

# Exploration du virome humain : de la symbiose à la pathologie

Christelle Desnues, CR CNRS

IHU Méditerranée Infection, Marseille

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# What are viruses?

Simple definitions for real complexity...

Virus means “poison, venom” in Latin

Viruses are small (with exceptions), infectious, obligate intracellular parasites depending on host cells to replicate. Because they lack the resources for independent existence, they exist on the borderline of the definition of life.

The virion (virus particle) consists of a nucleic acid genome surrounded by coat proteins (capsid) that may be enveloped in a host-derived lipid bilayer.

Viral genomes consist of either RNA or DNA. They may be single-, double, or partially double stranded. The genomes may be circular, linear, or segmented.

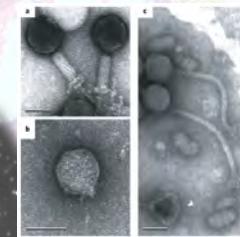
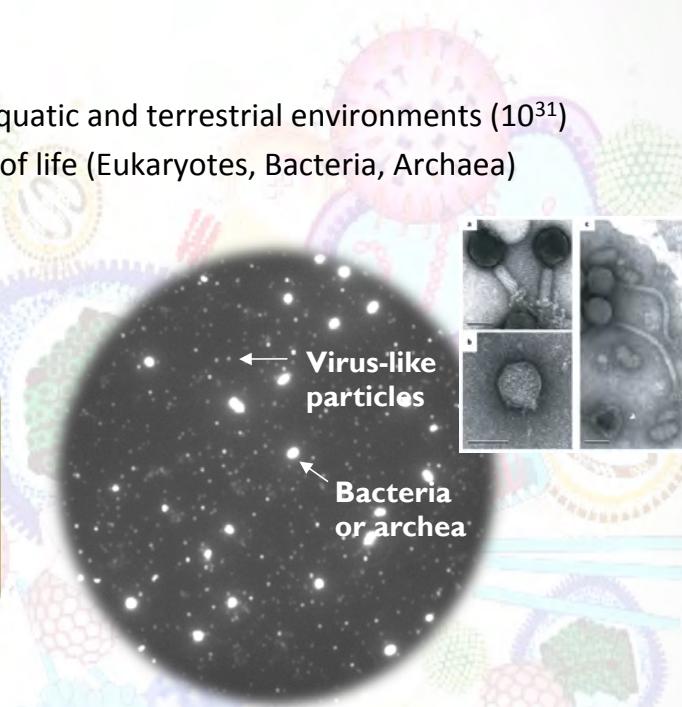
# Why working on viruses?

## ▪ Viruses are everywhere...

- ✓ Most abundant biological entity in aquatic and terrestrial environments ( $10^{31}$ )
- ✓ Infect organisms from the 3 domain of life (Eukaryotes, Bacteria, Archaea)



Abundances in 1 ml of seawater	
<b>Virus/phages</b>	<b><math>10^6</math>-<math>10^8</math></b>
Heterotrophic bacteria	1,000,000
Photosynthetic bacteria	100,000
Protozoa	4,000
Algae	3,000
Zooplankton	<<1



## ▪ Viruses impact the ecosystem functions

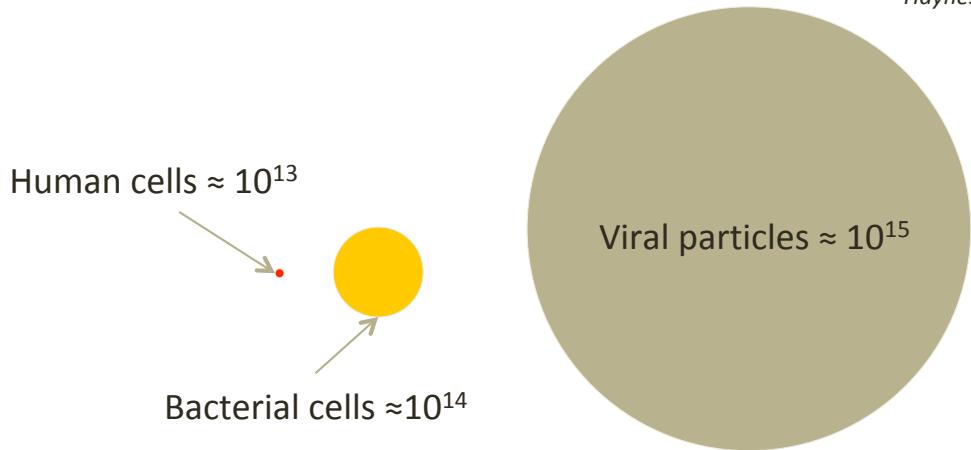
Through their lytic and lysogenic cycles, viruses play a fundamental role on microbial growth rates, nutrient cycling, genetic exchanges (and thus diversity, adaptation and evolution)

Suttle, *Nature* (2005)  
Desnues et al., *Nature* (2008)

# Viruses and humans

- ✓ It is estimated that there are 100 times more viruses in our body than human cells

*Haynes & Rohwer (2010)*



- ✓ The number of free virions varies from  $10^9$  particles/g for body barriers (gut, oropharynx, skin) to  $10^7$  and  $10^5$  particles/ml for urine and blood, respectively

*Haynes & Rohwer (2010)  
Mokili, Curr. Op. Virol. (2012)*

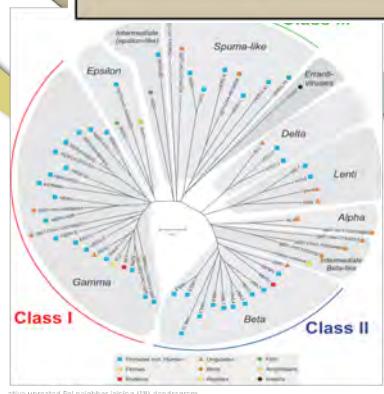
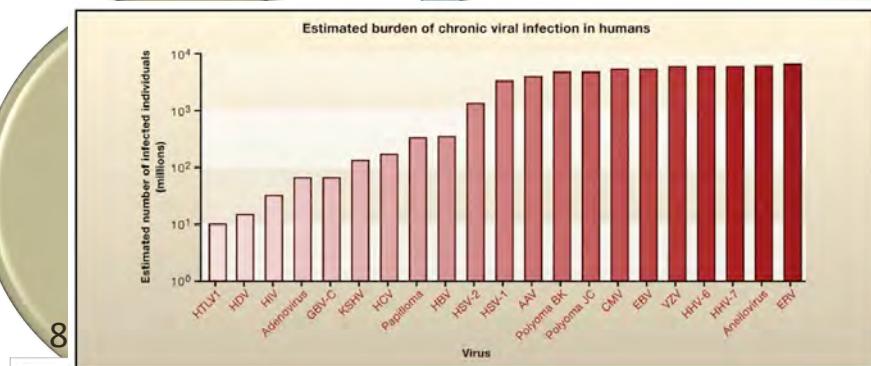
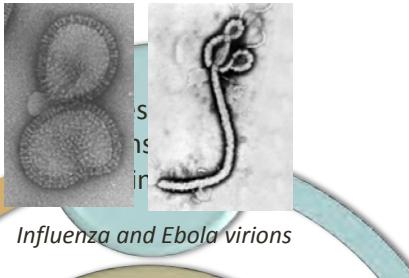
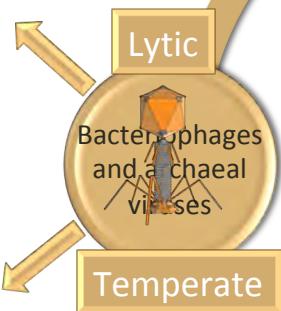
- ✓ Collectively, this viral flora is known as the **human virome**

The human virome is defined as the repertoire of all viruses that are found on the surface and inside our body

This includes viruses that cause acute, latent or chronic, symptomatic or asymptomatic infections

# The human virome

- ✓ Dysbiosis by predating on beneficial strain
- ✓ Maintain homeostasis by killing pathogens



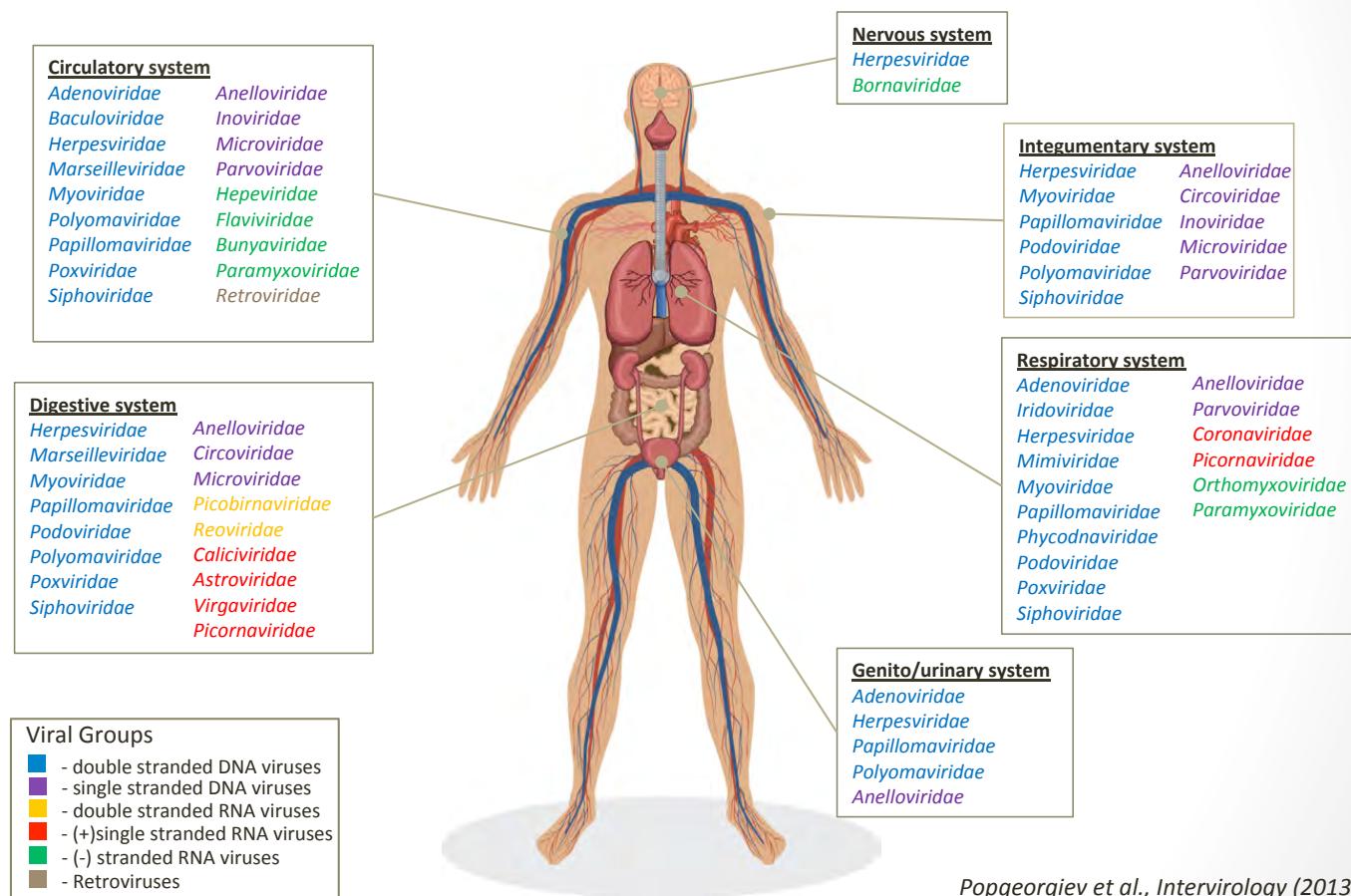
- ✓ Change the microbial host phenotype
- ✓ Increased pathogenicity, antibiotic resistance, and perhaps new metabolic capacity

Each adult is chronically infected by 8-10 viruses

Virgin et al., Cell (2009)  
Virgin, Cell (2014)

# The human silent virome

The human body is a composite of highly heterogeneous ecosystems and viral communities differ in terms of abundance and composition within anatomical sites



# How to study viruses?

Researches and progresses in virology are technologically-driven

## 40's: Electron microscopy

Visualization of viral particles.

Elucidation of ultrastructure and cellular/tissular localizations

## 50's : cell culture

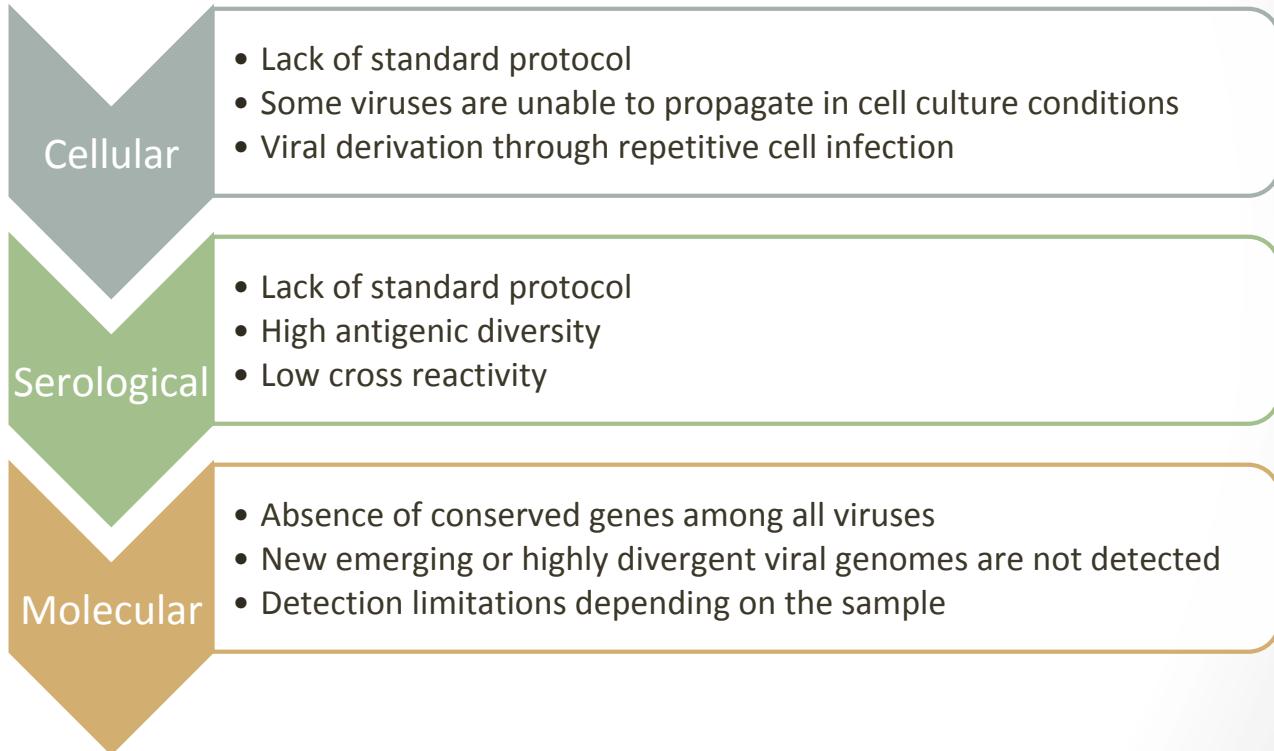
Isolation and production of virions. Study of the mechanisms of infection  
Experimental models

## 80's: Molecular biology

Rapid detection of novel viruses (or variants).  
Quantification of viral loads.  
« Gold standard » in clinical diagnostic

# How to study viruses?

## Classical techniques for virus discovery/ identification



## *Classical techniques for virus identification*



## *The metagenomic era*



Viral metagenomics consist in the sequencing of all viral nucleic acids from a sample (culture independent) and in their analysis using bioinformatics

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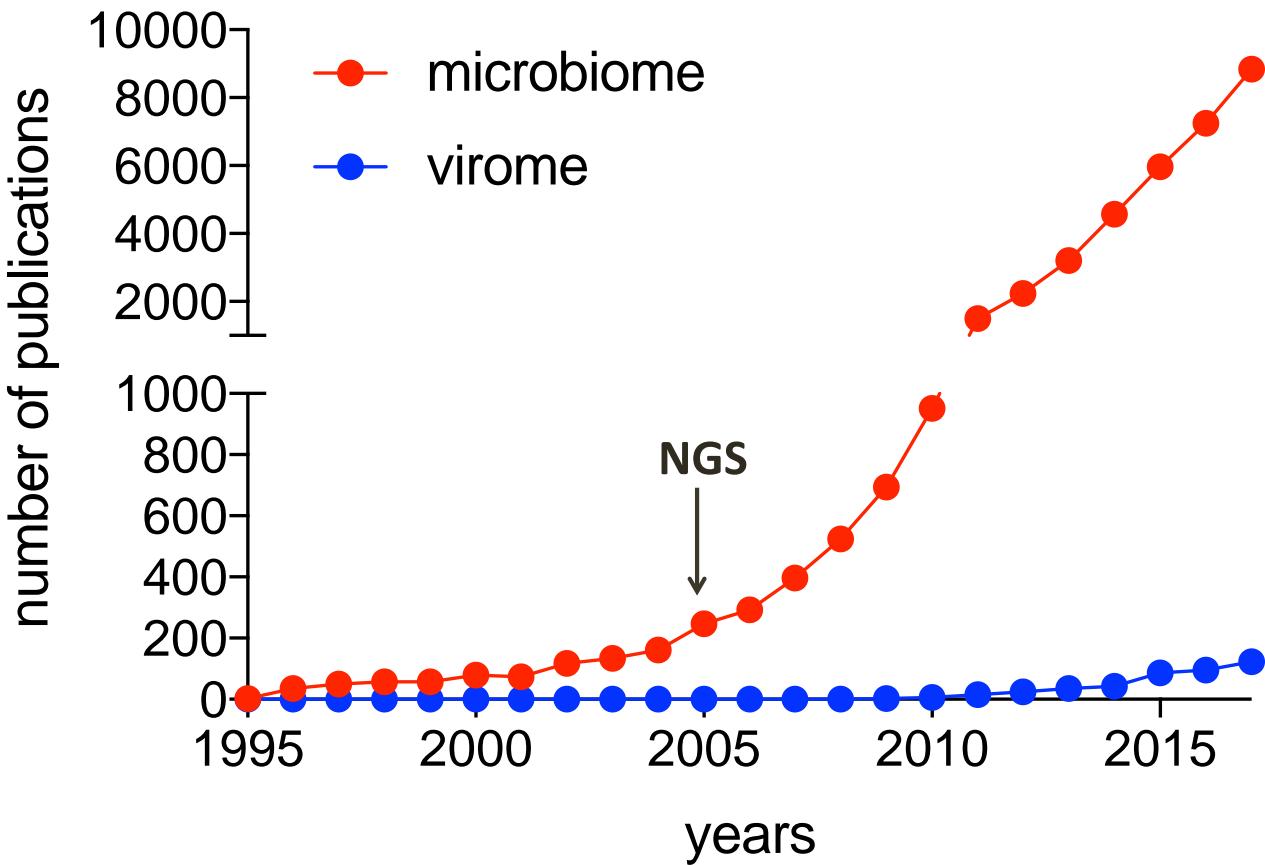
## Mid-2000: NGS

Meta-analyses:  
study of viruses at the community scale  
(composition, structure, function diversity).

Viral discovery

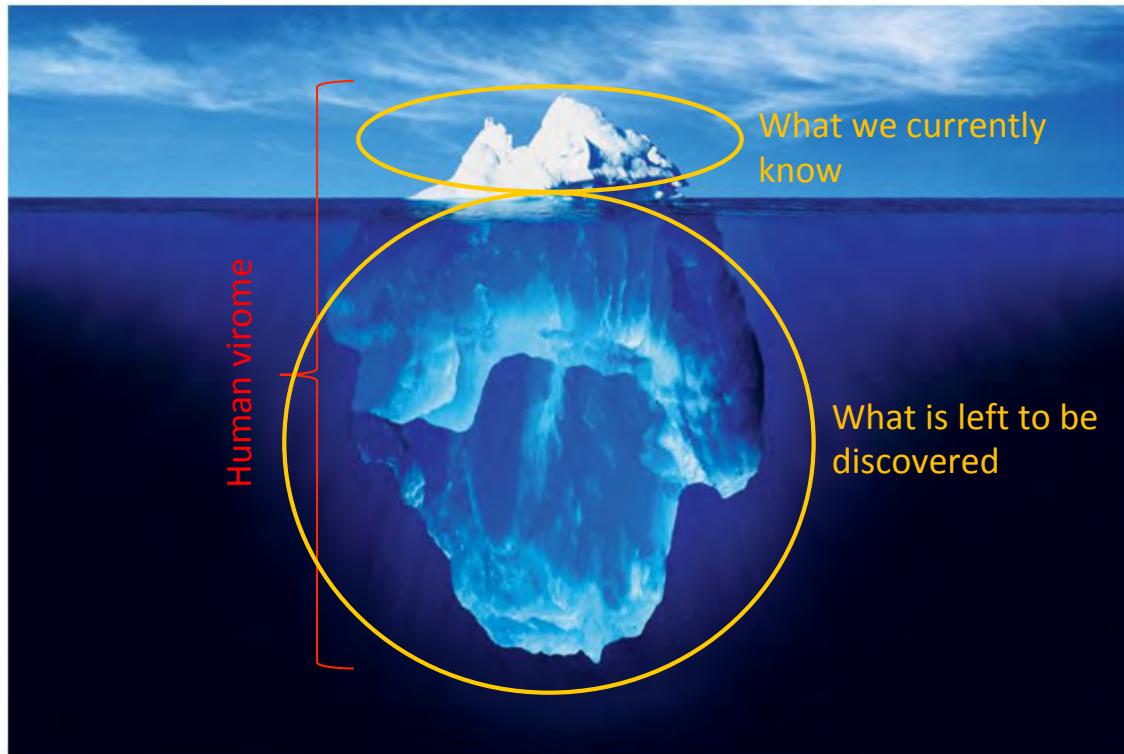


# The virome, a neglected part of the microbiome...



The virome

# The human virome: the hidden face of the iceberg



An essential part of our own ecology remains *terra incognita*

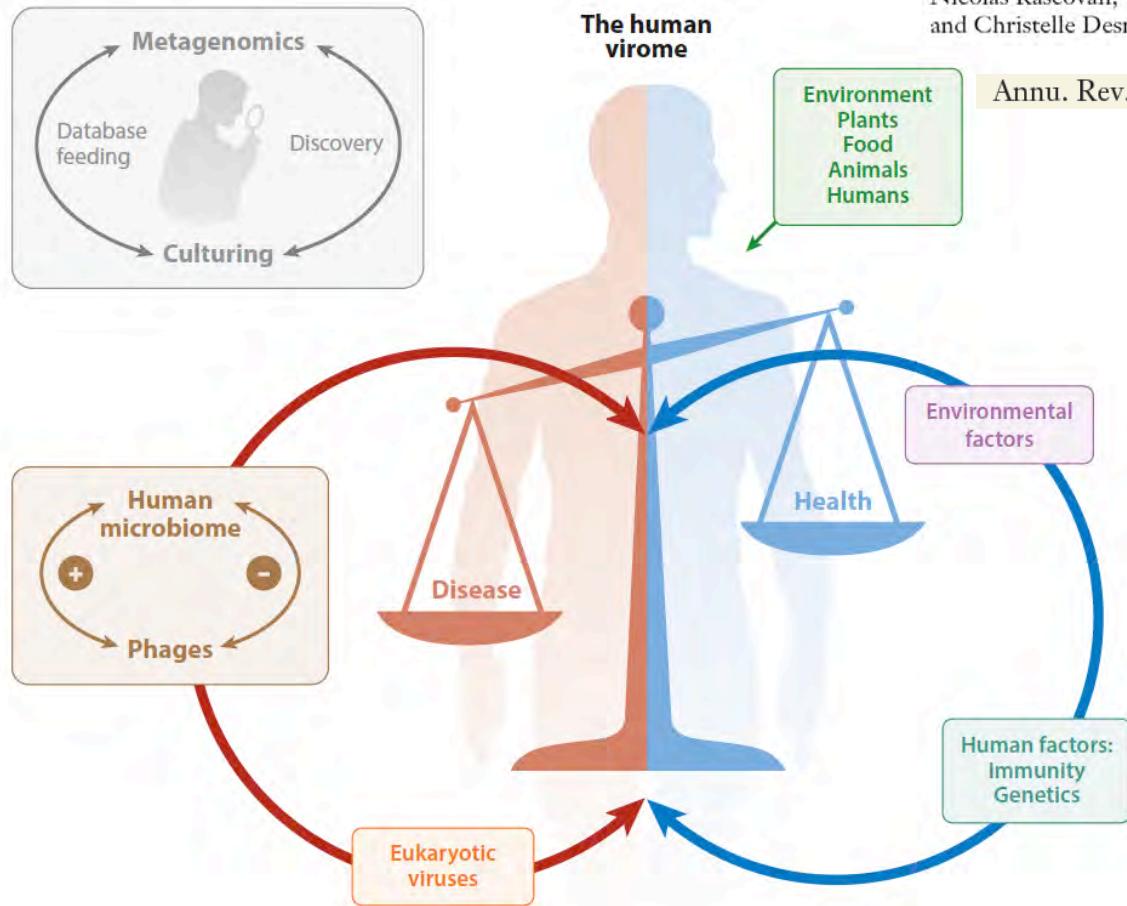
The human virome

# The human virome

Metagenomics and the Human Virome in Asymptomatic Individuals

Nicolás Rascovan,<sup>1,2,\*</sup> Raja Duraisamy,<sup>1,2,\*</sup> and Christelle Desnues<sup>1,2</sup>

Annu. Rev. Microbiol. 2016. 70:125–41



Virus-host interactions go beyond simple parasitism

Positive, neutral or negative interactions depend on the anatomical site, the immune/genetic status of the host and the presence of other viruses/microbes

# Inside the human virome: the good, the bad and the neutral...

## The example of the blood compartment

Characterization of the blood virome is critical:

- **For the safety of blood-derived transfusion products**  
(currently screened for *HIV-1 and 2, human T-lymphotropic virus-1 and 2, hepatitis C virus, hepatitis B virus, West Nile virus, and Zika virus*)
- **For the survey and identification of emerging pathogens**

# Method for discovering novel DNA viruses in blood using viral particle selection and shotgun sequencing

Vol. 39, No. 5 (2005)

Mya Breitbart and Forest Rohwer

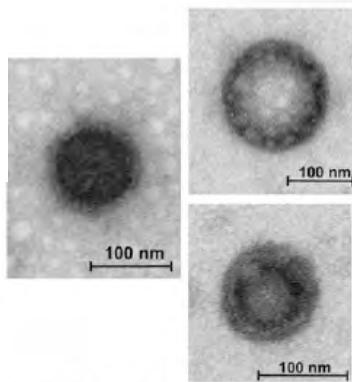
Asymptomatic blood donors

Library (No.)	Top Known Virus Hit	TBLASTX E-value
1	TTV-like mini virus	9e-04
1	TTV-like mini virus	3e-25
2	TTV-like mini virus	2e-15
1	Heliothis zea virus 1	1e-15
1	Heliothis zea virus 1	2e-16
1	Heliothis zea virus 1	9e-17
1	Heliothis zea virus 1	4e-11
1	Pseudorabies virus	7e-05
1	Bacteriophage φ3626	2e-27
1	Cowpox virus	1e-19
1	Cowpox virus	1e-19
1	Human endogenous retrovirus H (HERV-H)	1e-25
1	Human endogenous retrovirus H (HERV-H)	5e-25
1	Bacteriophage EJ-1	2e-05
1	Human herpesvirus 3	5e-05
1	TTV	2e-24
1	TTV	1e-04
2	Small anellovirus 2 <sup>a</sup>	3e-06
1	Methanobacterium phage psiM2	1e-04
1	Spodoptera litura nucleopolyhedrovirus	7e-08
1	Chlamydia phage φCPAR39	1e-09
3	SEN virus <sup>a</sup>	8e-38

TTV, Torque teno virus.

<sup>a</sup>Sequences that were further analyzed to identify phylogenetic relationships to known viruses (Figure 3, B–D).

**BioTechniques**  
The International Journal of Life Science Methods



Shotgun libraries – sanger sequencing

3 libraries (total of 50 blood samples)

22 sequences:

- Novel anelloviruses
- HHV3 (Varicella zoster virus)
- Other eukaryotic viruses
- bacteriophages

Ahmed Moustafa<sup>1</sup>, Chao Xie<sup>2</sup>, Ewen Kirkness<sup>1</sup>, William Biggs<sup>1</sup>, Emily Wong<sup>1</sup>, Yaron Turpaz<sup>2</sup>, Kenneth Bloom<sup>1</sup>, Eric Delwart<sup>3</sup>, Karen E. Nelson<sup>4</sup>, J. Craig Venter<sup>1,4,\*</sup>, Amalio Telenti<sup>1,4\*</sup>

<https://doi.org/10.1371/journal.ppat.1006292> March 22, 2017

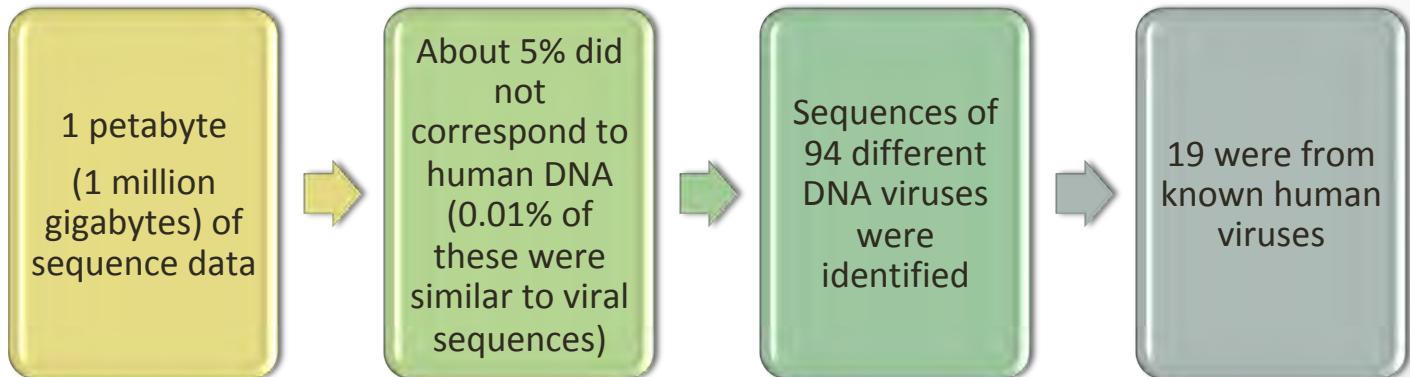


PNAS | October 18, 2016 | vol. 113 | no. 42 | 11901–11906

## Deep sequencing of 10,000 human genomes

Amalio Telenti<sup>a,b,1</sup>, Levi C. T. Pierce<sup>a,c,1</sup>, William H. Biggs<sup>a,1</sup>, Julia di Julio<sup>a,b</sup>, Emily H. M. Wong<sup>a</sup>, Martin M. Fabani<sup>a</sup>, Ewen F. Kirkness<sup>a</sup>, Ahmed Moustafa<sup>a</sup>, Naisha Shah<sup>a</sup>, Chao Xie<sup>d</sup>, Suzanne C. Brewerton<sup>d</sup>, Nadeem Bulsara<sup>a</sup>, Chad Garner<sup>a</sup>, Gary Metzker<sup>a</sup>, Efren Sandoval<sup>a</sup>, Brad A. Perkins<sup>a</sup>, Franz J. Och<sup>a,c</sup>, Yaron Turpaz<sup>a,d</sup>, and J. Craig Venter<sup>a,b,2</sup>

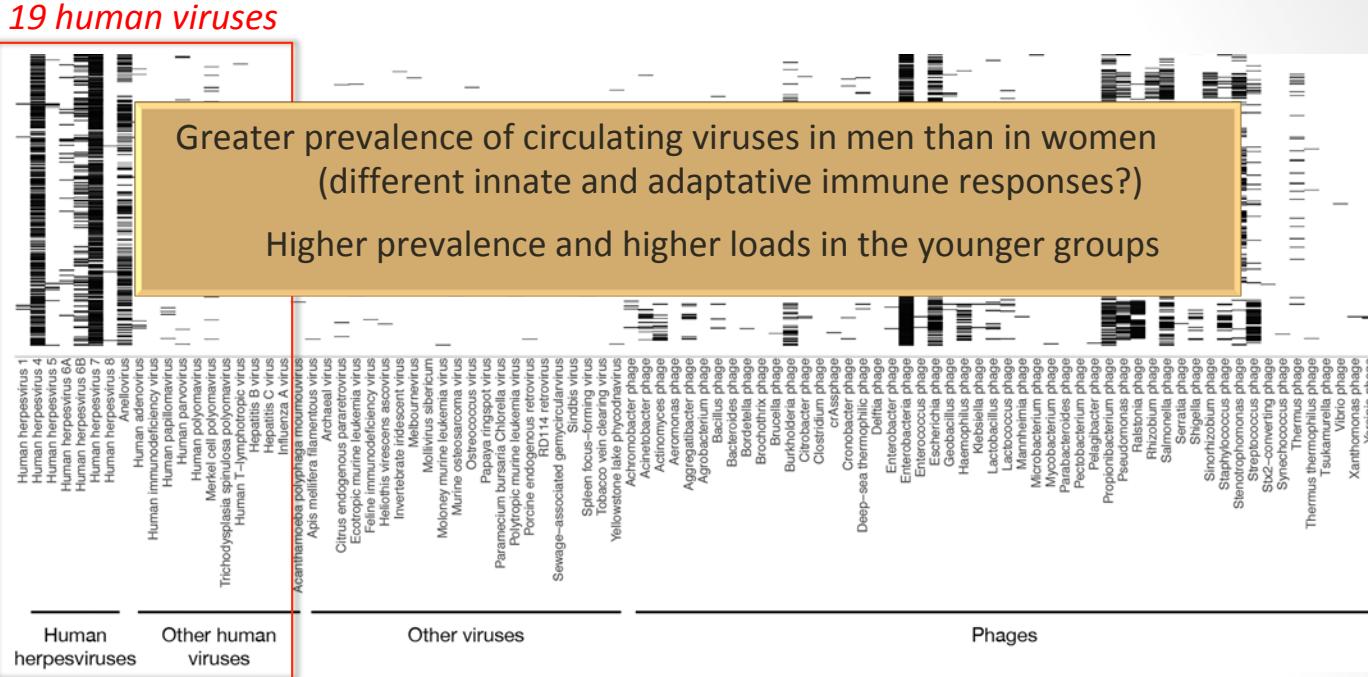
<sup>a</sup>Human Longevity Inc., San Diego, CA 92121; <sup>b</sup>J. Craig Venter Institute, La Jolla, CA 92037; <sup>c</sup>Human Longevity Inc., Mountain View, CA 94041; and <sup>d</sup>Human Longevity Singapore Pte. Ltd., Singapore 138542



## 19 human viruses

Greater prevalence of circulating viruses in men than in women  
(different innate and adaptative immune responses?)

Higher prevalence and higher loads in the younger groups



### Herpesviruses (0.1-20% of individuals)

Cytomegalovirus, Epstein-Barr virus, Herpes Simplex virus, and human herpesviruses 6, 7 and 8

Other human viruses (< 1%): papillomaviruses, parvoviruses, polyomavirus, adenovirus, human immunodeficiency virus and human T-lymphotropic virus

### Several persistent viral infection

# Redefining Chronic Viral Infection

Cell

Herbert W. Virgin,<sup>1,\*</sup> E. John Wherry,<sup>2,\*</sup> and Rafi Ahmed<sup>3,\*</sup>

Cell 138, July 10, 2009 ©2009 Elsevier Inc.

Persistent viral infection is a process in dynamic and metastable equilibrium

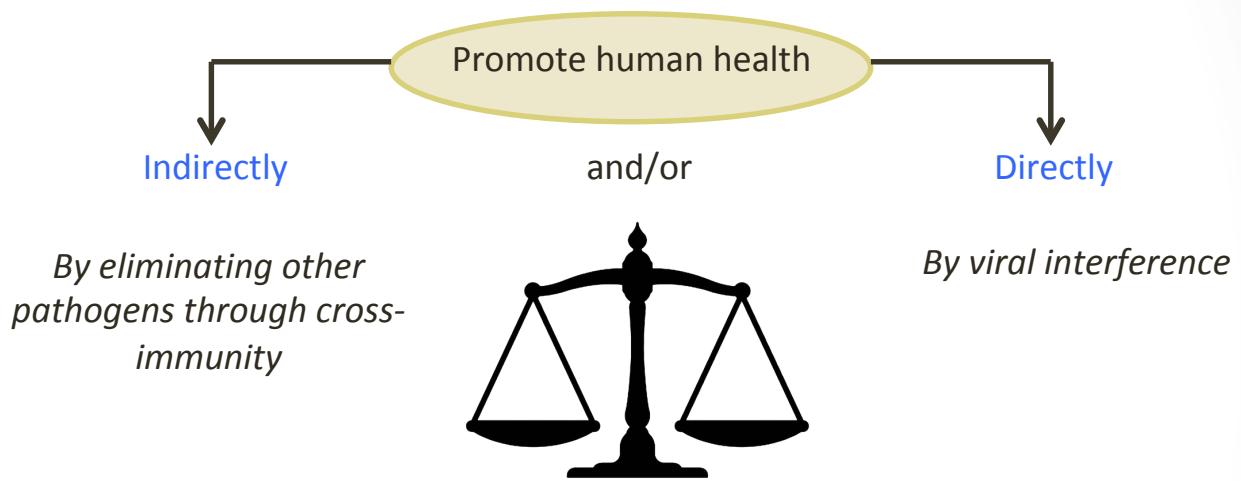
**Table 1. Chronic Virus Infections in Humans**

Virus, Primary Nucleic Acid, Estimated Percent of Humans Infected	Major Site of Persistence (Organ or Cell)	Acute Infection Examples	Disease during Chronic Infection		References
			Within Normal Hosts	Within Immunocompromised Hosts	
Human herpesvirus 6 (HHV-6), DNA, >90%	Lymphocytes?	Roseola	Unknown	Meningoencephalitis, secondary infections, immuno-modulatory?	Straus, 2000; Yamanishi et al., 2007
Human herpesvirus 7 (HHV-7), DNA, >90%	Lymphocytes?	Roseola	Unknown	Unknown	Straus, 2000; Yamanishi et al., 2007
Varicella zoster virus (VZV), DNA, >90%	Sensory ganglia neurons and/or satellite cells, lymphocytes	Chicken pox	Herpes zoster	Disseminated disease, hepatitis, pneumonitis	Zerboni and Arvin, 2008; Straus, 2000
Cytomegalovirus (CMV), DNA, 80%–90%	Myelomonocytic cells	Mononucleosis	Rare	Disseminated disease, vasculitis, pneumonitis, retinitis, hepatitis, gastroenteritis, meningoencephalitis	Mocarski et al., 2007
Epstein-Barr virus (EBV), DNA, 80%–90%	Pharyngeal epithelial cells, B cells	Mononucleosis	Burkitt's lymphoma, nasopharyngeal carcinoma, non-Hodgkin's lymphoma	CNS lymphomas, oral hairy leukoplakia, lymphoproliferative disease	Rickinson and Kieff, 2007; Straus, 2000; Kieff and Rickinson, 2007
Polyomavirus BK, DNA, 72%–98%	Kidney	Unknown	Unknown	Hemorrhagic cystitis (post bone marrow transplantation), nephropathy (post kidney transplantation)	Zur, 2008
Polyomavirus JC, DNA, 72%–98%	Kidney, CNS	Unknown	Unknown	Progressive multifocal leukoencephalopathy	Zur, 2008

The blood virome: persistent viruses

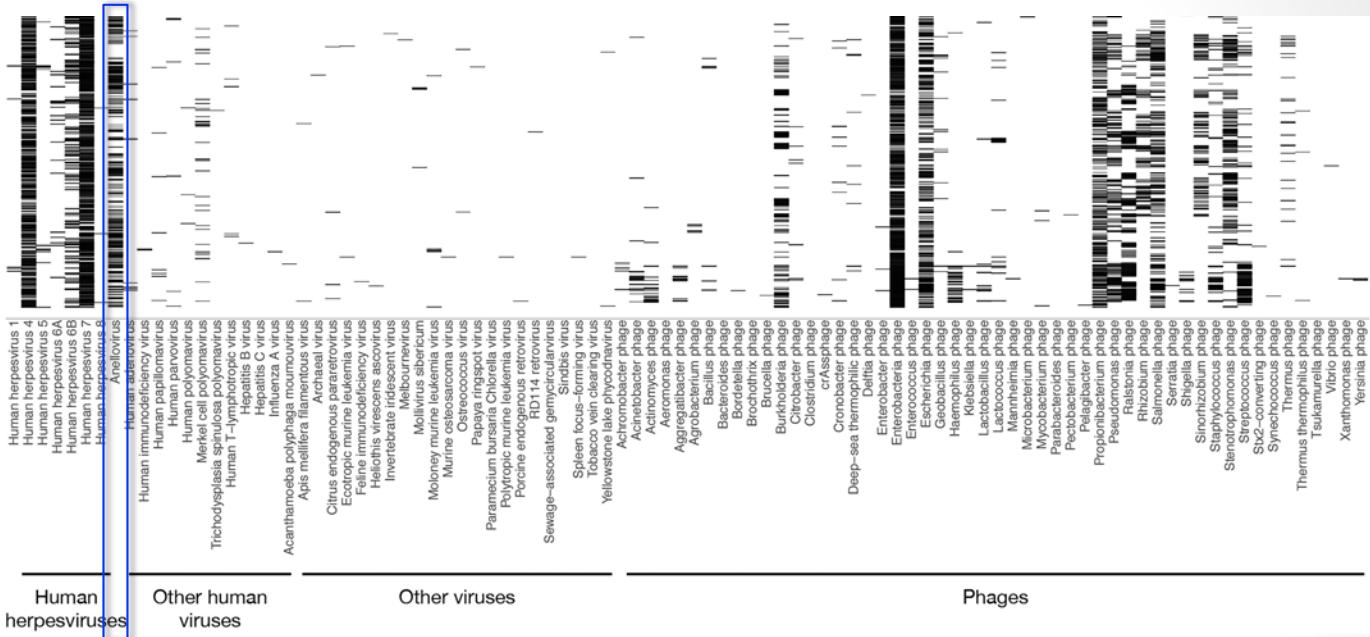
# The benefice of persistent viral infections

The physiological role of most of these viruses in humans has yet to be defined



- ❖ Latent infection with murine gammaherpesvirus 68 (a model for EBV) or murine CMV (a model for human CMV) confers protection against *Listeria monocytogenes* and *Yersinia pestis* in mice  
*Barton et al., Nature (2007)*
- ❖ Individuals with HIV, co-infected with Human Pegivirus (HPgV, also called GBV-C virus or hepatitis G virus) delay progression to AIDS

*Xiang et al., NEJM (2001)*



## Anelloviruses (9%) of the samples

Small ssDNA viruses from the *Anelloviridae* family

Three main viral groups:

- Torque Teno Virus (TTV, 1997)
- Torque Teno Mini Virus (TTMV, 2000)
- Torque Teno Midi Virus (TTMDV, 2007)

Anelloviruses cannot be cultivated and can be transmitted through transfusions

Bernardin et al., Transfusion (2010)

The blood virome: anelloviruses

# Anelloviruses

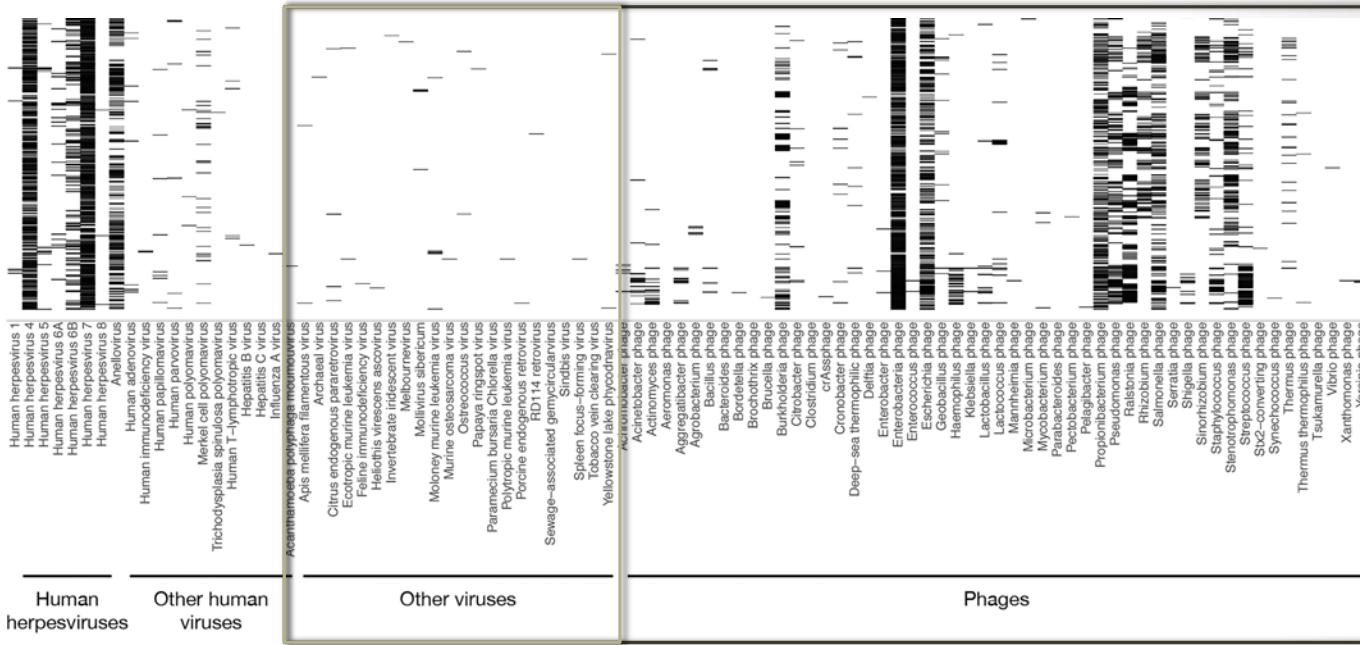
- ❖ Prevalence in humans is very high (>50%), high level of genomic heterogeneity
- ❖ Their role in human physiology and disease is unclear: originally believed to be a new viral etiologic agent of hepatitis but now considered as non-pathogenic commensals

*Spandole et al., Arch. Virol. (2015)*

## Anelloviruses as Biomarkers of immunocompetence?

- ❖ Increases in the anellovirus load in the blood associated with immunosuppression levels in transplant recipients and patients with HIV.  
*De Vlaminck et al., Cell (2013)*  
*Li et al., J. Virol. (2013)*  
*Young et al., Am. J. Transplant. (2015)*
- ❖ In the gut, sequences related to anelloviruses peaked in the first years of life then their abundance progressively decreased → correlated with the interval between maternal IgG protection and complete development of the infant's immune system?  
*Lim et al., Nat. Med. (2015)*
- ❖ Predictors of adverse outcomes after transplantation  
*Blatter et al., Pediatr. Transpl. (2017)*

## The blood virome: giant viruses



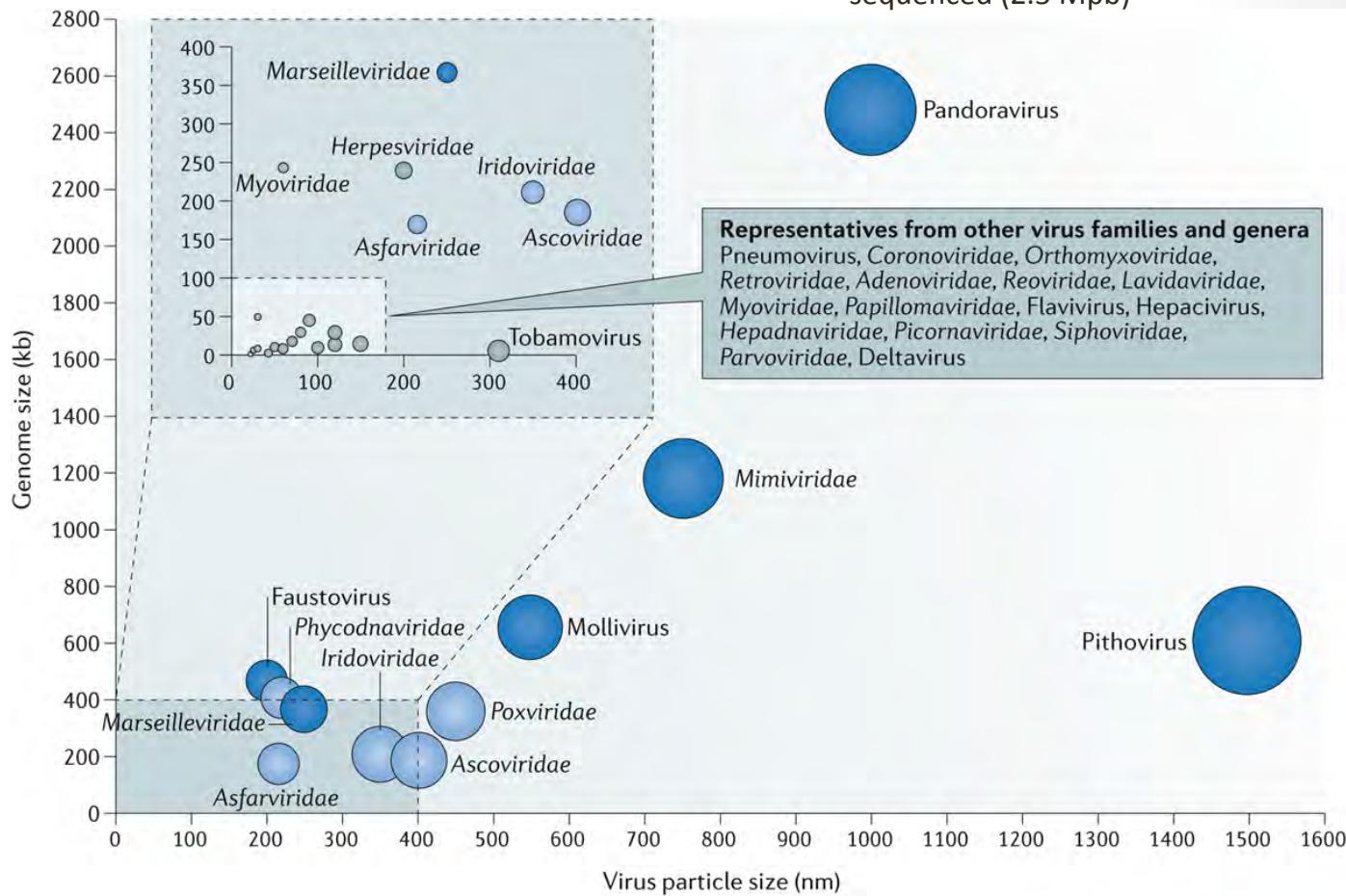
Extensive contamination of commercial reagents and from the environment

## Sequences related to giant viruses belonging to 4 genera:

- *Mollivirus* (8 individuals)
  - *Chlorovirus* (3 individuals)
  - *Marseillevirus* (2 individuals)
  - *Mimivirus* (1 individual)

# What are giant viruses?

- Viruses with bacterial like sizes
- The biggest viral genomes ever sequenced (2.5 Mpb)

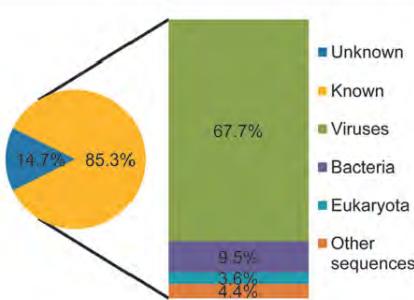


**Representatives from other virus families and genera**  
Pneumovirus, Coronoviridae, Orthomyxoviridae,  
Retroviridae, Adenoviridae, Reoviridae, Lavidaviridae,  
Myoviridae, Papillomaviridae, Flavivirus, Hepacivirus,  
Hepadnaviridae, Picornaviridae, Siphoviridae,  
Parvoviridae, Deltavirus

# Marseillevirus-Like Virus Recovered From Blood Donated by Asymptomatic Humans

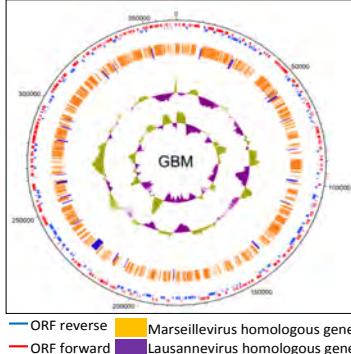
The Journal of  
Infectious Diseases

Nikolay Popgeorgiev,<sup>1</sup> Mickaël Boyer,<sup>1,\*</sup> Laura Fancello,<sup>1</sup> Sonia Monteil,<sup>1</sup> Catherine Robert,<sup>1</sup> Romain Rivet,<sup>1</sup> Claude Nappéz,<sup>1</sup> Said Azza,<sup>1</sup> Jacques Chiaroni,<sup>2</sup> Didier Raoult,<sup>1</sup> and Christelle Desnues<sup>1</sup>

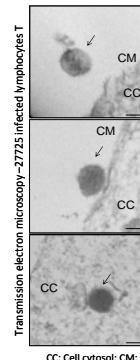
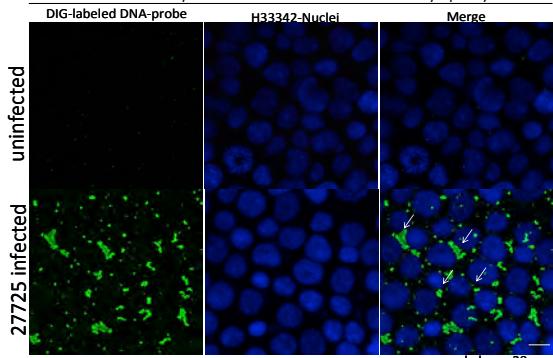


**Figure 1.** Classification of the human blood virome metadata. Taxonomic distribution of metagenomic reads are based on the GenBank taxonomic classification of the best BLASTn hit ( $E$  value,  $<10^{-5}$ ).

Giant blood Marseille-like virus (GBM) chromosome predicted using SOLiD™ genomic data



Fluorescence *in situ* hybridization - 27725 infected human lymphocytes T cells



CC: Cell cytosol; CM: Cell Membrane; scale bar = 100 nm

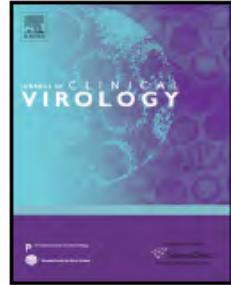
GBM is able to infect human T-lymphocytes

The blood virome: giant viruses

## Marseillevirus prevalence in multitransfused patients suggests blood transmission

Nikolay Popgeorgiev<sup>a</sup>, Philippe Colson<sup>a</sup>, Isabelle Thuret<sup>b</sup>, Jacques Chiarioni<sup>c</sup>,  
Pierre Gallian<sup>d</sup>, Didier Raoult<sup>a</sup>, Christelle Desnues<sup>a,\*</sup>

**Journal of Clinical Virology 58 (2013) 722–725**



- Detection of anti-Marseillevirus IgG (ELISA) and viral DNA (PCR) on 196 individuals
- 174 blood donors and 22 thalassemia patients (frequent transfusion acceptors)

	Blood donors	Thalassemia patients	p-value*
<b>Sample number</b>	174	22	
<b>Male/Female (Male %)</b>	91/83 (52.3%)	12/10 (54.5%)	
<b>Median age (range)</b>	46 (21-70)	23.5 (8-49)	
<b>IgG positive</b>			
<b>Number</b>	22/174 (12.6%)	5/22 (22.7%)	0,165
<b>Male/Female (Male %)</b>	10/12 (45.5%)	3/2 (60%)	
<b>Median age (range)</b>	47.5 (22-70)	30 (17-49)	<0,0001
<b>PCR positive</b>			
<b>Number</b>	7/174 (4%)	2/22 (9.1%)	0,267
<b>Male/Female (Male %)</b>	3/4 (42.9%)	1/1 (50%)	
<b>Median age (range)</b>	37 (21-61)	31 (21-41)	
<b>IgG positive/ PCR positive</b>			
<b>Number</b>	4/174 (2.3%)	1/22 (4.5%)	0,452
<b>Male/Female (Male %)</b>	2/2 (50%)	1 (0%)	
<b>Median age (range)</b>	31 (22-53)	41	

→ GBM prevalence (serological and molecular) in thalassemia patients compared to the general population suggest blood transmission

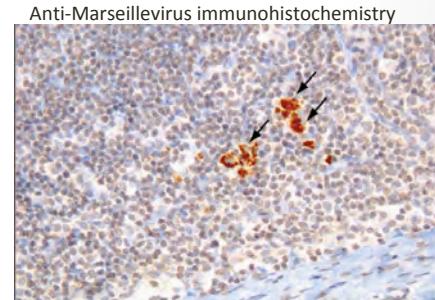
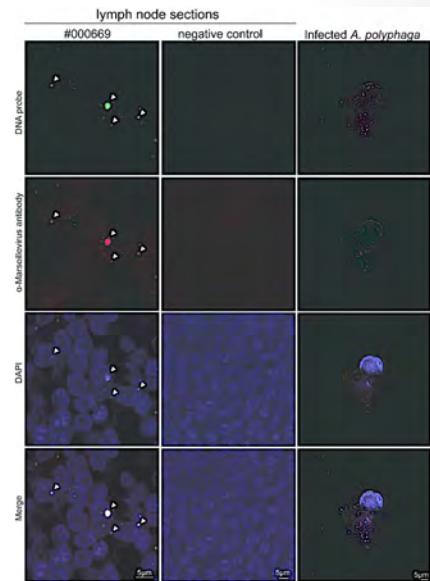
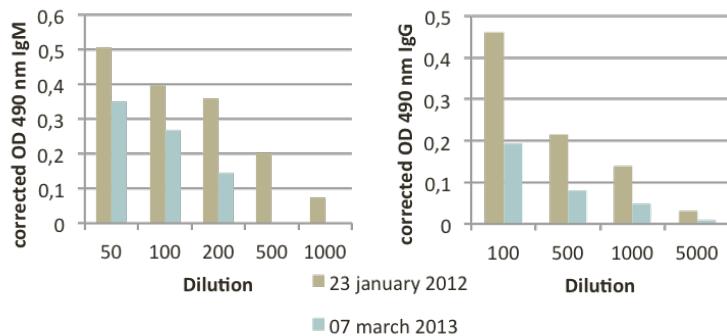
# Marseillevirus Adenitis in an 11-Month-Old Child



Nikolay Popgeorgiev,<sup>a</sup> Gerard Michel,<sup>b</sup> Hubert Lepidi,<sup>b</sup> Didier Raoult,<sup>a</sup> Christelle Desnues<sup>a</sup>

December 2013 Volume 51 Number 12

- High titers of anti-Marseillevirus IgG and IgM in Jan-2012
- GBM PCR positive (Jan-2012)



- Eleven months old child hospitalized in Marseille in 2012
- Adenopathy with unknown etiology
- Medical record of exacerbated reaction to BCG vaccination
- All 16S PCRs were negative, cultures were negative
- HIV, EBV and CMV PCRs and serologies were negative
- In March 2013, GBM PCR was negative
- IgM titers have decreased, IgG titers are stable

The blood virome: giant viruses

## Marseillevirus in lymphoma: a giant in the lymph node

Sarah Aherfi, Philippe Colson, Gilles Audoly, Claude Nappey, Luc Xerri, Audrey Valensi, Matthieu Million, Hubert Lepidi, Regis Costello, Didier Raoult

[www.thelancet.com/infection](http://www.thelancet.com/infection) Vol 16 October 2016

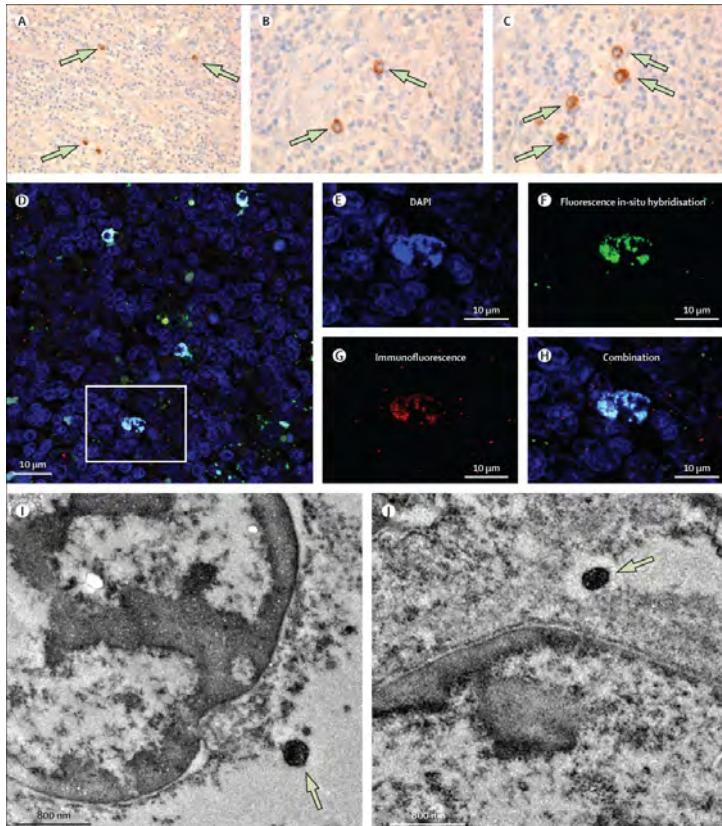
### Case:

- 30-year-old woman living in Marseille
- Admitted to the hospital in May, 2014, for a dry cough and with a 1-year history of lymphadenopathies.
- Clinical examination revealed bilateral axillary and left subclavicular lymphadenitis.
- PET and CT scanning revealed several hypermetabolic lymphadenopathies (cervical, supraclavicular, axillary, mediastinal, latero-aortic, coeliac, and in the internal mammary)
- Serological tests were negative for hepatitis B virus, hepatitis C virus, HIV, and cytomegalovirus, and indicated previous infection and immunity against Epstein-Barr virus.
- Pathological examination of a left axillary lymph node biopsy sample showed evidence of many Reed-Sternberg and Hodgkin cells surrounded by an inflammatory granuloma composed of lymphoid elements, macrophages, and eosinophils.



Classic nodal Hodgkin's lymphomas with mixed cellularity (WHO classification type 3)

The lymph node was Marseillevirus PCR positive (sequencing 100% identical to the marseillevirus )

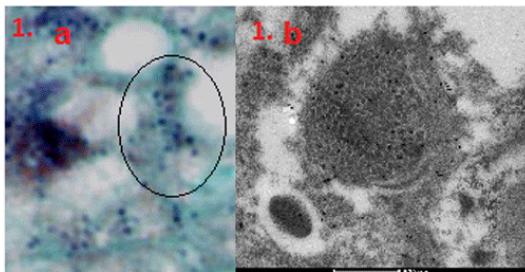


- Immunohistochemical detection of marseillevirus in the patient lymph node by use of a mouse polyclonal anti-marseillevirus antibody with haemalum counterstaining. Arrows show the intracellular location of the virus in the macrophage cytoplasm
- thin section of the lymph node can be shown by FISH (DNA probe 152F1-153R2, in green) and immunofluorescence (anti-marseillevirus antibody, in red); nucleic acid was stained with DAPI.
- Electron microscopy images of the embedded lymph node show giant virion-resembling structures.

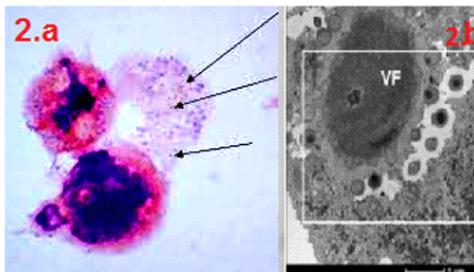
From July 2014, the patient underwent a standard chemotherapy regimen for Hodgkin's lymphomas. Complete remission was achieved.

# Giant viruses in human, contaminant? role?

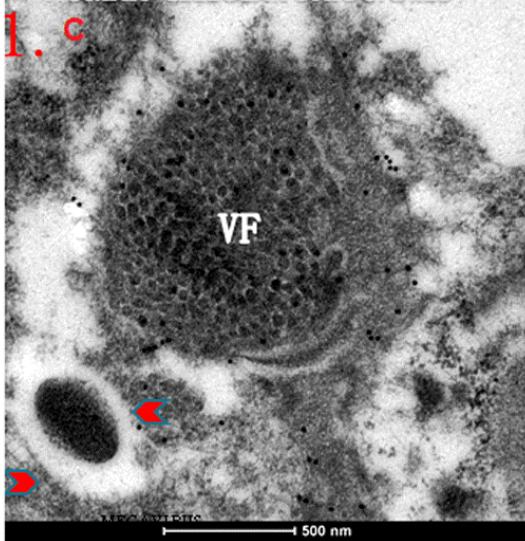
## 1. HUMAN TISSUES



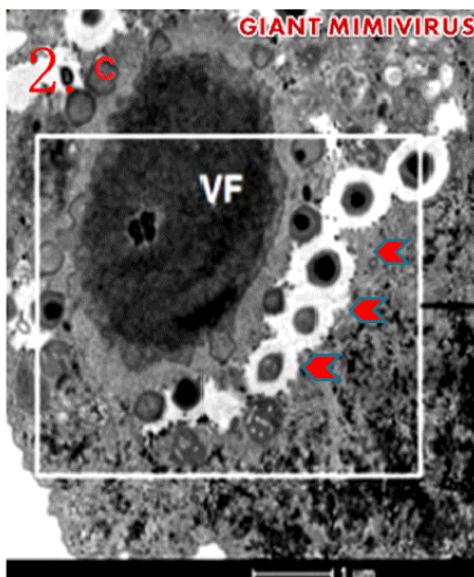
## 2. AMOEBAE



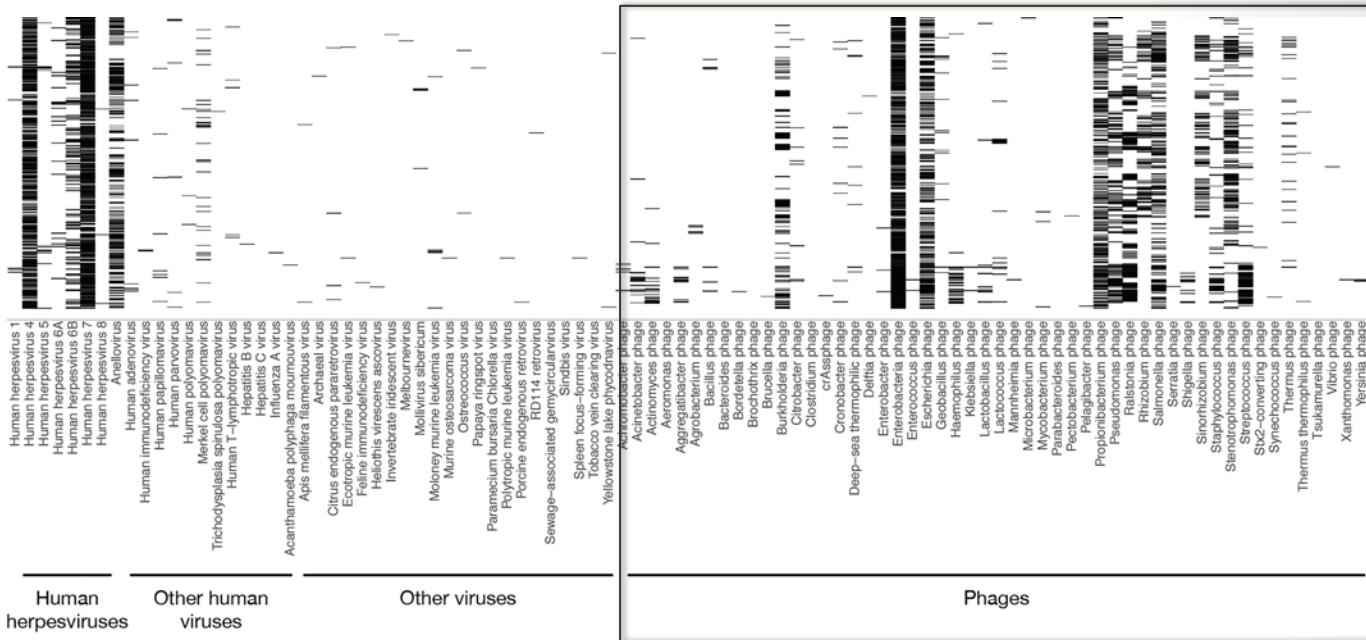
HUMAN CELLULAR STRUCTURES



GIANT MIMIVIRUS



# The blood virome: the phages



Sequences belonging to 52 different phages

*Enterobacteria, Burkholderia, Escherichia, Ralstonia, Stenotrophomonas, Ralstonia, Pseudomonas* phages were highly prevalent and detected in 2-11% of the individuals

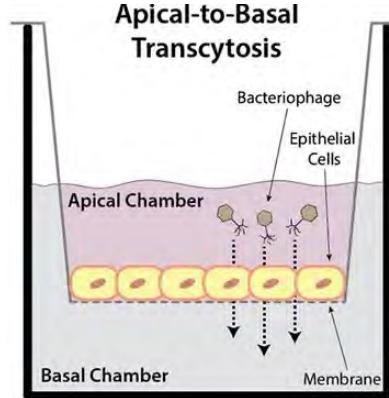
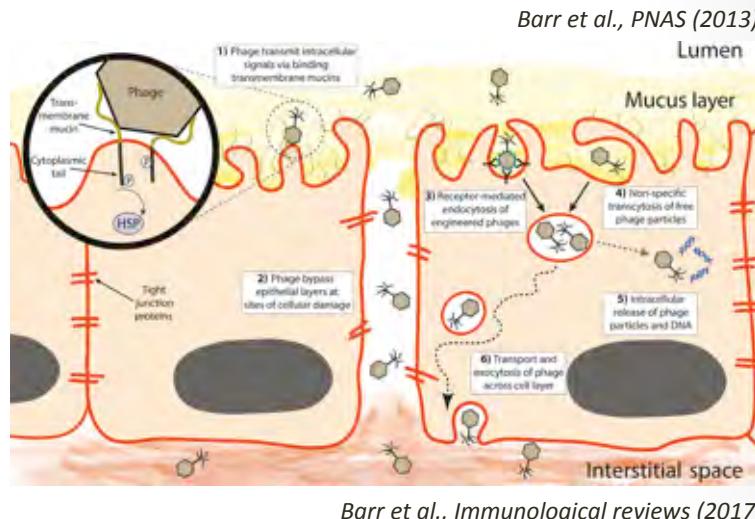
# Bacteriophages, contaminant or real?

Phage sequences are **always** detected in viral metagenomic data from human blood

The gut is the largest reservoir of phages in human. Phages are significantly enriched at the mucosal surface.

Route of entry from the gut to the lymph, blood and organs:

- Leaky gut (cellular damaged)
- Trojan-horse mechanism
- Receptor-mediated endocytosis (phage display)
- Non-specific cellular uptake



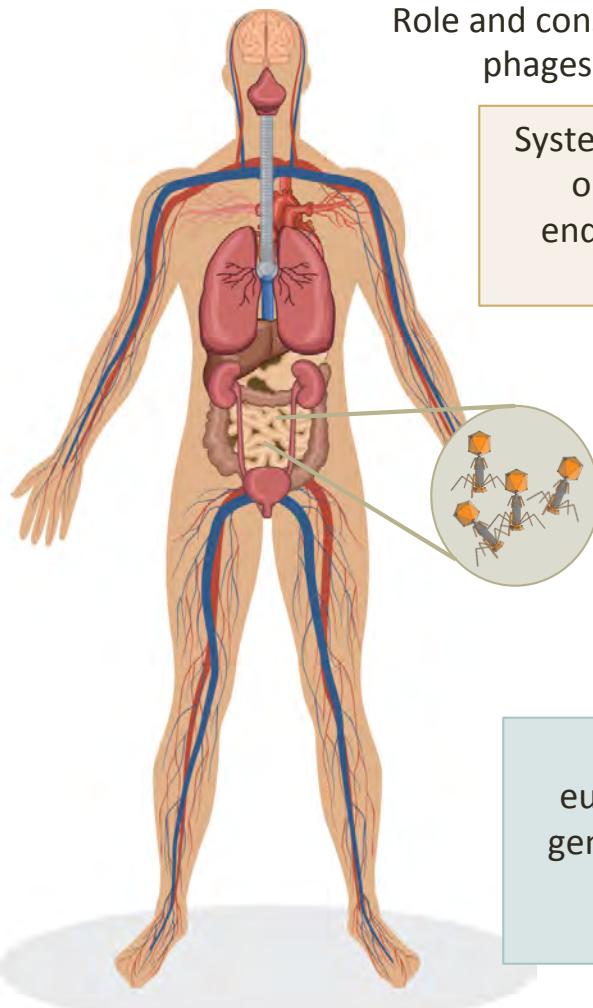
Apical-to-basal transcytosis observed with every phage type investigated across diverse cell lines

0.1% of total bacteriophages transcytosed over a 2-h period

31 billion of phage transcytotic events per day

Nguyen et al. *mBio* (2017)

# Role of phages in the human blood?



Role and consequences of this continuous low-level stream of phages from gut to the blood, lymph, and organs?

System-wide antimicrobial against the intrusion of any opportunistic gut microbe. The potential role of endogenous bacteriophages in controlling invading pathogens.

*Nguyen et al. mBio (2017)*  
*Górski et al., Cell Mol Life Sci. (2005)*

Long-term immunologic tolerance through interactions with regulatory T cell populations and downregulation of specific and nonspecific immune reactions

*Górski et al., Future Medicine (2017)*

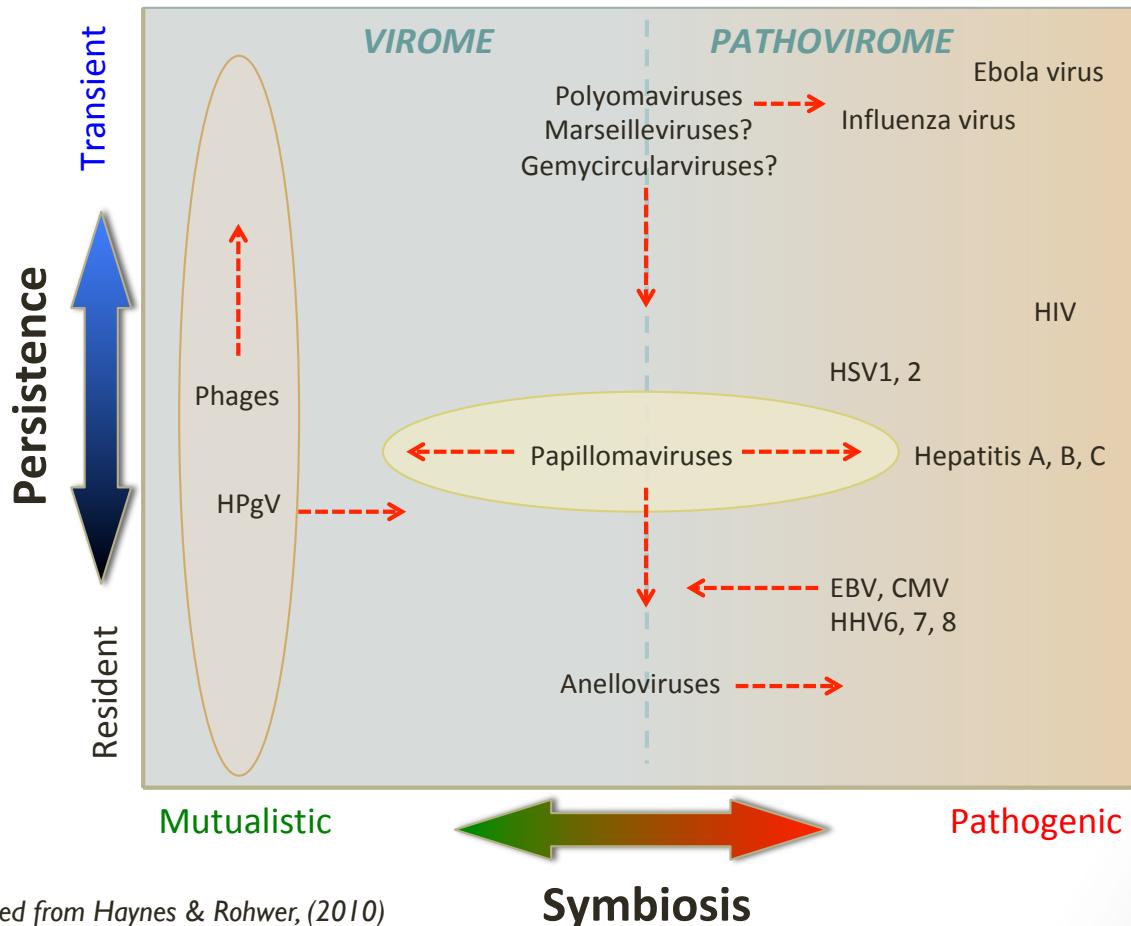
Horizontal gene transfer between phages and eukaryotes, transcription and translation of phage genetic material within epithelial cells and the body

Our third genome

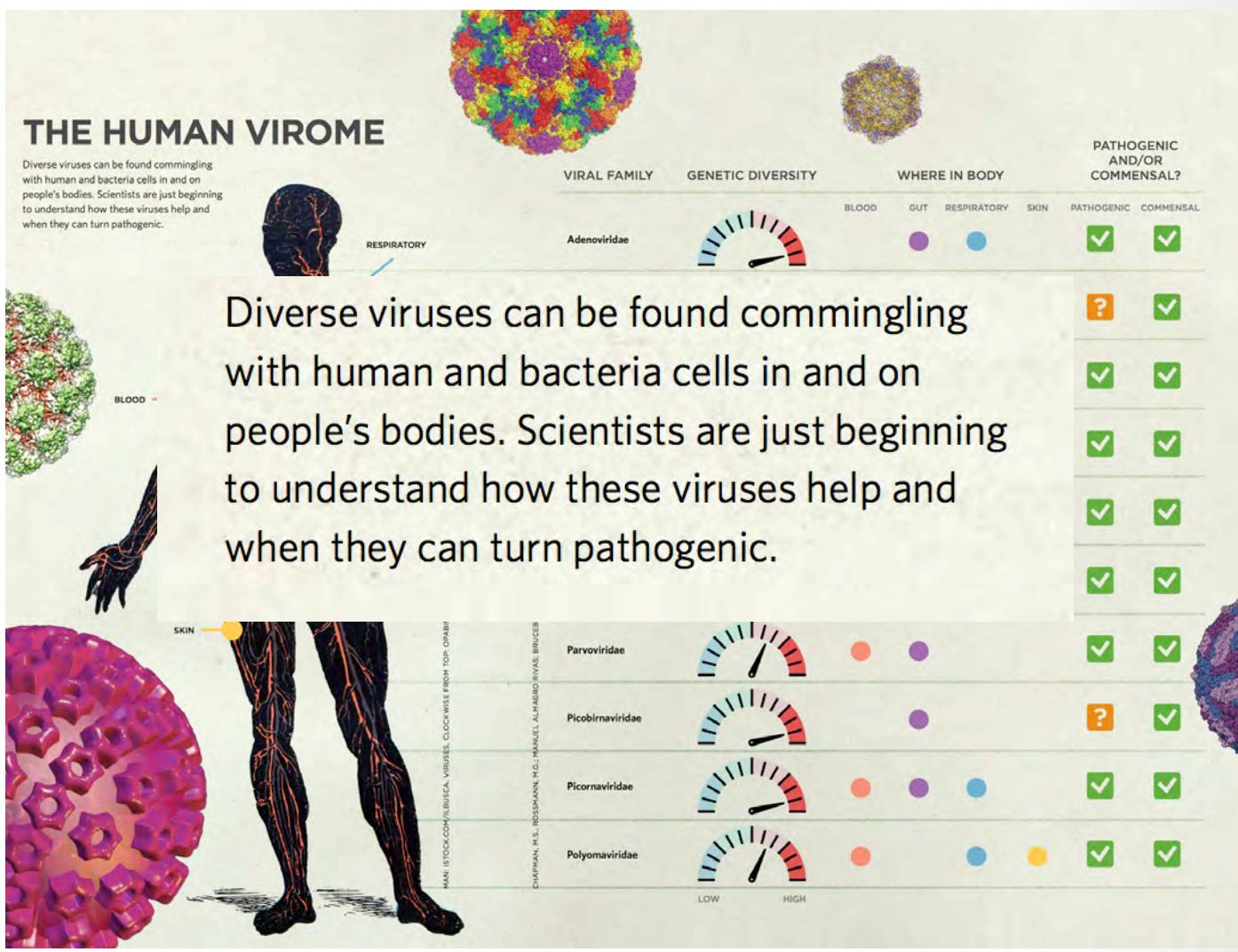
*Barr et al., Immunological Rev. (2017)*

# The blood virome: from symbiosis to pathology

A yet largely incomplete picture of human blood-associated viruses...



# Introduction to the human virome



# Future of human viromics

## METHODOLOGICAL CHALLENGES

- ✓ Genome partitioning: enrich the viral fraction or remove host DNA contaminations
- ✓ Development of protocols targeting RNA viruses
- ✓ Development of bioinformatics to deal with unknown sequences (viral dark matter)
- ✓ Improved sequencing technologies (reads length and fidelity) and computational platforms



Single molecule nanopore technology (minION)



Cheap, single molecule  
DNA sequencing in a  
device no larger than a  
USB key

Real-time sequencing,  
DNA is not damaged  
30 % error rate

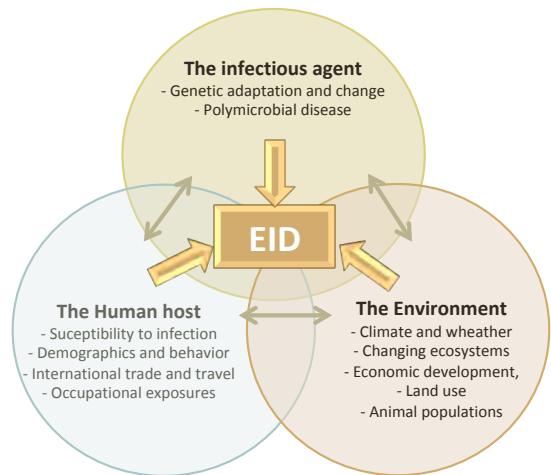
# Future of human viromics

- ✓ Pursue efforts on pathologies with unknown etiology, validation of the Koch's postulate

<b>Diseases of unknown etiology with a suspected viral cause</b>	
Disease of unknown etiology	Viruses associated
Kawasaki disease	Unknown; many have been examined and ruled out
Multiple sclerosis	Epstein Barr virus (EBV); human endogenous retroviruses (HERV)
Obesity	Human adenoviruses 36, 37 and 5; animal viruses
Rheumatoid arthritis	EBV and HERV
Systemic lupus erythematosus	EBV and HERV
Pityriasis rosea	Human herpesvirus 7, possibly human herpesvirus 6; many other viruses have been examined and ruled out
Amyotrophic lateral sclerosis	Unknown
Brain tumors	Cytomegalovirus (CMV), human 6, herpes simplex viruses 1 and 2
Inflammatory bowel disease	CMV
Bell's palsy	Herpes simplex virus 1
Inclusion body myositis	Retroviruses

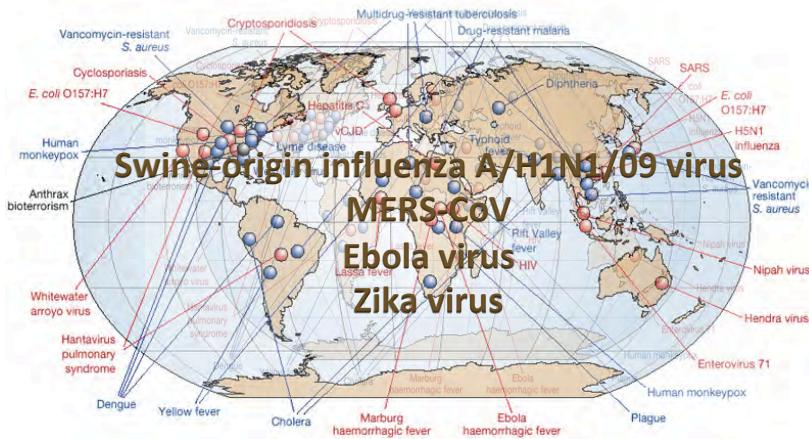
Wylie et al. *Curr. Op. Microb.*, (2013)

# Emerging infectious diseases (EID)



## Factors of emergence

(Morens et al., 2008, Lancet Infect Dis)

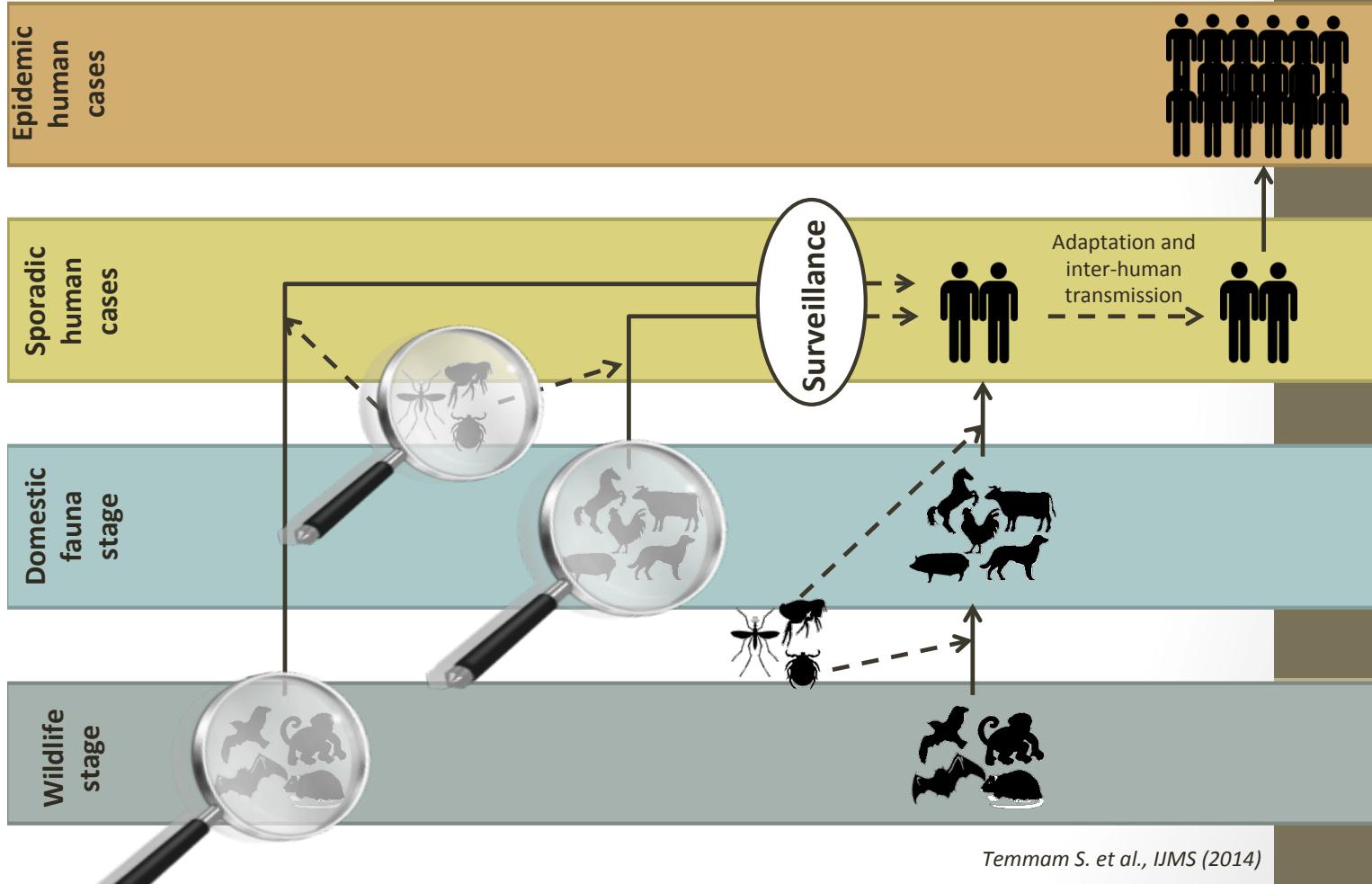


Zoonosis is a source of up to 75% of emerging infectious diseases in humans  
Vaccine development takes time and require a huge amount of resources



Assess the danger posed by viruses that thrive in animals and could cross to human

# Zoonotic viruses and human health



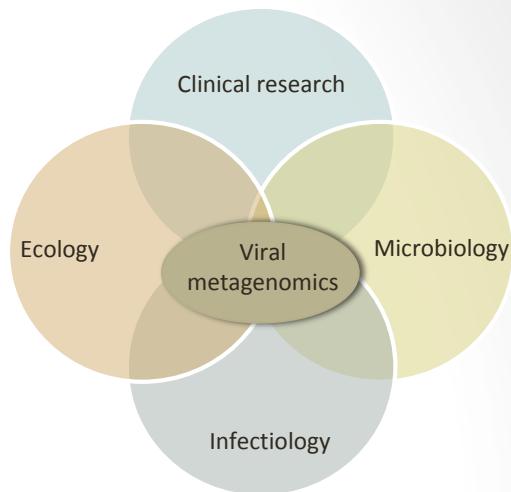
# The ecology of human health and disease



Olaf Hajek, New York times, July 2012

# Our research axes

We investigate the composition, the diversity, the dynamic and the evolution of human, animal and environmental viromes



## Human virome and pathogen discovery



1. Pathogen discovery
3. Role of viruses in dysbiosis
4. Get the best from our virome

## Emerging viruses vectors and reservoirs



- Inventory of viruses in vectors and reservoirs to prevent and detect emerging zoonoses*

## Environmental viromes



- Viral communities in extreme and human-impacted environments*

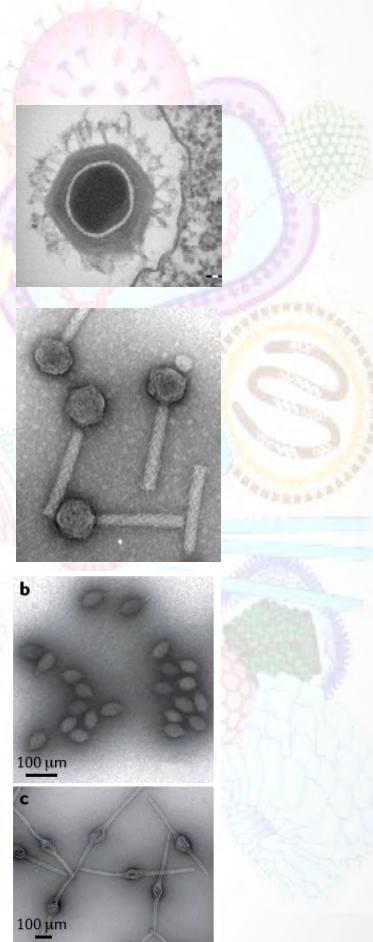
## Paleoecology of health (human and animals)



- Diversity and evolution of viral and microbial communities from the past*

# Consider something viral in your research

- **Viruses offer opportunities for new discoveries.** Viruses really are the 'dark matter' of the biological universe and a rich source for discovery.
- **Viruses can be markers of changes in the biology of ecosystems.** The signal from the virome will be the earliest, strongest and easiest to observe.
- **Biology and evolution makes less sense without viruses.** Viruses move genes between genomes; they are one of the selective forces — if not the primary force — acting on individual cells.



Final conclusion

# Acknowledgments

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