PATHOGEN SAFETY DATA SHEET

Helicobacter pylori

CHARACTERISTICS	
Morphology	Gram negative microaerophilic curved rod.
	H. pylori are not invasive, but colonize in the human
	stomach's antral region and gastric mucosal surfaces
	where they release pathogenic proteins that induce
	cell injury and inflammation. This can result in clinical
	symptoms of infection, such as duodenal ulcer and
	gastric adenocarcinoma. Other common illnesses as a
	result of infection include gastroenteritis, diffuse antral
	gastritis, and gastric carcinoma. H. pylori is a Class I
	human carcinogen according to the World Health
	Organization. Infection can last a lifetime in the host if
	not properly treated, causing chronic gastritis which
Disease	can lead to peptic gastroduodenal ulcer disease.
Zoonosis	Yes, animals and humans and vice versa.

HEALTH HAZARDS	
Host Range	Humans and animals
	With more than 50 % of the world's population
	infected, acquisition is likely to occur during childhood
Modes of	through fecal-oral, oral-oral contact, or during
Transmission	gastrointestinal tract transit disorders.
Signs and	Gastroenteritis and ulcers. Major symptoms are
Symptoms	abdominal pain, heartburn, and nausea.
Infectious Dose	unknown
Incubation Period	unknown.

MEDICAL PRECAUTIONS/TREATMENT	
Prophylaxis	None available.
Vaccines	None available.
Treatment	Clarithromycin, amoxicillin, and tetracycline.
	Can be confirmed by culture, blood antigen detection,
Surveillance	and urease detection
MSU Requirements	Report any exposures

LABORATORY HAZARDS	
Laboratory	
Acquired Infections	
(LAIs)	3 reported cases.
	May be located in the oral cavity, gastrointestinal and
	hepatobiliary regions. Cultures, frozen stocks, other
Sources	samples described in IBC protocol.

SUPPLEMENTAL REFERENCES	
	http://www.phac-aspc.gc.ca/lab-bio/res/psds-
Canadian MSDS:	ftss/index-eng.php
BMBL	https://www.cdc.gov/labs/BMBL.html
CDC	https://stacks.cdc.gov/view/cdc/40603
NIH Guidelines	https://osp.od.nih.gov/wp- content/uploads/NIH Guidelines.pdf

RISK GROUP & CONTAINMENT REQUIREMENTS	
	Agents that are associated with human disease
	which is rarely serious and for which preventive or
Risk Group 2	therapeutic interventions are often available.
	For all procedures involving suspected or known
BSL2	infectious specimen or cultures.
ABSL2	For all procedures utilizing infected animals.

fy others working in the lab. Remove PPE and new PPE. Cover area of the spill with absorbent erial and add fresh 1:10 bleach:water. Allow 20
utes (or as directed) of contact time. After 20
utes, cleanup and dispose of materials.
mediately notify all personnel in the lab and ear all personnel from the area. Remove any entaminated PPE/clothing and leave the lab. cure the area by locking doors, posting signage d guarding the area to keep people out of the ace. assistance, contact MSU's Biosafety Officer (406-

EXPOSURE PROCEDURES	
	Flush eyes, mouth, or nose for 5 minutes at eyewash
Mucous membrane	station.
Other Exposures	Wash area with soap and water for 5 minutes.
	Immediately report incident to supervisor, complete
	a <u>First Report of Injury</u> form, and submit to Safety
Reporting	and Risk Management.
	During business hours:
	Bridger Occupational Health 3406 Laramie Drive
	Weekdays 8am -6pm. Weekends 9am-5pm
	After business hours:
	Bozeman Deaconess Hospital Emergency Room
Medical Follow-up	915 Highland Blvd

VIABILITY	
Disinfection	Susceptible to 1:10 bleach:water, 70 % ethanol
Inactivation	Inactivated by moist heat (15 minutes at 121°C) and dry heat (10 minutes at 70°C followed by 5 mintues at 95°C).
Survival Outside Host	unknown

PERSONAL PROTECTIVE EQUIPMENT (PPE)	
Minimum PPE Requirements	Lab coat, disposable gloves, safety glasses, closed toed shoes, long pants
Additional Precautions	Additional PPE may be required depending on lab specific SOPs and IBC Protocol.