

Mansoura University Faculty of Veterinary Medicine Department of Internal Medicine, Infectious and Fish Diseases.

Molecular Screening of Antibiotic-Resistance Gene of Bacteria Isolated from Mastitic Cow

By

Hager Talaat Abo-El fetouh Ibrahim B.V.Sc., Mansoura University, (2011)

Under Supervision of

Prof. Dr. Mohamed I. Eissa

Professor of Infectious Diseases, Faculty of Veterinary Medicine, Zagazig University.

Dr. Samar Magdy Mohammed Atwa

Assistant Professor of Infectious Diseases Faculty of Veterinary Medicine Mansoura University.

Dr. Mohamed Mosbah El-Diasty

Senior Researcher of Bacteriology Mansoura Provincial Lab. Animal Health Research Institute Agricultural Research Center.

A Thesis Submitted to Faculty of Veterinary Medicine Mansoura University For the degree of Master of Veterinary Medical Sciences (Infectious Diseases)

(2019)

Number	Subjects	Page
1.	Introduction	1
2.	Review of literature	6
3.	Material and methods	37
4.	Results	69
5.	Discussion	133
6.	Summary	145
7.	Conclusion	149
8.	References	151
9.	Arabic Summary	``

CONTENTS

LIST OF TABLES

NO.	Titles	Page
Table (1)	Test Substrates on GP Card.	45
Table (2)	Oligonucleotide primers sequences.	47
Table (3)	Interpretation of the California mastitis test.	50
Table (4)	Biochemical tests for identification of Staphylococcus species.	54
Table (5)	Antimicrobial discs, concentration and interpretation of their action on	57
	the isolated Staphylococcus species.	
Table (6)	Preparation of uniplex PCR Master Mix	61
Table (7)	Temperature and time conditions of the primers during PCR	61
Table (8)	Biochemical tests for identification of Streptococci.	65
Table (9)	Biochemical tests for identification of <i>E. coli</i> .	68
Table (10)	Prevalence of clinical and subclinical mastitis in dairy cattle in the	70
	different dairy farms	
Table (11)	Prevalence of clinical and subclinical mastitis at cattle and quarter levels	72
Table (12)	Distribution of the infected quarters in clinical and subclinical mastitic	76
	cows	
Table (13)	Positional distribution of the infected quarters in clinical and subclinical	78
	mastitic cows	
Table (14)	Effect of season on the prevalence of clinical and subclinical mastitis	81
Table (15)	Effect of hygienic measures on the prevalence rate of mastitis in cattle	84
Table (16)	Relation between age and prevalence rate of mastitis in cattle	89
Table (17)	Prevalence rate of different bacterial isolates recovered from clinical and	92
	subclinical mastitic milk samples	
Table (18)	Identification of Staphylococcus aureus with VITEK 2	100
Table (19)	Identification of Staphylococcus xylosus with VITEK 2	101
Table (20)	Identification of Staphylococcus lentus with VITEK 2	102
Table (21)	Identification of S. haemolyticus with VITEK2	103
Table (22)	Phenotypic antimicrobial sensitivity pattern of Staphylococcus spp.	105
	isolated from mastitic cows	

Table (23)	Phenotypic antimicrobial sensitivity pattern of S. aureus isolated from	106
	mastitic cows	
Table (24)	Phenotypic antimicrobial sensitivity pattern of CNS isolated from mastitic	107
	cows	
Table (25)	Phenotypic antimicrobial sensitivity pattern of S. aureus using VITEK 2	110
	compact	
Table (26)	Antibiogram report of VITEK 2 for S. aureus	111
Table (27)	Antimicrobial resistance phenotypic profiles of S. aureus	113
Table (28)	Antimicrobial resistance phenotypic profiles of Coagulase- negative	115
	Staphylococci	
Table (29)	MAR index analysis of Staphylococci isolates	116
Table (30)	PCR assays for confirmation of Staphylococcus isolates and detection of	123
	antibiotic resistance genes	
Table (31)	prevalence of antibiotic resistance genes among Staphylococcus spp.	129
Table (32)	Prevalence and distribution of resistant phenotypes and antibiotic	131
	resistance genes of S. aureus isolates	
Table (33)	Prevalence and distribution of resistant phenotypes and antibiotic	132
	resistance genes of CNS	

List of Figures

NO.	Description	Page
Fig. (1)	Prevalence of clinical and subclinical mastitis in dairy cattle in the different	71
	dairy farms	
Fig. (2)	Prevalence rate of clinical and subclinical mastitis at cattle and quarter levels	72
Fig. (3)	Distribution of the infected quarters in clinical and subclinical mastitic cows	77
Fig. (4)	Positional distribution of the infected quarters in clinical and subclinical	79
	mastitic cows	
Fig. (5)	Effect of season on the prevalence rate of clinical and subclinical mastitis	82
Fig. (6)	The effect of hygienic measures on the prevalence rate of mastitis in cattle	85
Fig. (7)	Relation between age and prevalence rate of mastitis in cattle	90
Fig. (8)	Prevalence rate of different bacterial isolates recovered from clinical &	93
	subclinical mastitic milk samples	
Fig. (9)	MAR index analysis of Staphylococci isolates	118
Fig. (10)	Agarose gel electrophoresis of amplified PCR products from	120
	S. aureus thermonuclease gene (nuc) isolated from cows with mastitis.	
Fig. (11)	Agarose gel electrophoresis of amplified PCR products from	120
	S. aureus coagulase gene (coa) isolated from cows with mastitis (630 bp).	
	Lanes (1-13)	
Fig. (12)	Agarose gel electrophoresis of amplified PCR products from	121
	S. aureus coagulase gene (coa) isolated from cows with mastitis (630 bp).	
	Lanes (14, 15 and 16).	
Fig. (13)	Agarose gel electrophoresis of amplified PCR products from CNS tuf gene	121
	(412 bp).	
Fig. (14)	Agarose gel electrophoresis of amplified PCR products from	124
	S. aureus DNA for the presence of mecA gene (310 bp).	
Fig. (15)	Agarose gel electrophoresis of amplified PCR products from CNS isolates	124
	DNA for the presence of mecA gene (310 bp).	
Fig. (16)	Agarose gel electrophoresis of amplified PCR products from	125
	S. aureus isolates DNA for the presence of blaZ gene (833 bp).	

Fig. (17)	Agarose gel electrophoresis of amplified PCR products from CNS isolates	125
	DNA for the presence of blaZ gene (833 bp).	
Fig. (18)	Agarose gel electrophoresis of amplified PCR products from	126
	S. aureus isolates DNA for the presence of tetK gene (360 bp).	
Fig. (19)	Agarose gel electrophoresis of amplified PCR products from CNS isolates	126
	DNA for the presence of tetK gene (360 bp).	
Fig. (20)	Agarose gel electrophoresis of amplified PCR products from	127
	S. aureus isolates DNA for the presence of fexA gene (1272 bp).	
Fig. (21)	Agarose gel electrophoresis of amplified PCR products from CNS isolates	127
	DNA for the presence of fexA gene (1272 bp).	
Fig. (22)	prevalence of antibiotic resistance genes among Staphylococcus spp.	130

List of Photos

NO.	Description	Page
Photo (1)	Udder of cow showing inflammation at the right hind quarter	73
Photo (2)	Clinically mastitic cows showed gangrenous form of mastitis. The	73
	affected quarters were swollen and bluish in colour	
Photo (3)	Bloody milk sample from mastitic udder	74
Photo (4)	Yellowish milk with cheesy flakes	74
Photo (5)	application of California mastitis test	74
Photo (6)	Positive result of California mastitis test showed by gelatinous formation	74
	of milk sample with subclinical mastitis	
Photo (7)	Dairy cows with poor housing conditions represented in dirty and wet soil	86
Photo (8)	Dairy cows with good housing conditions represented in clean bedding	86
	and dry soil	
Photo (9)	Udder was washed with water then dried with clean towel	87
Photo (10)	Pre-milking teat dipping	87
Photo (11)	S. aureus on Baird Parker media, black convex shiny colonies surrounded	95
	by clear zones	
Photo (12)	Yellow colonies of S. aureus on mannitol salt agar	95
Photo (13)	Beta hemolysis of S. aureus on blood agar	95
Photo (14)	Staphylococci under microscope, Gram positive cocci arranged in grape-	95
	like clusters	
Photo (15)	Catalase test for identification of Staphylococci, gas bubbles formation	96
	(positive result)	
Photo (16)	Tube coagulase test for S. aureus identification, fibrin clot formation	96
Photo (17)	Str. agalactiae isolates on Edward's media, colorless colonies without	96
	esculin hydrolysis	
Photo (18)	CAMP test: Production of arrowhead shaped zone of hemolysis between	97
	S. aureus and Str. agalactiae	
Photo (19)	Hotis test	97
Photo (20)	Catalase test, Streptococci showed negative result at the right of the glass	97
	slide	

Photo (21)	E. coli isolates on EMB agar with metallic green sheen	98
Photo (22)	Biochemical identification of E. coli: (A): Citrate utilization (-ve green	98
	colour), (B): Indole test (+ve pink to red ring at the top layer, (C): Methyl	
	red test (+ve red colour) and (D): Voges Proskauer test (-ve copper like	
	colour)	
Photo (23)	Antibiotic sensitivity test of isolated Staphylococci spp.	108



Summary



VI. SUMMARY

A total of 415 lactating Holstein cows from different localities in Delta area, Egypt including 345 cows from four dairy farms at Damietta (farm A, 60 lactating cows, farm B, 65 lactating cows and farm C, 120 lactating cows) and El-Sharkia (farm D, 100 lactating cows) Governorates in addition to 70 individual cases of dairy cows at El-Dakahlia Governorate; were examined for clinical and subclinical mastitis during the period from October 2014 to June 2018.

Concerning to the prevalence rate of clinical and subclinical mastitis, it was found that the overall prevalence of mastitis in this study was 224 (54%) at the cattle level, 50 (12%) were clinical and 174 (42%) were subclinical cases. The prevalence rate at the quarter level was 467 (52.1%), 106 (11.8%) were clinical and 361 (40.3%) were subclinical.

Regarding to quarter involvement, the affection of two quarters was higher than the other quarters in clinical and subclinical mastitic cows with prevalence rate of 38% for clinical cases and 44.25% for subclinical cases, respectively. In clinically mastitic cows, one-quarter affection was 34%, three quarters affection was 10% and four quarters affection was 18% while, in subclinical cases one quarter affection was 27.01%, three quarters affection was 22.9% and four quarters affection was 5.7%. Furthermore, hindquarters' affection was more prevalent than forequarters in both clinical and subclinical cases in our study.

All the potential risk factors considered in the present study namely, season of the year, hygienic measures and age of the cow affected prevalence of mastitis.

Regarding to the effect of season of the year on the prevalence of mastitis, clinical mastitis in the examined dairy cattle was higher in spring (23.5%) and winter (21.4%) than in autumn (6.12%) and no clinical cases were found during summer. Furthermore, subclinical mastitis was higher in winter (53.8%) and spring (47%) than summer (37.5%) and autumn (34.7%).

Concerning hygiene, dairy cows with good hygienic measures had a low prevalence of mastitis at a rate 1.6% for clinical mastitis and 31.35% for subclinical

mastitis. However, dairy cows with bad hygiene had a high prevalence of mastitis at a rate of 20.4% for clinical mastitis and 50.4% for subclinical form.

In relation to age of cows, the present study revealed that animals in (\geq 5-9 years) group were more susceptible to clinical mastitis (13.5%) than those in age group (\geq 2-4 years) (11.02%). In addition, old cows (\geq 5-9 years) were more susceptible to subclinical mastitis (43.5%) than young cows (\geq 2-4 years) (40.8%).

From etiological point of view, the current bacteriological examinations revealed that CNS were the predominant bacteria isolated from mastitic cases (32%) followed by, *E. coli* (24.8%), *S. aureus* (15.4%), *Str. agalactiae* (13.4%), *Str. dysgalactiae* (8.8%), *E. faecalis* (2%), *Str. uberis* (2%), *Enterobacter aerogenes* (0.66%), *Micrococcus* (0.66%), *Enterobacter agglomerans* (0.22%) and *Klebsiella* spp. (0.22%).

In clinical mastitis, there were *S. aureus* (14.3%), CNS (25.7%), *Str. agalactiae* (14.3%), *Str. dysgalactiae* (8.6%), *Str. uberis* (2.86%), *E. faecalis* (2.86%), *E. coli* (24.7%), *Klebsiella* spp. (0.95%), *Enterobacter aerogenes* (2.86%), *Enterobacter agglomerans* (0.95%) and *Micrococcus* (1.9%).

In subclinical mastitis, there were *S. aureus* (15.7%), CNS (34 %), *Str. agalactiae* (13%), *Str. dysgalactiae* (8.8%), *Str. uberis* (1.7%), *E. faecalis* (1.7%), *E. coli* (24.8%) and *Micrococcus* (0.3%).

In the present study, the results of antibiotic sensitivity test for Staphylococcus spp. revealed that oxacillin was the most resistant antibiotic (92%), followed by ampicillin (90%), cefoxitin (86%), cefotaxime (70%), tetracycline (70%), ampicillin/sulbactam (64%), sulphamethoxazole/trimethoprim (64%), erythromycin (58%), gentamicin (50%), ofloxacin (42%), chloramphenicol (40%), ciprofloxacin (34%) and vancomycin (2%).

Regarding to the antibiogram of *S. aureus* isolates using disc-diffusion method revealed that they were highly resistant to oxacillin (96.6%) followed by ampicillin (93.3%), cefoxitin (93.3%), tetracycline (73.3%), cefotaxime (70%), ampicillin/sulbactam (66.67%), erythromycin (56.6%),

sulphamethoxazole/trimethoprim (56.6%), gentamicin (53.3%), ofloxacin (40%), chloramphenicol (36.6%), ciprofloxacin (30%) and vancomycin (0%).

Results of antibiogram of CNS isolates revealed that the highest number of isolates were resistant to ampicillin and oxacillin (85%, each), followed by cefoxitin (75%), sulphamethoxazole/ trimethoprim (75%), cefotaxime (70%), tetracycline (65%), ampicillin/sulbactam (60%), erythromycin (60%), chloramphenicol (45%), gentamicin (45%), ofloxacin (45%), ciprofloxacin (40%) and vancomycin (5%).

Concerning results of antibiotic sensitivity using VITEK 2 compact, it was found that *S. aureus* isolates were highly resistant to penicillin, cefoxitin, oxacillin with percentage (100%, each), followed by tetracycline (54%), erythromycin and clindamycin (30.7%, each), gentamicin (15.4%) and quinopristin/dalfopristin (7.7%).

In the present study, all of the examined Staphylococci isolates were resistant to at least three antibiotics resulting in high MAR index which was more than 0.2 where ten isolates were resistant to 10 antibiotics (20%), seven isolates were resistant to 9 antibiotics (14%), six isolates were resistant to 5 antibiotics (12%), six isolates were resistant to 6 antibiotics (12%), five isolates were resistant to 4 antibiotics (10%), four isolates were resistant to 11 antibiotics (8%), three isolates were resistant to 8 antibiotics (6%), two isolates were resistant to 3 antibiotics (4%) and two isolates were resistant to 12 antibiotics (4%).

Concerning antimicrobial phenotypic profiles, the most exhibited phenotype was Oxacillin – Ampicillin - Cefoxitin (OX-AM- FOX) in both *S. aureus* and CNS indicating high levels of resistance to these antibiotics.

In respect to using PCR for confirmation of Staphylococcal infections, the nuc gene and coa genes were used for confirmation of the isolated *S. aureus*. Results revealed that all the recovered *S. aureus* harbored the amplified products of both genes. On the other hand, the tuf gene was used for confirmation of CNS species where all of them were positive for this gene indicating high correlation between biochemical identification and genetic detection of these isolates.

Regarding to the prevalence of antibiotic resistance genes of Staphylococci spp., the obtained results revealed that all of the 25 Staphylococcal isolates were found to be

positive for the presence of mecA (100%) and 24/25 isolates were positive for the presence of blaZ gene (96%) where 19/25 isolates were phenotypically resistant to β -lactam antibiotics, 3/25 expressed intermediate resistant phenotype for ampicillin and also, 3/25 were intermediate resistant for oxacillin. Detection of tetK gene in 17/25 isolates (68%) where 15/17 were resistant phenotypically to tetracycline, one isolate was intermediate resistant and one isolate was sensitive to tetracycline although carrying tetK gene. Only 6/25 isolates were positive for the presence of fexA gene (24%) where three isolates were phenotypically resistant to chloramphenicol, one isolate was intermediate resistant and two isolates were sensitive although carrying fexA gene.