ทำอย่างไรงานวิจัย “ไม่” ขึ้นหิ้ง: การพัฒนานวัตกรรม และการนำไปใช้เชิงพาณิชย์ สังคม และชุมชน

ศาสตราจารย์ ดร. วันเพ็ญ ชัยคำภา สพ. บ. (เกียรตินิยม) Ph. D.

ศาสตรเมธาจารย์ ศาสตราจารย์วิจัยดีเด่น เมธีวิจัยอาวุโส

ที่ปรึกษาด้านงานวิจัย คณะแพทยศาสตร์ศิริราชพยาบาล มหาวิทยาลัยมหิดล

MMS Mahidol Sept 1st, 2020

My Research

- Diagnostics / Test kits
- Vaccine development
- Therapeutic antibodies
- Allergy

1. วิธีและชุดตรวจวินิจฉัยโรคติดเชื้อในเขตร้อน

Test kit development

- Parasitic infections
- Food pathogens
- Pathogens causing febrile illness
- Allergen detection/Allergen quantification

- Amoebic liver abcess
- Gnatostomiasis
- Angiostrongyliasis
- Paragonimiasis
- Trichinellosis
- etc.

Pathogens causing fever

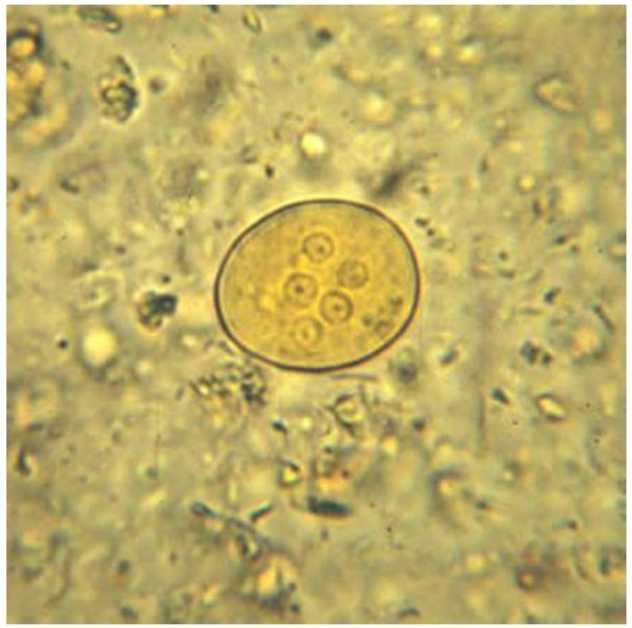
- *Salmonellosis / typhoid*
- Scrub typhus
- Leptospirosis
- Influenza

Food pathogens

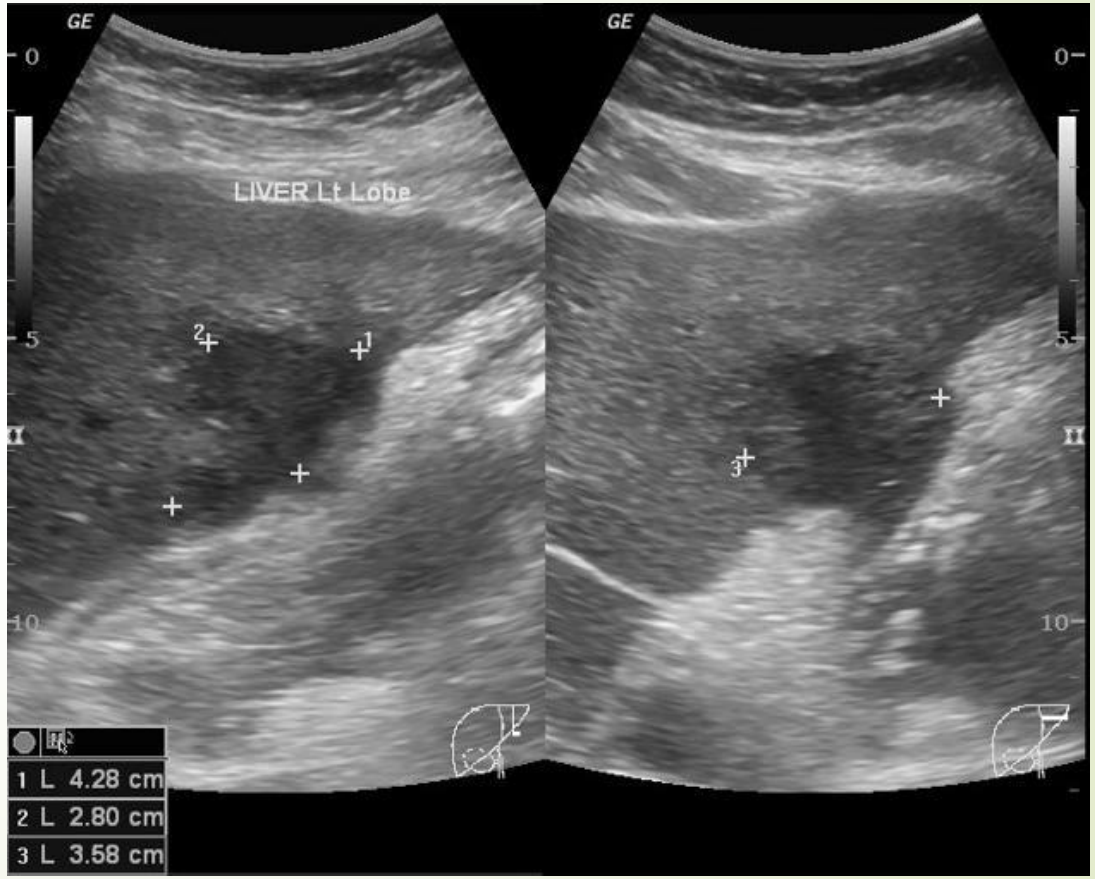
- *Salmonella*
- *V. cholerae* serogroups O1 & O139
- *Listeria* spp.
- Enterotoxigenic *E. coli*
- Enterohemorrhagic *E. coli*

- Allergen

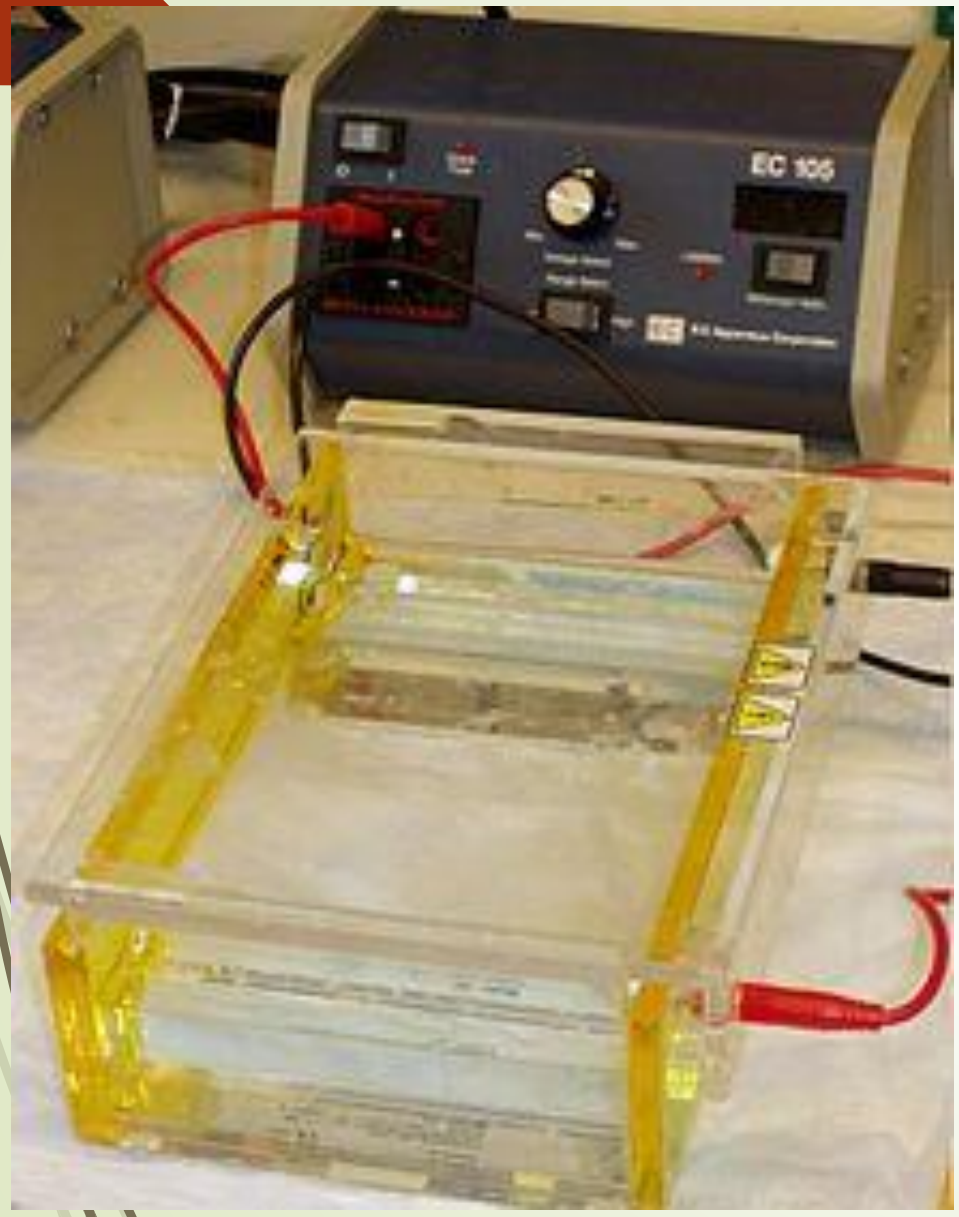
2509/1966: คณะอายุรศาสตร์เขตร้อน มหาวิทยาลัยแพทยศาสตร์

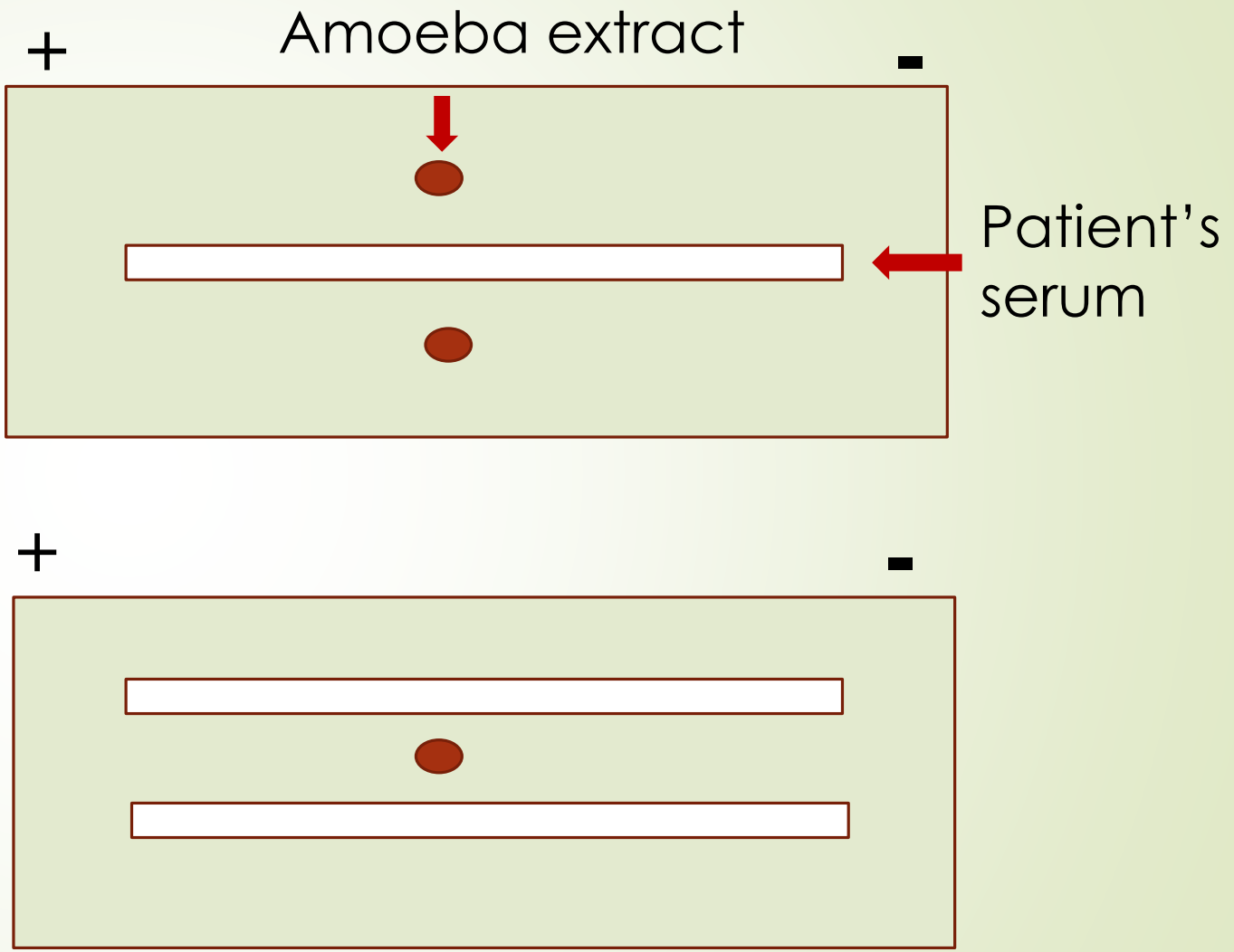


Entamoeba histolytica cyst stained with iodine

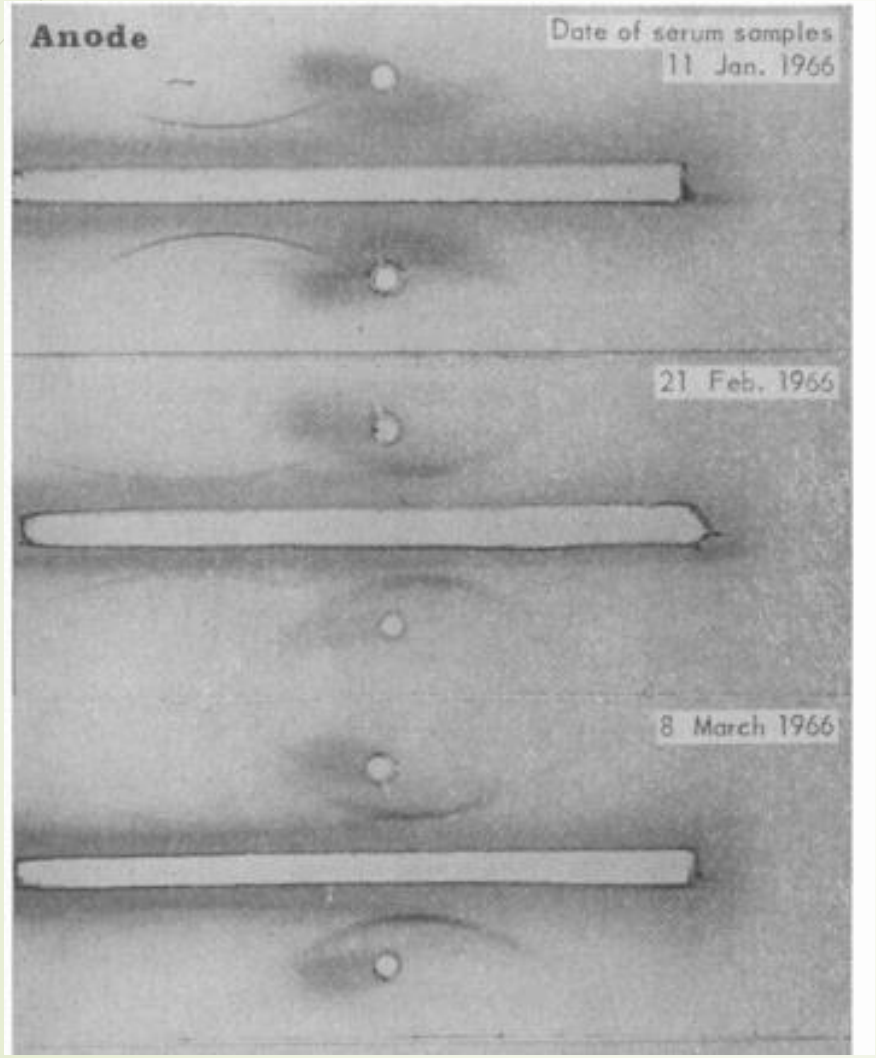


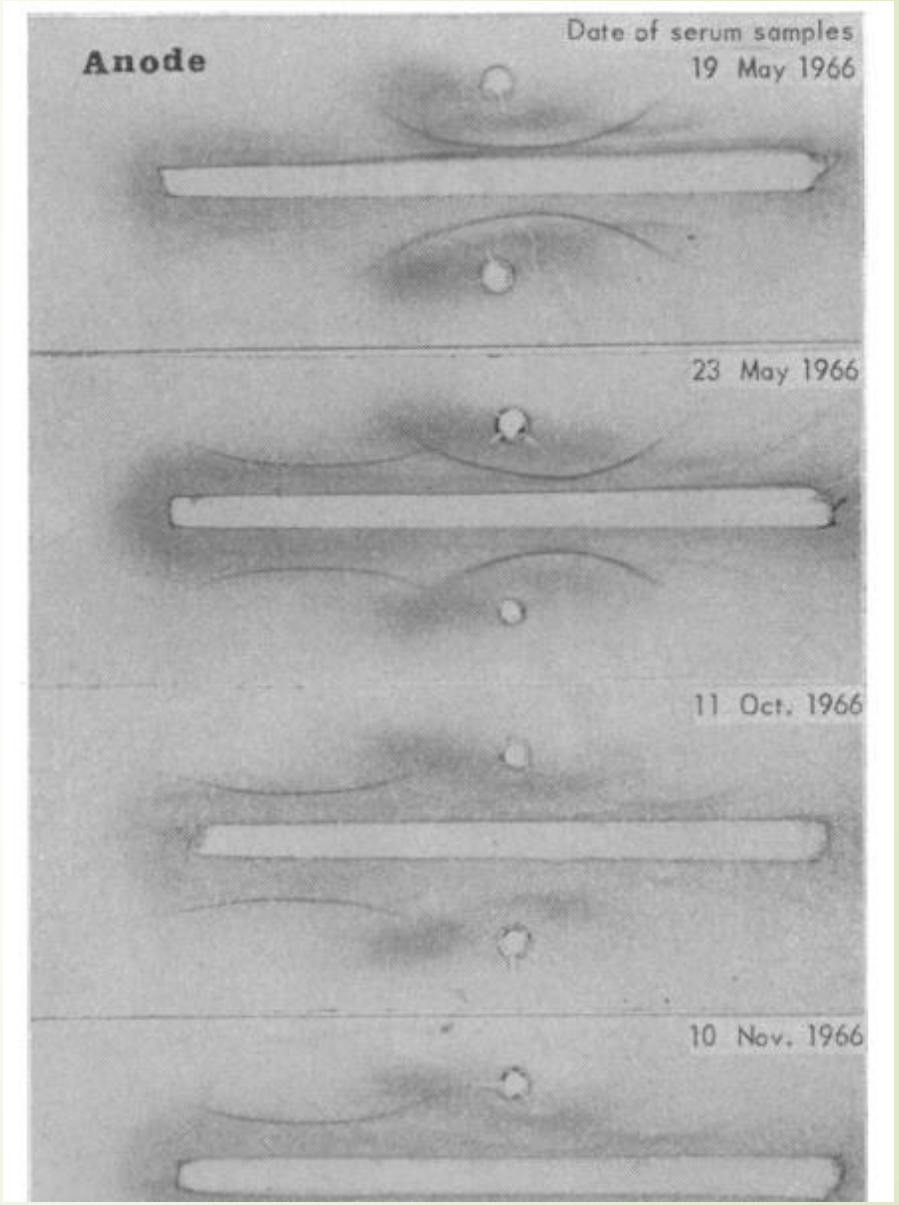
Amoebic liver abscess


EC 105


+
Amoeba extract
-
Patient's serum
+
-

Immunoelectrophoretic patterns of antibody in sera of patients with amoebic liver abscess





รางวัลมหาวิทยาลัยมหิดล สาขาการวิจัย 2518

Bull. Org. mond. Santé
Bull. Wld Hlth Org. } 1969, **40**, 343-353

Immunoelectrophoresis Test for Amoebiasis*

T. SAVANAT, M.B., Ph.D. & WANPEN CHAICUMPA, D.V.M.

Haemagglutination and immunoelectrophoresis tests were investigated to find which was more suitable for the immunodiagnosis of amoebiasis. Both tests were positive in more than 90 % of sera from patients with amoebic liver abscess. With serum from blood donors and patients with other diseases a much lower percentage of positives was given by the immunoelectrophoresis test, showing that this test had a closer correlation with clinically important disease.

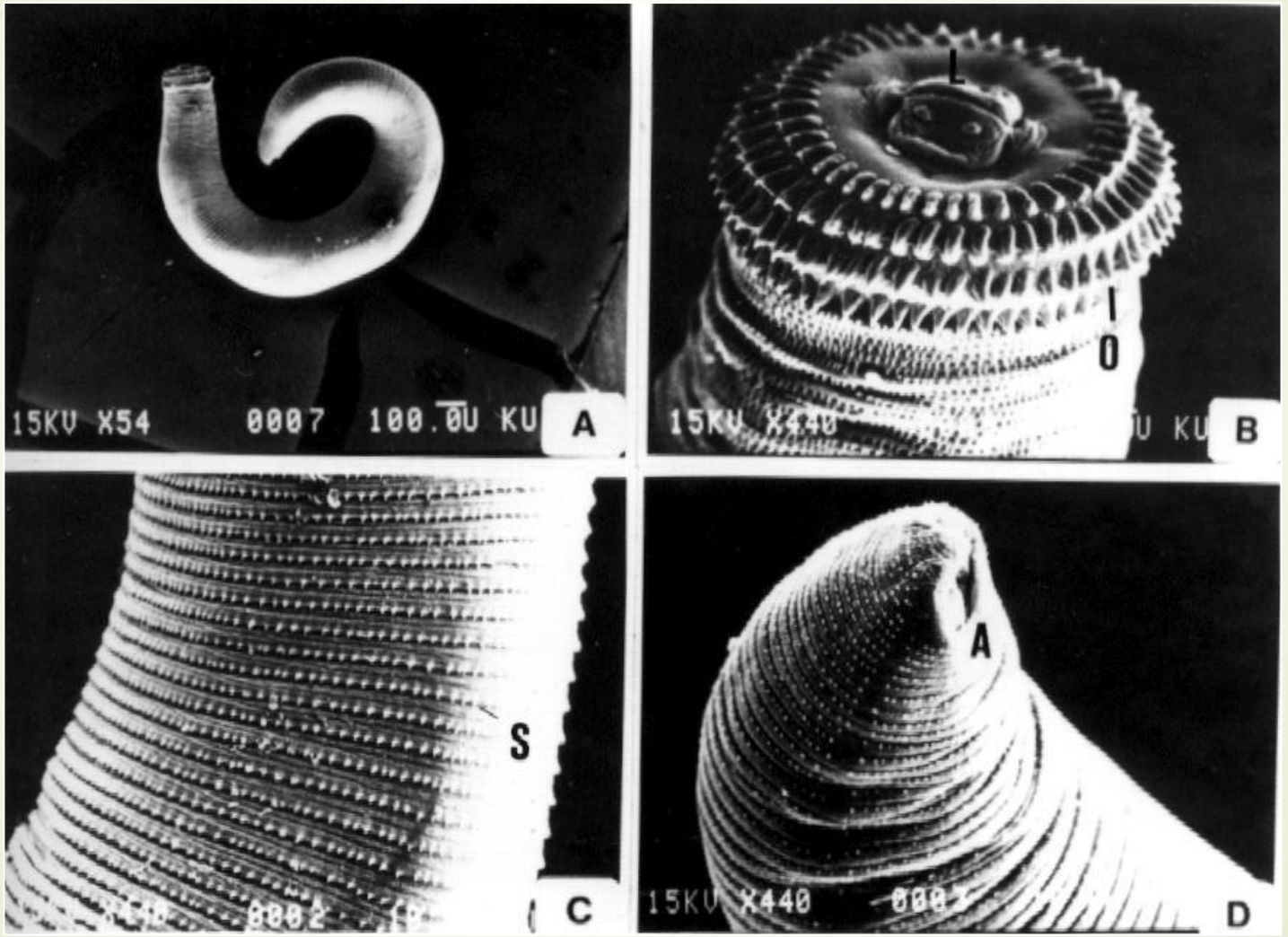
The immunoelectrophoretic patterns were of several varieties, but a single prominent band located near the well was considered as characteristic of amoebiasis.

Follow-up studies showed that both haemagglutinating and precipitating antibodies persisted for several months, accompanied in certain patients by changes in the immunoelectrophoretic pattern. Antibody activities were shown by means of column chromatography and "reversed" immunoelectrophoresis to be associated with serum IgG.

Although the parasitological diagnosis of amoebiasis is satisfactory in intestinal forms of the disease, it is not satisfactory in cases of liver abscess. Amoebae are often not found in the aspirated pus, and the diagnosis of amoebiasis is usually made presumptively on the finding of sterile pus of characteristic appearance. In patients with abscesses that are deep, small or multiple, the diagnosis is often delayed owing to difficulty in obtaining pus, sometimes with unhappy consequences. The need for sensitized red blood cells is required for each performance of the test. It is obviously uneconomical when only a few serum samples are tested at a time. Furthermore, the persistence of the haemagglutinating antibody long after the actual infection has subsided makes it difficult to differentiate between present and past infection.

By virtue of its better resolution, immunoelectrophoresis (IEP) is theoretically considered to be superior to the gel-diffusion test. The IEP was used

Gnathostomiasis: *Gnathostoma spinigerum*



Life Cycle of *Gnathostoma spinigerum*

พยาธิตัวจี๊ด *Gnathostoma spinigerum*

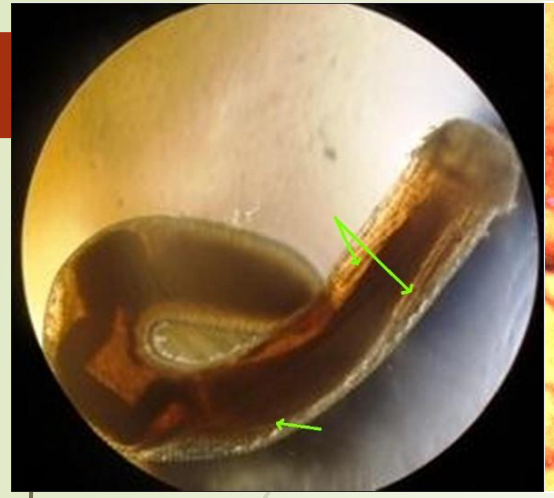
Definitive host
(cat, dog, tiger, leopard)

eggs and
1st stage larvae
in **fresh water**

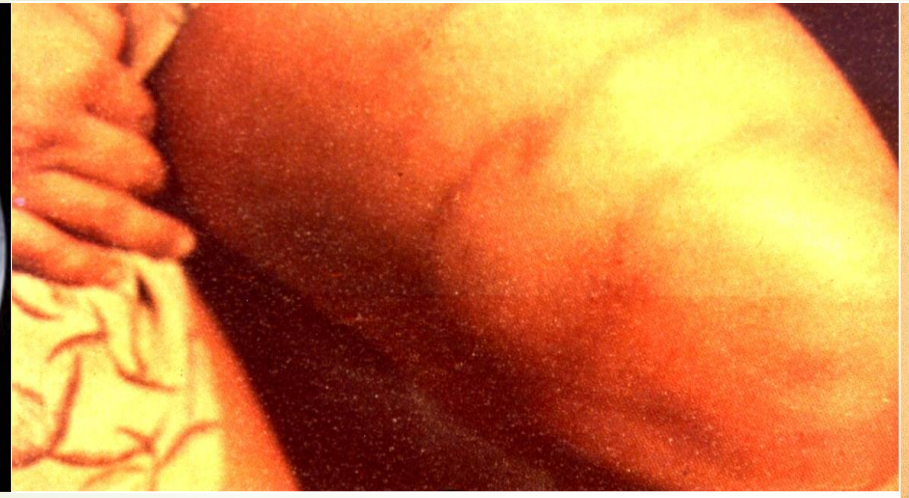
2nd stage & early 3rd stage larvae
in **cyclops**

Accidental host (man)

advanced 3rd stage larvae
in **fresh-water fish, amphibian,**
reptile, avian, mammal



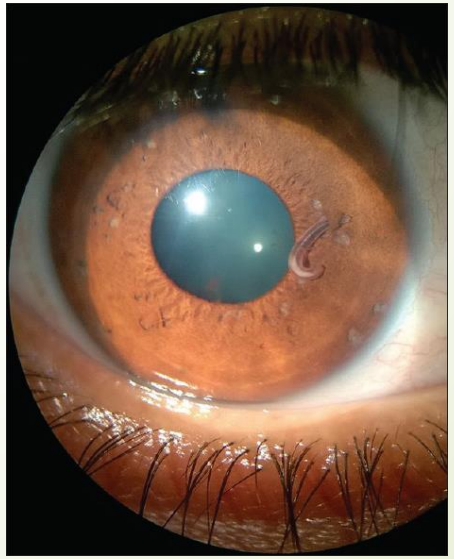
Occular gnathostomiasis



Cutaneous migratory swelling

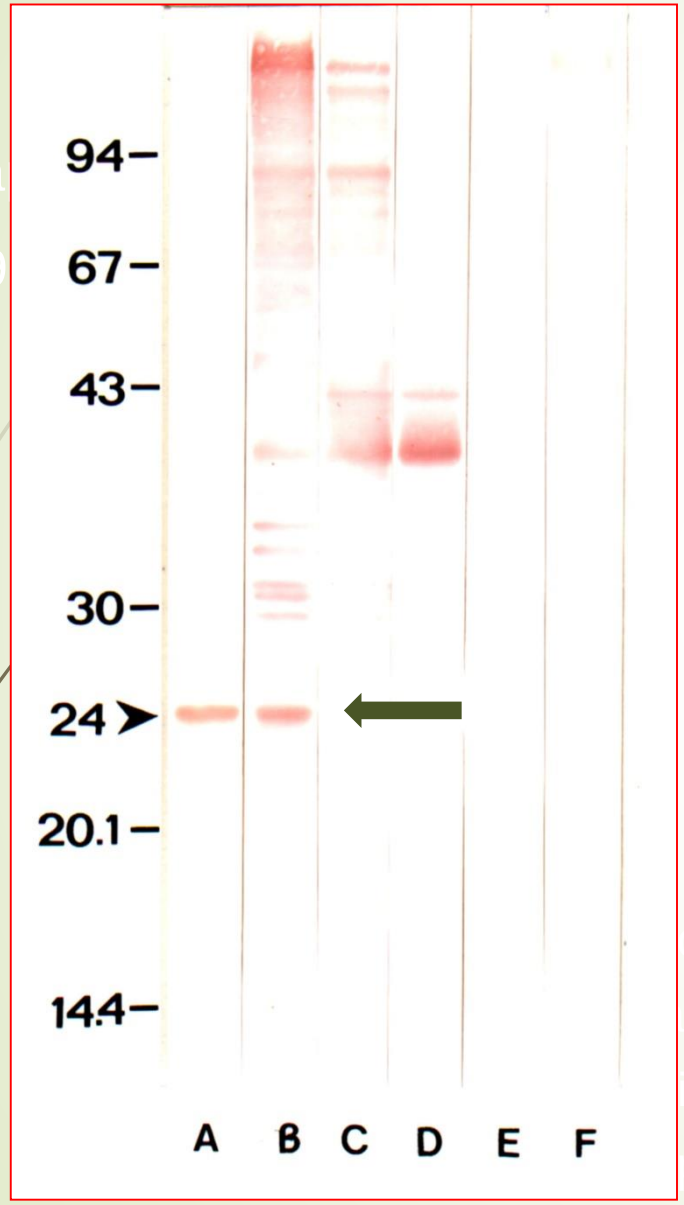
1. Brain hemorrhage, meningitis, encephalitis
2. Occular gnathostomiasis: Blindness
3. Others

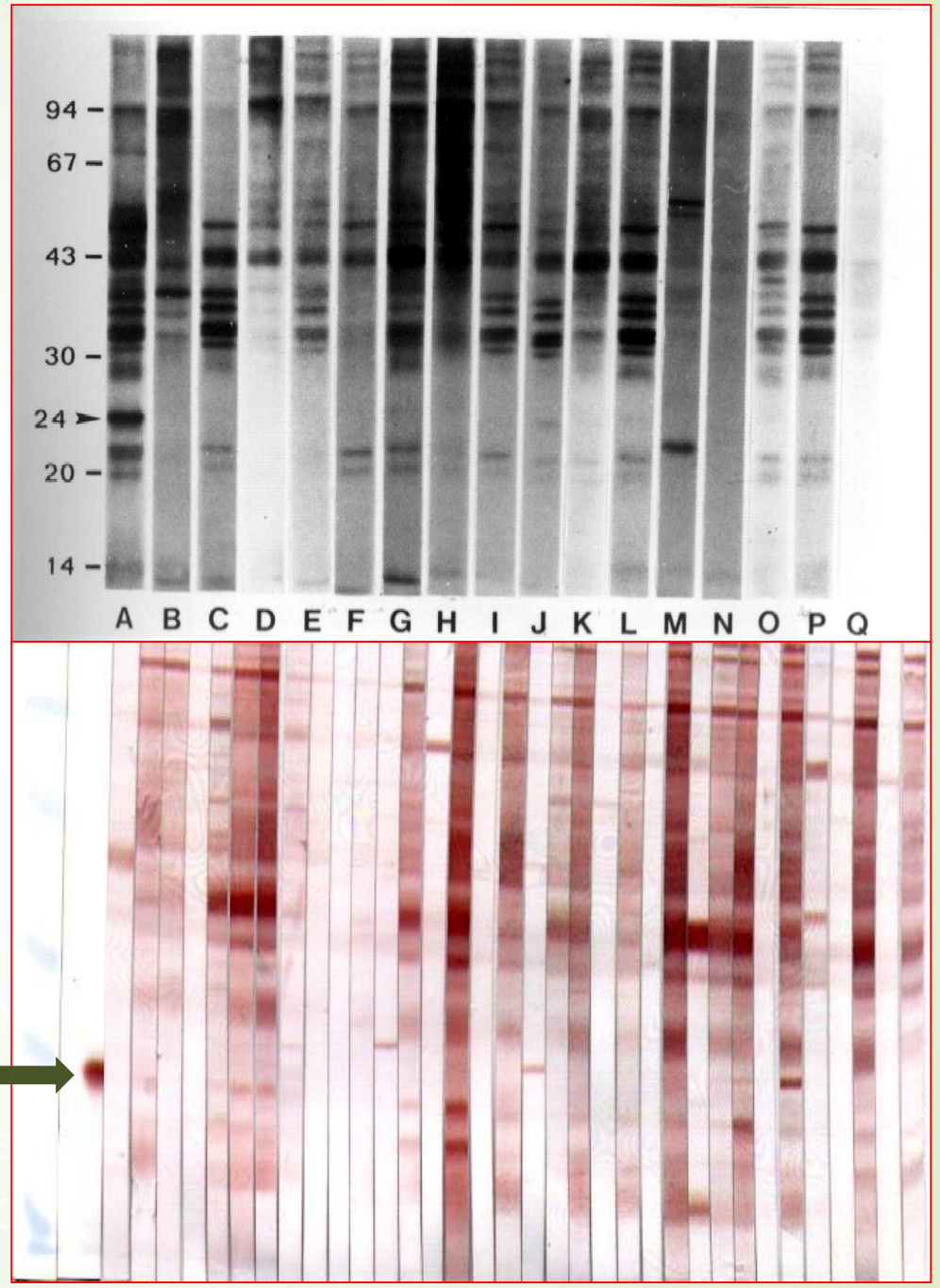
Cutaneous gnathostomiasis



opthalmitis

Occular gnathostomiasis


94
67
43
30
24
20.1
14.4
A
B
C
D
E
F


94
67
43
30
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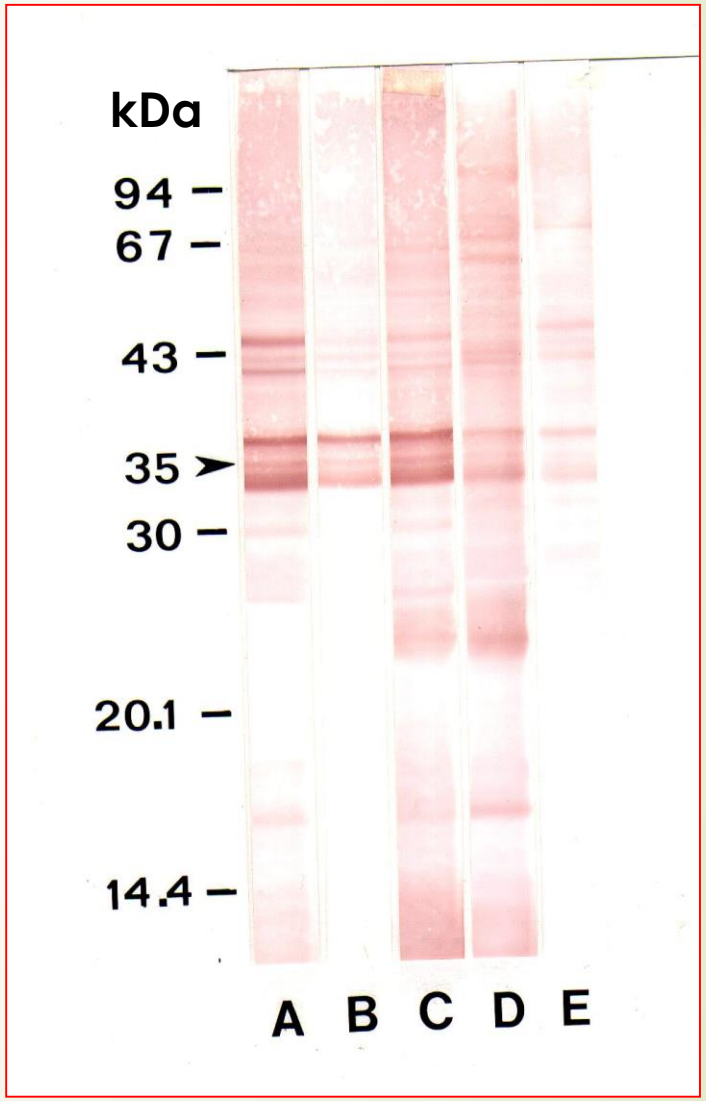
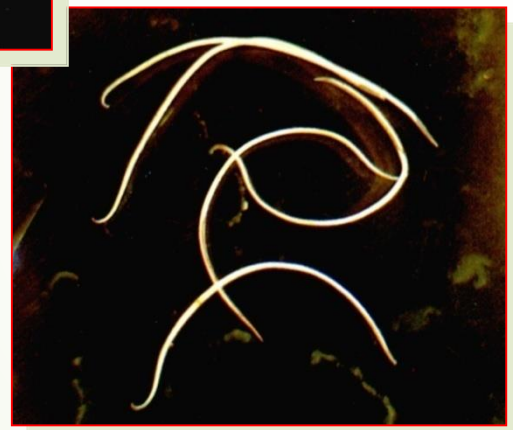
A B C D E F G H I J K L M N O P Q

พยาธิใบไม้ปอด Paragonimiasis

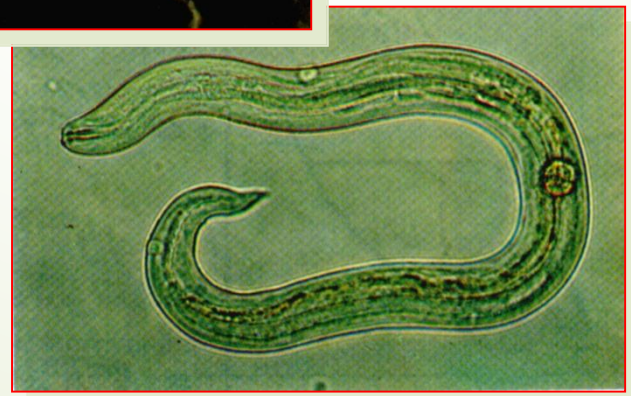


พยาธิหอยโข่ง (*Angiosstrongylus cantonensis*)

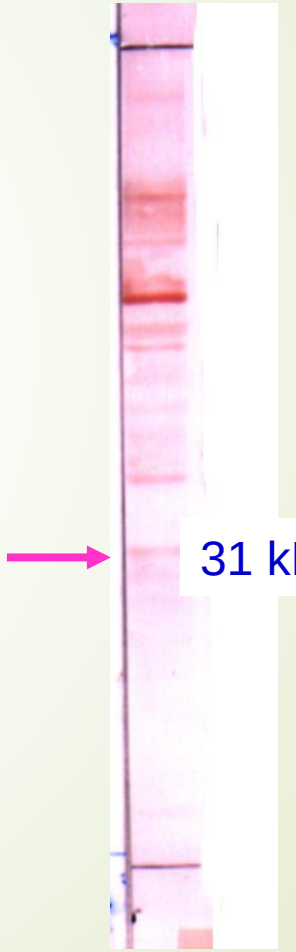
female



male

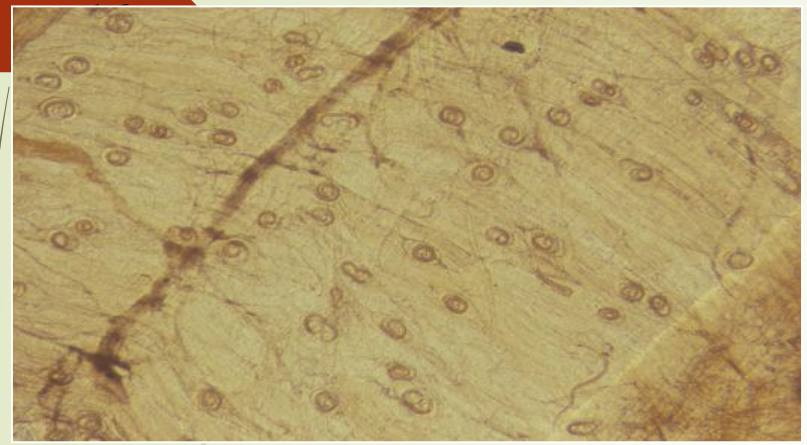


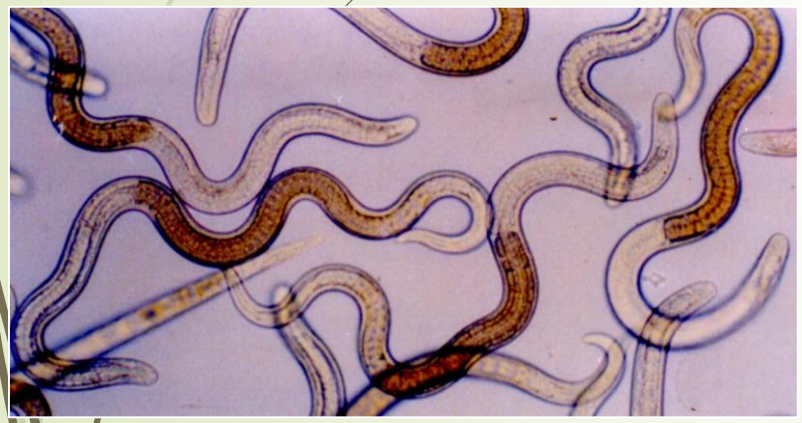
Infective stage larva

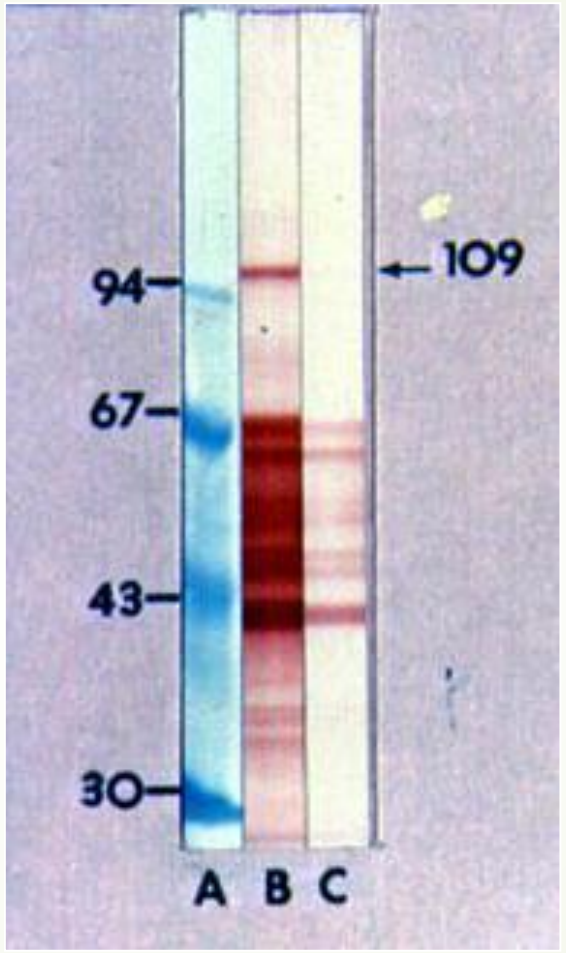


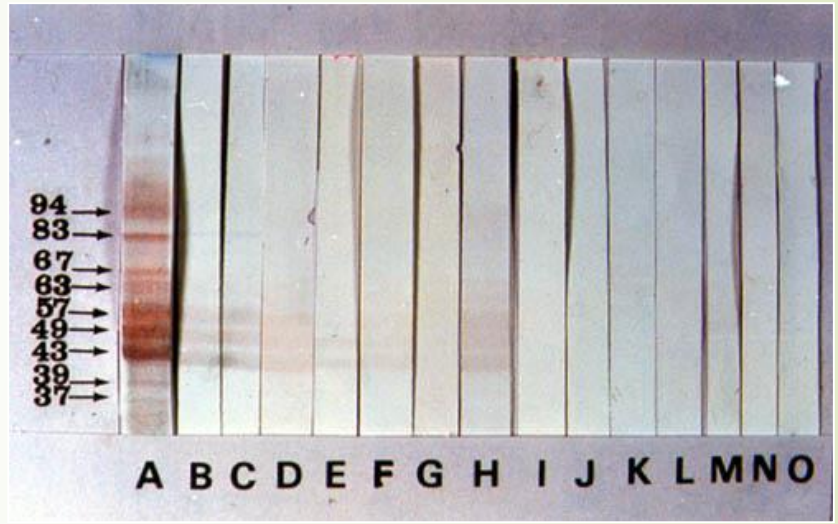
Trichinellosis

พยาธิทริคิเนลลา *Trichinella spiralis*

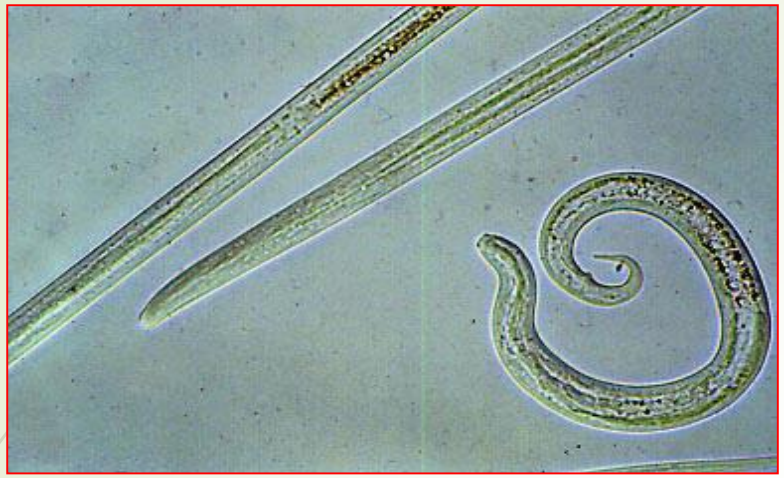


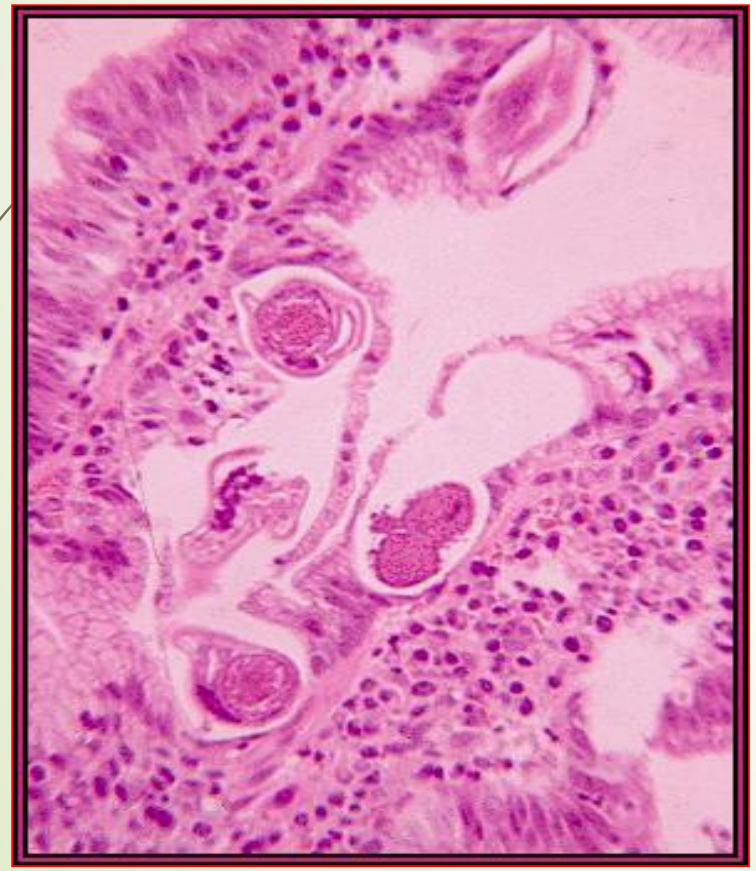


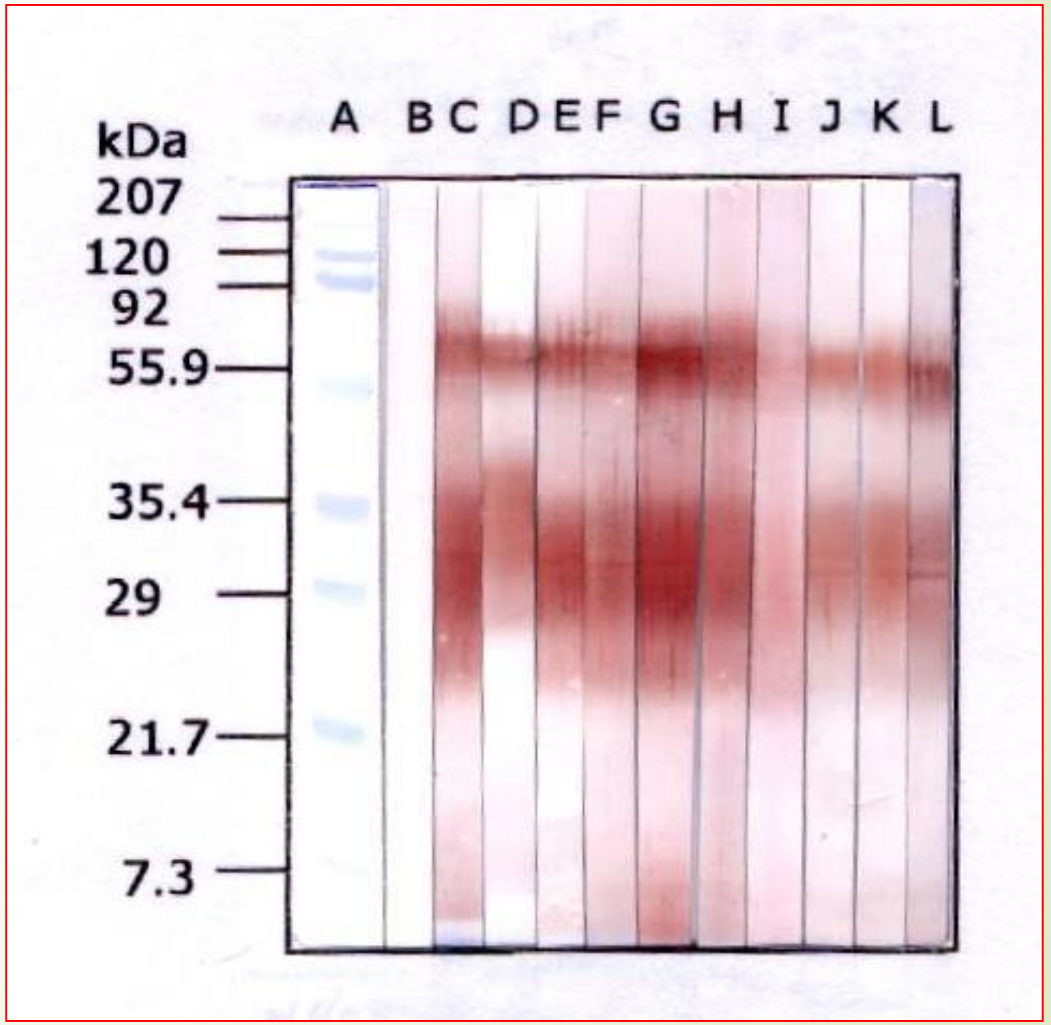


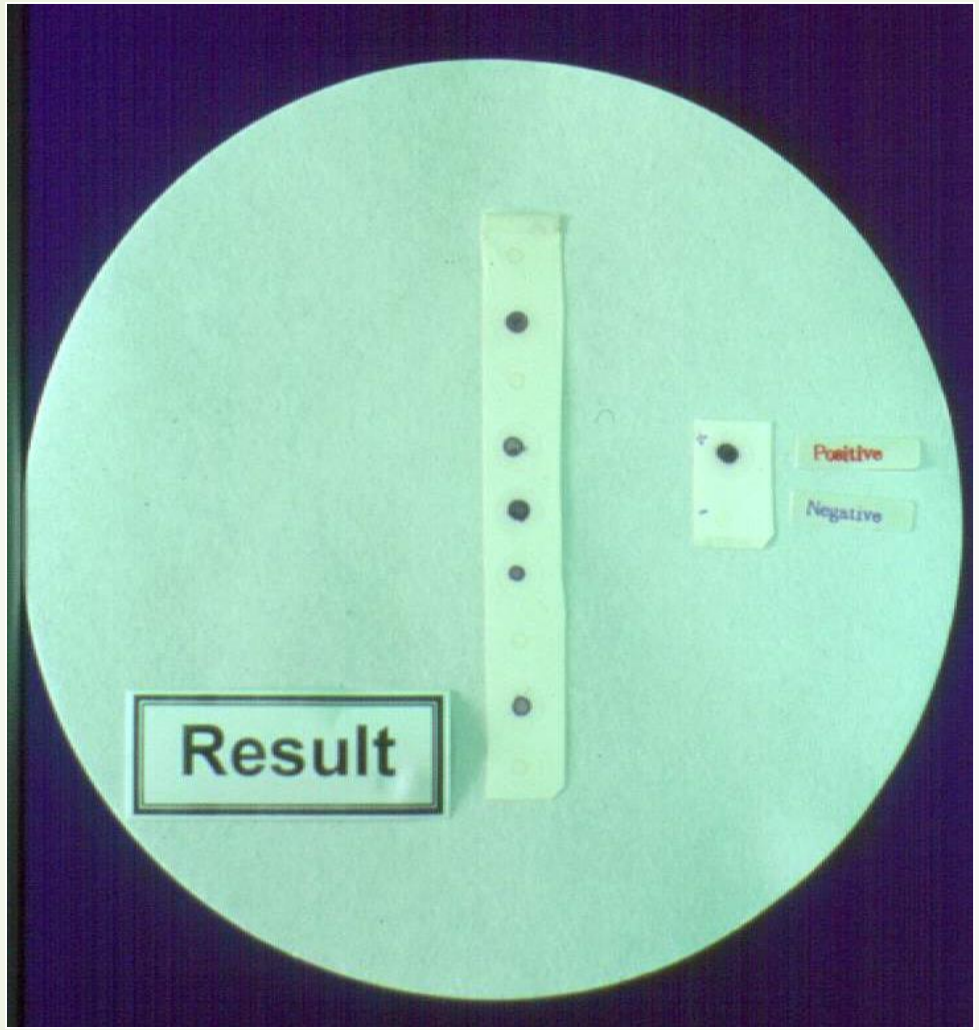


Strongyloidiasis

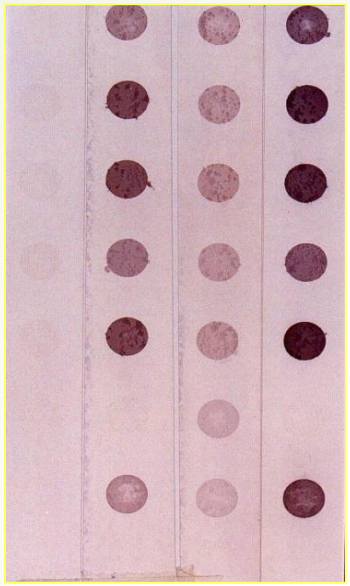







Result
+
Positive
-
Negative

ชุดตรวจวินิจฉัยโรคฉี่หนู



L. Autumnalis (Akiyami A)

L. Ballum

L. Djaseman

L. Saigon

L. Wolffi

L. biflexa Patoc

L. Icterohaemorrhagiae

negative

P3x-63-Ag8.653

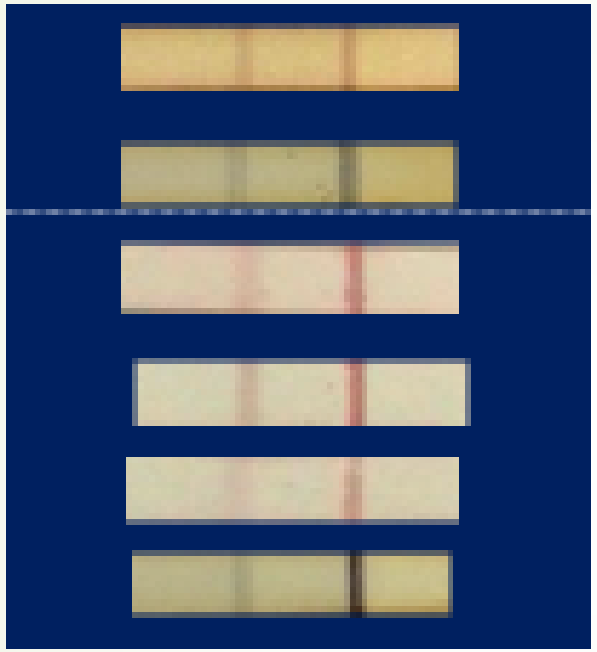
LD5

LF9

LE1

Immunochromatographic test kit for *Salmonella* detection

T C



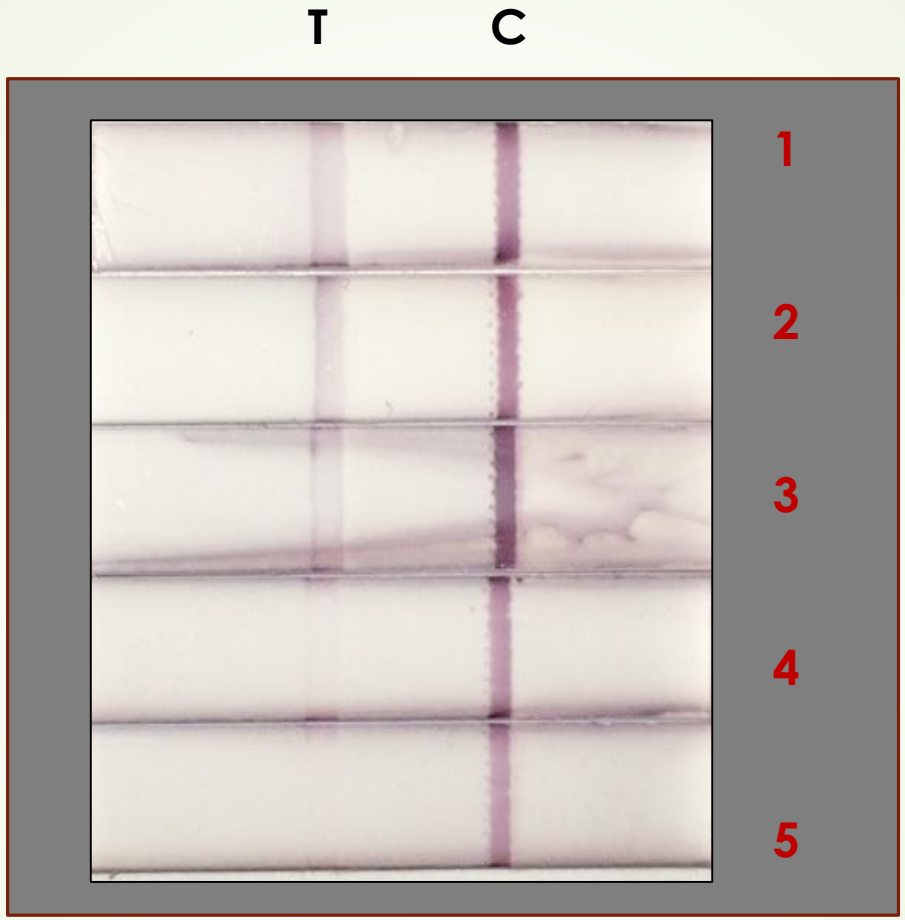
ผลบวก มีแถบสีแดงที่ T (Test line) คือมีเชื้อซัลโมเนลลาในตัวอย่างอาหาร

Control line (C) ต้องมีแถบสี

T C

ผลลบ ไม่มีแถบสีแดงที่ T (Test line) คือไม่มีเชื้อซัลโมเนลลาในตัวอย่างอาหาร

Control line (C) ต้องมีแถบสี


T
C
1
2
3
4
5

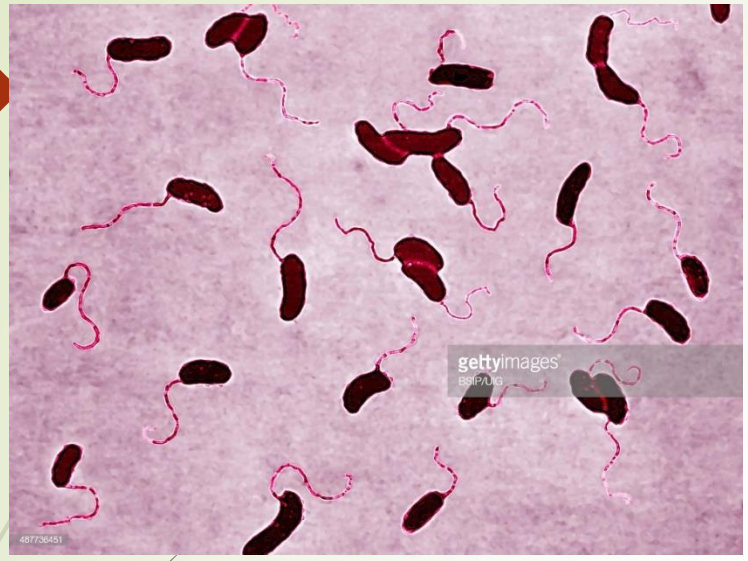
ICT for Scrub Typhus Dx

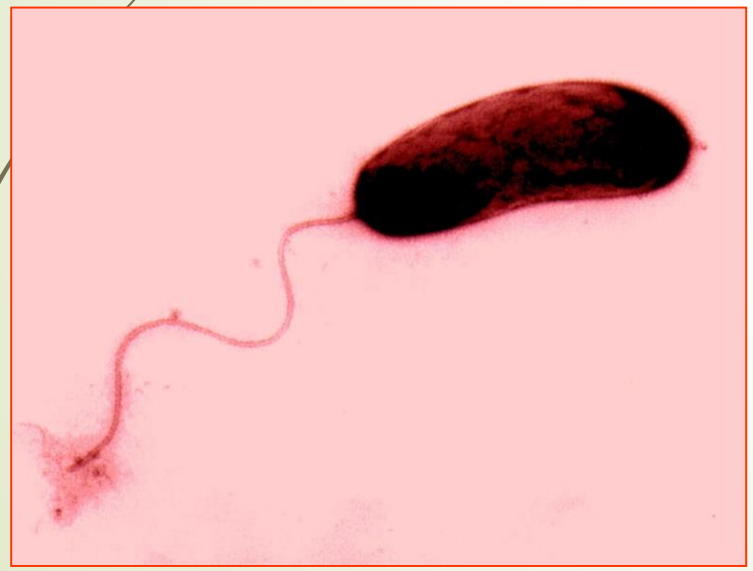
Scrub Typhus-positive (11-1-103)

Scrub Typhus-positive (11-1-304)

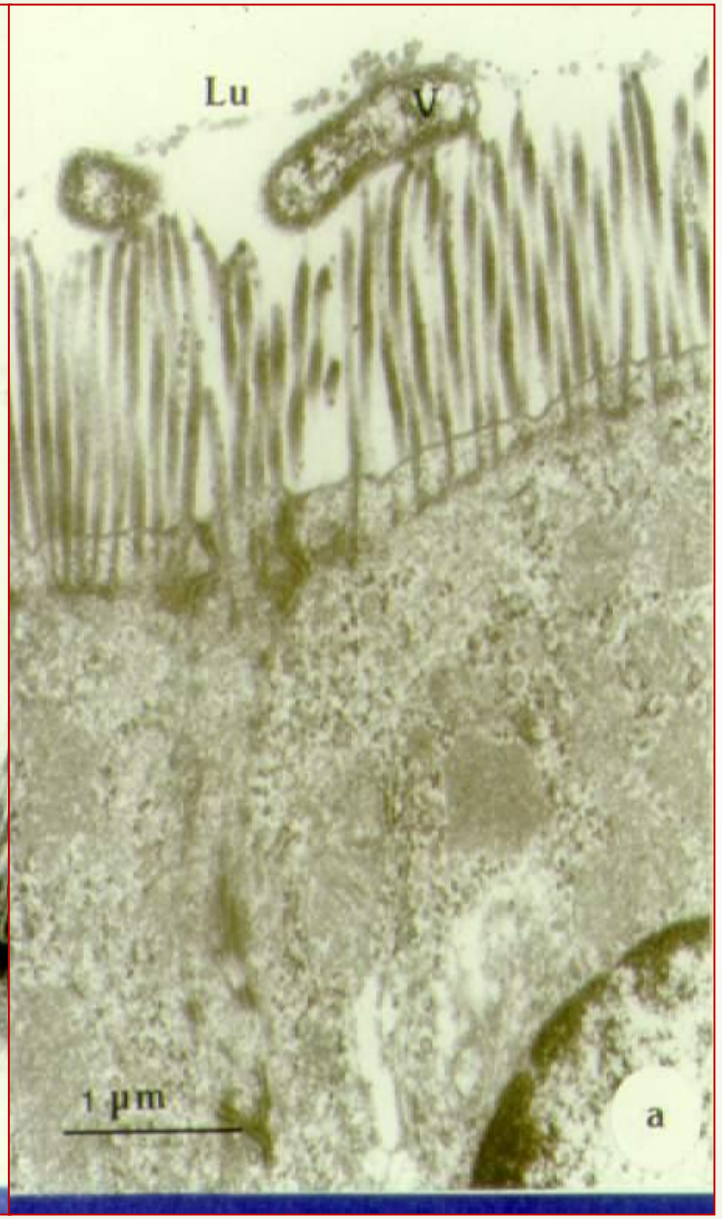
Scrub Typhus-negative (Lepto 0524)

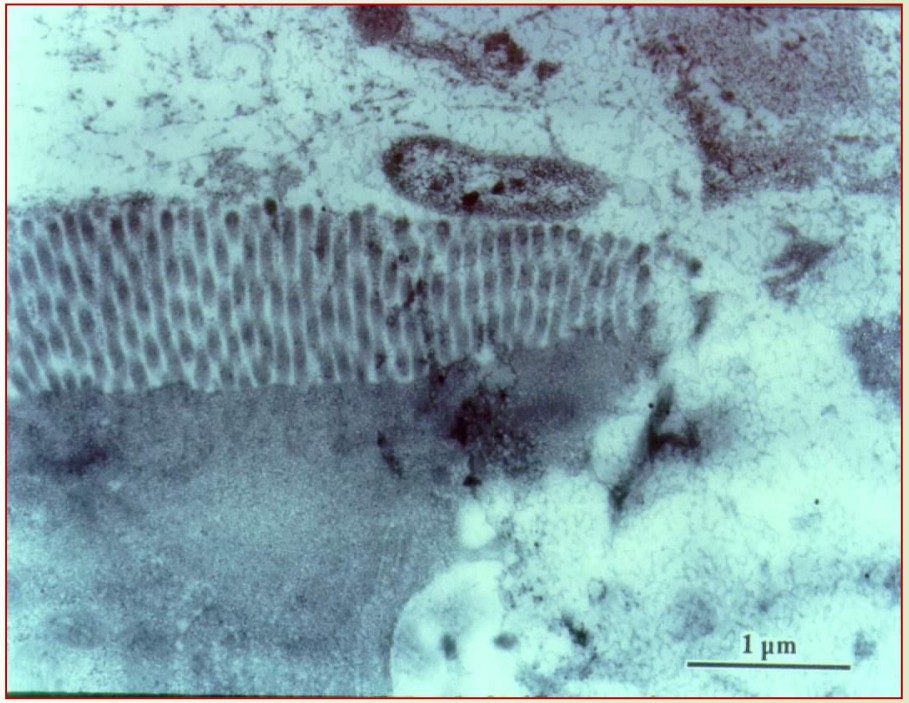
Scrub Typhus-negative (Dengue 0651)


gettyimages




Lu
V
1 µm
b

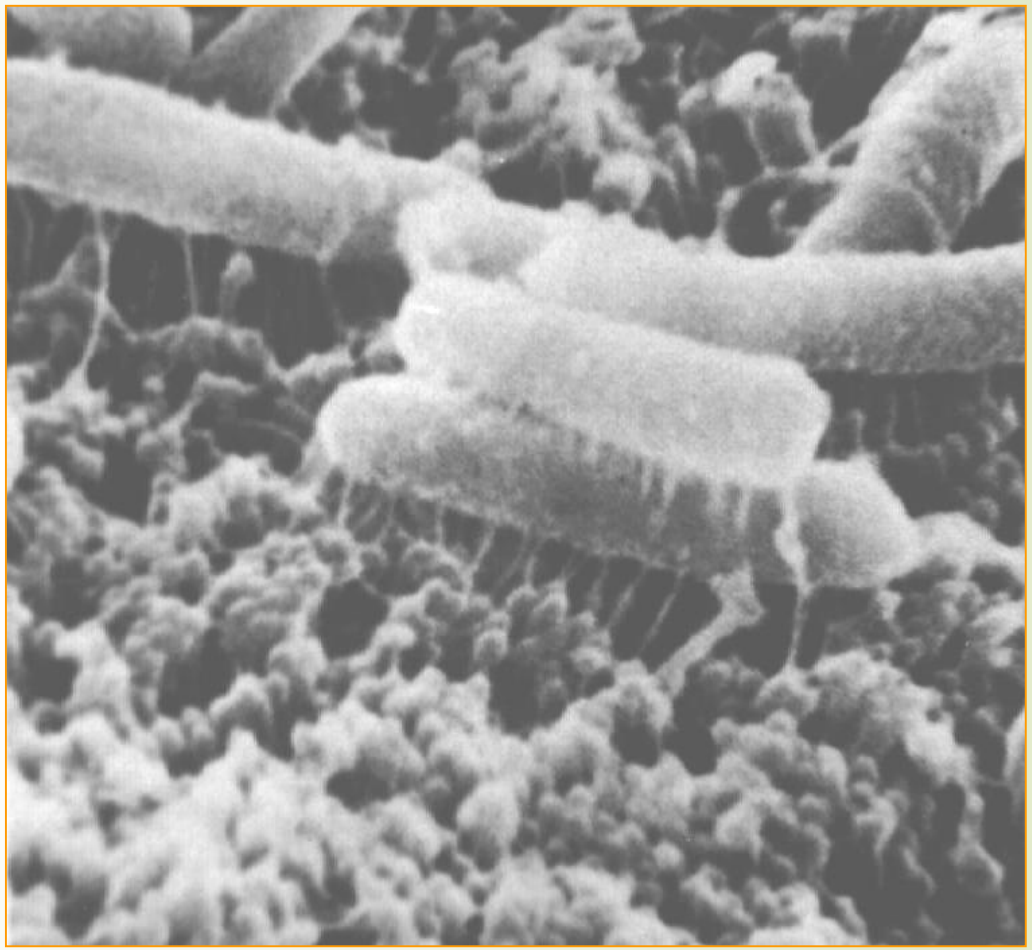

Lu
V
1 µm
a


1 µm

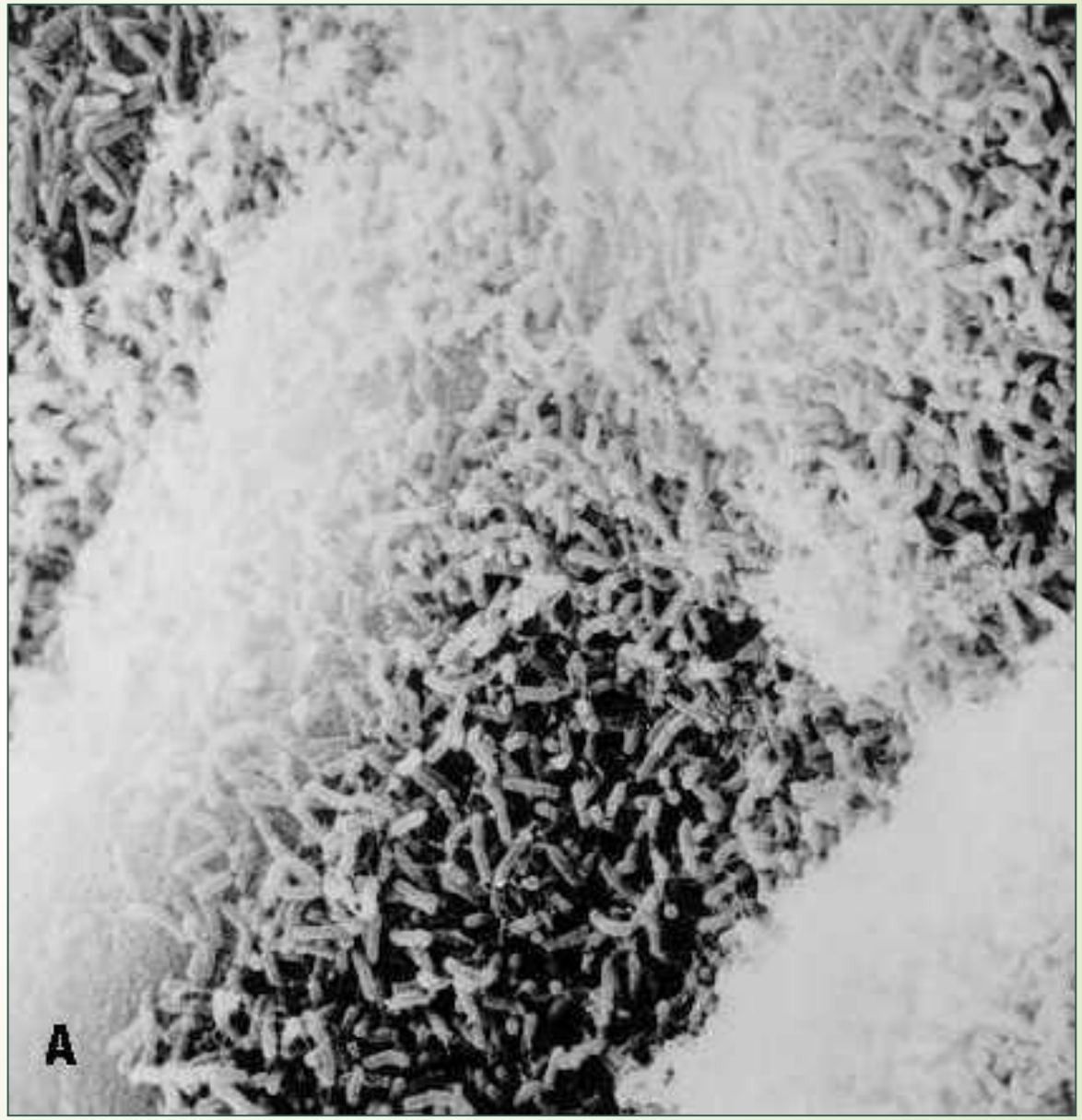

B


C

Vibrio cholerae attachment to microvillus of intestinal epithelial cell *via* a toxin-co-regulated pilus (TCP)



V. cholerae attachment and colonization in small intestine



Infect Immun 14:527, 1976

Subunit oral cholera vaccine

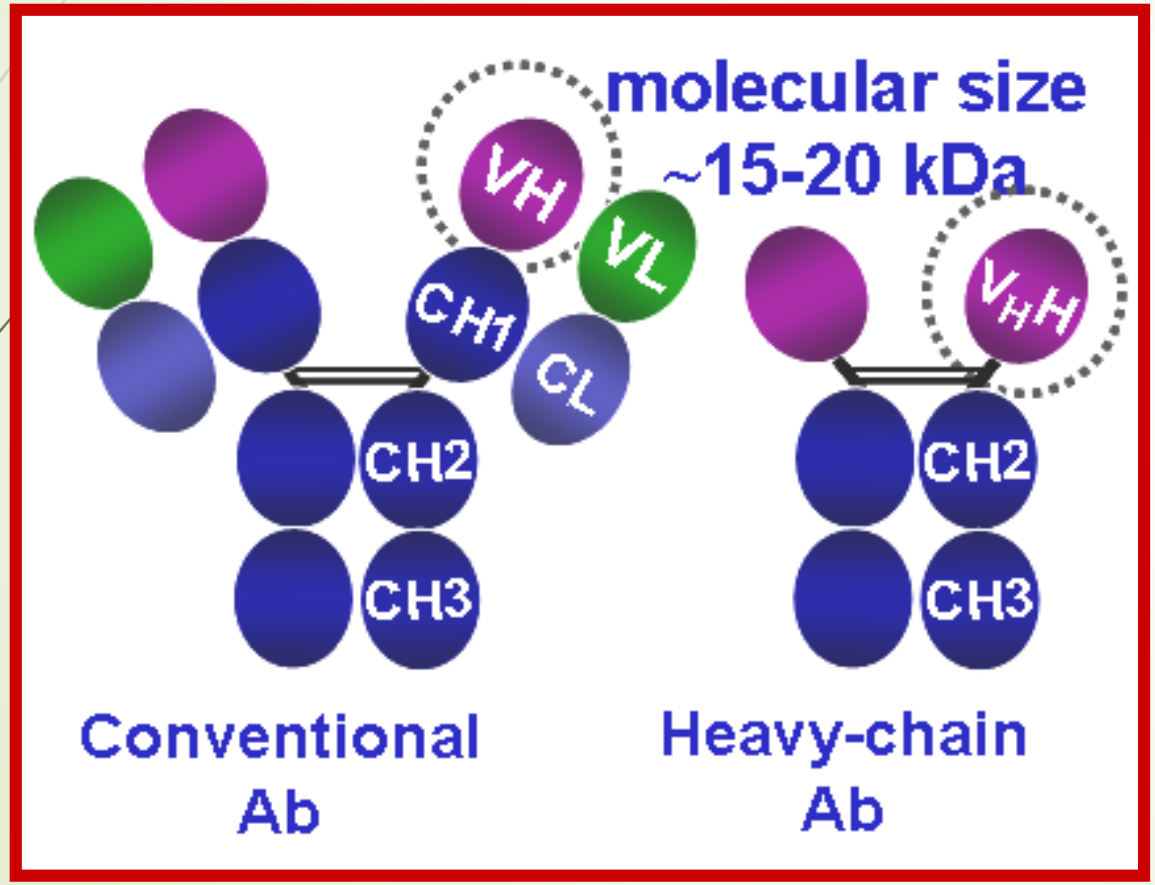
1. Toxin co-regulated pili
2. Lipopolysaccharide

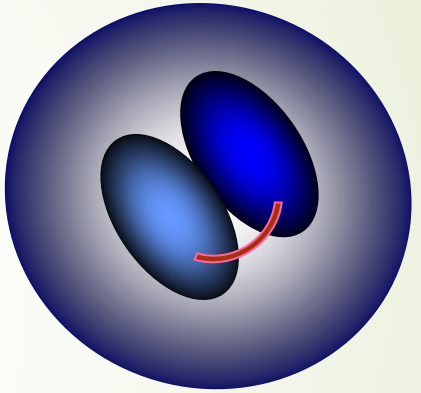
} Prevent attachment

3. B subunit of cholera toxin → Neutralize toxin

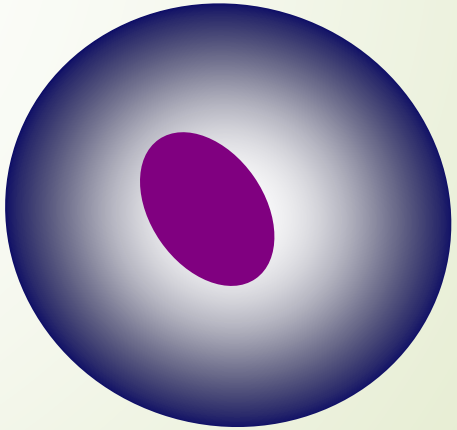
↑ Liposome as adjuvant

Therapeutic antibodies





scFv



nanobody

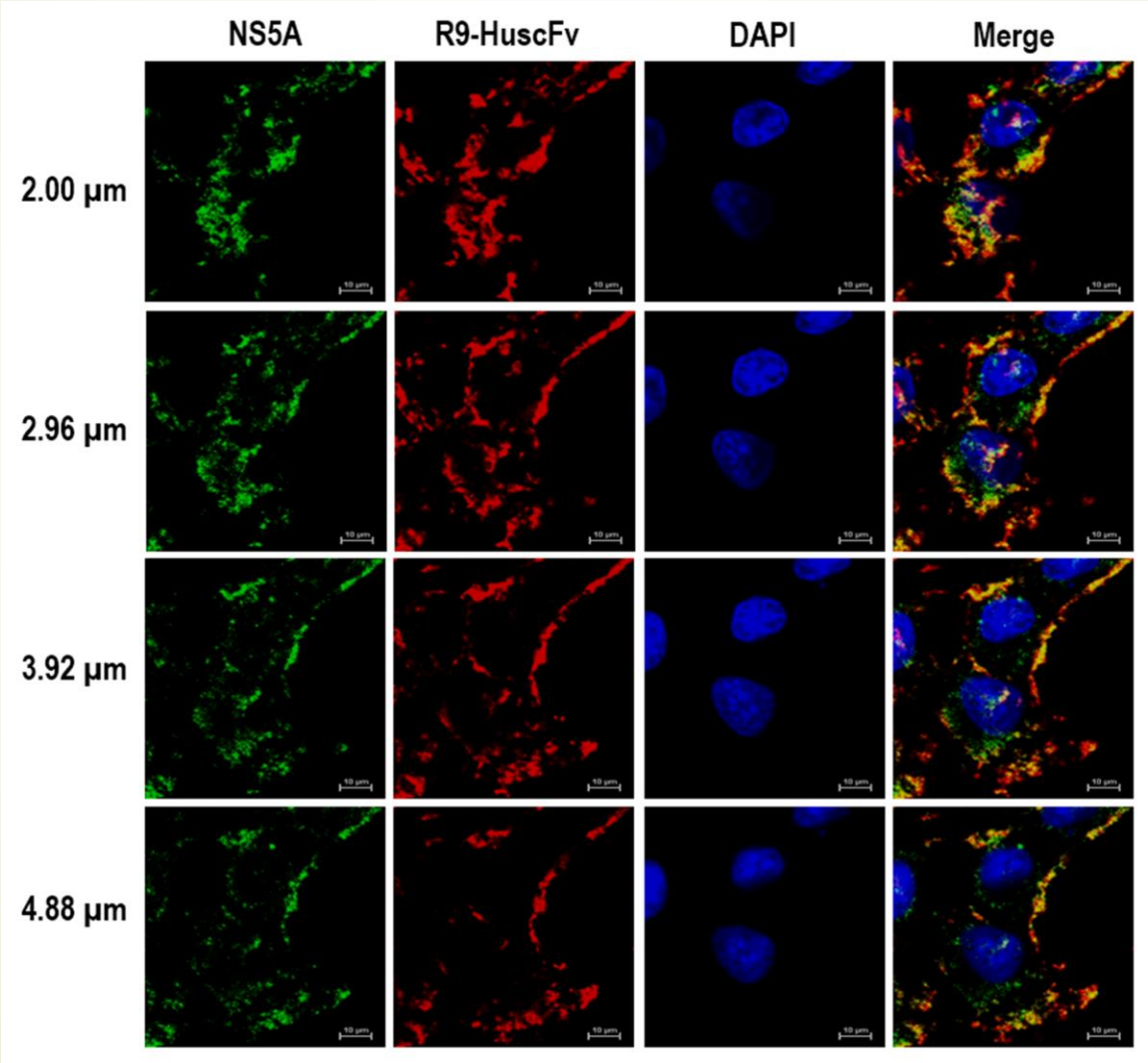
Research Area

1. Engineered fully human antibodies
2. Engineered humanized nanobodies
3. Transbodies (cell penetrating Ab)

- **Viruses:** Influenza, HCV, EV71, Ebola, porcine epidemic diarrhea (PEDV), SARS-CoV-2, etc.
- **Bacteria/toxins:** tetanus, diphtheria, pertussis, TSST-1, Exotoxin A, botulinum
- **Animal venom/toxin:** cobra neurotoxins, phospholipase A2, kaouthiagin (snake venom metalloproteinase); Tetrodotoxin
- **Cancers:** OX40, PD1/PD-L1, BITE, GD2, Car-T cells, etc.

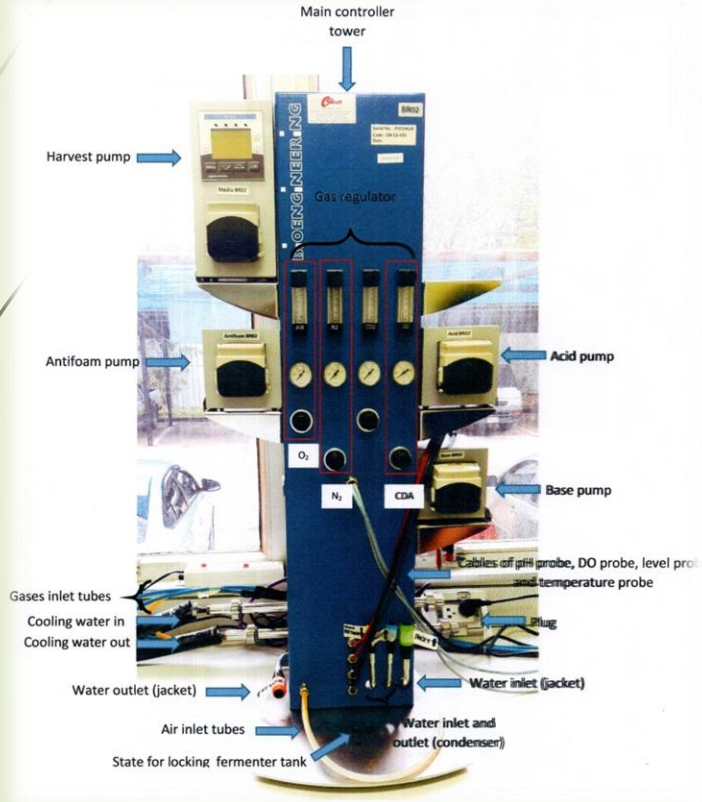
GMP Production

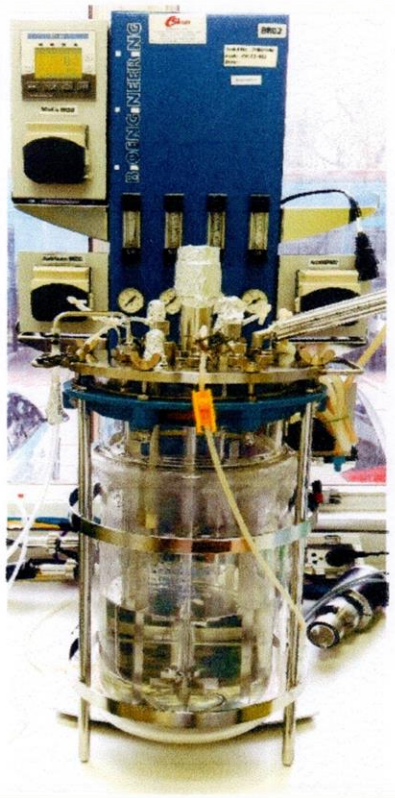
Cell penetrating antibody (Transbody) against HCV NS5A protein

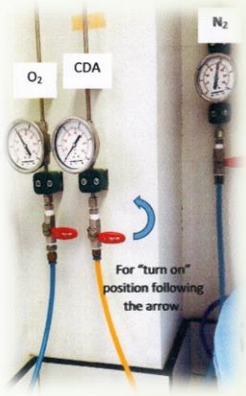


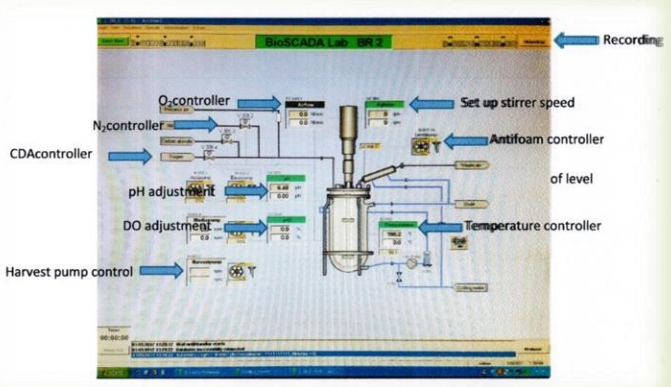
Batch-fermentation of human scFvs in pilot plant (MuBio)

Fermenter, 10-L Bioengineering



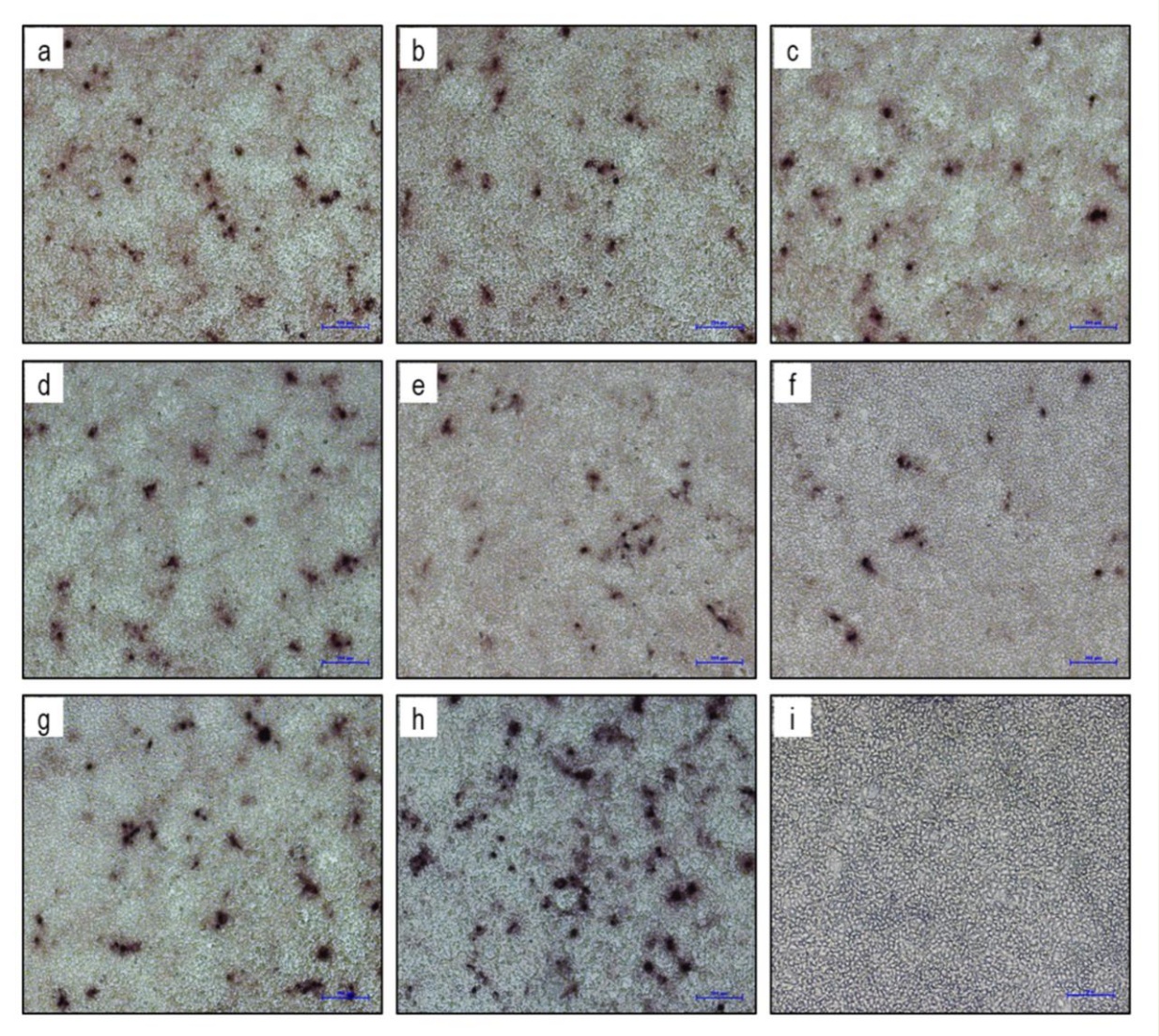






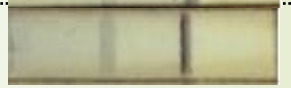
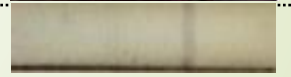
That’s all for today

Foci assay for detection of infectious HCV in cells



Therapeutic efficacy of transbody to HCV NS5A

Examples of results: culture method, PCR, and ICT of food samples

Date	Markets	Sample	Result of *Salmonella* culture	Real-time PCR (Ct)	ICT	
8-09-14	Market 1	Pork1	Negative	-(30.64)	Negative	
		Pork2	Negative	-(29.62)	Negative	
		Chicken1	Negative	-(29.64)	Negative	
		Beef1	Positive	+(16.22)	Positive	
29-09-14	Market 2	Pork3	Positive	+(15.75)	Positive	
		Chicken2	Positive	+(16.04)	Positive	
		Chicken3	Positive	+(15.38)	Positive	
		Chicken4	Positive	+(15.57)	Positive	
29-09-14	Market 3	Pork4	Positive	+(15.37)	Positive	
		Beef2	Positive	+(16.69)	Positive	
6-10-14	Market 4	Pork5	Positive	+(18.4)	Positive	
		Pork6	Positive	+(17.79)	Positive	

V. cholerae O1 Detection in Rectal Swabs of Diarrheic Patients by Dot-ELISA and Culture Method

Culture method	Dot-blot ELISA		Total
	Positive	Negative	
• **Culture positive**	14	0	14
• **Culture negative**	0	197	197
• **Total**	14	197	211

Complete agreement between the two methods

V. cholerae O1 Detection From Rectal Swabs of Case Contacts by Dot-ELISA and Culture Method

	Dot-blot ELISA		Total
	Positive	Negative	
• **Culture positive**	20	1	21
• **Culture negative**	0	394	394
• **Total**	20	395	415

Diagnostic sensitivity 95.2%