlled studies

The Historical Record Incident Reports

- A number of reports have attributed human illness and exposure to cyanobacteria.
 - Fairly well documented (large number of reports)
- Most of these are anecdotal, however,....
 - rates of exposure have been high enough to make sound conclusions about exposure:effect relationships.
- Confounding problems are:
 - there is no good biomarker for exposure
 - symptoms are similar to many other causes of illness

Symptoms Reported from Case/Incident Reports

| Hayfever-like | Dermatologic | Gastrointestinal | Mixed Symptoms | Death |
|-------------------------|--------------|------------------|-------------------|---------|
| Conjunctivitis | Rash | Diarrhea | Most common | Animals |
| Rhinitis | Irritation | Vomiting | | Human? |
| Sneezing | Blotching | Nausea | | |
| Respiratory distress | Itching | Abdominal Pain | | |

A reported death from recreational exposure

- Wisconsin, 2002
- 5 teenagers swam in golf course pond.
 - 3 developed minor symptoms.
 - 2 had their head under water for some time and developed major symptoms.
 - One developed diarrhea and abdominal pain
 - The other developed nausea and vomiting that progressed to shock, seizure, and heart failure.
 - Deceased was found to have acute heart damage (no evidence of pesticides, pathogens, or parasites)
 - Anatoxin-a found in blood and stool of both teens.

Argentina Incident Report

- Jet Skier in lake with cyanobacteria bloom for 2 hours.
 - Microcystis ~35,000 cells/mL
 - Microcystin 48.6 ug/L
- With a few hours developed:
 - Nausea, vomiting, muscle weakness
- Within a few days:
 - Respiratory distress, renal failure, increase in liver enzymes, increase in leukocytes
- Patient discharged from hospital after 20 days.

Epidemiologic Studies

Limited in numbers

- Difficult to set up a study beforehand
 - Crystal balls hard to find (non grant-eligible expenditure)
- Typical design:
 - interviewing lake visitors after a visit
 - quantify cyanobacteria
 - Toxins
 - Biomass estimation

Results of Epi Studies

- 1. Australia and U.S. (Stewart et al, 2006)
 - Interviewed 3,193 lake visitors
 - Visitors exposed to high levels of cyanobacteria were:
 - More likely (OR=1.7) to report a symptom.
 - More likely (OR=2.1) to report *respiratory* symptoms.
 - Toxin levels were very low

Results of Epi Studies

2. Australia (Pilotto et al, 1997)

- 295 participants exposed to cyanobacteria
 - Several genera present
- Symptoms were more likely if:
 - Higher number of cells (OR=2.9)
 - Higher contact time (OR=2.7)
 - High contact time and high cells (OR=3.4)
 - Cold and flu symptoms most common
- No correlation with hepatotoxins

Australian Swimming Study Occurrence of Symptoms in Swimmers

Odds



Canadian Study of Health Effects from Cyanobacteria Exposure Levesque (2009)

| Variables | | Symptoms | |
|---|--------------------------|----------|---------|
| Recreational contact with cyanobacteria | | RR | 95% CI |
| No | | 1.00 | - |
| | Cyanobacteria counts | | |
| Yes | <20,000 cells/mL | 1.52 | 0.7-3.5 |
| | 20,000- 100,000 cells/mL | 2.71 | 1.0-7.2 |
| | >100,000 cells/mL | 3.28 | 1.7-6.4 |

*G I symptoms plus respiratory, eye, skin muscle, etc. Most common complaint = respiratory symptoms Microcystin levels very low.

Controlled studies

- Several studies have examined the effects of directly placing cyanobacteria on skin in volunteers.
- Australia (Pilotto et al, 2003)
 - Patches with cyanobacteria were applied to healthy volunteers
 - Anabaena, Microcystis, Cylindrospermopsis, Nodularia, Aphanocapsa
 - □ ~20% of subjects developed a rash
 - No difference between toxin and non-toxin producing strains.
 - Reactions were seen at <10,000 cells/mL

Animal deaths

There have been numerous reports of pets and livestock dying after drinking cyanobacteriacontaminated water.

Suspected/Confirmed Dog Deaths - U.S. 2007-2011

| Description | Number |
|---|--------|
| Number of events associated with HAB reported | 55 |
| Number of dogs | 63 |
| Number attributed to anatoxin (a & a(s) | 12 |
| Number attributed to microcystin | 3 |
| Number of cases where HAB was biochemically confirmed | 8(13%) |
| Number/% cases reported in literature* | 0 |

* Peer reviewed

3. Risk Assessment

Can we quantify recreational exposure?

• Yes!!!!!!!!

- Using standard exposure calculations
- After measuring dose, we can compare this to Tolerable Daily Intake (TDI) values.
 - TDI is the amount of a substance that can be consumed without appreciable risk.

Tolerable Daily Intake (TDI) for microcystin

- Based on animal experimentation in mice looking at liver changes after exposure to microcystin:
 - It was determined that the TDI should be:
 - TDI Average adult (60 kg) = 2.4 ug/day
 - TDI Average child (10 kg) = 0.4 ug/day

Ingestion Exposure

• We know that:

- the average swimmer ingests between 100-200 mL of water.
- 100,000 cells/mL of *Microcystis* is capable of producing 20 ug/L of microcystin.

Ingestion Exposure

□ Therefore.....

 Ingestion of 100 mL of water (100,000 cells/mL) while swimming =

• 0.1 L * 20 ug/L = 2.0 ug dose of microcystin

- Approaches the TDI (2.4) for adults
- Exceeds the TDI (0.4) for children
- Assumed to represent a *moderate* risk of health effects.

What can we conclude about recreational risks?

- Exposure to cyanobacteria from recreation presents a health risk.
 - Children are likely to be more exposed than adults.
- There is a significant risk of symptoms when toxins are at low levels or even absent.
- The presence/absence of multiple species and toxins makes standard setting very difficult.

Conclusions

We have a problem in Oklahoma.

- Large blooms are certain to happen again.
- The situation is likely to get worse unless we take measures to fix it.

Reducing nutrient loading

 We have a very inadequate monitoring system to detect and report problems.

A Few Big Questions

- Are the frequency and types of reported symptoms enough to prompt warnings?
- Are there any reasons to think that the environmental conditions in Oklahoma produce different types of cyanobacteria blooms?
- Are there any reasons to think that users of Oklahoma lakes respond differently to cyanobacteria than other populations?

Summer 2011 Microcystin Values From Grand Lake

| Site | Type of Sample | Microcystin (ug/L) |
|-----------------------|-------------------|--------------------|
| Duck Creek | Grab | 9.9 |
| 11 | Tow | 358 |
| " | Grab | 2.6 |
| " | Tow | 210 |
| | | |
| Horse Creek | Grab | 49 |
| " | Tow | 125 |
| " | Grab | 1.2 |
| " | Tow | 98 |
| Argentina Case Report | | 49 |

Do we know enough about risk to say this?

