Antibiotic Resistance and Antibiotic Resistance Genes Among Edwardsiella Tarda Isolated from Fish

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Abstract

Edwardsiella tarda is a common fish pathogen, causing significant septicemic diseases in fish. This study was carried out to investigate prevalence of E. tarda among Tilapia zilli at EL manzla lake, Dakahlia governorate and characterize the isolates phenotypically and genotypically in addition to detection of multi-drug resistance genes (B-lactames genes and plasmid-mediated quinolone resistant genes by PCR assay. Therefore, (100) samples of *Tilapia zilli* collected from different localities. Fish samples were subjected to clinical and post-mortem examination then bacteriological examination from liver, kidney and spleen. The suspected isolates were characterized by cultural and morphological characters, some conventional biochemical tests and API 20E system then by PCR assay. Eighteen % isolates were characterized as E. tarda. Furthermore, detection of antimicrobial resistance genes by PCR, the recovered isolates harbored *blaSHV* and *blaOXA-1* with a prevalence of 50% and 25%, respectively with no detection of aac (6')-Ib-cr and gepA genes in examined isolates. The results of antibiotics sensitivity showed resistance to Nalidixic acid, Lincomycin, Amoxicillin and Norfloxacin and most of isolate were found to be sensitive to Florfenicol and Neomycin.55.6% of recovered isolates showed resistance to three antibiotic classes and 27.7% of recovered isolates showed resistance to four antibiotic classes and considered as MDR. The emergence of MDR-strains represents a threat-alarm and PCR is very rapid method for identification of E. tarda isolates which may be helpful in control of Edwardsiellosis.

Keywords: *Edwardsiell tarda*, *Tilapia zilli*, PCR and Antibiotic resistance genes

Introduction

Edwardsiella is enteric pathogen includes strains of three species (E. tarda, E. ictaluri and E. hoshinae). E. tarda is primarily a pathogen of fish associated with fish gangrene, emphysematous putrefactive disease of catfish, red disease of eels (Evans et al., 2011). E. tarda is mainly cause of a dangerous systemic disease, Edwardsiellosis which is one of the most important bacterial diseases in fish and it causes mass mortality in the various populations and age groups of fish in freshwater and marine fishes of both farmed and wild population all over the world (Enany et al., 2018). E. tarda is a Gram-negative, short, rodshaped bacterium of about 1cm in diameter and 2-3 cm in length (Evans et al., 2011). E. tarda strains isolated from various geographical sources exhibit little variation in the phenotypic characters (Austin and Austin, 2007) and several studies have demonstrated a wide degree of intraspecific diversitv in the isolates from the different geographic regions and host species (Nucci et al., 2002 and Wang et al., 2011).

E.tarda has been recognized as a normal guest of a wide range of animals, including fish, reptiles, crustaceans, chickens and warm-

blooded animals as human and essential virulence contains factors which increase bacterial survival and disease in hosts (Castro et al., 2016 and Park et al., 2012). E. tarda strain possess several virulence and toxin secretion associated genes which illustrate to some extent its ability survive within to phagocytic cells and to infect a wide range of hosts due to a highly virulent and multidrug resistant strain (Verjan et al., 2013). Pathogenesis of E. tarda multifactorial and several is potential virulence factors have been recognized to contribute to the infection process have been reported (Mohanty and Sahoo, 2007). Also, it is well known that diagnosis of particular a infection depends on detection and identification of its causative agent (Das et al., 2014).

Nowadays, one of the main threats to public health is the resistance (WHO. antibiotic Multi-drug resistant 2002). (MDR) was defined as resistance to only one agent in three or more antimicrobia1 classes. (Basak, et al., 2016). Several previous investigations revealed the emergence of multidrugresistant bacterial pathogens from different origins especially fish that increases the need for new natural immunostimulants

and antimicrobial alternatives to the commonly used old antimicrobial agents (EL-Sayed et al., 2019; Abouelmaatti et al., 2013; Algammal et al., 2020a; Algammal et al., 2020b: Algammal et al., 2020c; Algammal et al., 2021). This work was carried out to isolate and characterize E. tarda from brackishwater fish Tilapia zilli in Dakahlia governorate, Egypt. In the current study we detect the presence of E. tarda, determine antibiotic sensitivity and screened the presence of antimicrobial resistance genes of E. tarda isolated from diseased. dead and healthy fishes using molecular technique of conventional PCR

Materials and methods Fish sampling:

A total number of 100 of brackishwater fish of *Tilapia zilli* (healthy, diseased and morbid)) were collected randomly from EL-Manzla in Dakhlia governorate, Egypt during the period from April 2019 to April 2020. Samples were transported directly in plastic bags to the microbiological department of animal health research institute in EL-Mansoura branch to be full clinical, postmortem and bacteriological examination.

Clinical and postmortem examination

Fish were examined clinically for the presence of external and

internal lesions according to (Schaperclaus et al., 1992) The examined fish were placed on right side. Sterilization of the skin of fish by70% ethyl alcohol. The first cut was made in front of the anus through the abdominal wall with blunt sterile Scissors. The second cut was made perpendicular to the first directly behind the branchial cavity and the third cut was from the anus to the head parallel to middle line where the abdominal wall was removed and the internal organs become visible and examined for detection of any abnormalities as in color. size. change hemorrhages ascetic fluid and other abnormalities. fish were examined in a sterile manner using a three-line.

Bacteriological examination

Samples from kidney, liver and spleen aseptically were inoculated on tryptic soya broth (Oxoid, UK) and incubated at for 25-30°C 24 hrs. then inoculated on Salmonella-Shigella agar (SS agar; Oxoid CM0099) incubated at 35°C for 24-28 according hrs. to (Bergev's et al., 2005). For purification and further identification, recovered isolates streaked on TSA slope and incubated at 37°C for 24 hrs. All recovered isolates morphologically were detected Gram's with stain and biochemically according to. (Austin&Austin.,2007) and by using the analytical profile index of API20E system (Buller,2004).

Antibiotic susceptibility test for *E. tarda*:

The sensitivity test was done on examined isolates of E. tarda using disc diffusion method according to (Finegold and **martin.1982**) using various antimicrobia1 agents: Amoxicillin (10µg), Nalidixic acid (30µg), Florfenicol (30µg), Neomycin (30µg) Lincomycin (2µg) and Norfloxacin (10µg). The inhibition zone diameter was measured and interpreted according to (NCCLS, 2007). Isolates showed resistance to more than two different antimicrobial classes were multiple drug resistant (MDR).

Detection of antimicrobial resistance genes by polymerase chain reaction

The DNA was extracted using QIAamp DNA mini-Kit Primers (Catalogue no. 239035),USA) and used for the detection of *Edwardsiella tarda* antibiotic resistance related genes to β -lactams (*bla*_{SHV} and *bla*_{OXA}*I*), Fluroquinolones(*aac*(6')-*Ib*-*cr*

and *qepA* (Metabion, Germany) shown (Table as in 1). Separation of amplified products electrophoresis on by 1.5% agarose gel (Applichem, Germany, GmbH) and photographing gels by gel documentation system (Alpha Innotech, Biometra).

Statistical analysis

The obtained findings were analysed using the Chi-square test with SAS software, version 9.4, SAS Institute, Cary, NC, USA) (Significance-level; P < 0.05).

Results

Clinical and postmortem examination of fish

Samples represented Tilapia zilli were randomly collected and analyzed. based on the type of fish, the most clinical signs observed in the examine d *Tilapia zilli* were the appearance abdominal distension. of hemorrhage on the surface of the body, congestion of the fins, skin and congested ulcers vent. Accumulation of the ascitic fluid and congestion of the internal organs, including the liver. gallbladder, spleen and kidney, occurred internally. As shown in the (Fig. 1a,b).

Prevalence of *E.tarda* in the fish and Their distributions in Different Internal Organs

All examined strains were reported as *Edwardsiella tarda*. Under microscope, the bacteria as Gram-negative, appeared short, rod-shaped bacterium. The bacteria grew well Salmonella shigella agar appear as small transparent with black center on TSA. All recovered isolates were negative oxidase and biochemically homogenous. *E.tarda* were positive for Indole,

Methvl Red. Catalase. H2s production glucose fermentation reduction and nitrate to nitrite but negative for Lactose fermentation, sucrose, Urease, Voges - Proskauer . Also, the presence of *E. tarda*, identified using API20 E as shown in Fig.(2). The results exhibited that 18 isolate s recovered from (zero from healthy fish .10 from diseased fish and 8 from mourbid fish) as shown in table (2) and highest distribution of E. tarda was in liver (60%) then kidney (40%)then spleen (0%). Statistically, there is no significant difference in distribution of E. tarda among different organs.

Seasonal Variation of *E. tarda*.

Recovered strains of E. tarda were detected during spring, summer and autumn, while in detected in winter not anv samples. The summer season showed the highest prevalence with 58.3% then the spring season with 25%, finally autumn 16.7%. Statistically. there is no difference in seasonal variation of E. tarda.

Antibiotic Sensitivity of recovered *E. tarda* strains:

E. tarda isolates vary in their antimicrobial sensitivity pattern

to different used antimicrobial. In present study, all recovered isolates showed resistance to Nalidixic acid, Lincomycin, and Norfloxacin Amoxicillin and most of isolate were found to be sensitive to, Florfenicol and Neomycin. Statistically, there is a significant difference (P <(0.05) in the resistance and susceptibility of the recovered E. tarda strains to various antimicrobial agents as shown in table (3). in the present study, 55.6% of the recovered isolates showed resistance to three antibiotic classes and 27.7% of isolates recovered showed resistance to four antibiotic classes were multidrug resistant (MDR)

Molecular characterization of *E. tarda* isolates

Two isolates of representative (2/4)four isolates showed positive amplification of 392 bp fragment specific for bla_{SHV} with a total percentage of 50%, one (1/4) isolate showed positive amplification of 619 bp fragment specific for bla_{OXA1} with a total percentage of 25%, no recovered isolates detect aac(6)-*Ib*-cr and *qepA* amplified at 113 and 403 bp fragment respectively, as shown in Fig (3,4,5,6)

Gene	Sequence	Actual cycle 35 cycles	Amplified product	Reference
aac(6')-	CCCGCTTTCTCGTAGCA	Denaturation:94°C/30sec Annealing:52°C/30sec	113 bp	Lunn et
Ib-cr	TTAGGCATCACTGCGTCTTC	Extension:72°C/30sec	1	al., 2010
blaSHV	AGGATTGACTGCCTTTTTG	Denaturation:94°C/30sec	392 bp	Colom <i>et</i> <i>al.</i> , 2003
	ATTTGCTGATTTCGCTCG	Extension:72°C/40sec		
blaOXA-1	ATATCTCTACTGTTGCATCTCC	Denaturation:94°C/30sec Annealing:54°C/40sec	619 bp	
	AAACCCTTCAAACCATCC	Extension:72°C/45sec		
qepA	CGTGTTGCTGGAGTTCTTC	Denaturation:94°C/30sec	403 bp	Cattoir <i>et</i>
	CTGCAGGTACTGCGTCATG	Extension:72°C/45sec		al., 2008

Table (1): Oligonucleotide primers sequences of genes amongrecovered isolates

Table 2. prevelance of Edwardsiella tarda in accordance to fishstatus:

Fish	Apparently healthy	Diseased	morubid	Total
No of examined sample	20	30	50	100
No of isolated <i>E.tarda</i>	zero	10	8	18

 Table 3. Antibiotic sensitivity of recovered E. tarda strains

	Interpretation					
Specific tested antibiotic	Sensitive		Intermediate		Resistance	
·····	N	%	N	%	N	%
Amoxicillin	0	0	2	11.2	16	88.8
Neomycin	11	61.1	2	11.2	5	۲7.7
Norofloxacin	4	22.2	4	22.2	10	55.6
Nalidixic acid	3	16.6	8	44.4	7	38.9
Lincomycin	4	22.2	2	11.2	12	66.6
Florfenicol	11	61.6	3	١6.6	4	22.2



Figure 1a. Naturally infected Tilapia zilli with E. tarda showing, external hemorrhages and congested fins and gills.



Figure 1 b. *Naturally infected Tilapia zilli with E. tarda showing hemmorhage with congested liver*



Figure 2. Biochemical identification of the isolates by using API 20E.



Figure 3. Agarose gel electrophoresis showing MDR gene of *E. tarda* isolates using primer set for *bla*SHV gene (392bp). *LaneL: 100-1000bp ladder. P: control positive. N: control negative.*

Lanes3, 4: E. tarda isolates Positive the blaSHV gene. Lanes1, 5: E. tarda isolates Negative the blaSHV gene



Figure 4. Agarose gel electrophoresis showing MDR gene of E. tarda isolates using primer set for blaOXA-1 gene (619bp). **LaneL:** 100-1000bp ladder. **P:** control positive. **N:** control negative.

Lanes 1: E. tarda isolates Positive for the blaOXA-1 gene Lanes 3, 4,5: E. tarda isolates Negative for the blaOXA-1 gene.



Figure 5. Agarose gel electrophoresis of MDR gene of E. tarda isolates using primer set for aac(6-)-Ib-cr gene (113bp). LaneL: 100-1000bp ladder. **P:** control positive. **N:** control negative.

Lanes1, 3, 4, 5: E. tarda isolates Negative for the aac(6-)-Ib-cr gene.



Figure 6. Agarose gel electrophoresis of MDR gene of E. tarda isolates using primer set for qepA gene (403bp). LaneL: 100-1000bp ladder. **P:** control positive. **N:** control

negative. *ICONTROLOGICAL CONTROL PSCINE*. *N*: CONTROL NO.

Lanes1, 3, 4, 5: E. tarda isolates Negative for the qepA gene.

Discussion

Edwardsiellosis is one of the most important bacterial diseases in fishes causing massive mortalities the in various populations and age groups of fish consequently high economic losses (Plumb, 1993 and Jun and Yin, 2006). In the current study, the prevalence of *E. tarda* infection among the examined *Tilapia zilli* was 18% agree with results of (*Korni et al., 2012*) who recorded that prevalence of Edwardsiellos is among the cultured *Nile Tilapia* in spring season at Beni-Suef governorate was 13.33 % and higher than (*Ali et al., 2008*) who reported that incidence of *E*.

tarda among the diseased Tilapia zilli **Beni-Suef** at Governorate was 3.7%. Our results also were disagreed with (Abd El-Mageed et al, 2002) who recorded that incidence of E. tarda in Tilapia zilli collected from different localities in Egypt The difference in was 0% prevalence of E. tarda may be attributed to the difference in temperature, stocking water density, water quality and/or location of the study.

of Tilapia zilli Examination infected with E. tarda revealed number of the clinical signs as abdominal distension. hemorrhages on the body surface, congestion of the fins, presence of skin ulcers and congested vent. Internally, there were accumulation for the ascitic fluid and congestion of internal organs including liver, spleen and kidney. These clinical signs and post-mortem lesions were similar to those reported by (Kubota et al., 1981: Eissa and Yassien 1994; Galal et al, 2002; Saad El-Deen et al., 2005; El-Deeb et al., 2006; Ramadan et al., 2009; Yu et al., 2009 and Hashiem and Abd El-Galil ,2012).

Multidrug resistance could be partly attributed to the inadequate dose, extensive use and sub-active concentration of the drug used in fish farms. Furthermore, widespread use of antibiotics in medical, veterinary. agricultural and aquacultural settings as prophylactic measures and growth promoters have resulted in proliferation of antibiotic resistant genes in horizontal gene pool (Meervenne et al.. 2012).Our results detected that the recovered isolates showed resistance to nalidixic acid. amoxicillin Lincomycin, and Norfloxacin and this agree with those reported by (Noor ELDeen et al., 2017 ;Nagy et al., 2018) and most of isolate were found to be sensitive to, florfenicol and neomvcin. (Ahamad et al., 2013; Anyanwu et al., 2014; Thangapalam Jawahar Abraham et al.,2015; Pankaj Kumar et al., 2016). These resistance results may be attributed to mutations in the poisomerase gyrase or to antibiotic genes. resistance genes or by horizontal gene transfer of antibiotic resistance determinants (Poole, 2004) and (Sorum.2006).

Plasmid mediated quinolo ne resistance (PMQR) has been shown to play an important role resistance not in only to quinolones, but also B-lactamase and aminoglycosides. In fact, auinolones resistant genes represent one of the most important PMOR mechanisms and frequently carried along with **B**-lactamase on the same plasmids also *aac* (6-)-*Ib-cr* genes. *qepA* was identified

PMQR gene encoding efflux pump (Yamane et al., 2007) was detected in Edwardsiella isolates resistant to quinolones. DNA sequencing of *qepA* revealed that the gene includes three alleles of qipao (qepA1, qepA2, qepA3), (Cattoir et al., 2008 and wang et al., 2015). In the present work *qepA* gene could not be identified in any isolates of edwardsiella and disagree with (Liu et al., 2011) who found *qepA* gene in isolates of *E. tarda*. Quinolone resistance genes are distributed widely among bacteria (Flach et al., 2013). In this study aac(6-)-Ib-cr genes were investigated using specific primers and PCR, could not be detected in any one of the isolates and this results are in disagreement with these results recorded bv(*Sudu* et al.,2018) who isolate 11 out of 30 isolates of E.tarda from fish in japan, (Huang et al., 2012 and Yu et al., 2012) who identified this gene in one isolate and mentioned that this gene was located on large plasmid. While (Liu et al., 2011) mentioned that quinolones resistant genes were acquired from chromosomal genes in bacteria and are usually associated with mobilizing or transposable elements on plasmids.

The high levels of resistance to the β -lactam antibiotics in several Gram-negative bacteria has been attributed to their

intrinsic resistance. often chromosomal mediated and transferable to new generations (Kümmerer, 2009). on the other hand, bla_{OXA-1} was present in one isolate only with a percentage of (25%) and our results detect bla_{SHV} with a percentage of (50%) disagree with (Kees et al., 2008). Who recorded 0% and 25%, respectively in E. tarda while disagree with (Goudarzi et al., 2013) who could not detect bla_{SHV} genes in isolates and (Shahcheraghi et al., 2010) found bla_{SHV} genes among 6% of 200 isolates.

Conclusion

Edwardsiellosis infection leads to high morbidity and mortality rate resulting great economic losses. The total prevalence of E. tarda in brackishwater fishes is high may be due to pollution and stress factors so that overcrowded, bad environmental condition, bad water quality and high organic matter in fish farms. E. tarda has also public health significance in people engaged in fishery industry and those depend on fish products for their annual income. Overuse or miss use of antibiotics increase Edwardsiella resistance to most antibiotics. PCR method can use as an important technique in the diagnosis antibiotics of resistance genes MDR of *E.tarda* isolates aac(6)-*Ib-cr*, qnrA, bla_{SHV}, bla_{OXA-1}, qepA -

based techniques are used increasingly in foodmicrobiology research as they are well developed and when applied as culture confirmation tests, they are reliable, fast and sensitive which measure epidemics occurrence and subsequently the decreasing economic losses.

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المقاومة للمضادات الحيوية والجينات المقاومة للمضادات الحيوية الادوار دسيلا تاردا المعزوله من السمك

يعتبر مبكروب الادوار دسـيلا من المبكروبات التي تسـبب مشـاكل مر ضـية خطيرة وتؤثر على الثروة السمكية . ولذلك تهدف هذة الدر اسـة الى تحديد الاصـابة بهذا المرض الضـار وكيفية عزل الميكروب المسبب لة وتحديد الجينات المقاومة للمضادات الحيوية من المعزولات ولذلك قد تم عزل ميكروب الادوار دسيلا من عدد ١٠٠ سمكة بلطي والتي جمعت من بحيره المنزله بمحافظة الدقهلية في الفترة من ابر إيل ٢٠١٩ إلى ابر إيل ٢٠٢٠ واظهرت الدراسة عزل ميكروب الادواردسيلا ١٨% وقد تم اجراء الفحوصات الظاهرية والتشر بحبة والبكتير يولوجية وتم اخذ العينات من الطحال والكبد والكلي للفحص البيكتر بولوجي. فقد ظهر على الاسماك المصابة نزيف على سطح الجسم بشمل ووجود تقرحات على بعض الاسماك،كما تبين وجود بقع نزيفية في العضلات الخارجية بالاضافة الى ظهور حالات من الاستسقاء وانتفاخ في البطن حيث ظهر التهاب و احتقان الكلي والطحال بالدماء وتورم في الكبد ووجود علَّمات نزيفية وتم اجراء اختبار الحساسية للمضادات الحيوية المختلفة لتلك العترات وكانت النتايج ان معظم العترات حساسة فلوروفيذيكول والنيوميسين بينما اتضمح ان معظم العترات مقاومة الاموكسيسلين والنور فلوكساسين واللينكوميسين ونيلديكسيك و٦,٥٥% بكتريا مضاده لعده مضادات الحيوية. وتم اجراء اختبار البلمرة الجزيئية على ٤ من المعزولات التي تم عزلها باستخدام البادئ المتخصص لكل جبن من الجبنات المقاومة للمضاد الحبوبة بمعزولات الادواردسيلا(qepA aac(6')-Ib-cr الخاصة بالكينولونات - الخاص بالبيتا لاكتام blaOXA, blaSHV)وحيث اظهرت النتايج تواجدهم في العينات المعزولة بالنسب الاتية: ٥٠ (blaSHV) ٥٢ blaOXA ولم يظهر فيepA aac(6)-Ib-cr ولم يظهر في