



SINCOTRÓN

Aplicaciones en las investigaciones biomédicas.

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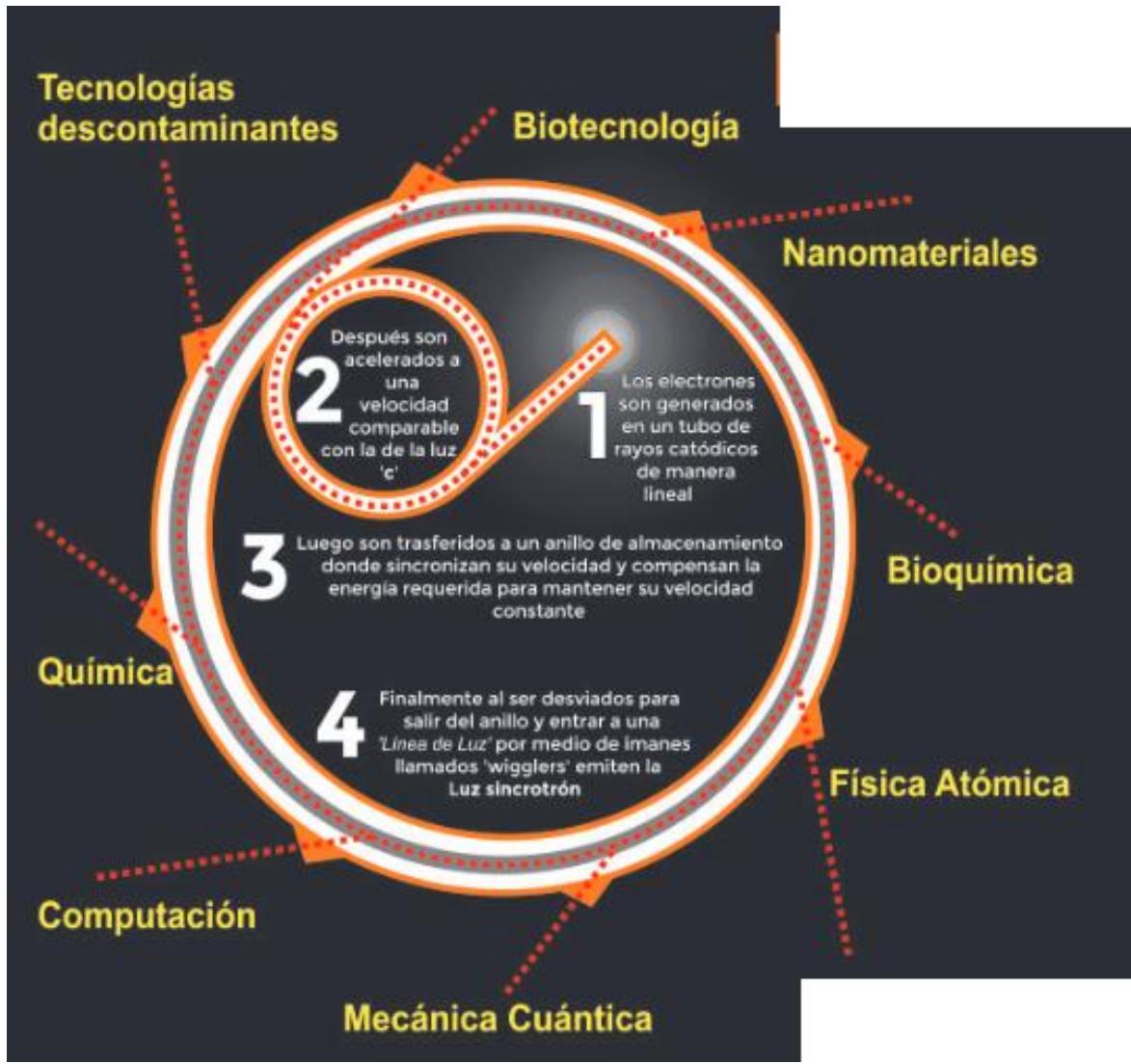


SINCOTRÓN

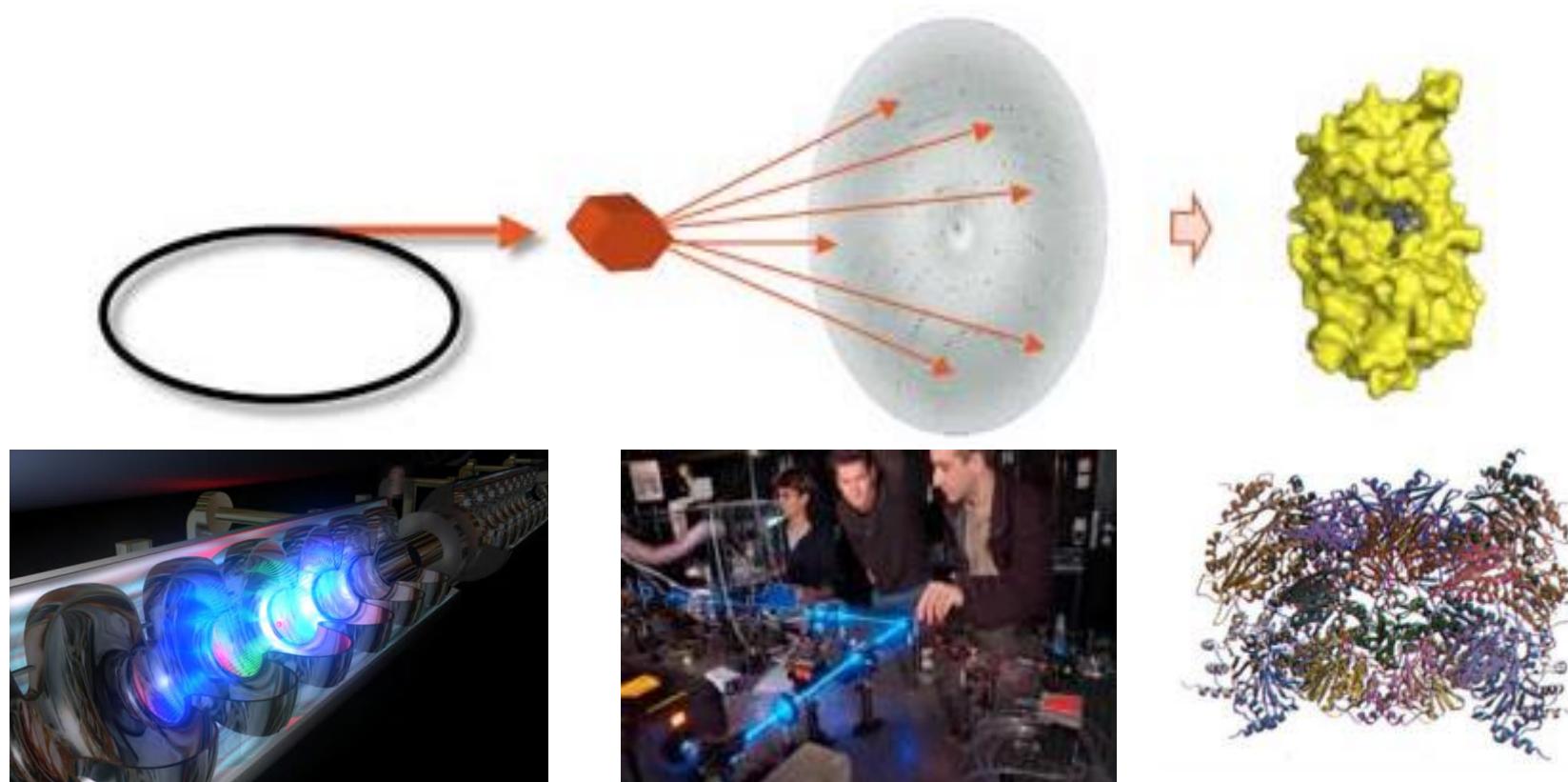


- ✓ Es un tipo de **acelerador de partículas**.
- ✓ Generan **energía extremadamente altas**, creando un haz de electrones que viaja casi a la velocidad de la luz
- ✓ Estas instalaciones aceleran **partículas a gran velocidad** y las guían dentro de una trayectoria utilizando **campos electromagnéticos**.
- ✓ Permiten **estudiar la materia** (viva o inerte) y sus propiedades del orden del radio atómico.

PARTES DEL SINCOTRÓN



FUNCIONAMIENTO DEL SINCOTRON



APLICACIONES DEL SINCOTRÓN

La luz de sincrotrón se utiliza en múltiples industrias. Destacan los siguientes:

Investigación médica: microbiología, estudio de enfermedades, generación de imágenes de alta resolución y radioterapia contra el cáncer.

Contaminación: detección de partículas contaminantes de agua y polvos cósmicos.

Exploración de minerales/fósiles: análisis rápido de minerales para facilitar el procesamiento de minerales.

Ingeniería: imágenes de procesos industriales en tiempo real y imágenes de alta resolución de grietas y defectos en estructuras.

APLICACIONES DEL SINCOTRÓN

Estudia cristales a nivel macromolecular

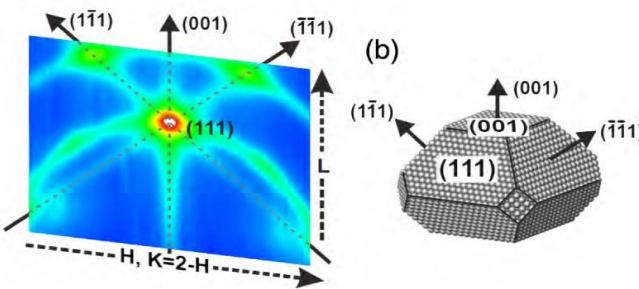
MATERIALES

- ✓ Preciosos.
- ✓ Que no pueden ser reproducidos.
- ✓ Contiene diferentes estructuras mezcladas.
- ✓ Frágiles.

APLICACIONES DEL SINCOTRÓN

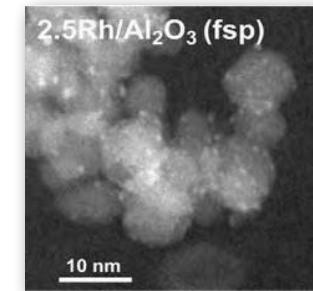
Física

- ✓ Disposición de electrones
- ✓ Películas magnéticas
- ✓ Fotones



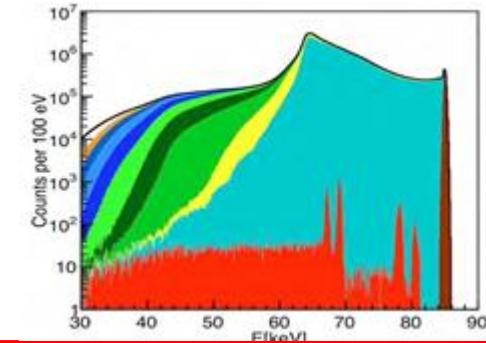
Química

- ✓ Catálisis
- ✓ Reacciones superficiales



Materia blanda

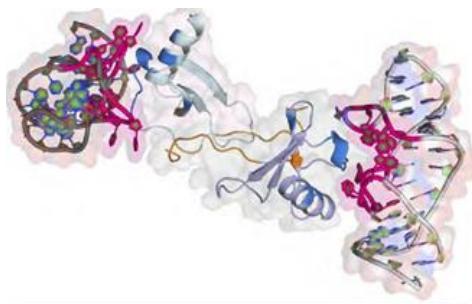
- ✓ Coloides
- ✓ Fase de transición



APLICACIONES DEL SINCOTRÓN

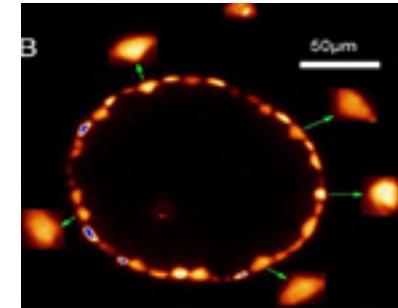
Ciencias de la Vida

- ✓ Estructura de proteínas
 - ✓ Fisiología celular
 - ✓ Diseño de fármacos



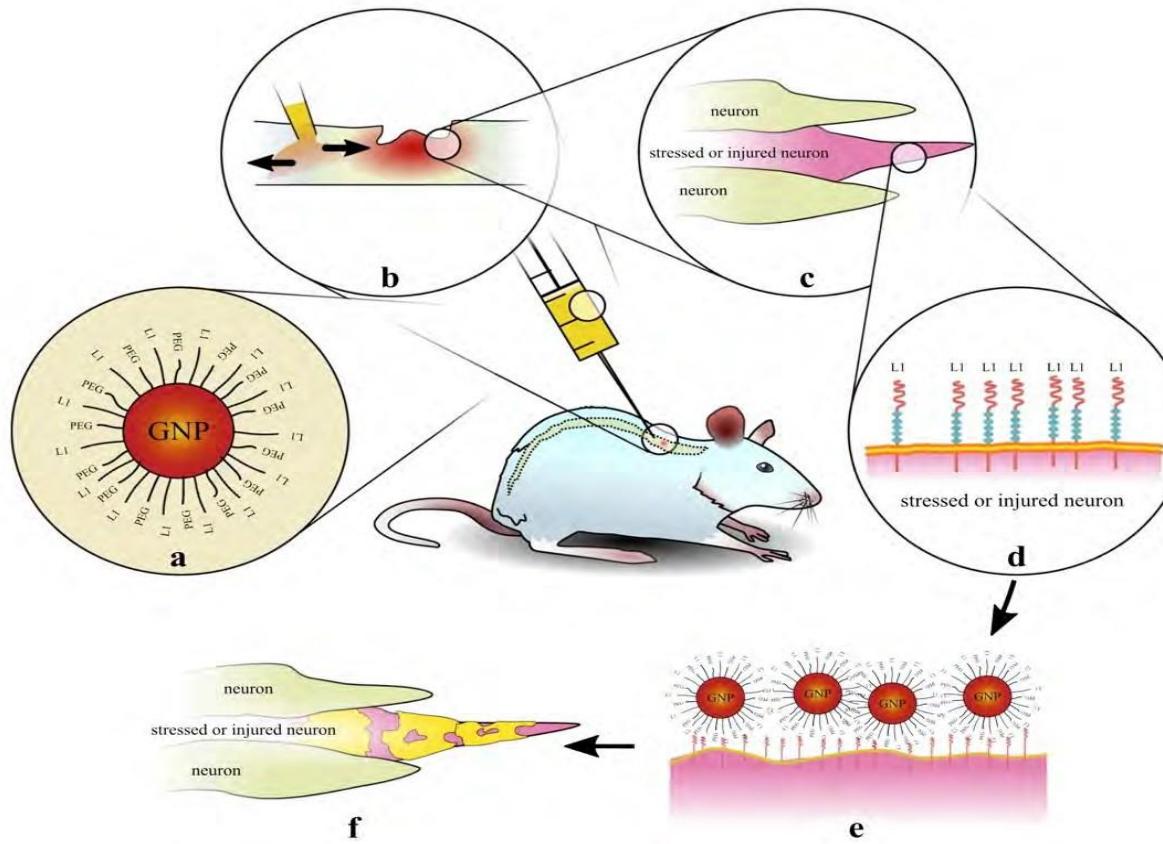
Ciencias medioambientales

- ✓ Contaminación
 - ✓ Reacciones



APLICACIONES DEL SINCOTRÓN

DIAGNÓSTICO TEMPRANO DE TUMOR

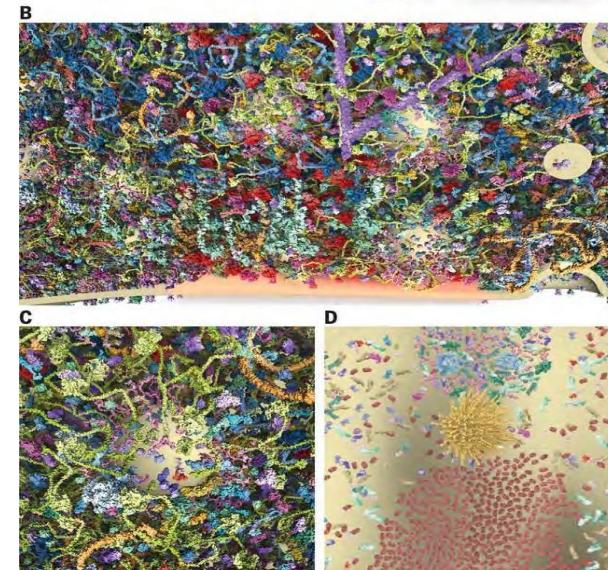
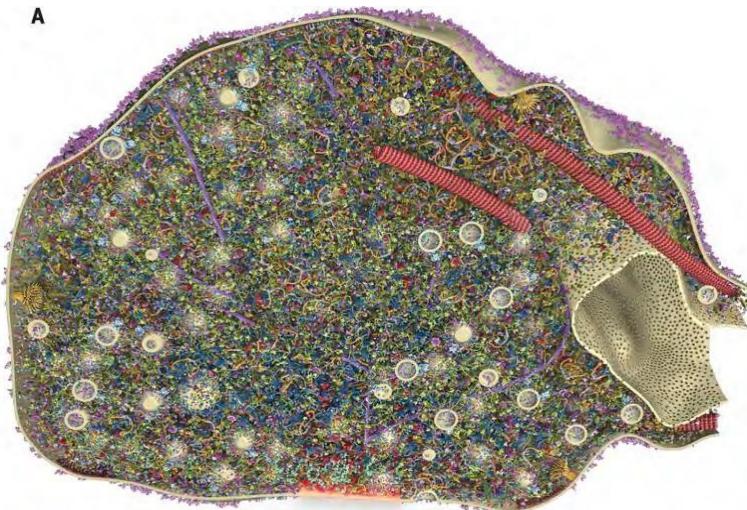


APLICACIONES DEL SINCOTRÓN

ENFERMEDADES INFECCIOSAS

Unión de virus a la superficie de una célula

- ✓ Puede resultar segundos
- ✓ Reacción química que ocurre a nivel cuántico



SINCOTRONES EN EL MUNDO

HAY MÁS DE 60 SINCROTRONES



SINCOTRÓN EN BRASIL

SIRIUS Ciudad de Campinas

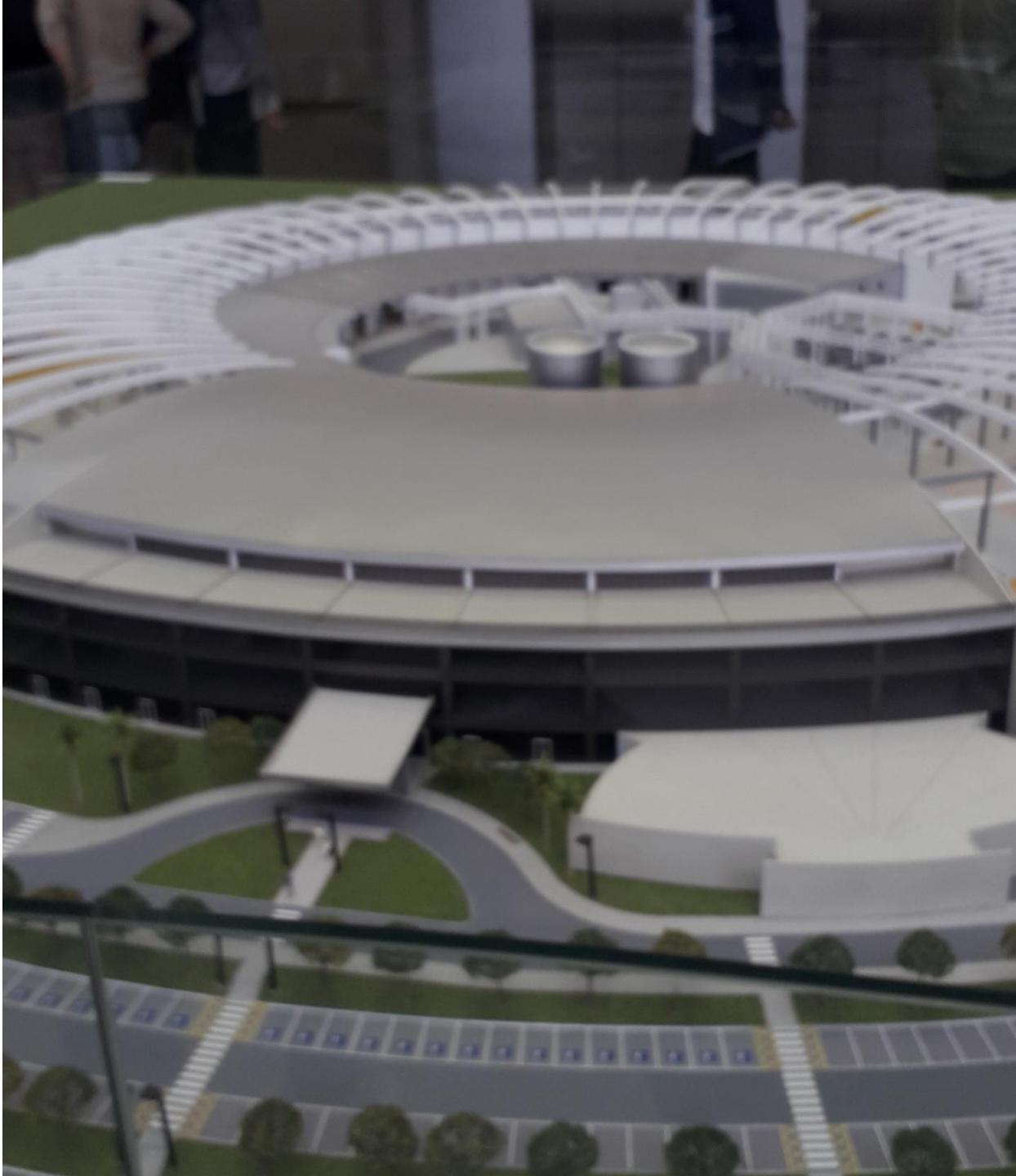


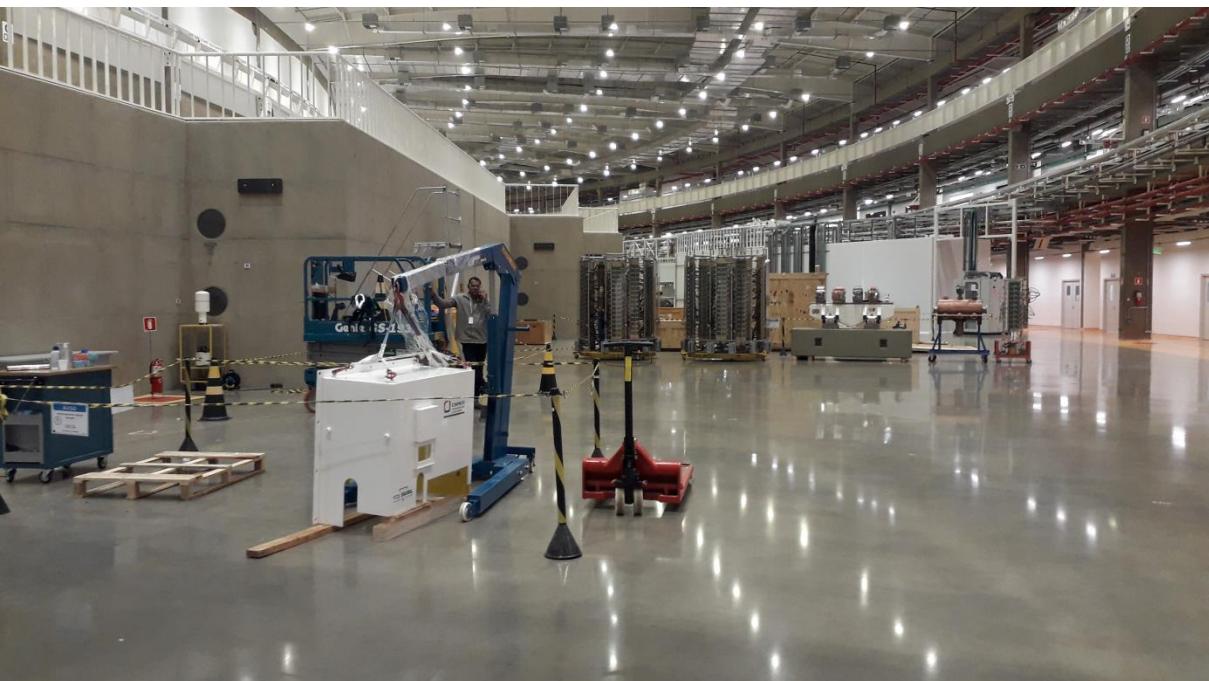
SINCOTRÓN EN BRASIL

SIRIUS Ciudad de Campinas



- ✓ Empezó a construirse en 2015.
- ✓ Se terminó 2020.
- ✓ Circunferencia de 518 metros y emitancia de 0,27 nm-radianes.
- ✓ Está blindado por 1 kilómetro de muros de hormigón de 1,5 metros de espesor y 3 metros de altura.
- ✓ La inversión fue de 1.800 millones de reales.
- ✓ El proyecto científico más ambicioso jamás realizado en Brasil.
- ✓ Todo es tecnología brasileña.
- ✓ Primeros estudios dirigidos al Sar-CoV-2.





SINCOTRÓN EN BRASIL

SIRIUS Ciudad de Campinas



- ✓ Estudiar estructuras tridimensionales.
- ✓ Posición de los átomos en el espacio y soluciones.
- ✓ Interacciones entre moléculas
- ✓ Creación de materiales superconductores.

**Aprueban proyectos 2 veces
al año libre de costo**

Review
Imaging of Virus-Infected Cells with Soft X-ray Tomography

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Abstract: Viruses are obligate parasites that depend on the host cell to replicate. Consequently, to fully understand the viral pathogenesis, it is fundamental to study them in the cellular context in the subcellular organization of the host cell. Cell cycle, localization and/or budding of newly synthesized viral proteins in infected cells can thus provide information on viral development. Among the X-ray tomography stands out for its large depth (able to be imaged without further thinning), ability to detect viral particles, the minimal tissue damage, unfixed and unstained whole cells (i.e., correlative fluorescence microscopy). In X-ray tomography, its sample requirements and potential of this technique, examples of viral X-ray tomography are also presented.

Keywords: cryo-soft X-ray tomography (cryo-soft X-ray tomography); Virus (Virus); Zika virus (ZIKV); direct-acting antiviral (DAA).



Garriga, D.; Chichón, J.; Calisto, B.M.; Pereiro, D.E.; Pérez-Berna, A.J. Imaging of Virus-Infected Cells with Soft X-ray Tomography. *Viruses* **2021**, *13*, 2109. <https://doi.org/10.3390/v1312109>

Academic Editor: Fausto Cossarini

Received: 2 August 2021; Accepted: 14 October 2021; Published: 20 October 2021

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Viruses **2021**, *13*, 2109. <https://doi.org/10.3390/v1312109>

NIH Public Access

Author Manuscript

Infect Disord Drug Targets. Author manuscript; available in PMC 2009 December 7.

Published in final edited form as:
Infect Disord Drug Targets. 2009 November; 9(5): 507–517.

Structural Genomics and Drug Discovery for Infectious Diseases

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Abstract

The application of structural genomics methods and approaches to proteins from infectious diseases is making available the three dimensional structures of many potential drug targets and laying the groundwork for structure-aided drug discovery. A number of structural genomics projects with a focus on pathogens that have a worldwide. The Center for Structural Genomics of Infectious Diseases (CSGID) was established to apply state-of-the-art high throughput structural biology technology to characterization of proteins from the National Institute of Allergy and Infectious Diseases (NIAID) category A–C pathogens and organisms causing emerging, or re-emerging infectious disease. The target selection process emphasizes potential biomedical benefits. Selected protein targets and their homologs, essential enzymes, virulence factors and vaccine candidates also provide a structure determination service for the infectious disease. The ultimate goal is to generate a library of structures that are available to the scientific community and can serve as a starting point for further research and structure-aided drug discovery. To achieve this goal, the CSGID will determine protein crystal and protein–ligand complexes using proven, rapid, highly integrated, and cost effective methods, such as X-ray crystallography. High throughput determination is greatly aided by frequent, convenient access to high-performance synchrotron X-ray sources.

Keywords

CSGID; structural genomics; infectious diseases; drug discovery; virulence factor

ANTI-MICROBIAL DRUG DISCOVERY AND STRUCTURE

It is widely recognized that anti-microbial drug discovery is a major challenge in the field of drug resistance [1]. Coupled with the rise in drug resistance in a number of new targets and new approaches to anti-microbial screening for broad spectrum antibiotics in particular are a number of factors that have limited recent success. Spectrum antibiotics is lagging behind society's expectations to focus on new drug targets and appropriate spectrum therapeutics, may be useful for treating

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10.2217/fmd.12.48 © 2012 Future Medicine Ltd

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Candida species: new insights into biofilm formation

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Biofilms of *Candida albicans*, *Candida parapsilosis*, *Candida glabrata* and *Candida tropicalis* are associated with high indices of hospital morbidity and mortality. Major factors involved in the formation and growth of *Candida* biofilms are the chemical composition of the medical implant and the cell wall adhesins responsible for mediating *Candida*–*Candida*–human host cell and *Candida*–medical device adhesion. Strategies for elucidating the mechanisms that regulate the formation of *Candida* biofilms combine tools from biology, chemistry, nanoscience, material science and physics. This review proposes the use of new technologies, such as synchrotron radiation, to study the mechanisms of biofilm formation. In the future, this information is expected to facilitate the design of new materials and antifungal compounds that can eradicate nosocomial *Candida* infections due to biofilm formation on medical implants. This will reduce dissemination of candidiasis and hopefully improve the quality of life of patients.

Biofilms as a virulence factor of *Candida* species

Rural infections due to *Candida* species are the leading cause of hospital morbidity and mortality. *Candida albicans* is the organism most frequently isolated from patients with systemic candidiasis [1–5]. However, because of the indiscriminate use of broad-spectrum antibiotics and antifungals [6–10] combined with immunosuppressive therapies, the non-*C. albicans* *Candida* (NAC) species, such as *Candida glabrata* and *Candida parapsilosis*, which were previously considered to be non-pathogenic, have emerged as the second or third most common species causing candidemia and systemic candidiasis in immunocompromised patients, organ transplant or hematopoietic stem cell recipients, newborns, elderly adults and patients with neoplasms [11–14]. The infections caused by these species are difficult to treat, since *C. glabrata* and *C. parapsilosis* possess an innate resistance to azole-based compounds [14,15,16]. The second most frequently isolated species of *Candida* in the USA and Canada is presently *C. glabrata* [17], whereas *C. parapsilosis* is *C. glabrata* [14,18,19].

in Europe and some regions of Latin America [20,21,22]. Even though *C. parapsilosis*, *C. glabrata* and *C. tropicalis* are important nosocomial pathogens, little is known about their virulence. One virulence factor involved in the establishment of

Candida infection is the adherence of the yeast to epithelial and endothelial cells, soluble factors, extracellular matrices and inert material implants in the body of the host [23]. Once *Candida* has adhered and evaded the immune system of the patient [24–26], it can form biofilms that colonize the internal organs and medical implants such as implants, contact or intracocular lenses, breast prostheses, vascular inserts, endotracheal tubes and pacemakers [24–26]. In the last two decades, important virulence factors for the establishment of recurring candidiasis [27], as their sessile living cells show high resistance to antifungal treatment and host defense mechanisms [28–30]. This resistance negatively impacts the patient's health, since the infected medical implant must be removed when the infection does not respond adequately to treatment. This can damage surrounding tissues, as can the prolonged antifungal treatment required by the resistance of the micro-organisms [24,25]. It has been reported that the strains of *C. albicans*, *C. parapsilosis*, *C. glabrata* and *C. tropicalis* that were isolated during a fungal infection, capable of forming biofilms, cause high levels of mortality (25–50%) as compared with clinical isolates unable to form biofilms [28,29]. In other studies, have shown that *C. glabrata* is phylogenetically closer to *C. albicans*, as assessed by evolutionary divergence based on

Keywords

adhesins; ALS; biofilm; *Candida* species; cell wall; ERK; GR proteins; mannoproteins; medical device; synchrotron