African Journal of Microbiology Research

Volume 8 Number 48, 26 November, 2014 ISSN 1996-0808



ABOUT AJMR

The African Journal of Microbiology Research (AJMR) (ISSN 1996-0808) is published Weekly (one volume per year) by Academic Journals.

African Journal of Microbiology Research (AJMR) provides rapid publication (weekly) of articles in all areas of Microbiology such as: Environmental Microbiology, Clinical Microbiology, Immunology, Virology, Bacteriology, Phycology, Mycology and Parasitology, Protozoology, Microbial Ecology, Probiotics and Prebiotics, Molecular Microbiology, Biotechnology, Food Microbiology, Industrial Microbiology, Cell Physiology, Environmental Biotechnology, Genetics, Enzymology, Molecular and Cellular Biology, Plant Pathology, Entomology, Biomedical Sciences, Botany and Plant Sciences, Soil and Environmental Sciences, Zoology, Endocrinology, Toxicology. The Journal welcomes the submission of manuscripts that meet the general criteria of significance and scientific excellence. Papers will be published shortly after acceptance. All articles are peer-reviewed.

Submission of Manuscript

Please read the **Instructions for Authors** before submitting your manuscript. The manuscript files should be given the last name of the first author

Click here to Submit manuscripts online

If you have any difficulty using the online submission system, kindly submit via this email ajmr@academicjournals.org.

With questions or concerns, please contact the Editorial Office at ajmr@academicjournals.org.

Editors

Prof. Dr. Stefan Schmidt, *Applied and Environmental Microbiology School of Biochemistry, Genetics and Microbiology University of KwaZulu-Natal Private Bag X01 Scottsville, Pietermaritzburg 3209 South Africa.*

Prof. Fukai Bao Department of Microbiology and Immunology Kunming Medical University Kunming 650031, China

Dr. Jianfeng Wu Dept. of Environmental Health Sciences, School of Public Health, University of Michigan USA

Dr. Ahmet Yilmaz Coban OMU Medical School, Department of Medical Microbiology, Samsun, Turkey

Dr. Seyed Davar Siadat Pasteur Institute of Iran, Pasteur Square, Pasteur Avenue, Tehran, Iran.

Dr. J. Stefan Rokem The Hebrew University of Jerusalem Department of Microbiology and Molecular Genetics, P.O.B. 12272, IL-91120 Jerusalem, Israel

Prof. Long-Liu Lin National Chiayi University 300 Syuefu Road, Chiayi, Taiwan

N. John Tonukari, Ph.D Department of Biochemistry Delta State University PMB 1 Abraka, Nigeria

Dr. Thaddeus Ezeji

Assistant Professor Fermentation and Biotechnology Unit Department of Animal Sciences The Ohio State University 1680 Madison Avenue USA.

Associate Editors

Dr. Mamadou Gueye

MIRCEN/ Laboratoire commun de microbiologie IRD-ISRA-UCAD, BP 1386, DAKAR, Senegal.

Dr. Caroline Mary Knox Department of Biochemistry, Microbiology and Biotechnology Rhodes University Grahamstown 6140 South Africa.

Dr. Hesham Elsayed Mostafa Genetic Engineering and Biotechnology Research Institute (GEBRI) Mubarak City For Scientific Research, Research Area, New Borg El-Arab City, Post Code 21934, Alexandria, Egypt.

Dr. Wael Abbas El-Naggar Head of Microbiology Department, Faculty of Pharmacy, Mansoura University, Mansoura 35516, Egypt.

Dr. Abdel Nasser A. El-Moghazy Microbiology, Molecular Biology, Genetics Engineering and Biotechnology Dept of Microbiology and Immunology Faculty of Pharmacy Al-Azhar University Nasr city, Cairo, Egypt

Dr. Barakat S.M. Mahmoud

Food Safety/Microbiology Experimental Seafood Processing Laboratory Costal Research and Extension Center Mississippi State University 3411 Frederic Street Pascagoula, MS 39567 USA

Prof. Mohamed Mahrous Amer

Poultry Disease (Viral Diseases of poultry) Faculty of Veterinary Medicine, Department of Poultry Diseases Cairo university Giza, Egypt

Dr. Xiaohui Zhou

Molecular Microbiology, Industrial Microbiology, Environmental Microbiology, Pathogenesis, Antibiotic resistance, Microbial Ecology Washington State University Bustad Hall 402 Department of Veterinary Microbiology and Pathology, Pullman, USA

Dr. R. Balaji Raja Department of Biotechnology,

School of Bioengineering, SRM University, Chennai India

Dr. Aly E Abo-Amer

Division of Microbiology, Botany Department, Faculty of Science, Sohag University. Egypt.

Editorial Board

Dr. Haoyu Mao

Department of Molecular Genetics and Microbiology College of Medicine University of Florida Florida, Gainesville USA.

Dr. Rachna Chandra

Environmental Impact Assessment Division Environmental Sciences Sálim Ali Center for Ornithology and Natural History (SACON), Anaikatty (PO), Coimbatore-641108, India

Dr. Yongxu Sun

Department of Medicinal Chemistry and Biomacromolecules Qiqihar Medical University, Qiqihar 161006 Heilongjiang Province P.R. China

Dr. Ramesh Chand Kasana

Institute of Himalayan Bioresource Technology Palampur, Distt. Kangra (HP), India

Dr. S. Meena Kumari

Department of Biosciences Faculty of Science University of Mauritius Reduit

Dr. T. Ramesh

Assistant Professor Marine Microbiology CAS in Marine Biology Faculty of Marine Sciences Annamalai University Parangipettai - 608 502 Cuddalore Dist. Tamilnadu, India

Dr. Pagano Marcela Claudia

Post doctoral fellowship at Department of Biology, Federal University of Ceará - UFC, Brazil.

Dr. EL-Sayed E. Habib

Associate Professor, Dept. of Microbiology, Faculty of Pharmacy, Mansoura University, Egypt.

Dr. Pongsak Rattanachaikunsopon

Department of Biological Science, Faculty of Science, Ubon Ratchathani University, Warin Chamrap, Ubon Ratchathani 34190, Thailand

Dr. Gokul Shankar Sabesan

Microbiology Unit, Faculty of Medicine, AIMST University Jalan Bedong, Semeling 08100, Kedah, Malaysia

Dr. Kwang Young Song

Department of Biological Engineering, School of Biological and Chemical Engineering, Yanbian Universityof Science and Technology, Yanji, China.

Dr. Kamel Belhamel

Faculty of Technology, University of Bejaia Algeria

Dr. Sladjana Jevremovic

Institute for Biological Research Sinisa Stankovic, Belgrade, Serbia

Dr. Tamer Edirne Dept. of Family Medicine, Univ. of Pamukkale Turkey

Dr. R. Balaji Raja M.Tech (Ph.D) Assistant Professor, Department of Biotechnology, School of Bioengineering, SRM University, Chennai. India

Dr. Minglei Wang University of Illinois at Urbana-Champaign,USA

Dr. Mohd Fuat ABD Razak Institute for Medical Research Malaysia

Dr. Davide Pacifico Istituto di Virologia Vegetale – CNR Italy

Prof. Dr. Akrum Hamdy *Faculty of Agriculture, Minia University, Egypt Egypt*

Dr. Ntobeko A. B. Ntusi

Cardiac Clinic, Department of Medicine, University of Cape Town and Department of Cardiovascular Medicine, University of Oxford South Africa and United Kingdom

Prof. N. S. Alzoreky

Food Science & Nutrition Department, College of Agricultural Sciences & Food, King Faisal University, Saudi Arabia

Dr. Chen Ding

Serbia

College of Material Science and Engineering, Hunan University, China

Dr Svetlana Nikolić Faculty of Technology and Metallurgy, University of Belgrade,

Dr. Sivakumar Swaminathan

Department of Agronomy, College of Agriculture and Life Sciences, Iowa State University, Ames, Iowa 50011 USA

Dr. Alfredo J. Anceno School of Environment, Resources and Development (SERD), Asian Institute of Technology, Thailand

Dr. Iqbal Ahmad

Aligarh Muslim University, Aligrah India

Dr. Josephine Nketsia-Tabiri Ghana Atomic Energy Commission Ghana

Dr. Juliane Elisa Welke *UFRGS – Universidade Federal do Rio Grande do Sul Brazil*

Dr. Mohammad Nazrul Islam NIMR; IPH-Bangalore & NIUM Bangladesh

Dr. Okonko, Iheanyi Omezuruike Department of Virology,

Faculty of Basic Medical Sciences, College of Medicine, University of Ibadan, University College Hospital, Ibadan, Nigeria

Dr. Giuliana Noratto Texas A&M University USA

Dr. Phanikanth Venkata Turlapati Washington State University USA

Dr. Khaleel I. Z. Jawasreh National Centre for Agricultural Research and Extension, NCARE Jordan

Dr. Babak Mostafazadeh, MD Shaheed Beheshty University of Medical Sciences Iran

Dr. S. Meena Kumari Department of Biosciences Faculty of Science University of Mauritius Reduit Mauritius

Dr. S. Anju Department of Biotechnology, SRM University, Chennai-603203 India

Dr. Mustafa Maroufpor

Prof. Dong Zhichun

Professor, Department of Animal Sciences and Veterinary Medicine, Yunnan Agriculture University, China

Dr. Mehdi Azami

Parasitology & Mycology Dept, Baghaeei Lab., Shams Abadi St. Isfahan Iran

Dr. Anderson de Souza Sant'Ana University of São Paulo. Brazil.

Dr. Juliane Elisa Welke *UFRGS – Universidade Federal do Rio Grande do Sul Brazil*

Dr. Paul Shapshak USF Health, Depts. Medicine (Div. Infect. Disease & Internat Med) and Psychiatry & Beh Med. USA

Dr. Jorge Reinheimer Universidad Nacional del Litoral (Santa Fe) Argentina

Dr. Qin Liu East China University of Science and Technology China

Dr. Xiao-Qing Hu State Key Lab of Food Science and Technology Jiangnan University P. R. China

Prof. Branislava Kocic Specaialist of Microbiology and Parasitology University of Nis, School of Medicine Institute for Public Health Nis, Bul. Z. Djindjica 50, 18000 Nis Serbia

Dr. Rafel Socias *CITA de Aragón, Spain* **Prof. Kamal I. Mohamed** State University of New York at Oswego USA

Dr. Adriano Cruz Faculty of Food Engineering-FEA University of Campinas (UNICAMP) Brazil

Dr. Mike Agenbag (Michael Hermanus Albertus) Manager Municipal Health Services, Joe Gqabi District Municipality South Africa

Dr. D. V. L. Sarada Department of Biotechnology, SRM University, Chennai-603203 India.

Dr. Samuel K Ameyaw *Civista Medical Center United States of America*

Prof. Huaizhi Wang Institute of Hepatopancreatobiliary Surgery of PLA Southwest Hospital, Third Military Medical University Chongqing400038 P. R. China

Prof. Bakhiet AO *College of Veterinary Medicine, Sudan University of Science and Technology Sudan*

Dr. Saba F. Hussain Community, Orthodontics and Peadiatric Dentistry Department Faculty of Dentistry Universiti Teknologi MARA 40450 Shah Alam, Selangor Malaysia

Prof. Dr. Zohair I.F.Rahemo State Key Lab of Food Science and Technology Jiangnan University P. R. China

Dr. Afework Kassu University of Gondar Ethiopia Prof. Isidro A. T. Savillo ISCOF Philippines

Dr. How-Yee Lai *Taylor's University College Malaysia*

Dr. Nidheesh Dadheech *MS. University of Baroda, Vadodara, Gujarat, India. India*

Dr. Omitoyin Siyanbola Bowen University, Iwo Nigeria

Dr. Franco Mutinelli Istituto Zooprofilattico Sperimentale delle Venezie Italy

Dr. Chanpen Chanchao Department of Biology, Faculty of Science, Chulalongkorn University Thailand

Dr. Tsuyoshi Kasama Division of Rheumatology, Showa University Japan

Dr. Kuender D. Yang, MD. Chang Gung Memorial Hospital Taiwan

Dr. Liane Raluca Stan University Politehnica of Bucharest, Department of Organic Chemistry "C.Nenitzescu" Romania

Dr. Muhamed Osman Senior Lecturer of Pathology & Consultant Immunopathologist Department of Pathology, Faculty of Medicine, Universiti Teknologi MARA, 40450 Shah Alam, Selangor Malaysia

Dr. Mohammad Feizabadi *Tehran University of medical Sciences Iran*

Prof. Ahmed H Mitwalli

State Key Lab of Food Science and Technology Jiangnan University P. R. China

Dr. Mazyar Yazdani Department of Biology, University of Oslo, Blindern, Oslo, Norway

Dr. Ms. Jemimah Gesare Onsare *Ministry of Higher, Education Science and Technology Kenya*

Dr. Babak Khalili Hadad

Department of Biological Sciences, Roudehen Branch, Islamic Azad University, Roudehen Iran

Dr. Ehsan Sari Department of Plan Pathology, Iranian Research Institute of Plant Protection, Tehran, Iran.

Dr. Snjezana Zidovec Lepej University Hospital for Infectious Diseases Zagreb, Croatia

Dr. Dilshad Ahmad *King Saud University Saudi Arabia*

Dr. Adriano Gomes da Cruz University of Campinas (UNICAMP) Brazil

Dr. Hsin-Mei Ku Agronomy Dept. NCHU 250 Kuo Kuang Rd, Taichung, Taiwan

Dr. Fereshteh Naderi *Physical chemist, Islamic Azad University, Shahre Ghods Branch Iran*

Dr. Adibe Maxwell Ogochukwu

Department of Clinical Pharmacy and Pharmacy Management, University of Nigeria, Nsukka. Nigeria

Dr. William M. Shafer Emory University School of Medicine

USA

Dr. Michelle Bull

CSIRO Food and Nutritional Sciences Australia

Prof. Dr. Márcio Garcia Ribeiro (DVM, PhD) School of Veterinary Medicine and Animal Science-UNESP,

Dept. Veterinary Hygiene and Public Health, State of Sao Paulo Brazil

Prof. Dr. Sheila Nathan National University of Malaysia (UKM) Malaysia

Prof. Ebiamadon Andi Brisibe University of Calabar, Calabar, Nigeria

Dr. Julie Wang *Burnet Institute Australia*

Dr. Jean-Marc Chobert INRA- BIA, FIPL France

Dr. Zhilong Yang, PhD Laboratory of Viral Diseases National Institute of Allergy and Infectious Diseases, National Institutes of Health

Dr. Dele Raheem University of Helsinki Finland

Dr. Li Sun *PLA Centre for the treatment of infectious diseases, Tangdu Hospital, Fourth Military Medical University China*

Dr. Biljana Miljkovic-Selimovic

School of Medicine, University in Nis, Serbia; Referent laboratory for Campylobacter and Helicobacter, Center for Microbiology, Institute for Public Health, Nis Serbia

Dr. Xinan Jiao Yangzhou University China

Dr. Endang Sri Lestari, MD. Department of Clinical Microbiology, Medical Faculty, Diponegoro University/Dr. Kariadi Teaching Hospital, Semarang Indonesia

Dr. Hojin Shin Pusan National University Hospital South Korea

Dr. Yi Wang *Center for Vector Biology, 180 Jones Avenue Rutgers University, New Brunswick, NJ 08901-8536 USA*

Dr. Heping Zhang The Key Laboratory of Dairy Biotechnology and Engineering, Ministry of Education, Inner Mongolia Agricultural University. China

Prof. Natasha Potgieter *University of Venda South Africa*

Dr. Alemzadeh Sharif University Iran

Dr. Sonia Arriaga Instituto Potosino de Investigación Científicay Tecnológica/División de Ciencias Ambientales Mexico

Dr. Armando Gonzalez-Sanchez *Universidad Autonoma Metropolitana Cuajimalpa Mexico* **Dr. Pradeep Parihar** Lovely Professional University, Phagwara, Punjab. India

Dr. William H Roldán Department of Medical Microbiology, Faculty of Medicine, Peru

Dr. Kanzaki, L I B Laboratory of Bioprospection. University of Brasilia Brazil

Prof. Philippe Dorchies Laboratory of Bioprospection. University of Brasilia Brazil

Dr. C. Ganesh Kumar Indian Institute of Chemical Technology, Hyderabad India

Dr. Farid Che Ghazali Universiti Sains Malaysia (USM) Malaysia

Dr. Samira Bouhdid Abdelmalek Essaadi University, Tetouan, Morocco

Dr. Zainab Z. Ismail Department of Environmental Engineering, University of Baghdad. Iraq

Dr. Ary Fernandes Junior *Universidade Estadual Paulista (UNESP) Brasil*

Dr. Papaevangelou Vassiliki Athens University Medical School Greece

Dr. Fangyou Yu *The first Affiliated Hospital of Wenzhou Medical College China*

Dr. Galba Maria de Campos Takaki Catholic University of Pernambuco Brazil

Dr. Kwabena Ofori-Kwakye

Department of Pharmaceutics, Kwame Nkrumah University of Science & Technology, KUMASI Ghana

Prof. Dr. Liesel Brenda Gende

Arthropods Laboratory, School of Natural and Exact Sciences, National University of Mar del Plata Buenos Aires, Argentina.

Dr. Adeshina Gbonjubola *Ahmadu Bello University, Zaria.*

Nigeria

Prof. Dr. Stylianos Chatzipanagiotou University of Athens – Medical School Greec

Dr. Dongqing BAI Department of Fishery Science, Tianjin Agricultural College, Tianjin 300384 P. R. China

Dr. Dingqiang Lu Nanjing University of Technology P.R. China

Dr. L. B. Sukla Scientist –G & Head, Biominerals Department, IMMT, Bhubaneswar India

Dr. Hakan Parlakpinar *MD. Inonu University, Medical Faculty, Department of Pharmacology, Malatya Turkey*

Dr Pak-Lam Yu Massey University New Zealand

Dr Percy Chimwamurombe University of Namibia Namibia

Dr. Euclésio Simionatto State University of Mato Grosso do Sul-UEMS Brazil

Dr. Hans-Jürg Monstein

Clinical Microbiology, Molecular Biology Laboratory, University Hospital, Faculty of Health Sciences, S-581 85 Linköping Sweden

Dr. Ajith, T. A

Associate Professor Biochemistry, Amala Institute of Medical Sciences, Amala Nagar, Thrissur, Kerala-680 555 India

Dr. Feng-Chia Hsieh

Biopesticides Division, Taiwan Agricultural Chemicals and Toxic Substances Research Institute, Council of Agriculture Taiwan

Prof. Dra. Suzan Pantaroto de Vasconcellos

Universidade Federal de São Paulo Rua Prof. Artur Riedel, 275 Jd. Eldorado, Diadema, SP CEP 09972-270 Brasil

Dr. Maria Leonor Ribeiro Casimiro Lopes Assad

Universidade Federal de São Carlos - Centro de Ciências Agrárias - CCA/UFSCar Departamento de Recursos Naturais e Proteção Ambiental Rodovia Anhanguera, km 174 - SP-330 Araras - São Paulo Brasil

Dr. Pierangeli G. Vital

Institute of Biology, College of Science, University of the Philippines Philippines

Prof. Roland Ndip University of Fort Hare, Alice South Africa

Dr. Shawn Carraher University of Fort Hare, Alice South Africa

Dr. José Eduardo Marques Pessanha

Observatório de Saúde Urbana de Belo Horizonte/Faculdade de Medicina da Universidade Federal de Minas Gerais Brasil **Dr. Yuanshu Qian** Department of Pharmacology, Shantou University Medical College China

Dr. Helen Treichel *URI-Campus de Erechim Brazil*

Dr. Xiao-Qing Hu State Key Lab of Food Science and Technology Jiangnan University P. R. China

Dr. Olli H. Tuovinen Ohio State University, Columbus, Ohio USA

Prof. Stoyan Groudev University of Mining and Geology "Saint Ivan Rilski" Sofia Bulgaria

Dr. G. Thirumurugan *Research lab, GIET School of Pharmacy, NH-5, Chaitanya nagar, Rajahmundry-533294. India*

Dr. Charu Gomber Thapar University India

Dr. Jan Kuever Bremen Institute for Materials Testing, Department of Microbiology, Paul-Feller-Str. 1, 28199 Bremen Germany

Dr. Nicola S. Flanagan Universidad Javeriana, Cali Colombia

Dr. André Luiz C. M. de A. Santiago *Universidade Federal Rural de Pernambuco Brazil*

Dr. Dhruva Kumar Jha *Microbial Ecology Laboratory, Department of Botany, Gauhati University, Guwahati 781 014, Assam India* **Dr. N Saleem Basha** *M. Pharm (Pharmaceutical Biotechnology) Eritrea (North East Africa)*

Prof. Dr. João Lúcio de Azevedo Dept. Genetics-University of São Paulo-Faculty of Agriculture- Piracicaba, 13400-970 Brasil

Dr. Julia Inés Fariña PROIMI-CONICET Argentina

Dr. Yutaka Ito *Kyoto University Japan*

Dr. Cheruiyot K. Ronald Biomedical Laboratory Technologist Kenya

Prof. Dr. Ata Akcil S. D. University Turkey

Dr. Adhar Manna *The University of South Dakota USA*

Dr. Cícero Flávio Soares Aragão Federal University of Rio Grande do Norte Brazil

Dr. Gunnar Dahlen Institute of odontology, Sahlgrenska Academy at University of Gothenburg Sweden

Dr. Pankaj Kumar Mishra *Vivekananda Institute of Hill Agriculture, (I.C.A.R.), ALMORA-263601, Uttarakhand India*

Dr. Benjamas W. Thanomsub *Srinakharinwirot University Thailand*

Dr. Maria José Borrego National Institute of Health – Department of Infectious Diseases Portugal **Dr. Catherine Carrillo** *Health Canada, Bureau of Microbial Hazards Canada*

Dr. Marcotty Tanguy Institute of Tropical Medicine Belgium

Dr. Han-Bo Zhang Laboratory of Conservation and Utilization for Bioresources Key Laboratory for Microbial Resources of the Ministry of Education, Yunnan University, Kunming 650091. School of Life Science, Yunnan University, Kunming, Yunnan Province 650091. China

Dr. Ali Mohammed Somily King Saud University Saudi Arabia Dr. Nicole Wolter

National Institute for Communicable Diseases and University of the Witwatersrand, Johannesburg South Africa

Dr. Marco Antonio Nogueira

Universidade Estadual de Londrina CCB/Depto. De microbiologia Laboratório de Microbiologia Ambiental Caixa Postal 6001 86051-980 Londrina. Brazil

Dr. Bruno Pavoni Department of Environmental Sciences University of Venice Italy

Dr. Shih-Chieh Lee Da-Yeh University Taiwan

Dr. Satoru Shimizu Horonobe Research Institute for the Subsurface Environment, Northern Advancement Center for Science & Technology Japan **Dr. Tang Ming** College of Forestry, Northwest A&F University, Yangling China

Dr. Olga Gortzi Department of Food Technology, T.E.I. of Larissa Greece

Dr. Mark Tarnopolsky Mcmaster University Canada

Dr. Sami A. Zabin Al Baha University Saudi Arabia

Dr. Julia W. Pridgeon Aquatic Animal Health Research Unit, USDA, ARS USA

Dr. Lim Yau Yan Monash University Sunway Campus Malaysia

Prof. Rosemeire C. L. R. Pietro *Faculdade de Ciências Farmacêuticas de Araraquara, Univ Estadual Paulista, UNESP Brazil*

Dr. Nazime Mercan Dogan PAU Faculty of Arts and Science, Denizli Turkey

Dr Ian Edwin Cock Biomolecular and Physical Sciences Griffith University Australia

Prof. N K Dubey Banaras Hindu University India

Dr. S. Hemalatha Department of Pharmaceutics, Institute of Technology, Banaras Hindu University, Varanasi. 221005 India

Dr. J. Santos Garcia A. Universidad A. de Nuevo Leon Mexico India

Dr. Somboon Tanasupawat

Department of Biochemistry and Microbiology, Faculty of Pharmaceutical Sciences, Chulalongkorn University, Bangkok 10330 Thailand

Dr. Vivekananda Mandal Post Graduate Department of Botany, Darjeeling Government College, Darjeeling – 734101. India

Dr. Shihua Wang *College of Life Sciences, Fujian Agriculture and Forestry University China*

Dr. Victor Manuel Fernandes Galhano

CITAB-Centre for Research and Technology of Agro-Environment and Biological Sciences, Integrative Biology and Quality Research Group, University of Trás-os-Montes and Alto Douro, Apartado 1013, 5001-801 Vila Real Portugal

Dr. Maria Cristina Maldonado Instituto de Biotecnologia. Universidad Nacional de Tucuman Argentina

Dr. Alex Soltermann Institute for Surgical Pathology, University Hospital Zürich Switzerland

Dr. Dagmara Sirova Department of Ecosystem Biology, Faculty Of Science, University of South Bohemia, Branisovska 37, Ceske Budejovice, 37001 Czech Republic

Dr. E. O Igbinosa Department of Microbiology, Ambrose Alli University, Ekpoma, Edo State, Nigeria.

Dr. Hodaka Suzuki National Institute of Health Sciences Japan **Dr. Mick Bosilevac** US Meat Animal Research Center USA

Dr. Nora Lía Padola Imunoquímica y Biotecnología- Fac Cs Vet-UNCPBA Argentina

Dr. Maria Madalena Vieira-Pinto *Universidade de Trás-os-Montes e Alto Douro Portugal*

Dr. Stefano Morandi *CNR-Istituto di Scienze delle Produzioni Alimentari (ISPA), Sez. Milano Italy*

Dr Line Thorsen *Copenhagen University, Faculty of Life Sciences Denmark*

Dr. Ana Lucia Falavigna-Guilherme *Universidade Estadual de Maringá Brazil*

Dr. Baoqiang Liao Dept. of Chem. Eng., Lakehead University, 955 Oliver Road, Thunder Bay, Ontario Canada

Dr. Ouyang Jinping Patho-Physiology department, Faculty of Medicine of Wuhan University China

Dr. John Sorensen University of Manitoba Canada

Dr. Andrew Williams University of Oxford United Kingdom

Dr. Chi-Chiang Yang *Chung Shan Medical University Taiwan, R.O.C.*

Dr. Quanming Zou Department of Clinical Microbiology and Immunology, College of Medical Laboratory, Third Military Medical University China **Prof. Ashok Kumar** School of Biotechnology, Banaras Hindu University, Varanasi India

Dr. Chung-Ming Chen Department of Pediatrics, Taipei Medical University Hospital, Taipei Taiwan

Dr. Jennifer Furin Harvard Medical School USA

Dr. Julia W. Pridgeon Aquatic Animal Health Research Unit, USDA, ARS USA

Dr Alireza Seidavi Islamic Azad University, Rasht Branch Iran

Dr. Thore Rohwerder Helmholtz Centre for Environmental Research UFZ Germany

Dr. Daniela Billi University of Rome Tor Vergat Italy

Dr. Ivana Karabegovic Faculty of Technology, Leskovac, University of Nis Serbia

Dr. Flaviana Andrade Faria IBILCE/UNESP Brazil

Prof. Margareth Linde Athayde Federal University of Santa Maria Brazil

Dr. Guadalupe Virginia Nevarez Moorillon *Universidad Autonoma de Chihuahua Mexico*

Dr. Tatiana de Sousa Fiuza *Federal University of Goias Brazil*

Dr. Indrani B. Das Sarma Jhulelal Institute of Technology, Nagpur India **Dr. Guanghua Wang** Northeast Institute of Geography and Agroecology, Chinese Academy of Sciences China

Dr. Renata Vadkertiova Institute of Chemistry, Slovak Academy of Science Slovakia

Dr. Charles Hocart *The Australian National University Australia*

Dr. Guoqiang Zhu University of Yangzhou College of Veterinary Medicine China

Dr. Guilherme Augusto Marietto Gonçalves São Paulo State University Brazil

Dr. Mohammad Ali Faramarzi *Tehran University of Medical Sciences Iran*

Dr. Suppasil Maneerat Department of Industrial Biotechnology, Faculty of Agro-Industry, Prince of Songkla University, Hat Yai 90112 Thailand

Dr. Francisco Javier Las heras Vazquez Almeria University Spain

Dr. Cheng-Hsun Chiu Chang Gung memorial Hospital, Chang Gung University Taiwan

Dr. Ajay Singh DDU Gorakhpur University, Gorakhpur-273009 (U.P.) India

Dr. Karabo Shale *Central University of Technology, Free State South Africa*

Dr. Lourdes Zélia Zanoni Department of Pediatrics, School of Medicine, Federal University of Mato Grosso do Sul, Campo Grande, Mato Grosso do Sul Brazil **Dr. Tulin Askun** Balikesir University Turkey

Dr. Marija Stankovic Institute of Molecular Genetics and Genetic Engineering Republic of Serbia

Dr. Scott Weese

University of Guelph Dept of Pathobiology, Ontario Veterinary College, University of Guelph, Guelph, Ontario, N1G2W1, Canada

Dr. Sabiha Essack

School of Health Sciences South African Committee of Health Sciences University of KwaZulu-Natal Private Bag X54001 Durban 4000 South Africa

Dr. Hare Krishna *Central Institute for Arid Horticulture, Beechwal, Bikaner-334 006, Rajasthan, India*

Dr. Anna Mensuali Dept. of Life Science, Scuola Superiore Sant'Anna

Dr. Ghada Sameh Hafez Hassan *Pharmaceutical Chemistry Department, Faculty of Pharmacy, Mansoura University, Egypt*

Dr. Kátia Flávia Fernandes Biochemistry and Molecular Biology Universidade Federal de Goiás Brasil

Dr. Abdel-Hady El-Gilany *Public Health & Community Medicine Faculty of Medicine, Mansoura University Egypt* **Dr. Hongxiong Guo** STD and HIV/AIDS Control and Prevention, Jiangsu provincial CDC, China

Dr. Konstantina Tsaousi *Life and Health Sciences, School of Biomedical Sciences, University of Ulster*

Dr. Bhavnaben Gowan Gordhan

DST/NRF Centre of Excellence for Biomedical TB Research University of the Witwatersrand and National Health Laboratory Service P.O. Box 1038, Johannesburg 2000, South Africa

Dr. Ernest Kuchar

Pediatric Infectious Diseases, Wroclaw Medical University, Wroclaw Teaching Hospital, Poland

Dr. Hongxiong Guo

STD and HIV/AIDS Control and Prevention, Jiangsu provincial CDC, China

Dr. Mar Rodriguez Jovita

Food Hygiene and Safety, Faculty of Veterinary Science. University of Extremadura, Spain

Dr. Jes Gitz Holler

Hospital Pharmacy, Aalesund. Central Norway Pharmaceutical Trust Professor Brochs gt. 6. 7030 Trondheim, Norway

Prof. Chengxiang FANG *College of Life Sciences, Wuhan University Wuhan 430072, P.R.China*

Dr. Anchalee Tungtrongchitr

Siriraj Dust Mite Center for Services and Research Department of Parasitology, Faculty of Medicine Siriraj Hospital, Mahidol University 2 Prannok Road, Bangkok Noi, Bangkok, 10700, Thailand

Instructions for Author

Electronic submission of manuscripts is strongly encouraged, provided that the text, tables, and figures are included in a single Microsoft Word file (preferably in Arial font).

The **cover letter** should include the corresponding author's full address and telephone/fax numbers and should be in an e-mail message sent to the Editor, with the file, whose name should begin with the first author's surname, as an attachment.

Article Types

Three types of manuscripts may be submitted:

Regular articles: These should describe new and carefully confirmed findings, and experimental procedures should be given in sufficient detail for others to verify the work. The length of a full paper should be the minimum required to describe and interpret the work clearly.

Short Communications: A Short Communication is suitable for recording the results of complete small investigations or giving details of new models or hypotheses, innovative methods, techniques or apparatus. The style of main sections need not conform to that of full-length papers. Short communications are 2 to 4 printed pages (about 6 to 12 manuscript pages) in length.

Reviews: Submissions of reviews and perspectives covering topics of current interest are welcome and encouraged. Reviews should be concise and no longer than 4-6 printed pages (about 12 to 18 manuscript pages). Reviews are also peer-reviewed.

Review Process

All manuscripts are reviewed by an editor and members of the Editorial Board or qualified outside reviewers. Authors cannot nominate reviewers. Only reviewers randomly selected from our database with specialization in the subject area will be contacted to evaluate the manuscripts. The process will be blind review.

Decisions will be made as rapidly as possible, and the Journal strives to return reviewers' comments to authors as fast as possible. The editorial board will re-review manuscripts that are accepted pending revision. It is the goal of the AJMR to publish manuscripts within weeks after submission.

Regular articles

All portions of the manuscript must be typed doublespaced and all pages numbered starting from the title page.

The Title should be a brief phrase describing the contents of the paper. The Title Page should include the authors' full names and affiliations, the name of the corresponding author along with phone, fax and E-mail information. Present addresses of authors should appear as a footnote.

The Abstract should be informative and completely selfexplanatory, briefly present the topic, state the scope of the experiments, indicate significant data, and point out major findings and conclusions. The Abstract should be 100 to 200 words in length.. Complete sentences, active verbs, and the third person should be used, and the abstract should be written in the past tense. Standard nomenclature should be used and abbreviations should be avoided. No literature should be cited.

Following the abstract, about 3 to 10 key words that will provide indexing references should be listed.

A list of non-standard **Abbreviations** should be added. In general, non-standard abbreviations should be used only when the full term is very long and used often. Each abbreviation should be spelled out and introduced in parentheses the first time it is used in the text. Only recommended SI units should be used. Authors should use the solidus presentation (mg/ml). Standard abbreviations (such as ATP and DNA) need not be defined.

The Introduction should provide a clear statement of the problem, the relevant literature on the subject, and the proposed approach or solution. It should be understandable to colleagues from a broad range of scientific disciplines.

Materials and methods should be complete enough to allow experiments to be reproduced. However, only truly new procedures should be described in detail; previously published procedures should be cited, and important modifications of published procedures should be mentioned briefly. Capitalize trade names and include the manufacturer's name and address. Subheadings should be used. Methods in general use need not be described in detail. **Results** should be presented with clarity and precision. The results should be written in the past tense when describing findings in the authors' experiments. Previously published findings should be written in the present tense. Results should be explained, but largely without referring to the literature. Discussion, speculation and detailed interpretation of data should not be included in the Results but should be put into the Discussion section.

The Discussion should interpret the findings in view of the results obtained in this and in past studies on this topic. State the conclusions in a few sentences at the end of the paper. The Results and Discussion sections can include subheadings, and when appropriate, both sections can be combined.

The Acknowledgments of people, grants, funds, etc should be brief.

Tables should be kept to a minimum and be designed to be as simple as possible. Tables are to be typed doublespaced throughout, including headings and footnotes. Each table should be on a separate page, numbered consecutively in Arabic numerals and supplied with a heading and a legend. Tables should be self-explanatory without reference to the text. The details of the methods used in the experiments should preferably be described in the legend instead of in the text. The same data should not be presented in both table and graph form or repeated in the text.

Figure legends should be typed in numerical order on a separate sheet. Graphics should be prepared using applications capable of generating high resolution GIF, TIFF, JPEG or Powerpoint before pasting in the Microsoft Word manuscript file. Tables should be prepared in Microsoft Word. Use Arabic numerals to designate figures and upper case letters for their parts (Figure 1). Begin each legend with a title and include sufficient description so that the figure is understandable without reading the text of the manuscript. Information given in legends should not be repeated in the text.

References: In the text, a reference identified by means of an author's name should be followed by the date of the reference in parentheses. When there are more than two authors, only the first author's name should be mentioned, followed by 'et al'. In the event that an author cited has had two or more works published during the same year, the reference, both in the text and in the reference list, should be identified by a lower case letter like 'a' and 'b' after the date to distinguish the works.

Examples:

Abayomi (2000), Agindotan et al. (2003), (Kelebeni, 1983), (Usman and Smith, 1992), (Chege, 1998;

1987a,b; Tijani, 1993,1995), (Kumasi et al., 2001) References should be listed at the end of the paper in alphabetical order. Articles in preparation or articles submitted for publication, unpublished observations, personal communications, etc. should not be included in the reference list but should only be mentioned in the article text (e.g., A. Kingori, University of Nairobi, Kenya, personal communication). Journal names are abbreviated according to Chemical Abstracts. Authors are fully responsible for the accuracy of the references.

Examples:

Chikere CB, Omoni VT and Chikere BO (2008). Distribution of potential nosocomial pathogens in a hospital environment. Afr. J. Biotechnol. 7: 3535-3539.

Moran GJ, Amii RN, Abrahamian FM, Talan DA (2005). Methicillinresistant Staphylococcus aureus in community-acquired skin infections. Emerg. Infect. Dis. 11: 928-930.

Pitout JDD, Church DL, Gregson DB, Chow BL, McCracken M, Mulvey M, Laupland KB (2007). Molecular epidemiology of CTXM-producing Escherichia coli in the Calgary Health Region: emergence of CTX-M-15-producing isolates. Antimicrob. Agents Chemother. 51: 1281-1286.

Pelczar JR, Harley JP, Klein DA (1993). Microbiology: Concepts and Applications. McGraw-Hill Inc., New York, pp. 591-603.

Short Communications

Short Communications are limited to a maximum of two figures and one table. They should present a complete study that is more limited in scope than is found in full-length papers. The items of manuscript preparation listed above apply to Short Communications with the following differences: (1) Abstracts are limited to 100 words; (2) instead of a separate Materials and Methods section, experimental procedures may be incorporated into Figure Legends and Table footnotes; (3) Results and Discussion should be combined into a single section.

Proofs and Reprints: Electronic proofs will be sent (email attachment) to the corresponding author as a PDF file. Page proofs are considered to be the final version of the manuscript. With the exception of typographical or minor clerical errors, no changes will be made in the manuscript at the proof stage. **Fees and Charges**: Authors are required to pay a \$550 handling fee. Publication of an article in the African Journal of Microbiology Research is not contingent upon the author's ability to pay the charges. Neither is acceptance to pay the handling fee a guarantee that the paper will be accepted for publication. Authors may still request (in advance) that the editorial office waive some of the handling fee under special circumstances

Copyright: © 2014, Academic Journals.

All rights Reserved. In accessing this journal, you agree that you will access the contents for your own personal use but not for any commercial use. Any use and or copies of this Journal in whole or in part must include the customary bibliographic citation, including author attribution, date and article title.

Submission of a manuscript implies: that the work described has not been published before (except in the form of an abstract or as part of a published lecture, or thesis) that it is not under consideration for publication elsewhere; that if and when the manuscript is accepted for publication, the authors agree to automatic transfer of the copyright to the publisher.

Disclaimer of Warranties

In no event shall Academic Journals be liable for any special, incidental, indirect, or consequential damages of any kind arising out of or in connection with the use of the articles or other material derived from the AJMR, whether or not advised of the possibility of damage, and on any theory of liability.

This publication is provided "as is" without warranty of any kind, either expressed or implied, including, but not limited to, the implied warranties of merchantability, fitness for a particular purpose, or non-infringement. Descriptions of, or references to, products or publications does not imply endorsement of that product or publication. While every effort is made by Academic Journals to see that no inaccurate or misleading data, opinion or statements appear in this publication, they wish to make it clear that the data and opinions appearing in the articles and advertisements herein are the responsibility of the contributor or advertiser concerned. Academic Journals makes no warranty of any kind, either express or implied, regarding the quality, accuracy, availability, or validity of the data or information in this publication or of any other publication to which it may be linked.

African Journal of Microbiology Research

Table of Content: Volume 8 Number 48, 26 November, 2014

ARTICLES

Development and evaluation of loop-mediated isothermal amplification (LAMP) for the rapid diagnosis of *Candida parapsilosis* Yili Chen and Hongxu Xu

The prevalence of *Brucella abortus* **DNA in seropositive bovine sera in Bangladesh** Md. Siddiqur Rahman, Md Abu Sayed Sarker, A. K. M. Anisur Rahman, Roma Rani Sarker, Falk Melzer, Lisa D. Sprague and Heinrich Neubauer

Verification of molecular characterization of coagulase positive *Staphylococcus* from bovine mastitis with matrix-assisted laser desorption ionization, time-offlight mass spectrometry (MALDI-TOF MS) mass spectrometry

Cássia Couto da Motta, Anna Carolina Coelho Marín Rojas, Felipe Carlos Dubenczuk, Larissa Alvarenga Batista Botelho, Beatriz Meurer Moreira, Shana Mattos de Oliveira Coelho, Irene da Silva Coelho and Miliane Moreira Soares de Souza

Microbiological quality and safety of street vended raw meat in Jijiga town of Somali Regional State, southeast Ethiopia

Firew Tafesse, Gulelat Desse, Ketema Bacha and Haile Alemayehu

academicJournals

Vol. 8(48), pp. 3850-3855, 26 November, 2014 DOI: 10.5897/AJMR2014.7107 Article Number: 19D2EF949231 ISSN 1996-0808 Copyright © 2014 Author(s) retain the copyright of this article http://www.academicjournals.org/AJMR

African Journal of Microbiology Research

Full Length Research Paper

Development and evaluation of loop-mediated isothermal amplification (LAMP) for the rapid diagnosis of *Candida parapsilosis*

Yili Chen and Hongxu Xu*

Department of Laboratory Medicine, The First Affiliated Hospital of Sun Yat-sen University, 510080, Guangzhou, Guangdong, China.

Received 4 September, 2014; Accepted 14 November, 2014

The Candida parapsilosis family has emerged as a major opportunistic and nosocomial pathogen. It causes multifaceted pathology in immuno-compromised and normal hosts, notably low birth weight neonates. In the present study, a novel method, known as loop-mediated isothermal amplification (LAMP), was described for the rapid and specific detection of the species, using primer sets derived from the 5.8 S ribosomal RNA gene of *C. parapsilosis* (internal transcribed spacer 2, ITS2). Amplification products can be detected macroscopically by visual inspection in vials using SYBRGreen I as well as by electrophoresis on agarose gel. The LAMP assay resulted in specific amplification of the ITS2 of *C. parapsilosis* using pure cultures after a 45-min reaction at 65°C; no cross-reactivity with other fungi including other Candida species was observed. The detectable DNA limit was 0.01 pg fungal DNA per reaction, equivalent to 3.74×10^{-3} cfu/ml. In addition, specific amplification was achieved using 30 proven *C. parapsilosis* strains from patients samples. The method provides a powerful tool for rapid diagnostics in the clinical laboratory, and has potential for use in ecological studies.

Key words: Loop-mediated isothermal amplification, diagnosis, Candida parapsilosis.

INTRODUCTION

Over the past decade, the incidence of *Candida parapsilosis* has dramatically increased. In fact, reports indicate that *C. parapsilosis* is often the second most commonly isolated *Candida* species from blood cultures (Almirante et al., 2006; Brito et al., 2006), and *C. parapsilosis* even outranks *Candida albicans* in some European (Nakamura and Takahashi, 2006), Asian (Nakamura and Takahashi, 2006; Ng et al., 2001) and South American (Medrano et al., 2006) hospitals. This species has emerged as an

important nosocomial pathogen, with clinical manifestations including fungemia, endocarditis, endophthalmitis, septic arthritis and peritonitis, all of which usually occur in association with invasive procedures or prosthetic devices. Outbreaks of *C. parapsilosis* infections have been caused by contamination of hyperalimentation solutions, intravascular pressure monitoring devices, and ophthalmic irrigating solution. Experimental studies have generally shown that *C. parapsilosis* is less virulent than

*Corresponding author. E-mail: xhx333@163.com. Tel: +86 02062732226.

Author(s) agree that this article remain permanently open access under the terms of the <u>Creative Commons Attribution License</u> <u>4.0International License</u>

C. albicans or *Candida tropicalis*. However, characteristics of *C. parapsilosis* that may relate to its increasing occurrence in nosocomial settings include frequent colonization of the skin (Bonassoli et al., 2005), particularly the subungual space, and an ability to proliferate in glucose-containing solutions, with a resultant increase in adherence to synthetic materials (Alonso-Valle et al., 2003).

Traditionally, C. parapsilosis strains have been identified based on morphological, physiological and biochemical characteristics (Van Asbeck et al., 2009). These methods are laborious and time consuming. Currently, matrix-assisted laser desorption/ionisation timeof-flight (MALDI-TOF) MS is reported as a reliable, rapid and simple technique for the identification of the C. parapsilosis group (Quiles-Melero et al., 2012). However, MALDI-TOF MS requires expensive equipment, which impedes it as an attractive tool for the routine of a clinical microbiology laboratory. Molecular methods based on the analysis of polymorphism in the DNA region that encodes the ribosomal RNA genes (5S, 5.8S, 18S and 26S) (Kurtzman and Robnett, 1998; Nosek et al., 2002; Sofair et al., 2006) and the non-coding internal transcribed spacers (ITS)(Cadez et al., 2002; Sabate et al., 2002) and IGS (Intergenic Spacer) regions (Diaz et al., 2000; Naumov et al., 2003) are being successfully used for the identification of many yeast species. Recently, developed molecular techniques may facilitate the continued exploration of the epidemiology and pathogenesis of C. parapsilosis infections. However, all have been developed based on cultured material, and require a fully equipped molecular laboratory. Thus, there is still a need for a rapid and simple technique that is able to deliver an unambiguous identification within a single day.

Loop-mediated isothermal amplification (LAMP) is a novel nucleic acid amplification method, which relies on autocycling strand displacement DNA synthesis performed by the Bst DNA polymerase large fragment (Mori et al., 2001; Nagamine et al., 2002; Notomi et al., 2000). The amplification products are stem-loop DNA structures with several inverted repeats of the target and cauliflower-like structures with multiple loops. LAMP has the following characteristics: (i) all reactions can be conducted under isothermal conditions ranging from 60 to 65°C by using only one type of enzyme; (ii) the specificity of the reaction is extremely high because it uses four primers recognizing six distinct regions on the target DNA; (iii) amplification can be performed in a shorter time than amplification by PCR because there is no time loss due to thermal cycling; and (iv) it produces extremely large amounts of amplified products and enables simple detection methods such as visual judgment by the turbidity or fluorescence of the reaction mixture, which is kept in the reaction tube (Mori and Notomi, 2009). With all these characteristics, LAMP of target DNA has emerged as a powerful tool to facilitate point-of-care genetic testing at the bedside. Recently, Nagamine et al. (2002) reported

that when two more primers, termed loop primers, were added, the LAMP reaction time could be even less than half of that for the original LAMP method. In their procedure, six primers recognized eight distinct regions on the targeted DNA. In the present study, we introduced LAMP diagnostics for *C. parapsilosis*. The sensitivity, specificity and applicability of this method for *C. parapsilosis* from patient samples were evaluated. It is believed that the rapid detection and confirmation of *C. parapsilosis* in clinical specimens is essential for efficient management.

MATERIALS AND METHODS

Strains

Thirty proven strains of *C. parapsilosis* isolated from patients, 5 isolates of other reference strains including *C. albicans*, *C. tropicals*, *Candida glabrata*, *Candida krusei* and *Cryptococcus neoformans* and one *C. parapsilosis* type strain ATCC 22019 were used in this study. The 30 strains of *C. parapsilosis* and the 5 other reference strains were all collected in Department of Laboratory Medicine, The First Affiliated Hospital of Sun Yat-sen University during the period of January 2010 to December 2012. Cases from patients were confirmed by routine and molecular identification methods. All the isolates were cultured on Sabourand dextrose agar (SDA) at 37°C. Inoculated plates were examined after 48 h of incubation. Identification of *Candida* species were based on VITEK 2 system (bioMérieux, Marcy l'Etoile, France) and further identified by 18S rRNA gene sequencing as described by Zheng et al. (2013).

DNA extraction

Candida species were grown on SDA plates for 24 to 48 h at 30°C. Single colonies were inoculated into 200 ml of YPD broth (1% yeast extract, 2% peptone, 2% glucose) and incubated in a shaking water bath at 200 rpm and 30°C for 36 h. DNA was extracted from this culture by adaptation of the Lyticase-based method (10KU, Sigama, USA). DNA concentrations and A260/A280 ratios were determined using a spectrophotometer Lambda 1A (Perkin-Elmer, USA). An A260/A280 ratio of 1.8-2.1 was considered acceptable.

Design of LAMP primers

The target gene of the LAMP was the 5.8 S ribosomal RNA gene of *C. parapsilosis* (internal transcribed spacer 2, ITS2). The binding sites of all primer sets are located within the target gene and were designed by using PrimerExplorer software V4 (Eiken Chemical Co. Ltd.) in the database under the Accession No. KF313207. A set of sixLAMP primers was selected as follows: outer primers (F3 and B3), a forward inner primer (FIP), a backward inner primer (BIP) and loop primers (loop F and loop B) (Table 1).

LAMP reaction

The LAMP reaction was performed with a Loop amp DNA amplification kit (Eiken Chemical Co., Ltd., Tochigi, Japan). A reaction mixture (25 μ I) containing 1.2 μ M each inner primer (FIP and BIP), 0.2 μ M each outer primer (F3 and B3), 0.8 μ M each loop primer (F and B), 0.8 mM dNTPs, 1M betaine (Sigma), 1xThermoPol Buffer, 4 mM MgSO₄, 8 U of Bst DNA large fragment polymerase (New England Biolabs), with 2 μ I of crude DNA extract

Table 1. Sequences	of primers used	in the LAMP assay.
--------------------	-----------------	--------------------

Primer name	Sequence(5'→ 3')
Forward outer (F3)	AACGAGAGTATCACTCACTAC
Backward outer (B3)	TCAACAATGGATCTCTTGGT
Forward inner primer (FIP)	ATTGCGCCCTCTGGTATTCCCAAACACAACGTGTTTGAGA
Backward inner primer (BIP)	GTGCGTTCAAAGATTCGATGATTCTCTCGCATCGATGAAGAAC
LF	CCTGTTTGAGCGTCATTTCCT
LB	ACGGAATTCTGCAATTCACATTACG

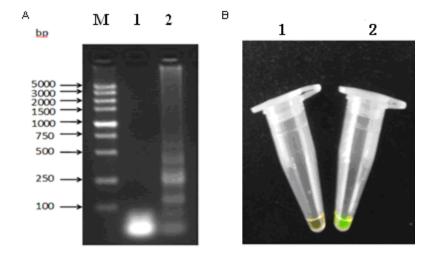


Figure 1. Identification specificities of the LAMP assay for *C. parapsilosis*. (A) Electrophoretic analysis of LAMP amplified products. Lane M, 100-bp ladder used as a size marker; Lane 1, negative control; Lane 2, *C. parapsilosis* ATCC22019. (B) Visual inspection of LAMP amplified products. Tube 1, negative control; Tube 2, *C. parapsilosis* ATCC22019.

as the template and the specified amounts of DNA lysates was incubated at 65°C for 45 min and was heated at more than 80°C for 2 min to terminate the reaction. Positive and negative controls were included in each run, and all precautions to prevent cross contamination were observed.

PCR reaction

To compare the detection sensitivities of LAMP and PCR, PCR using F3 and B3 primers which amplify a 446-bp product was carried out in a total reaction volume of 25 μ l containing 1 μ l of the fungal DNA, 2 μ l of a pair of appropriate primers (0.1 mM), 2 μ l dNTPs mixture (0.8 mM), 2.5 U ExTaqTM DNA polymerase ((TaKaRa, Shiga, Japan) with the corresponding polymerase buffer were mixed. PCR conditions consisted of an initial denaturation of 94°C for 4 min and 30 cycles of 94°C for 60 s, 58°C for 60 s, 72°C for 90 s and a final extension of 72°Cfor 4 min in a DNA thermal cycler 9700 (Applied Biosystems, Foster City, CA). The amplified products (4 μ l) were then analyzed by 1% agarose gel.

Analysis of LAMP products

Amplified products were analyzed by electrophoresis on 1% agarose gels, stained with ethidium bromide and photographed. A

100-bp DNA ladder was used as the molecular weight standard. LAMP amplicons in the reaction tube were directly detected with the naked eye by adding 1.0 μ I of 1/10-diluted original SYBR Green I (Molecular Probes Inc.) to the tube and observing the color of the solution. The solution turned green in the presence of a LAMP amplicon, while it remained orange with no amplification. The sensitivities of electrophoresis and SYBR Green I inspection with the naked eye were compared by using seriallydiluted LAMP products.

RESULTS

Specificity of LAMP assay

The specificity of LAMP was tested using fungal DNA extracted from *C. parapsilosis* ATCC22019, 5 proven isolates of *C. parapsilosis* and 5 isolates of non-*C. parapsilosis*, including *C. albicans*, *C. tropicals*, *C. glabrata*, *C. krusei* and *Cryptococcus neoformans*. After incubation at 65°C for 45 min, all the *C. parapsilosis* isolates were positively detected, whereas no cross-reactivity with other fungi including other *Candida* species such as *C. albicans* was observed (Figure 1). The products

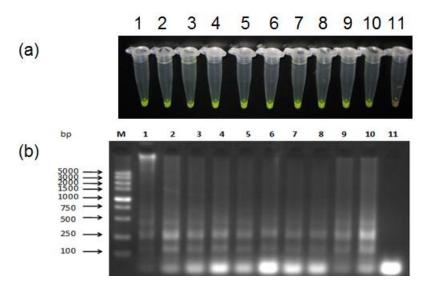


Figure 2. Sensitivities of visual inspection (a) and electrophoretic analysis (b) of LAMP amplified products. The number above each tube or lanes 1-11 represents the dilution of the LAMP product: 1, no dilution; 2-11: 10^{-1} , 10^{-2} , 10^{-3} , 10^{-4} , 10^{-5} , 10^{-6} , 10^{-7} , 10^{-8} , 10^{-9} , 10^{-10} dilutions of DNA templates from *C. parapsilosis*.

of the LAMP reaction could be detected by electrophoresis on 1% agarose gels and showed ladder-like patterns (1). The products could also be made visible to the naked eye directly in Eppendorf vials or under UV transillumination after adding SYBR Green I dye. Positive reactions showed bright green fluorescence, whereas negative reactions remained light orange. These results indicate that the LAMP method is highly specific for *C. parapsilosis* in the study.

Sensitivity of the LAMP assay

To assess the detection sensitivity of the LAMP assay for the detection of *C. parapsilosis*, the reaction was tested using 1-µl tenfold serial dilutions of fungal DNA (1 µg/ml) and compared with the PCR assay. The LAMP reaction was able to detect *C. parapsilosis* up to 0.01 pg fungal DNA per reaction, equivalent to 3.74×10^{-3} cfu/ml. However, PCR could only detect *C. parapsilosis* up to 0.1 pg fungal DNA per reaction. LAMP amplification products were analyzed visually by addition 1 µl SYBR Green I and by 2% agarose gel electrophoresis (Figure 2). The results indicate a tenfold higher sensitivity of LAMP than the standard PCR method.

Identification of *Candida* strains isolated from clinical samples

Clinical samples were first discriminated by VITEK 2 system and further identified by 18SrRNA gene

sequencing, and then assessed by LAMP established in this study. The results showed that all the 30 proven *C. parapsilosis* strains were detected, suggesting that the established LAMP assay for *C. parapsilosis* represented a great consistency with conventional PCR and VITEK 2 system (Figure 3).

DISCUSSION

LAMP is a powerful innovative gene amplification technique providing a simple and rapid tool for early detection and identification of microbial diseases. In the present study, we developed and evaluated the LAMP assay, exemplified by the detection and identification of C. parapsilosis in DNA from pure cultures. The LAMP assay is a simple detection tool in which the reaction is performed in a single tube by mixing the thermopol buffer, primers, and Bst DNA polymerase, and incubation of the mixture at 65°C for 45 min. The LAMP reaction is done under isothermal conditions and it does not require expensive equipment. The only equipment needed for the LAMP reaction is a regular laboratory water bath or a heating block that can provide a constant temperature Moreover, the amplification efficiency is of65°C. extremely high because there is no time loss because of thermal cycling and inhibition reactions at later stages are less likely to occur unlike in standard PCR. In addition, LAMP amplifies DNA to higher concentrations than PCR making it convenient for visualizing the products after addition of SYBR Green I without gel electrophoresis. Hence, the LAMP assay could be developed into a field

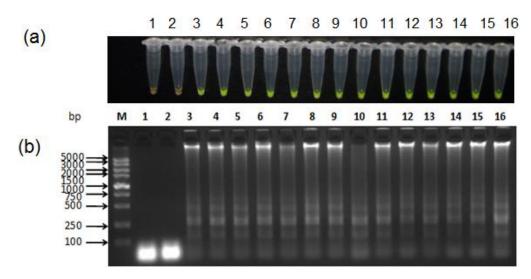


Figure 3. Identification of *Candida* strains isolated from clinical samples. (a) Electrophoretic analysis of LAMP amplified products. (b) Visual inspection of LAMP amplified products. The number above each Lane 1 represents *Candida albicans* strain; Lane 2 represents *Candida tropical* strain; Tube or Lane 3-16 represent DNA templates from proven *C. parapsilosis* strains.

test and made available to empower active efforts to identify *C. parapsilosis*.

During the past decade, various nucleic acid amplification based methods have been developed to address the need for rapid and sensitive diagnosis of *C. parapsilosis* (Burton et al., 2011). These methods require either precision instruments for the amplification or elaborate methods for detection of the amplified products, which are the major obstacles to wide use of these methods in relatively small scale clinical laboratories (Carolis et al., 2014; Del et al., 2011; Hays et al., 2011). In this regard, the LAMP-based assay developed in this study has the advantages of rapid reaction, simple operation and easy detection.

In this study, the LAMP method detecting *C. parapsilosis* was found to be highly sensitive, as it could detect *C. parapsilosis* up to 0.01 pg fungal DNA per reaction, equivalent to 3.74×10^{-3} cfu/ml, whereas by PCR, the detection of *C. parapsilosis* was possible up to 0.1 pg fungal DNA per reaction. This indicates that the sensitivity of LAMP is ten times more than that of the standard PCR. This increased sensitivity makes LAMP a better choice than PCR for the detection of *C. parapsilosis* in cases where lower fungal concentrations are expected.

Identification of the species of *C. parapsilosis* isolates is another critical requirement for clinical laboratories. In the present study, the results showed that all the 30 proven *C. parapsilosis* isolates from clinical samples were detected by the LAMP assay, suggesting that the established LAMP assay for *C. parapsilosis* represented a great consistency with conventional PCR and VITEK 2 system. The conventional biochemical tests for identification of *C. parapsilosis* are relatively time-consuming. The LAMP-based assay can identify *C. parapsilosis* in 80 min: 30 min for DNA extraction, 45 min for the LAMP reaction and 1 min for detection.

In conclusion, the LAMP method described in this study represents a new sensitive, specific and rapid protocol for the detection of *C. parapsilosis*. Due to its easy operation without sophisticated equipment, it will be simple enough to use in small-scale hospitals, primary care facilities and clinical laboratories in developing countries if the remaining issues such as nucleic acid extraction and cross-contamination controls are addressed. Our next direction in developing this promising method for wider clinical use would be to detect *C. parapsilosis* in clinical specimens such as blood, urine and sputum.

Conflict of Interest

The author(s) have not declared any conflict of interests.

REFERENCES

- Almirante B, Rodriguez D, Cuenca-Estrella M, Almela M, Sanchez F, Ayats J, Alonso-Tarres C, Rodriguez-Tudela JL, Pahissa A (2006). Epidemiology, risk factors, and prognosis of Candida parapsilosis bloodstream infections: case-control population-based surveillance study of patients in Barcelona, Spain, from 2002 to 2003. J. Clin. Microbiol. 44(5):1681-1685.
- Alonso-Valle H, Acha O, Garcia-Palomo JD, Farinas-Alvarez C, Fernandez-Mazarrasa C, Farinas MC (2003). Candidemia in a tertiary care hospital: epidemiology and factors influencing mortality. Eur. J. Clin. Microbiol. Infect. Dis. 22(4):254-257.
- Bonassoli LA, Bertoli M, Svidzinski TI (2005). High frequency of Candida parapsilosis on the hands of healthy hosts. J. Hosp. Infect. 59(2):159-162.
- Brito LR, Guimaraes T, Nucci M, Rosas RC, Paula AL, Da MD, Colombo AL (2006). Clinical and microbiological aspects of candidemia due

to Candida parapsilosis in Brazilian tertiary care hospitals. Med. Mycol. 44(3):261-266.

- Burton MJ, Shah P, Swiatlo E (2011). Misidentification of Candida parapsilosis as C famata in a clinical case of vertebral osteomyelitis. Am. J. Med. Sci. 341(1):71-73.
- Cadez N, Raspor P, de Cock AW, Boekhout T, Smith MT (2002). Molecular identification and genetic diversity within species of the genera Hanseniaspora and Kloeckera. FEMS Yeast Res. 1(4):279-289.
- Carolis ED, Hensgens LA, Vella A, Posteraro B, Sanguinetti M, Senesi S, Tavanti A (2014). Identification and typing of the Candida parapsilosis complex: MALDI-TOF MS vs. AFLP. Med Mycol. 52(2): 123-130.
- Del PVM, Garcia MJ, Canton E, Peman J, Gomez GM, Gomez EV, Del CAL (2011). Differentiation of Candida parapsilosis, C. orthopsilosis, and C. metapsilosis by specific PCR amplification of the RPS0 intron. Int. J. Med. Microbiol. 301(6):531-535.
- Diaz MR, Boekhout T, Theelen B, Fell JW (2000). Molecular sequence analyses of the intergenic spacer (IGS) associated with rDNA of the two varieties of the pathogenic yeast, Cryptococcus neoformans. Syst. Appl. Microbiol. 23(4):535-545.
- Hays C, Duhamel C, Cattoir V, Bonhomme J (2011). Rapid and accurate identification of species belonging to the Candida parapsilosis complex by real-time PCR and melting curve analysis. J. Med. Microbiol. 60(4):477-480.
- Kurtzman CP, Robnett CJ (1998). Three new insect-associated species of the yeast genus Candida. Can. J. Microbiol. 44(10):965-973
- Medrano DJ, Brilhante RS, Cordeiro RA, Rocha MF, Rabenhorst SH, Sidrim JJ (2006). Candidemia in a Brazilian hospital: the importance of Candida parapsilosis. Rev. Inst. Med. Trop. Sao Paulo 48(1):17-20.
- Mori Y, Nagamine K, Tomita N, Notomi T (2001). Detection of loopmediated isothermal amplification reaction by turbidity derived from magnesium pyrophosphate formation. Biochem. Biophys. Res. Commun. 289(1):150-154.
- Mori Y, Notomi T (2009). Loop-mediated isothermal amplification (LAMP): a rapid, accurate, and cost-effective diagnostic method for infectious diseases. J. Infect. Chemother. 15(2):62-69.
- Nagamine K, Kuzuhara Y, Notomi T (2002). Isolation of single-stranded DNA from loop-mediated isothermal amplification products. Biochem. Biophys. Res. Commun. 290(4):1195-1198.

- Nakamura T, Takahashi H (2006). Epidemiological study of Candida infections in blood: susceptibilities of Candida spp. to antifungal agents, and clinical features associated with the candidemia. J. Infect. Chemother. 12(3):132-138.
- Naumov GI, Gazdiev DO, Naumova ES (2003). [Identification of the yeast species Saccharomyces bayanus in Far East Asia]. Mikrobiologiia 72(6):834-839.
- Ng KP, Saw TL, Na SL, Soo-Hoo TS (2001). Systemic Candida infection in University hospital 1997-1999: the distribution of Candida biotypes and antifungal susceptibility patterns. Mycopathologia 149(3):141-146.
- Nosek J, Tomaska L, Rycovska A, Fukuhara H (2002). Mitochondrial telomeres as molecular markers for identification of the opportunistic yeast pathogen Candida parapsilosis. J. Clin. Microbiol. 40(4):1283-1289.
- Notomi T, Okayama H, Masubuchi H, Yonekawa T, Watanabe K, Amino N, Hase T (2000). Loop-mediated isothermal amplification of DNA. Nucleic Acids Res. 28(12):E63.
- Quiles-Melero I, Garcia-Rodriguez J, Gomez-Lopez A, Mingorance J (2012). Evaluation of matrix-assisted laser desorption/ionisation timeof-flight (MALDI-TOF) mass spectrometry for identification of Candida parapsilosis, C. orthopsilosis and C. metapsilosis. Eur. J. Clin. Microbiol. Infect. Dis. 31(1):67-71.
- Sabate J, Cano J, Esteve-Zarzoso B, Guillamon JM (2002). Isolation and identification of yeasts associated with vineyard and winery by RFLP analysis of ribosomal genes and mitochondrial DNA. Microbiol. Res. 157(4):267-274.
- Sofair AN, Lyon GM, Huie-White S, Reiss E, Harrison LH, Sanza LT, Arthington-Skaggs BA, Fridkin SK (2006). Epidemiology of community-onset candidemia in Connecticut and Maryland. Clin. Infect. Dis. 43(1):32-39.
- Van Asbeck EC, Clemons KV, Stevens DA (2009). Candida parapsilosis: a review of its epidemiology, pathogenesis, clinical aspects, typing and antimicrobial susceptibility. Crit. Rev. Microbiol. 35(4):283-309.
- Zheng NN, Guo XC, Lv W, Chen XX, Feng GF (2013). Characterization of the vaginal fungal flora in pregnant diabetic women by 18S rRNA sequencing. Eur. J. Clin. Microbiol. Infect. Dis. 32(8):1031-1040.

academicJournals

Vol. 8(48), pp. 3856-3860, 26 November, 2014 DOI: 10.5897/AJMR2014.6031 Article Number: 7CE069B49233 ISSN 1996-0808 Copyright © 2014 Author(s) retain the copyright of this article http://www.academicjournals.org/AJMR

African Journal of Microbiology Research

Full Length Research Paper

The prevalence of *Brucella abortus* DNA in seropositive bovine sera in Bangladesh

Md. Siddiqur Rahman^{1,3}*, Md Abu Sayed Sarker¹, A. K. M. Anisur Rahman¹, Roma Rani Sarker¹, Falk Melzer², Lisa D. Sprague² and Heinrich Neubauer^{2,3}

¹Department of Medicine, Faculty of Veterinary Science, Bangladesh Agricultural University, Mymensingh 2202, Bangladesh.

²Institute of Bacterial Infections and Zoonoses, Federal Research Institute for Animal Health, Friedrich-Loeffler-Institut, Naumburger Str. 96a, 07743 Jena, Germany.

³OIE Reference Laboratory for Brucellosis, Federal Research Institute for Animal Health, Friedrich-Loeffler-Institut, Naumburger Str. 96a, 07743 Jena, Germany.

Received 12 June, 2013; Accepted 19 November, 2014

Prevalence of brucellosis has been widely investigated on the basis of serological test in livestock but the information on the prevalence of *Brucella* species is scarce in Bangladesh. The objective of this work was to determine the prevalence of *Brucella* species in cattle and buffaloes in Bangladesh. For these purpose, a total of 799 serum samples of cattle and buffaloes were collected from different districts of Bangladesh. Out of 799 serum samples, 45 serum samples reacted positively to the Rose Bengal test (RBT); among the RBT positive serum, 14 sera were found to contain *Brucella* DNA by genus specific IS711 screening using quantitative real time PCR (qRT-PCR); and all the 14 qRT-PCR positive samples were found to contain specifically *Brucella abortus* DNA. This report confirms that *B. abortus* is endemic in cattle and buffaloes in Bangladesh. A combination of SAT-iLEISA and PCR could be effective for future eradication programmes.

Key words: Brucellosis, cattle, buffalo, Bangladesh, serology, polymerase chain reaction (PCR).

INTRODUCTION

Brucellosis is considered to be the most widespread zoonosis throughout the world and is caused by different species of the genus *Brucella* (OIE, 2008). In animals, brucellosis mainly affects reproduction and fertility, with abortion, birth of weak offspring and reduced milk yield (Sewel and Blocklesby, 1990). In man, the clinical picture resembles many other febrile diseases, but sacroiliitis and hepato-splenomegaly are the most prominent symp-

toms. Severe complications are endocarditis and neurological disorders (Colmenero et al., 1996). Numerous serological tests, that is, Rose Bengal Test (RBT), serum agglutination test (SAT), complement fixation test (CFT) and ELISA are used for detecting *Brucella* antibodies in cattle and small ruminants at herd level. Presently, quantitative real time (qRT) PCR methods are used to corroborate serological diagnostics. *Brucella* DNA can

*Corresponding author. E-mail: prithul02@yahoo.co.uk. Tel: 88 01918181550. Fax: 88 091 61510.

Author(s) agree that this article remain permanently open access under the terms of the <u>Creative Commons Attribution License</u> <u>4.0International License</u>

Species	Forward primer ^a	Reverse primer ^a
<i>Brucella</i> spp.	GCTCGGTTGCCAATATCAATGC	GGGTAAAGCGTCGCCAGAAG
<i>Brucella</i> spp. TagManprobe ^{ab}	6FAMAAATCTTCCACCTTGCCCTTGCCATCABHQ1	
B. abortus	GCGGCTTTTCTATCACGGTATTC	CATGCGCTATGATCTGGTTACG
<i>B. abortus</i> Tag Manprobe ^{ab}	HEXCGCTCATGCTCGCCAGACTTCAATGBHQ1	
B. melitensis	AACAAGCGGCACCCCTAAAA	CATGCGCTATGATCTGGTTACG
<i>B. melitensis</i> TagMan probe ^{ab}	Texas RedCAGGAGTGTTTCGGCTCAGAATAATCCACABHQ2	<u> </u>

Table 1. Oligonucleotide primers and probes in the real-time multiplex PCR assay for the detection of Brucella spp., B. abortus, B. melitensis.

^aOligonucleotide sequence provided in 5'to 3'orientation. 5'Fluorophonre/3'quencher^b: 6-FAM: 6-carboxyfluorescein; HEX: 6-hexachlorofluorescein; BHQ1: Black Hole Quencher 1; BHQ2: Black Hole Quencher 2.

readily be detected in serum of infected animals when blood culture fails, and species differentiation is done using serum and the IS711 species specific qRT-PCR is possible (Gwida et al., 2011).

In the agro-based economy of Bangladesh, livestock contribute 2.73% of the total gross domestic product (GDP) and 75% of rural people are directly or indirectly involved in livestock rearing including 23.4 million cattle and 1.86 million buffaloes. Brucellosis was first identified serologically in cattle in 1967 (Mia and Aslam, 1967), and in buffalo in 1997 (Rahman et al., 1997). Besides, the serological prevalence of brucellosis has been reported in man and animals in Bangladesh (Nahar and Ahmed, 2009; Muhammad et al., 2010; Rahman et al., 2006; 2011; 2012). Pharo et al. (1981) for the first time in Bangladesh described the isolation of Brucella abortus from two cows both of which were MRT and RBT positive. In the same year, Rahman and Rahman (1981) claimed to isolate Brucella spp. from MRT positive milk in sub-clinical mastitic udder. Unfortunately, the detail procedure to validate the isolates as Brucella spp. is missing in these papers. Moreover, these isolates were not preserved in any laboratory in Bangladesh for further analysis. The culture of Brucella spp. requires BSL 3 facilities, highly skilled personnel and it has also high health risk to laboratory workers. However, real time PCR techniques are available to identify Brucella at species level which is more sensitive, specific, faster, safe and relatively cheaper than culture technique (Alton et al., 1988; Al Dahouk et al., 2007). Therefore, the aim of this study was to determine the species of Brucella in Bangladesh using sophisticated and sensitive technique, quantitative real time PCR.

MATERIALS AND METHODS

Blood samples from 99 adult buffaloes and 700 cattle were randomly collected between May and October 2011 for a preliminary study. RBT, SAT, CFT (all Pourquier, IDEXX, Montpellier, France) and the IDEXX Brucellosis Serum X2 Ab Test (IDEXX, Liebefeld-Bern, Switzerland) were performed according to the procedures described by the manufacturers. The RBT positive sera were re-tested with SAT, CFT, ELISA and qRT-PCR. For the qRT-PCR, DNA was isolated from 200 µL of seropositive serum using the High Pure PCR Template Preparation Kit (Roche Diagnostics, Mannheim, Germany) according to the manufacturer's instructions. *Brucella* IS711 targeting genus specific qRT-PCR was done according to the established and routine protocol (Tomaso et al., 2010) on a light cycler 2.0 instrument (Roche, Mannheim, Germany). Cycle threshold values (CT) \leq 40 were interpreted as positive. Positive samples were then typed with the *Brucella* IS711species specific qRT-PCRs for *B. abortus* and *Brucella melitensis* according to Probert et al. (2004). CT values were calculated by the instrument's software MxPro3000P v 4.01. CT values \leq 42 were interpreted as positive. The details primers list could be found in Table 1.

Statistical analysis

Descriptive statistics, 95% confidence interval of prevalence and Fisher Exact test to determine the level of significance between *B. abortus* detection level among RBT positive cattle and buffalo serum were performed in R 3.1.0 (The R foundation for Statistical Computing).

RESULTS

Out of total 700 cattle and 99 buffalo sera, 38 cattle and seven buffalo sera showed positive reaction to RBT with the overall prevalence of brucellosis 5.42% (95% Confidence Interval (CI): 3.87-7.38) in cattle and 7.07% (95% CI: 2.89-14.03) in buffalo (Table 2). Out of 38 RBT positive sera of cattle, 23.68% were *B. abortus* positive whereas out of 7 RBT positive buffalo sera, 71.43% were *B. abortus* positives. The difference in detection level of *B. abortus* from cattle and buffalo sera was statistically significant (p=0.02). The odds of getting *B. abortus* DNA from RBT positive buffalo sera was 7.61 times higher than the same from cattle sera (Table 2). Figure 1 shows the amplification plots of *B. abortus* specific real time PCR based on seropositive cattle and buffalo sera.

Out of 45 sera tested, six samples were three tests positive and can be considered as acute and active infection. Among 799 sera samples, 36 were positive only to RBT but negative to the other two tests (Table 3).

The relationship between serological tests and PCR is shown in Table 4. Out of nine *B. abortus* specific rt PCR positive cattle samples, 7 were positive only to RBT but negative to other two tests. On the other hand, out of five buffalo *B. abortus* specific rt PCR positive buffalo

Table 2. Prevalence of brucellosis and *B. abortus* infection in cattle and buffalo based on RBT and rt PCR.

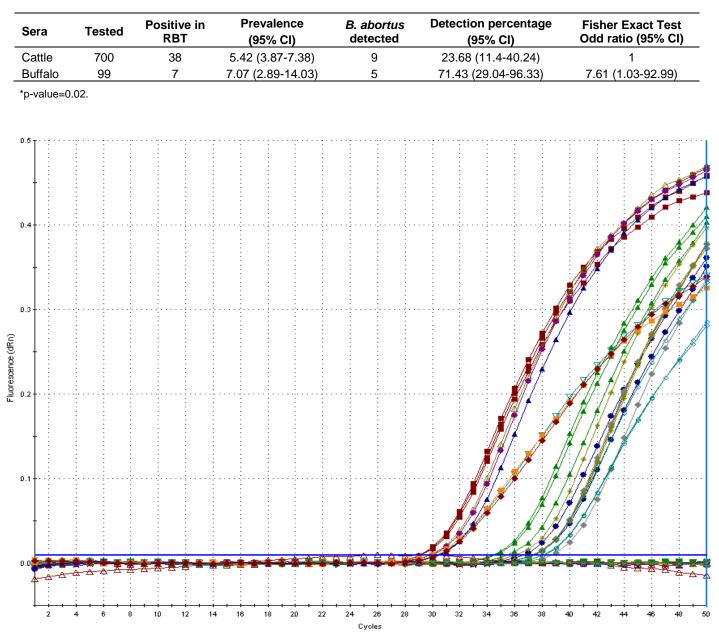


Figure 1. Amplification plots of *B. abortus* specific real time PCR with the DNA extracted from sera of cattle and buffalo in Bangladesh.

samples, only one was positive to RBT but negative to the other two tests. The genus specific screening by PCR detected *Brucella* DNA in 14 sera, the species specific IS711 PCR also detected *B. abortus* DNA from all the14 sera samples tested.

DISCUSSION

We found seroprevalences of 5.42 and 7.07% in cattle and buffalo by RBT, respectively (Table 2). The seropre-

valence of brucellosis in cattle in Bangladesh is reported to lie between 2.4 - 18.4% at animal level and at 62.5% at herd level. Serological prevalence in buffaloes was reported to be 2.87% (Rahmanet al., 1997; Amin et al., 2005).

About 13.3% (6/45) RBT positive bovines were found to be acutely infected with brucellosis. These animals were positive to both IgG (iELISA) and IgM (SAT) detecting tests. The IgM and IgG are produced respectively in early and later stage of the disease. So, if a sample is positive in SAT and ELISA, it is considered as an active and acute infection. Whereas, if a sample is positive only to

RBT	SAT	iELISA	Number	Remarks
1+	+	+	0	
1+	+	-	3	Probably false positive (if RBT detected IgG)/Acute infection (if RBT detected IgM)
1+	-	-	33	Probably false positive
2+	+	+	4	Acute infection*
2+	+	-	0	
2+	-	-	3	Probably false positive
3+	+	+	2	Acute infection*
3+	+	-	0	
3+	-	-	0	
Sub-total			45	Tested by genus and species specific rt PCR
Suspicious	ND	Negative	93	Probably false positive
Suspicious	ND	ND	15	Probably false positive
Negative	ND	Negative	50	
Negative	ND	ND	596	
Total			799	

Table 3. Summary of three serological test results.

ND: Not done, only two sera were tested by CFT and found positive. They were positive in at least 2+ in RBT and also in iLEISa and SAT.

Table 4. Relationship of serological tests and PCR.

Sample	Area	RBT	SAT	iELISA	BCSP genus specific rt PCR	IS711 genus specific rt PCR	B. abortus spe- cific IS711 rtpcr	Number
Cattle serum	Kurigram	1+	Negative	Negative	Positive	Not done	Positive	7
Cattle serum	Kurigram	2+	Positive	Positive	Positive	Positive	Positive	1
Cattle serum	Kurigram	3+	Positive	Positive	Negative	Positive	Positive	1
Buffalo serum	Mymensingh	1+	Negative	Negative	Positive	Not done	Positive	1
Buffalo serum	Mymensingh	2+	Positive	Positive	Positive	Positive	Positive	1
Buffalo serum	Bagerhat	2+	Positive	Positive	Positive	Positive	Positive	2
Buffalo serum	Bagerhat	3+	Positive	Positive	Positive	Positive	Positive	1
Total								14

IgG ELISA, it is considered as chronic infection. A sample positive to only agglutination test like SAT cannot be considered as brucellosis unless confirmed by an IgG detecting test like IgG ELISA within one week (Godfroid et al., 2010; Seleem et al., 2010). However, it requires repeated sampling from the same animal which was not possible and also not the purpose of this study. From all cattle and buffalo sera investigated, only two cattle sera from Kurigram could be analysed by CFT due to the low quality of the sera. These two sera were also positive in the ELISA.

Out of 9 cattle sera from where *B. abortus* DNA were detected 7 had negative test results both in SAT and iELSA. The biological explanation of this phenomenon is not clear. However, these animals were positive to RBT (1+). The infection in these animals may be in the very early stage which was detected by the qualitative test (RBT) but not by the quantitative tests like SAT and iLEISA for the presence of antibody below cut-off level.

Similarly, for buffalo sera only one sample was positive to RBT but negative to SAT and iELISA. In humans, presence of *Brucella* DNA after a long time after clinical cure was also reported by Navarro et al. (2006). This indicates that the presence of only *Brucella* DNA does not indicate acute infection. Similar phenomenon may also occur in animals as we have notice in this study. Contrarily, serological cross reactivity with other abortion causing agents could explain the high number of RBT 'positives'which is regularly reported for females older than four years (Chantal and Thomas, 1976). However, the low number of animals investigated in this study does not allow statistical proof of these assumptions.

The major shortcoming of PCR based techniques is that the biovar cannot be determined. Cultivation from sera often fails and was thus not attempted in our preliminary study but has to be part of future investigations. It can be concluded that a combination of real-time PCR with SAT and iELISA should be applied to detect brucellosis in cattle and buffalo from Bangladesh in a future eradication program. This paper for the first time detected the presence of *B. abortus* using real time PCR technique in the cattle and buffalo populations in Bangladesh.

Conflict of Interest

The author(s) have not declared any conflict of interests.

ACKNOWLEDGEMENTS

Dr. M. S. Rahman was supported in part by funding obtained from the DAAD (Deutscher Akademischer Austausch Dienst-German Academic Exchange Service) Programme "Research Stays and Study Visits for University Academics", OIE Reference Laboratory for Brucellosis, Institute of Bacterial Infections and Zoonoses, Federal Research Institute for Animal Health, Friedrich-Loeffler-Institut, Naumburger Str. 96a, 07743 Jena, Germany, November-December, 2011.

REFERENCES

- Al Dahouk S, Flèche PL, Nöckler K, Jacques I, Grayon M, Scholz HC, Tomaso H, Vergnaud G, Neubauer H (2007). Evaluation of *Brucella* MLVA typing forhuman brucellosis. J. Microbiol. Methods 69:137-145.
- Alton GG, Jones LM, Angus RD, Verger JM (1988). Techniques for the brucellosislaboratory. Institut National de la recherché Agronomique (INRA).
- Amin KMR, Rahman MB, Rahman MS, Han JC, Park JH, Chae JS (2005). Prevalence of *Brucella* antibodies in sera of cows in Bangladesh. J. Vet. Sci. 6:223-226.
- Chantal J, Thomas JF (1976). Serological study of bovine brucellosis in Dakar abattoir. Rev. Elev. Med. Vet. Pays Trop. 29:101-108.
- Colmenero JD, Reguera JM, Martos F, Sánchez-De-Mora D, Delgado M, Causse M, Martín-Farfán A, Juárez C (1996). Complications associated with *Brucellamelitensis* infection: a study of 530 cases. Medicine (Baltimore) 75:195-211.
- Godfroid J, Nielsen K, Saegerman C (2010). Diagnosis of brucellosis in livestock and wildlife. Croatian Med. J. 51:296-305.

- Gwida MM, El-Gohary AH, Melzer F, Tomaso H, Roesler U, Wernery U, Wernery R, Elschner MC, Khan I, Eickhoff M, Schoner D, Neubauer H (2011). Comparison of diagnostic tests for the detection of *Brucella* spp. in camel sera. BMC Res. 4:525.
- Mia AS, Islam H (1967). A preliminary study on the incidence of bovine infertility and economic loss caused by it. Pak. Vet. J. 1:12-15.
- Muhammad N, Hossain MA, Musa AK, Mahmud MC, Paul SK, Rahman MA, Haque N, Islam MT, Parvin US, Khan SI, Nasreen SA, Mahmud NU (2010). Seroprevalence of human brucellosis among the population at risk in rural area. Mymensingh Med. J. 19:1-4.
- Nahar A, Ahmed MU (2009). Seroprevalence study of brucellosis in cattle and contact human in Mymensingh district. Bangl. J. Vet. Med. 7:269-274.
- Navarro E, Segura JC, Castaño MJ, Solera J (2006). Use of real-time quantitative polymerase chain reaction to monitor the evolution of *Brucellamelitensis* DNA load during therapy and post-therapy follow-up in patients with brucellosis. Clin. Infect. Dis. 42(9):1266-1273.
- OIE (2008). Bovine brucellosis. Manual of diagnostic tests and vaccines for terrestrial animals. OIE (Paris).
- Pharo H, Motalib A, ALam S, Fraser G, Routledge S (1981). Preliminary information on the prevalenceof bovine brucellosis in the Pabna milk-shed area of Bangladesh. Banglad. Vet. J. 15:43-51.
- Probert SW, Schrader NK, Khuong YN, Bystrom LS, Graves HM (2004). Real-time multiplex PCR assay for detection of *Brucellaspp., B. abortus*, and *B. melitensis*. J. Clin. Microbiol. 42:1290-1293.
- Rahman MA, Islam MS, Alam MGS, Shamsuddin M (1997). Seroprevalence of brucellosis in the buffalo of a selected area in Bangladesh. Buffalo J. 2:209-214.
- Rahman MM, Rahman MA. (1981). Incidence of *Brucella* infection in sub-clinical mastiticudder. Banglad. Vet. J. 15:39-42.
- Rahman MS, Uddin MJ, Park J, Chae JS, Rahman MB, Islam MA (2006). A short history of brucellosis: special emphasis in Bangladesh. Bangl. J. Vet. Med. 4(1):1-6.
- Rahman MS, Faruk MO, Her M, Kim JY, Kang SI, Jung SC (2011). Prevalence of brucellosis in ruminants in Bangladesh. Veterinarni Medicina, 56:379-385.
- Rahman AKMA, Dirk B, Fretin D, Saegerman C, Ahmed MU, Muhammad N, Hossain A, Abatih E (2012). Seroprevalence and risk factors for brucellosis in a high-risk group of individuals in Bangladesh. Foodborne Pathog. Dis. 9(3):190-197.
- Seleem MN, Boyle SM, Sriranganathan N (2010). Brucellosis: a reemerging zoonosis. Vet. Microb. 140(3):392-398.
- Sewel MMH, Blocklesby DW (1990). Handbook of animal disease in the tropics. (BailliereTindall, London)
- Tomaso H, Kattar M, Eickhoff M, Wernery U, Al Dahouk S, Straube E, Neubauer H, Scholz HC (2010). Comparison of commercial DNA preparation kits for the detection of Brucellae in tissue using quantitative real-time PCR. BMC Infect. Dis. 10:100.

academicJournals

Vol. 8(48), pp. 3861-3866, 26 November, 2014 DOI: 10.5897/AJMR2014.7071 Article Number: 4934C2349235 ISSN 1996-0808 Copyright © 2014 Author(s) retain the copyright of this article http://www.academicjournals.org/AJMR

African Journal of Microbiology Research

Full Length Research Paper

Verification of molecular characterization of coagulase positive *Staphylococcus* from bovine mastitis with matrix-assisted laser desorption ionization, timeofflight mass spectrometry (MALDI-TOF MS) mass spectrometry

Cássia Couto da Motta¹, Anna Carolina Coelho Marín Rojas¹, Felipe Carlos Dubenczuk¹, Larissa Alvarenga Batista Botelho², Beatriz Meurer Moreira², Shana Mattos de Oliveira Coelho¹, Irene da Silva Coelho¹ and Miliane Moreira Soares de Souza¹*

¹Veterinary Microbiology and Immunology Department, Federal Rural University of Rio de Janeiro, BR 465 Km 7, CEP 23897-970, Seropédica/RJ, Brazil.

²Research Laboratory of Medical Microbiology, Institute of Microbiology Paulo Goes, Federal University of Rio de Janeiro, Avenue Carlos Chagas Filho, 373, University City, CEP 21941-902, Rio de Janeiro/RJ, Brazil.

Received 17 August, 2014; Accepted 17 November, 2014

Besides Staphylococcus aureus, other coagulase-positive Staphylococcus (CPS) species such as Staphylococcus hylicus and Staphylococcus intermedius are implicated in bovine mastitis etiology. These species are often misdiagnosed as S. aureus. Also, some atypical S. aureus isolates can test negative for coagulase production and consequently be misdiagnosed as coagulase-negative Staphylococcus (CNS). Several currently available methods for the identification of Staphylococcus spp., including molecular techniques, are widely used worldwide. Recently, matrix-assisted laser desorption ionization, time-offlight mass spectrometry (MALDI-TOF MS) has been attracting attention for its fast and precise identification of several microorganisms at the species level. The present work evaluated the efficiency of a protocol for S. aureus characterization using PCR and M-PCR procedures. MALDI-TOF was considered the gold standard test to evaluate the sensitivity and specificity of the proposed identification protocol. Seventy-two Staphylococcus spp., isolates were evaluated. All samples were submitted to PCR for coa, nuc and 23S rDNA. Out of 33 isolates, genotypically characterized as S. aureus and confirmed by MALDI-TOF MS, 2 (6.1%) tested negative for coagulase production. Three isolates were identified as S. hyicus (2) and S. intermedius (1) by MALDI-TOF MS. The proposed molecular identification schedule achieved 100% sensitivity and specificity as compared to MALDI-TOF MS.

Key words: Bovine mastitis, coagulase-positive *Staphylococcus*, matrix-assisted laser desorption ionization, time-offlight mass spectrometry (MALDI-TOF MS), molecular identification.

INTRODUCTION

Bovine mastitis is an inflammatory disease usually caused by bacterial and mycotic pathogens (Capurro, 2009). It is recognized as a major disease affecting milk production and consequently dairy enterprises. Among the infectious agents implicated in the etiology of mastitis, *Staphylococcus* spp. are usually the most frequent bacteria (Taponen and Pyörälä, 2009).

According to the List of Prokaryotic Names with Standing in Nomenclature (http://www.bacterio.net/staphylococcus.html), the genus Staphylococcus comprises 49 species and 26 subspecies, separated into two distinct groups based on their ability to coagulase. The coagulase-negative produce Staphylococcus (CNS) was long regarded as non pathogenic species assembled in an undistinguishable group. Today, their importance in animal infections is becoming clear and there are several reports implicating CNS in bovine mastitis.

Eight coagulase-positive *Staphylococcus* species have been reported: *Staphylococcus aureus*, *Staphylococcus intermedius*, *Staphylococcus delphini*, *Staphylococcus pseudintermedius*, *Staphylococcus schleiferi* subsp. *coagulans*, *Staphylococcus hyicus*, *Staphylococcus lutrae* and *Staphylococcus agnetis* (Freney et al., 1999; Devriese et al., 2005; Sasaki et al., 2010; Taponen et al., 2012). S. *aureus* is the most frequent species isolated from bovine mastitis samples. *S. intermedius* and *S. hyicus* are rarely identified and the other CPS seems to be misidentified as *S. aureus* (Capurro, 2009).

The failures in the identification protocol are mostly related to phenotypic procedures, since distinguishing between species is a difficult task. The use of molecular markers has greatly improved species differentiation and allows the elucidation of the taxonomy of *Staphylococcus* spp., (Lange et al., 2011). Description of new species (Foster et al., 1997; Devriese et al., 2005) and reclassification of known ones have happened as a consequence of new methods and techniques (Sasaki et al., 2007; Blaiotta et al., 2010).

Molecular identification methods are keys to achieving phenotypic identification spaces as gene specific markers are being recognized. Nucleic acid-based detection approaches offer rapid and sensitive methods that are easily reproducible. Several identification schedules considering the amplification of *nuc*, *coa* and 23S rDNA genes have been previously reported for *S. aureus* (Hookey et al., 1998; Straub et al., 1999; Ciftci et al., 2009). Sasaki et al. (2010) developed a *multiplex* PCR (M-PCR) of *nuc* gene which encodes for thermonuclease in different *Staphylococcus* species.

Recently, matrix-assisted laser desorptionionization, time off light mass spectrometry (MALDI-TOF MS) has been attracting attention for its fast and precise identification of several microorganisms at the species level, even in mixed cultures (Bizzini and Greub, 2010; Bannoehr and Guardabassi, 2012). Mass spectrometry (MS) is a technique based on the analysis of ionized molecules in a gaseous phase. Decristophoris et al. (2011) reported high specificity (95%) and sensitivity (100%) in the identification of species of the SIG group, the *S. intermedius* reclassification proposed by Devriese et al. (2005), that comprises *S. intermedius*, the new species *S. pseudintermedius* and *S. delphini*. Böhme et al. (2012) also reported its use for *S. aureus* identification.

In the present study, we proposed a molecular schedule based on PCR amplification of the *nuc*, 23S rDNA and *coa* genes in coagulase-positive *Staphylococcus* isolated from dairy farms. The results obtained were compared with those yielded by MALDI-TOF MS, considered the gold standard technique due to its reliability and speed.

MATERIALS AND METHODS

Sampling

The 72 *Staphylococcus* spp. isolates evaluated in this study were obtained from samples of mastitic cow's milk and dairy workers' hands, obtained from dairy farms in the state of Rio de Janeiro, Brazil.

The samples were first inoculated on blood agar (blood agar base enriched with 5% sheep blood) and incubated at 35°C (\pm 2°C) for 24 h. Then, the isolates were submitted to routine microbiological diagnostics, including inoculation in selective medium for analysis of cultural properties and catalase and coagulase production. The coagulase-positive samples were evaluated for maltose and _Dmannitol fermentation, acetoin production and nitrate reduction (Winn et al., 2006). Coagulase-negative isolates were stored in 45% glycerol added to Brain Heart Infusion (BHI) broth for complementary analysis. To its identification, a modified scheme based on Cunha et al., (2004) was used, comprising the following tests: fermentation of the sugars xylose, arabinose, sucrose, trehalose, maltose, mannitol, lactose, xylitol, ribose, fructose and mannose; production of hemolysin; presence of urease; and resistance to novobiocin 5 mcg.

Molecular and proteomic analysis

After phenotypic identification, all strains including CNSs, were submitted to polymerase chain reaction for 16S rRNA to confirm the presence of *Staphylococcus* spp. (Zhang et al., 2004). PCR for *coa* (Hookey et al., 1998), *nuc* (Ciftci et al., 2009) and 23S rDNA (Straub et al., 1999) genes were performed to characterize *S. aureus* (Table 1). *S. aureus* standard strain ATCC29213 was used as control.

Multiplex PCR (M-PCR) for *nuc* gene was performed according to Sasaki et al. (2010) to characterize coagulase-positive *Staphylococcus* species (Table 1). Strains ATCC 29213 *S. aureus* and ATCC 29663 *S. intermedius* and two strains from UFRJ culture collection, the *S. hyicus* 5368 and *S. schleiferi* 3975 were used as quality controls.

Furthermore, all 72 isolates were evaluated by the MALDI-TOF MS. To perform this procedure, the samples were inoculated in BHI agar at 37°C for 24 h. Each culture was transferred to a microplate

*Corresponding author. E-mail: miliane@ufrrj.br.

Author(s) agree that this article remain permanently open access under the terms of the <u>Creative Commons Attribution License</u> <u>4.0International License</u>

Gene (fragment)	Species	Primer Sequence (5'-3')	Cycling*	
160 ×DNA/766 pb)	Stanbulgagaguagan	AAC TCT GTT ATT AGG GAA GAA CA	4	
<i>16S rRNA</i> (756 pb)	Staphylococcus spp.	CCA CCT TCC TCC GGT TTG TCA CC	I	
228 rDNA(1250 ph)		ACG GAG TTA CAA AGG ACG AC	1	
23S <i>rDNA</i> (1250 pb)	S. aureus	AGC TCA GCC TTA ACG AGT AC	I	
	S. aureus	ATA GAG ATG CTG GTA CAG G	2	
<i>coa</i> (Variável)	S. aureus	GCT TCC GAT TGT TCG ATG C	2	
(070 ph)		GCG ATT GAT GGT GAT ACG GTT	2	
<i>nuc</i> (279 pb)	S. aureus	AGC CAA GCC TTG ACG AAC TAA AGC	3	
<i>nuc</i> (359 pb)		TCG CTT GCT ATG ATT GTG G	4	
	S. aureus	GCC AAT GTT CTA CCA TAG C	4	
n_{10} (120 pb)	S. intermedius	CAT GTC ATA TTA TTG CGA ATG A	4	
<i>nuc</i> (430 pb)	S. Internedius	AGG ACC ATC ACC ATT GAC ATA TTG AAA CC	4	
nua (526 ph)	S poblaifari aub an anagulana	AAT GGC TAC AAT GAT AAT CAC TAA	4	
<i>nuc</i> (526 pb)	S. schleiferi sub sp. coagulans	CAT ATC TGT CTT TCG GCG CG	4	
nua (661 nh)	C dalahini graya A	TGA AGG CAT ATT GTA GAA CAA	4	
<i>nuc</i> (661 pb)	S. delphini group A	CGR TAC TTT TCG TTA GGT CG	4	
nua (1125 ph)	S. delphini group B	GGA AGR TTC GTT TTT CCT AGA C	4	
<i>nuc</i> (1135 pb)	S. delprinni group B	TAT GCG ATT CAA GAA CTG A	4	
n_{10} (702 pb)	S. hvioup	CAT TAT ATG ATT TGA ACG TG	4	
<i>nuc</i> (793 pb)	S. hyicus	GAA TCA ATA TCG TAA AGT TGC	4	
$p_{\mu\nu}$ (026 pb)	S. pooudintormodius	TRG GCA GTA GGA TTC GTT AA	4	
<i>nuc</i> (926 pb)	S. pseudintermedius	CTT TTG TGC TYC MTT TTG G	4	

*1. 94°C 5 min (94°C 1 min, 55°C 1 min, 72°C 1 min) x 30 and 72°C 10 min; 2. 94°C 4 min (94°C 1 min, 60°C 1 min, 72°C 1 min) x 30 and 72°C 5 min; 3. 94°C 5 min (94°C 45 s, 68°C 45 sec and 72°C 90 s) x 30 and 72°C 10 min; 4. 95°C 2 min (95°C 30 sec, 56°C 35 sec and 72°C 1 min) x 30 and 72°C 2 min.

(96 MSP, Bruker® - Billerica, USA). Each bacterial sediment was covered by a lysis solution (70% formic acid; Sigma-Aldrich®). Additionally, a 1-µL aliquot of matrix solution (alpha-ciano-4-hidroxicinamic acid diluted in 50% acetonitrile and 2.5% trifluoracetic acid, Sigma-Aldrich®) was added to each sediment. The spectra of each sample were generated in a mass spectrometer (MALDI-TOF LT Microflex, Bruker®) equipped with a 337 nm nitrogen laser in a linear path, controlled by the FlexControl 3.3 (Bruker®) program. The spectra were collected in a mass range between 2,000-20,000 m/s, and then were analyzed by the MALDI Biotyper 2.0 (Bruker®) program, using the standard configuration for bacteria identification, by which the spectrum of the sample is compared with the references in the database. The results vary on a 0-3 scale, where the highest value means a more precise match and reliable identification (Table 2). In this study, we accepted values for matching greater than or equal to 2.

The percentage of sensitivity, specificity and positive and negative predictive values for the employed molecular methods were measured considering MALDI-TOF MS proteomic analysis as the gold standard technique in this study.

RESULTS

Out of a total of 72 *Staphylococcus* spp. isolates evaluated in this study, 52.8% (38/72) tested negative for the phenotypic coagulase production test, so they were initially considered to be coagulase-negative *Staphylococcus*.

Phenotypic identification of the 47.2% (34/72) of isolates that tested positive for coagulase production demonstrated that 79.4% (27/34) were *S. aureus*. Seven coagulase-positive isolates (20.6%) from the 34 could not be phenotypically identified.

PCR amplification of the 16S rRNA gene (756 pb) tested positive in all 72 isolates, corroborating the Staphylococcus spp., phenotypic identification. Additionally, PCRs for coa, nuc and 23S rDNA genes were carried out for all 72 isolates to characterize S. aureus. The decision to evaluate even the phenotypic coagulasenegative strains was due to the report of the detection of atypical coagulase-negative S. aureus strains misdiagnosed as CNSs (Akineden et al., 2011). The coa gene was detected in 41.7% (30/72) isolates, yielding variable size amplicons. Each nuc (279 pb) and 23S rDNA (1250 pb) gene was detected in 37.5% (27/72) of the isolates. Strains were characterized as S. aureus when positive for the amplification of at least one of these specific genes, consisting of 45.8% (33/72) of the samples. Interestingly, 6.1% (2/33) tested negative for phenotypic coagulase production. Also, none of the studied genes were detected in 4.2% (3/72) of the coagulase-positive isolates. These isolates were submitted to M-PCR for nuc genes of S. intermedius,

1S. aureus2CPS3CPS4CNS5S. aureus6CNS7S. aureus8S. aureus9S. aureus	S. aureus S. aureus	S. intermedius S. aureus S. aureus ND ND ND ND ND ND ND	S. aureus(2.354) S. aureus(2.258) S. aureus(2.380) S. aureus(2.329) S. aureus(2.403) S. aureus(2.317) S. aureus(2.459) S. aureus(2.367)
 CPS CNS S. aureus CNS CNS S. aureus S. aureus S. aureus 	S. aureus S. aureus S. aureus S. aureus S. aureus S. aureus S. aureus	S. aureus ND ND ND ND ND ND	S. aureus(2.380) S. aureus(2.329) S. aureus(2.403) S. aureus(2.317) S. aureus(2.459) S. aureus(2.367)
 4 CNS 5 S. aureus 6 CNS 7 S. aureus 8 S. aureus 	S. aureus S. aureus S. aureus S. aureus S. aureus S. aureus	ND ND ND ND ND	S. aureus(2.329) S. aureus(2.403) S. aureus(2.317) S. aureus(2.459) S. aureus(2.367)
 S. aureus CNS S. aureus S. aureus 	S. aureus S. aureus S. aureus S. aureus S. aureus	ND ND ND ND	S. aureus(2.403) S. aureus(2.317) S. aureus(2.459) S. aureus(2.367)
6 CNS 7 S. aureus 8 S. aureus	S. aureus S. aureus S. aureus S. aureus	ND ND ND	S. aureus(2.317) S. aureus(2.459) S. aureus(2.367)
 S. aureus S. aureus 	S. aureus S. aureus S. aureus	ND ND	S. aureus(2.459) S. aureus(2.367)
8 S. aureus	S. aureus S. aureus	ND	S. aureus(2.367)
	S. aureus		
9 S. aureus		ND	
	S aurous		S. aureus(2.408)
10 S. aureus	5. aureus	ND	S. aureus(2.381)
11 S. aureus	S. aureus	ND	S. aureus(2.441)
12 S. aureus	S. aureus	ND	S. aureus(2.424)
13 S. aureus	S. aureus	ND	S. aureus(2.443)
14 S. aureus	S. aureus	ND	S. aureus(2.351)
15 S. aureus	S. aureus	ND	S. aureus(2.405)
16 CPS	S. aureus	ND	S. aureus(2.419)
17 S. aureus	S. aureus	ND	S. aureus(2.371)
18 S. aureus	S. aureus	ND	S. aureus(2.418)
19 S. aureus	S. aureus	ND	S. aureus(2.426)
20 S. aureus	S. aureus	ND	S. aureus(2.450)
21 S. aureus	S. aureus	ND	S. aureus(2.455)
22 S. aureus	S. aureus	ND	S. aureus(2.410)
23 S. aureus	S. aureus	ND	S. aureus(2.461)
24 S. aureus	S. aureus	ND	S. aureus(2.379)
25 S. aureus	S. aureus	ND	S. aureus(2.428)
26 S. aureus	S. aureus	ND	S. aureus(2.410)
27 CPS	S. aureus	ND	S. aureus(2.477)
28 S. aureus	S. aureus	ND	S. aureus(2.442)
29 S. aureus	S. aureus	ND	S. aureus(2.451)
30 S. aureus	S. aureus	ND	S. aureus(2.397)
31 CPS	S. aureus	ND	S. aureus(2.425)
32 S. aureus	S. aureus	ND	S. aureus(2.422)
33 S. aureus	S. aureus	ND	S. aureus(2.424)
34 CPS	Negative (CPS)	Negative	S. hyicus(2.157)
35 CPS	Negative (CPS)	Negative	S. hyicus(2.116)
36 S. aureus	Negative (CPS)	Nonspecific fragment	S. intermedius(2.178)

Table 2. Comparison of the phenotype, genotype and proteomic identification of 36 coagulase-positive Staphylococcus isolates analyzed by the MALDI-TOF MS technique and their respective scores.

*CPS: Coagulase-positive Staphylococcus; CNS: coagulase-negative Staphylococcus; ND: not determined.

S. pseudintermedius, S. schleiferi subsp. *coagulans, S. delphini* group A and B, *S. hyicus* and *S. aureus* (Sasaki et al., 2010). Out of these three CPSs isolates evaluated, just one presented an atypical amplicon bigger than 1000 pb. The other two isolates and the *S. hyicus* 5368 standard strain could not be identified by this technique. MALDI-TOF MS confirmed the 33 isolates previously identified as *S. aureus* (45.8%), even the strain misidentified as *S. intermedius* by the M-PCR assay. Three isolates, previously identified as CPSs, were

identified by MALDI-TOF MS as *S. hyicus* (2) and *S. intermedius*. The M-PCR assay for the *nuc* gene was not able to distinguish these strains. All 36 isolates previously identified as CNSs (45.8%) were confirmed by the MALDI-TOF MS proteomic analysis. *S. chromogenes* and *S. sciuri* were the prevalent species. The genotypic identification schedule based simultaneously on the detection of coa, *nuc* and 23S rDNA genes and showed correspondence of 100% with the MALDI-TOF MS technique.

Table 3. Percentages of sensitivity, specificity, positive predictive value and negative predictive value found for the proposed identification of *S. aureus*.

Comes	Values (%)						
Genes	Sensitivity	Specificity	PPV	NPV			
<i>coa, nuc</i> e 23S rDNA	100	100	100	100			
соа	90.9	100	100	92.8			
nuc	81.8	100	100	86.7			
23S rDNA	81.8	100	100	86.7			

*PPV: Positive predictive value; NPV: negative predictive value.

DISCUSSION

The phenotypic differentiation of CPS species is a difficult task due to the absence of specific biochemical markers. To overcome this problem, the use of molecular tools has become routine in human and veterinary microbiology diagnosis. Nonetheless, genotypic assays are relatively expensive, time consuming and most important may provide results that are difficult to analyze.

To evaluate susceptibility patterns, it is necessary to establish a reliable identification procedure of CPS species involved in several infections of distinct hosts. Parameters such as oxacillin minimum inhibitory concentration, antimicrobial susceptibility, incubation time and inhibition zones are specific to different *Staphylococcus* species (Sasaki et al., 2010).

In the present study, MALDI-TOF MS proteomic analysis was carried out to evaluate the sensitivity, specificity and positive and negative predictive values of a molecular identification schedule for *S. aureus* based on the *coa*, *nuc* and 23S rDNA genes. It proved to be an efficient tool for distinguishing *Staphylococcus* species. Also, it has high potential for routine automated analysis, allowing the identification of isolates from clinical sources on a large scale (CLSI) (2013). Nevertheless, although it proved to be a fast and easy method with high specificity and sensitivity, the equipment is very expensive and requires skilled staff, so it is not suitable for small laboratories.

The proposed genotypic identification schedule based on the *coa*, *nuc* and 23S rDNA genes achieved 100% sensitivity and specificity as compared to MALDI-TOF MS, the gold standard tool in this study (Table 3). So, this proposed identification schedule is reliable to characterize *S. aureus*, even the atypical coagulasenegative strains, and can be used in small research laboratories.

Despite the fact that it was reported as a 99.8% sensitive and a 100% specific method, the M-PCR technique, established by Sasaki et al. (2010) was not able to distinguish among the other CPS strains. In fact, although several molecular approaches have been suggested for the proper identification of CPS, since phenotypic methods are time consuming and unreliable for animal samples, this is still a goal to be achieved.

Conflict of interest

The author(s) have not declared any conflict of interests.

ACKNOWLEDGEMENTS

This study was supported by the National Council for Scientific and Technological Development (CNPq, Rio de Janeiro, Brazil – process 472119/2011-7) and the Rio de Janeiro State Research Foundation (FAPERJ; process E-26/110.526/2011).

REFERENCES

- Akineden Ö, Hassan AA, Schneider E, Usleber E(2011). A coagulasenegative variant of *Staphylococcus aureus* from bovine mastitis milk. J. Dairy Res. 78:38-42.
- Bannoehr J, Guardabassi L (2012). Staphylococcus pseudintermedius in the dog: taxonomy, diagnostics, ecology, epidemiology and pathogenicity. Vet. Dermatol. 23:253-e52.
- Bizzini Å, Greub G(2010). MALDI-TOF MS, a revolution in clinical microbial identification. Clin. Microbiol. Infect.16: 1614–1619.
- Blaiotta G, Fusco V, Ercolini D, Pepe O, Coppola S (2010). Diversity of Staphylococcus Species Strains Based on Partial kat (Catalase) Gene Sequences and Design of a PCR-Restriction Fragment Length Polymorphism Assay for Identification and Differentiation of Coagulase-Positive Species (S. aureus, S. delphini, S. hyicus, S. intermedius, S. pseudintermedius, and S. schleiferisubsp. coagulans). J. Clin. Microbiol. 48 (1):192-201.
- Böhme K, Morandi S, Cremonesi P, No ICF, Barros-Velázquez J,Castiglioni B, Brasca M, Cañas B, Calo-Mata P (2012).Characterization of *Staphylococcus aureus*strains isolated from Italian dairy products by MALDI-TOF mass fingerprinting. Electrophoresis 33:2355-2364.
- Capurro A (2009). Diagnostic and epidemiological studies of staphylococci in bovine mastitis. Thesis, Swedish University of Agricultural Sciences, Uppsala. 62 p.
- Ciftci A, Findik A, Onuk EE, Savasan S(2009). Detection of methicillin resistance and slime factor production of *Staphylococcus aureus* in bovine mastitis. Braz. J. Microbiol. 40:254-261.
- Clinical and Laboratory Standards Institute (CLSI) (2013). Performance Standards for Antimicrobial Disk and Dilution Susceptibility Tests for Bacteria Isolated From Animals; Approved Standards - 4th Edition, CLSI document VET01-A4, Wayne, PA, USA.
- Cunha MLRS, Sinzato YK, Silveira LVA (2004). Comparison of methods for the identification of coagulase-negative staphylococci. Mem. I. Oswaldo Cruz. 99:855-860.
- Decristophoris P, Fasola A, Benagli C, Tonolla M, Petrini O (2011).Identification of *Staphylococcus intermedius* Group by MALDI-TOF MS. Syst. Appl. Microbiol. 34:45-51.
- Devriese L, Vancanney M, Baele M, Vaneechoutte M, DeGraef E, Snauwaert C, Cleenwerck I, Dawyndt P, Swings J, Decostere A, Haesebrouck F (2005). *Staphylococcus pseudintermediussp.* nov., a coagulase-positive species from animals. Int. J. Syst. Evol. Microbiol. 55:1569-1573.
- Foster G, Ross HM, Hutson RA, Collins MD (1997). *Staphylococcus lutraesp.* nov., anew coagulase-positive species isolated from otters. Int. J. Syst. Evol. Microbiol. 49:489-502.
- Freney J, Kloos WE, Hajek V, Webster JA (1999).Recommended minimal standards for description of new staphylococcal species Int. J. Syst. Evol. Microbiol. 49:489-502.
- Hookey JV, Richardson JF, Cookson BD (1998). Molecular Typing of Staphylococcus aureusBased on PCR Restriction Fragment Length Polymorphism and DNA Sequence Analysis of the Coagulase Gene. J. Clin. Microbiol. 36 (4):1083-1089.
- Lange CC, Brito MAVP, Brito JRF, Arcuri EF, Souza GN, Machado MA, Domingues R, Salimena APS (2011). Identification of *Staphylococcus*

strains isolated from bovine mastites by PCR and 16S rDNA sequencing. Pesq. Vet. Bras. 31(1):36-40.

- Sasaki T, Kikuchi K, Tanaka Y, Takahashi N, Kamata S, Hiramatsu K (2007). Methicillin-resistant *Staphylococcus pseudintermedius*in a veterinary teaching hospital. J. Clin. Microbiol. 45:1118-1125.
- Sasaki T, Tsubakishita S, Tanaka Y, Sakusabe A, Ohtsuka M, Hirotaki S, Kawakami T, Fukata T (2010). Multiplex-PCR Method for Species Identification of Coagulase-Positive Staphylococci. J. Clin. Microbiol. 48(3):765-769.
- Straub JA, Hertel C, Hammes WP (1999).A 23S RNAr-targeted polymerase chain reaction-based system for detection of *Staphylococcus aureus* in meat started cultures and dairy products. J. Food. Prot. 62:1150-1156.
- Taponen S, Supré K, Piessens V, Van Coillie E, DeVliedher S, Koort J MK (2012). Staphylococcus agnetis sp. nov., a coagulase variable species from bovine subclinical and mild clinical mastites. Int. J. Syst. Evol. Microbiol. 62:61-65.

- Taponen S, Pyörälä S (2009). Coagulase-negative staphylococci as cause of bovine mastitis not so different from *Staphylococcus aureus*? Vet. Microbiol. 134:29-36.
- Winn W, Allen S, Janda W, Koneman E, Procop G, Schreckenberger P, Woods G (2006). Koneman's Color Atlas and Diagnostic Microbiology. 6.ed, Lippincott Williams & Wilkins.
- Zhang K, Sparling J, Chow BL, Elsayed S, Hussain Z, Church DL, Gregson DB, Louie T, Conly JM (2004). New Quadriplex PCR Assay for Detection of Methicillin and Mupirocin Resistance and Simultaneous Discrimination of *Staphylococcus aureus*from Coagulase-Negative Staphylococci. J. Clin. Microbiol. 42(11):4947-4955.

academicJournals

Vol. 8(48), pp. 3867-3874, 26 November, 2014 DOI: 10.5897/AJMR2014.7136 Article Number: 108320049237 ISSN 1996-0808 Copyright © 2014 Author(s) retain the copyright of this article http://www.academicjournals.org/AJMR

African Journal of Microbiology Research

Full Length Research Paper

Microbiological quality and safety of street vended raw meat in Jijiga town of Somali Regional State, southeast Ethiopia

Firew Tafesse¹*, Gulelat Desse², Ketema Bacha³ and Haile Alemayehu⁴

¹Department of Food Science and Nutrition, Jigjga University, Jigjiga, Ethiopia.
 ²Food Science and Nutrition Program, Addis Ababa University, Addis Ababa, Ethiopia.
 ³College of Natural Sciences, Jimma University, Jimma, Ethiopia.
 ⁴Department of Microbiology and Immunology, Aklilu Lemma Institute of Pathobiology, Addis Ababa University, Addis Ababa, Ethiopia.

Received 19 September, 2014; Accepted 18 November, 2014

A cross sectional study was conducted to determine the microbial quality and safety of street vended raw meats in Jijiga town, Ethiopia. Questionnaire was used to assess the profile of 33 street vendors. A total of 60 meat samples (30 beef and 30 goats) were collected. The pH and holding temperature were measured. Six microbial groups were counted using standard methods. The aerobic mesophilic flora was characterized. Vendors had very little degree of awareness on food safety and food borne diseases. The sanitary condition of the vending environment was poor. The mean pH values were 6.03 and 5.98 for beef and goat meat samples, respectively. The samples were held in a temperature range of 17.5-27.5°C. Total mesophilic bacteria, Enterobacteriaceae and coliforms, *Staphylococci*, lactic acid bacteria, yeasts and moulds had counts of >7, 4, 6, 4 and 4log cfu/g respectively for both species. The aerobic plate counts were dominated by *Staphylococcus* spp. followed by Enterobacteriaceae. *Salmonellae* were also isolated from 5 (8.3%) meat samples. There were significant differences (P<0.05) between goat and beef samples in total mesophilic bacteria and *Staphylococci* counts. The samples harbored high counts of microorganisms. Trainings, inspections, infrastructures and code of practice are recommended.

Key words: Jijiga, raw meat, street vendors, quality, safety.

INTRODUCTION

Food is essential for survival. However, occasionally, human beings consume undesirable chemical and biological agents and toxins resulting in food borne illness. Consequently, in many countries food safety and quality is becoming a matter of increasing concern. Food safety problems are particularly becoming an increasingly serious threat to public health in developing countries. Lack of adequate regulations related to food safety as

*Corresponding author. E-mail: f.afesse80@gmail.com.

Author(s) agree that this article remain permanently open access under the terms of the <u>Creative Commons Attribution License</u> <u>4.0International License</u>

reflected in many unrecognized cases of food borne illnesses puts especially children and infants at high risk (Unnevehr and Hirschhorn, 2000). Biological contaminants, largely bacteria, viruses and parasites constitute the major cause of food-borne diseases (Kaferstein, 2003).

Vending foods on the street is a common aspect of lifestyle both in industrialized as well as countries in which there are high unemployment, low salaries and limited work opportunities (Bryan et al., 1988). Street vendors provide an essential service to people of all walks of life by selling raw foods, complete meals, refreshing drinks and snacks (WHO, 1996).

In spite of numerous advantages offered by street vended foods, there are also several hazards associated with this sector of the economy. Multiple line evidence revealed that foods exposed for sale on the roadside may become contaminated by either spoilage or pathogenic microorganisms (Mogessie, 1995). This constitutes serious health hazards, particularly in economically disadvantaged countries where food surveillance are undeveloped or not there at all. Evidently, street vended foods have shown epidemiological link with illness (Van Kampen et al., 1998; Mogessie, 1995) and laboratory results have also shown high counts of microorganisms and presence of food borne pathogens (Umoh et al., 1984, 1985; Mogessie, 1995). Some foods like meats, rice, fish and fruits have been frequently identified as vehicles in outbreaks of food borne diseases in countries where food-borne surveillance data are available (Davey, 1985; Bryan et al., 1988). Among the most common street vended foods, meat and meat products were known to be the major in either processed or unprocessed form (WHO, 1996). Retailing unprocessed raw meat in the street or in an open air market for the public is common in Africa as well as in some parts of Asian countries (WHO, 1996). Studies made in Africa, Asia and Latin America (FAO, 1995) pointed out that the important aspect of street vended food is their safety and understanding the possible ways of contamination.

Microbial contamination of street vended foods could occur due to different possible reasons such as storing food in cheap utensils, holding food at a temperature that would permit bacterial growth, utilization of water of questionable hygienic quality, using packing materials that were not of food-grade quality, vending site that had no facilities for waste disposal and utilization of unclean utensils (Deriba and Mogessie, 2001).). In addition, street food vendors are unaware of the basic importance of personal cleanliness, thus their products are usually vulnerable to gross contamination by flies, insects, rodents, dust and other dirt (Deriba and Mogessie, 2001). It is also indicated that street-food vendors are often poor and uneducated and lack appreciation for safe food handling (Bryan et al., 1988).

Although vending raw meat is not common in most parts of Ethiopia, there are some areas in which vending raw meat in an open market is practiced. Jijiga town is one of these areas where raw meat street vendors are available in most parts of the town and highly populated at the center of the town. Raw meats of different animals (such as sheep, goat, camel and cattle) are commonly retailed and vending and purchasing activities are carried out every day in a week.

Studies concerning various street vended foods in Ethiopia showed the presence of pathogens or existence of good conditions in street foods to allow growth of pathogens in them (Mogessie, 1994, Deriba and Mogessie, 2002). However, information on the microbial quality and safety of street vended raw meats in Jijiga town is scant. The purpose of this study was therefore to determine the microbiological quality and safety of raw beef and raw goat meats as these types of meats were the most common and widely vended meats in the study area.

MATERIALS AND METHODS

Study area

The study was conducted at Jijiga town, the capital city of Somali Regional State, located about 80 km east of Harar and 620 km southeast of Addis Ababa. Its geographical coordinates are 9° 21' North, 42° 48' East. The majority of the region has an altitude of 900 m above sea level and in some areas the altitude reaches 1600 m. Of the total area size of the state, approximately 80% is flat and 7% mountainous. Regarding climate, 80% of the region is classified as "Kolla" (lowlands), 5% highland ("Dega") and 15% of the area fall under temperate ("Woyna Dega") category. The maximum temperature reaches 32-40°C. In the temperate ("Woyna Dega") areas, the temperature is within 20-28°C. The mean annual rainfall of the state is estimated to be 300-500 mm.

Study design and data collection

The current cross-sectional study was carried out at Jijiga town from December, 2010 to March, 2011 with the aim of evaluating the microbiological quality and safety of street vended beef and goat meat in the town. Questionnaire and direct observation were used as tools to collect data. Content of the questionnaire included issues addressing socio-demographic characteristics, health status and personnel hygiene, food handling practices and food safety knowledge of the vendors and access to hygienic water supply and other sanitary facilities. Standard microbiological methods were also used to assess the microbiological quality and safety of street vended raw meats.

Survey

Survey using direct observation and questionnaire was undertaken throughout the study period in order to obtain data on sociodemography, food safety knowledge and food handling practices of street raw meat vendors. For this study, vendors selling mainly raw meat of goat and cattle were included. From the total of 44 raw meat vendors recognized by the city administration office and operating in the major open air market in a fixed place, only 33 food vendors were recruited using simple random sampling technique. Written consent was obtained by reading a statement to prospective respondents seeking permission for the data gathering. Data were collected only after getting willingness of the vendors and confidentiality was ensured using data coding system.

Sample collection for microbiological analysis

About 60 (30 from each meat type) samples of raw meat were collected from 30 different street vendors as made available to the consumers. Collection and transportation of the meat samples was carried out following the procedures used by Mogessie (1994) and Deriba and Mogessie (2002).

Plating and enumeration of microorganisms from raw meat samples

Plating of samples and microbial enumeration was conducted based on well established procedures (Diane et al., 2003). Twenty five grams of raw meat and 225 ml of 0.1% sterile buffered peptone water (BPW) was homogenized in a stomacher bag after the meat was chopped using sterile scissors. A volume of 0.1 ml sample from appropriate dilutions was plated on the following culture media (all from Oxoid) for microbial count: Aerobic mesophilic bacteria were counted on plate count (PC) agar after incubation at 32°C for 24-48 h. Violet Red Bile agar was used to count coliforms. After 24 h incubation at 32°C, purplish red colonies surrounded by red zone of precipitated bile were counted as coliforms. Violet Red Bile Glucose agar plates were used to count enterobacteriacae. The seeded culture plates were incubated at 30-32°C for 20-24 h after which pink to red purple colonies with or without haloes of precipitation were enumerated as members of enterobacteriaceae. Staphylococci were counted on Mannitol Salt agar after incubation at 32°C for 36 h. Lactic acid bacteria were counted on de-Mann, Rogossa and Sharp (MRS) agar plates after incubation in an anaerobic jar at 32°C for 48 h. Yeasts and moulds were counted on potato dextrose agar plates. Colonies were counted after incubation at 28-30°C for five days (Diane et al., 2003).

Mezophilic flora analysis: After enumeration of aerobic mesophilic bacteria, about 10-20 colonies were picked randomly from countable plates and inoculated into tubes containing about 5 ml Nutrient Broth (Oxoid). The broth cultures were incubated at 37°C overnight. Cultures were further purified by repeated plating and differentiated to various bacterial groups. Cell morphology and clustering pattern, presence or absence of endospores and motility were examined under a microscope. Gram reaction was determined using the KOH test as indicated by Gregerson (1978). Furthermore, the presence of cytochrome oxidase (Kovacs, 1956) and catalase (Deriba and Mogessie, 2001) and oxidation-fermentation test (Hugh and Leifson, 1953) for glucose metabolism were also employed to characterize the microbial flora to their respective genus and/or species level.

Isolation of Salmonella spp. from meat samples: Isolation and identification of Salmonella was done according ISO 6579 (Muinde and Kuri, 2005). Briefly, 25 g sample was mixed with 225 ml buffered peptone water (BPW) and homogenized in a stomacher bag after the meat was chopped using sterile scissors. The homogenized solution was incubated at 37°C for 18-24 h for primary enrichment. For secondary enrichment, 0.1 ml of the solution was added in a tube containing 10 ml Rappaport-Vassiliadis broth (Oxoid) and incubated at 42°C for 24 h. A loopful of culture from the enrichment broth was inoculated into xylose lysine deoxycholate (XLD) medium (Oxoid) and incubated at 37°C for 18-24 h. Characteristic colonies from XLD medium were picked and further purified and tested biochemically using the following media: Triple Sugar Iron (TSI) agar, Lysine Iron (LI) agar, Urea

agar, Simmon's Citrate agar and Sulphur-Indole-Motility (SIM) medium. For all media, incubation was done at 37°C for 18-24 h (Diane et al., 2003).

Data management and statistical analysis

All data collected form survey and laboratory investigations were double entered into Microsoft Spread Sheet data storage program. For the analysis, data generated from the questionnaire was analyzed using SPSS version 15.0. All microbial counts were converted to \log_{10} colony forming unit (cfu) per gram values. Difference in microbial counts among meat samples of the two meat types was analyzed by analysis of variance (ANOVA). Significance was determined at the 5% of confidence level.

RESULTS

Survey

Survey results indicated that the majority of the food vendors were females (78.8%). Fifty-eight percent of the respondents were in the age range of 31-45 years. Only 30.3% of the vendors were literate (elementary school). Most of them (58%) were involved in vending meat for 5-10 years.

The sanitary condition of the vending environment was poor as it was dusty and full of remains of slaughtered animals such as bones, horn, head and other body parts. House flies were also very prevalent throughout the vending area and even on the raw meats displayed for sale by street vendors. All street vendors included in our study had no access to clean potable water. Forced by the situation, they simply reuse the water that they brought from their home.

It was also observed that the raw meats were displayed uncovered for more than 6 h for sale at ambient temperature on a table or a carton which would be used again and again.

All food handlers have a basic task to maintain a high degree of personal cleanliness and observe hygienic and safe food handling practices. Only 67% of the vendors had relatively good personal hygiene with respect to cleanness of their cloths and visible body parts. None of raw meat street vendors evaluated in our study wore appropriate working garment (overcoat). The majority (70%) of street vendors wore jewelers on their hands, ear and different body parts.

Microbiological analysis

Mean pH values for the meat samples investigated in our study ranged between 5.98 and 6.03. The raw meat samples analyzed in our study were held within a temperature range of 17.5-27.5°C during the time of vending and they were also possibly displayed for more than 6 h.

The mean values of aerobic mesophilic counts of street

Microbiol group		RBM		RGM			
Microbial group	Mean	S.D.	Range	Mean	S.D.	Range	
AMB	8.07	0.75	6.20-9.40	7.59	0.76	6.00-9.00	
тс	4.71	1.32	2.30-7.70	4.31	1.12	2.00-6.10	
Enterobacteriaceae	4.45	1.31	2.00-6.90	4.10	1.14	2.30-6.60	
Staphylococci	6.74	0.37	5.80-7.50	6.23	0.40	5.30-7.00	
LAB	5.16	0.88	3.30-7.40	4.82	0.81	2.90-6.40	
Yeasts & Moulds	4.62	1.06	2.70-7.00	4.66	0.87	2.30-6.10	

Table 1. Microbial counts (log cfu/g) of street vended raw beef and goat meat samples in Jijiga town, 2011.

AMB, Aerobic mesophilic bacteria; TC, total coliforms; LAB, lactic acid bacteria; S.D, standard deviation; RBM, raw beef meat; RGM, raw goat meat.

Table 2. Frequency distribution of mezophilic bacteria in meats collected from street vendors in Jijiga town, 2011

Meat type	No. of isolates	Staphylococ cus spp.	<i>Micrococcus</i> spp.	Other G+ ve rods	EB	Pseudomonas spp.	Alcaligenes spp.	Acinetobacter spp.	Aeromonas spp.
Beef	149	77(52)	10(6.7)	11(7.4)	33(22.2)	4(2.7)	7(4.7)	4(2.7)	3(2.0)
Goat	153	73(47.7)	11(7.2)	16(10.5)	36(23.5)	3(2.0)	10(6.5)	3(2.0)	1(0.7)
Sum	302	150(49)	21(7)	27(8.9)	69(22.8)	7(2.3)	17(5.6)	7(2.3)	4(1.3)

Where: EB, Entrobacteriaceae; Numbers in the parenthesis are percentage of the total isolates of respective species.

vended raw meat obtained in this study were 8.07 log cfu/g (ranged from 6.20 to 9.40 log cfu/g) and 7.59 log cfu/g (ranged 6.00-9.00 log cfu/g) for raw beef and raw goat meat, respectively (Table 1).

Enterobacteriaceae and coliforms were also encountered in our samples frequently (Table 1). The mean count of enterobacteriaceae and coliforms in our raw beef and raw goat meat samples was as high as log 4 cfu/g. Both raw meat samples analyzed in the present study had staphylococci counts \geq 6log cfu/g (Table 1).

Counts of lactic acid bacteria in our study were also high with mean counts as high as log 5.16 cfu/g for raw beef meat and 4.82 log cfu/g for raw goat meat. The presence of such high counts of lactic acid bacteria (LAB) in the meat samples might indicate improper handling of the meats and inadequate storage conditions. Since lactic acid bacteria (LAB) are meat spoilers (Jay, 2005), the presence of such high counts in the samples may limit the keeping quality of the raw meats. The mean count of yeasts and moulds for raw beef and goat meat samples analyzed in our study were log 4.62 cfu/g and log 4.66 cfu/g, respecttively (Table 1).

In our study, a total of 302 bacterial groups (149 isolates from raw beef and 153 isolates from raw goat meat) were isolated and characterized to various genera and bacterial groups (Table 2). In both types of meats, the aerobic mesophilic flora

was dominated by staphylococci followed by enterobacteriacae and other Gram positive rods. *Pseudomonas* spp., *Alcaligenes* spp., *Acinetobacter* spp, and *Aeromonas* spp. were also among the aerobic mesophilic bacterial groups isolated in beef and goat meat samples although they were not significant in their number. *Salmonella* was isolated from 5 meat samples (8.3%) (3 from goat meat and 2 from beef samples) (Table 2).

Statistical analysis with one-way ANOVA revealed that there were significant differences (P< 0.05) between goat and beef raw meat samples with regard to aerobic mesospheric count and staphylococci count (Table 3). However, significant **Table 3.** ANOVA for microbial counts (log cfu/g) of raw beefand raw goat meat samples collected from street vendors inJijiga Town, 2011.

Destarial manage	Log cfu/g (Mean+S.D.)				
Bacterial groups —	RBM	RGM			
AM B	8.07±0.75 ^a	7.59±0.76 ^b			
тс	4.45±1.31 ^a	4.10±1.14 ^a			
Enterobacteriaceae	4.71±1.32 ^a	4.31±1.12 ^a			
Staphylococci	6.74±0.37 ^a	6.23±0.40 ^b			
LAB	5.16±0.88 ^a	4.82±0.81 ^a			
Yeasts and moulds	4.62±1.06 ^a	4.66±0.87 ^a			

AMB, Aerobic mesophilic bacteria; TC, total coliforms; LAB, lactic acid bacteria; RBM, raw beef meat; RGM, raw goat meat; NB: Rows followed by the same letters are not significantly different (P > 0.05).

differences were not observed in the counts of other microbial groups (P >0.05).

DISCUSSION

Idowu and Rowland (2006) reported that in countries like Nigeria, Ghana, Uganda and Botswana, the majority of vendors are women who balance the income-generating opportunities of street vending. On the other hand, Muinde and Kuri (2005) have reported that 60% of the vendors surveyed in Nairobi were male. Although the quality and safety of raw meats sold by males and females was not assessed in our study, however, Ohiokpehai (2003) reported that female vendors sold food of better quality than their male counterparts. Klontz et al. (1995) also reported that in the United States, safer food preparations were consistently reported by persons who were female, at least 40 years old, with at least high school education and experience in the sector. In this survey, the experience and the age is consistent with that indicated by Klontz et al. (1995). However, there were significant percentage of youngsters under the age of 16-25 and inexperienced (0-4 years) vendors had also participated at vending activities in addition, their higher percentage of illiteracy would influence the good handling practice so does the safety of raw meat.

The presence of animals, insects, liquid waste and solid waste in all of food vending areas is similar to a study conducted elsewhere (FAO, 1988). The linkage between houseflies and diarrheal diseases has been also documented (Smith and Rose, 1998).

Reused water would have dissolved organic material in it to serve as a 'culture medium' favoring the growth of array of microorganisms including pathogens (Bryan et al., 1992c). For instance, in Ibadan, Nigeria, water was considered to be the major source of food contamination (Yah et al., 2009).

It has been mentioned that holding foods for more than

4-6 h is one of the main contributing factors of high possible microbial counts (EI-Sherbeeny et al., 1985; Bryan et al., 1992a, b, c). Deriba and Mogessie (2001) also indicated that foods that are held at ambient temperatures of 15-45°C for more than about 4 h present a considerable public health risk.

All food handlers have a basic task to maintain a high degree of personal cleanliness and observed hygienic and safe food handling practices. Keeping hands clean, shortening fingernails, wearing clean working garment and hair cover (hair net and cap) are some of the precautions that a food handler must maintain (Kinfe and Abera, 2005). However, none of raw meat street vendors evaluated in our study wore appropriate working garment (over coat).

Jewelries observed especially on vendor's hand were very high (70%) as compared to street food vendors assessed in other areas of Ethiopia such as Mekele (35.7%) and Awassa (28.7%) (Kinfe and Abera, 2005). Thus, the culture might have also its own effect on food safety in relation to jewelries and clothing.

Several studies have shown that skin under rings is more heavily colonized by microorganisms as compared to fingers without rings (Jacobson et al., 1985). Hands are the most important vehicle for the transfer of organisms from faeces, nose, skin or other sites to food (WHO, 1984). Epidemiological studies of Salmonella non-typhi salmonellae, Campylobacter and typhi, Escherichia coli have demonstrated that these organisms can survive on finger tips and other surfaces for varying periods of time and in some cases after hand washing (Pether and Gilbert, 1971; WHO, 1984). Hands are important agents when it comes to transmitting microorganisms and intestinal parasites to food. Therefore, they should always be washed before starting work, immediately after using the bathroom, after handling contaminated material or any other material that could possibly transmit diseases, and whenever necessary (Goh et al., 1993). WHO (1984) also indicated that food vendors should wash their hands in hot soapy water before preparing or touching foods and after using bathroom. However, washing hands was not a common practice by raw meat street vendors in Jijiga town. Absence of clean water and washing facilities in the vending environment and lack of awareness of the vendors about food handling and safety might be possible reasons for the poor handling practice of vendors observed in this study. Van-Kampen et al. (1998) reported that the lack of available hand washing facilities and poor knowledge concerning hygiene were correlated with improper food handling practices of street food vendors in Jakarta, Indonesia. On the other hand, a study conducted by Azanza et al. (2005) in Philippines showed that street vendors had good practice of washing hands during handling foods due to the relatively high level of knowledge in hand washing and the availability of a number of hand washing facilities within the area.

Microbiological analysis

These mean pH values (6.03 and 5.98) for beef and goat meat samples respectively might make these products susceptible to bacteria as well as mold and yeast spoilage (Jay, 1996) and could allow the multiplication of several bacterial pathogens (Ferrari and Torres, 2002). Freese et al. (1998) also indicated that pH above 4.4 and 5.0 would promote growth of pathogens.

Food that is not maintained within the safety temperature zone acts as an incubator for pathogenic bacteria whether the food is raw, partially cooked or fully done (Roller, 1999). According to Van Kampen et al. (1998) and Joseph and Doser (1999), time-temperature abuse was considered particularly potentially hazardous and initiate microbial proliferation. Freese et al. (1998) also indicated that storing foods at a temperature range of 15– 47°C could promote growth of pathogens.

The mean values of total areobic mesophilic counts were relatively higher than that reported by Okonko et al. (2009) for fresh meats sold in Calabar metropolis, Nigeria which had a mean aerobic mesophilic count of 4 log cfu/g. Comparable results with our study were reported by Kumar et al. (2010) for raw beef meat marketed in some parts of Tigray region as samples had areobic mesophilic counts >7log cfu/g. According to Jay (2005), foods kept at ambient temperature, will stimulates the growth of aerobic mesophilic organisms, including most of the pathogens. Thus, high aerobic mesophilic count recorded in this study might reflect the time temperature abuse during displaying the meats for sale. ICMSF (1980) also indicated that high total bacterial count might be attributed to the contamination of the product from different sources or unsatisfactory processing and it may be due to unsuitable temperature during storage.

Although, there are no standards or guidelines regarding the microbial contamination of street vended raw meat in Ethiopia, HPA (2009) indicated that aerobic mesophilic count must be $< 7 \log cfu/g$ for raw meats. However, in this study, the mean counts of raw beef and raw goat meat samples were 8.07 and 7.59 log cfu/g, respectively. These mean values, thus exceeded the typical guideline for aerobic mesophilic count. Total bacterial count is considered an index of quality, which gives an idea about the hygienic measures during processing and helps in the determination of the keeping quality of the product Aberle et al. (2001). Comparable results were also reported by Mukhopadhyay et al. (2009) as most of goat meat and beef meat samples showed aerobic plate counts above 7.00 log cfu/g. Thus, it can be also said that most of the meat samples analyzed in this study were in a condition at which spoilage of meat can occur since they had aerobic mesophilic counts greater than 7log cfu/g (Warriss, 2001).

Comparable Enterobacteriaceae counts were also reported by Khalafalla et al. (1993) for ground beef meat samples. However, the mean values of our samples were

higher than that reported by Mehmet and Hilmi (2005) for ground beef samples in Turkey which had mean count of Enterobacteriaceae and coliforms as low as 3log cfu/g. According to Cathy (1997) and HPA (2009) a raw meat is unacceptable if the categorized as count of Enterobacteriaceae and coliforms is > 4log cfu/g. Based on this, it can be said that both species of meat samples were found to be unacceptable as they had counts of these microbial groups >4log cfu/g. The presence of such high counts in the investigated samples could indicate time/temperature abuse during handling or inadequate storage and displaying conditions during sale. As these microbial groups are safety indicators, the presence of high counts may indicate possible presence of pathogens (Jay, 1996).

Staphylococci counts obtained were comparable with results obtained for ground beef by Tekinsen et al. (1980). However, the mean values of our samples were by far greater than that reported for ground meat obtained at retail (2log cfu/g) (Mehmet and Hilmi, 2005). Khalafalla et al. (1993) also reported lower counts of staphylococci (3log cfu/g) for ground beef meat samples. Staphylococci are common in unprocessed animal products and in products handled by bare hands. The high count of staphylococci in our meat samples indicates the presence of cross contamination, which is usually related to human skin, hand touch, discharge from human and clothing because of faulty handling activities, as they are typical contaminants from hands, clothes and utensils (Postgate, 2000).

The presence of such high counts of lactic acid bacteria (LAB) in this study might indicate improper handling of the meats and inadequate storage conditions. Since lactic acid bacteria (LAB) are spoilers (Jay, 2005), the presence of such high counts in the samples may limit their keeping quality.

In contrast with our finding, Selvan et al. (2007) reported that the mean total viable count was significantly greater in goat meat than other products (chicken and beef) studied in Chennai City, India. Another study in India by Mukhopadhyay et al. (2009) also indicated that coliform count was slightly lower in beef than goat meat samples (mean 5.84 and 6.40 log cfu/g). The presence of low microbial counts in raw goat meat samples as compared to raw beef samples in this study can be explained by the relatively short display time of goat meat at retail due to consumer preference for goat meat. In addition to this, trimming and cutting which usually enhance microbial contamination was minimized during sale of goat meat as compared to beef meat. These differences may be explained by personal hygiene, individual difference in awareness and safe food handling practice, displaying period and intrinsic characteristics of the two meat species.

The aerobic mesophilic flora was dominated by staphylococci followed by enterobacteriacae. Deriba and Mogessie (2001) reported that the microflora of 'kitfo' a

traditional Ethiopian spiced, minced meat samples collected from street vendors in Addis Ababa were also dominated by various bacterial genera, *Staphylococcus* spp.

Isolation of *Staphylococcus* spp. and Enterobacteriaceae from the street vended meat can be worrying because certain strain of these bacteria cause food-borne infections (Mogessie, 1994). Thus, the raw meat samples investigated were under question from food safety point of view.

Salmonella was isolated from 5 meat samples (8.3%) quite far as compared to the study in Jimma town by Tasew et al. (2010) for minced meat in which rate of Salmonella isolation was 2 (1.2%). However, our samples had lower prevalence of salmonella as compared to other findings where rate of isolation from raw meat at retail was 20% in Gaborone, Botswana (Mrema et al., 2006), 9% in raw meat obtained from butchers shop in Awassa, Ethiopia (Mogessie, 1994) and 42% from raw "kitfo" (minced meat) in Addis Ababa (Mezgebu and Mogessie, 1998). The variation in the prevalence of Salmonella contamination could be partly due to differences in sample type, sampling techniques, distribution of Salmonellae in a lot examined and the detection methods employed.

In general, the majority of raw meats considered in this study had high microbial load and in some cases, even pathogens were isolated. Time/temperature abuse during vending on the street or cross contamination due to improper handling of meat or inappropriate vending practices or a combination of these factors might contribute to the presence of high microbial counts. Furthermore, the absence of clean potable water and receptacles, and also the poor sanitary condition of the vending area revealed inadequacies concerning quality and safety of the meats analyzed in this study. Training and inspections are important. Moreover, provision of basic infrastructures and establishment of code of practice for the sector are also recommended.

Conflict of interest

The author(s) have not declared any conflict of interests.

ACKNOWLEDGEMENTS

We acknowledge the Addis Ababa University for sponsoring this study and we would also like to thank the Akililu Lemma Institute of Pathobiology for their permission to use microbiology laboratory. Our sincere thanks also go to Wro. Hirut Assaye for her profound comments on the entire work and the manuscript too.

REFERENCES

- Aberle ED, Forrest J, Gerrard DE, Mills EW (2001). Principles of Meat Science (4th ed). Hunt Publishing Co., Kendall, USA. 106-402.
- Azanza MAP, Gatchalian CF, Ortega MP (2005). Food safety knowledge and practices of street food vendors in a Philippines

university campus. Int. J. Food Sci. Nutr. 51:235-246.

- Bryan FL, Michanie SC, Alvarez P, Paniagua A (1988). Critical control points of street-vended foods in the Dominican Republic. J. Food Prot. 51:373-383.
- Bryan FL, Teufel P, Riaz S, Roohi S, Qadar F, Malik Z (1992a). Hazards and critical control points of vending operations at a railway station and a bus station in Pakistan. J. Food Prot. 55:534-541.
- Bryan FL, Teufel P, Riaz S, Roohi S, Qadar F, Malik Z (1992b). Hazards and critical control points of street-vended chat, a regionally popular food in Pakistan. J. Food Prot. 55: 708-713.
- Bryan FL, Teufel P, Riaz S, Roohi S, Qadar F, Malik Z (1992c). Hazards and critical control points of street-vending operations in a mountain resort town in Pakistan. J. Food Prot. 55: 701-707.
- Cathy S (1997). Development and use of microbiological criteria for foods .Guidance for those involved in using and interpreting microbiological criteria for foods (1st ed.). Food Science and Technology Today 11: 50-120.
- Davey GR (1985). Food poisoning in New South Wales: 1977-1984. Food Technol. 37: 453-456.
- Deriba M, Mogessie A (2001). Bacteriological profile and holding temperatures of street-vended foods from Addis Ababa. Int. J. Environ. Health Res. 11:95 -105.
- Deriba M, Mogessie A (2002). Some street vended foods from Addis Ababa: microbiological and socio-economical considerations. Ethiop. J. Health Sci. 10: 89-100.
- Diane R, Melody G (2003). Practical Food Microbiology. (3rd edn) by Blackwell Publishing Ltd, UK. 91-243.
- El-Sherbeeny MR, Saddik MF, Bryan FL (1985). Microbiological profiles of foods served by street vendors in Egypt. Int. J. Food Microb. 2: 355-364.
- Ferrari CKB, Torres EAFS (2002). Lipid oxidation and quality parameters of sausages marketed locally in the town of Săo Paulo (Brazil). Czech J. Food Sci. 20:144-150.
- Food and Agriculture Organization (FAO) (1995). Street foods. Report of an FAO technical meeting on street foods. Calcutta, India. FAO Food Nutr. 63:2-24.
- Food and Agriculture Organization FAO (1988). Food and nutrition: street foods. Report of an FAO Expert Consultation, Yogyakarta, Indonesia. Food and Agriculture Organisation of the United Nations. Rome; 1988 Jun. Report No. 46: 200-450.
- Freese E, Romero-Abal M, Solomons NW, Gros R (1998). The microbiological safety of typical Guatemalan foods from street vendors, low-income homes and hotels. Int. J. Food Sci. Nutr. 49:27-38.
- Goh K, Lam S, Kumarapathy S, Tan J (1993). A common source foodborne outbreak of 11. Ministe´rio da Sau´de. Portaria no 1428 de 26 de novembro de 1993. Dia´rio Oficial da Unia˜o, Brası´lia, 2 dez. Sec 1/18415
- Gregerson G (1978). Rapid method for distinction of Gram-positive from Gram-negative bacteria. Eur. J. Appl. Microbiol. 5:123-127.
- Health Protection Agency (HPA) (2009). Guidelines for Assessing the Microbiological Safety of Ready-to-Eat Foods. London: Health Protection Agency, November 2009.
- Hugh R, Leifson E (1953).The taxonomic significance of fermentative versus oxidative Gram -negative bacteria. J. Bacteriol. 66: 24-26.
- ICMSF (1980). Micro Organisms In Foods : Sampling for microbiological analysis, Principles and specific applications (2nd edition) . Blackwell Scientific Publications. pp. 543-549.
- Idowu OA, Rowland SA (2006). Oral fecal parasites and personal hygiene of food handlers in Abeokuta, Nigeria. Afr. Health Sci. 6: 160-164.
- Jacobson G, Thiele JE, McCune JH, Farrell LD (1985). Handwashing: Ring-wearing and number of microorganisms. Nurs. Res. 34:186-188.
- Jay JM (1996). Modern food microbiology (5th ed.). New York: Champman and Hall. pp. 603-752.
- Jay JM (2005). Modern Food Microbiology, (7th ed.). Aspen Publishers, Inc. New York. pp. 201-500.

Käferstein F (2003). Food safety as a public health issue for Developing Countries. Focus 10, brief 2 of 17. 2020 Vision for Food, Agriculture

Joseph G, Doser J (1999). How safe are self-serve unpacked foods? J. Environ. Health 61:29-32.

and the Environment. Washington, DC., USA.

- Khalafalla FK, Gergis AF, El-Sherif A (1993). Effect of freezing and mincing technique on microbial load of minced meat. Die Nahrung. 37: 422-427.
- Kinfe Z, Abera K (2005). Assessment of the Sanitary Conditions of Food Establishments in Mekelle Town Ethiop. J. Health Dev. 21:3-11.
- Klontz KC, Timbo B, Fein S, Levy A (1995). Prevalence of selected food consumption and preparation behaviors associated with increased risks of food-borne disease. J. Food Prot. 58:927-930.
- Kovacs N (1956). Identification of Pseudomonas pyocyanae by the oxidase reaction. Nature 178:703.
- Kumar A, Kebede E, Kassaye E (2010). Evaluation of quality of beef produced and sold in parts of Tigray Region of Ethiopia. Trop. Anim. Health Prod. 42:445-449.
- Mehmet E, Hilmi Y (2005). Microbiological Quality of Raw Meat Balls: Produced and Sold in the Eastern of Turkey. J. Nutr. Pak. 4: 197-201.
- Mezgebu T, Mogessie A (1998). Microbial load and incidence of Salmonella species in 'kitfo', traditional Ethiopian spiced, minced meat dish. Ethiop. J. Hlth. Dev. 12:135-140.
- Mogessie A (1994). Microbial flora and incidence of some foodborne pathogens on fresh beef from butcher's shops in Awassa, Ethiopia. Bull. Anim. Health Prod. Afr. 42:273-277.
- Mogessie A (1995). Bacteriological profile and holding temperature of ready -to- serve food items in an open market in Awasa, Ethiopia. Trop. Geogr. Med. 47: 1-4.
- Mrema N, Mpuchane S, Gashe BA (2006). Prevalence of *Salmonella* in raw minced meat, raw fresh sausages and raw burger patties from retail outlets in Gaborone. Food Control 17: 207-212.
- Muinde OK, Kuri E (2005). Hygienic and sanitary practices of vendors of street foods in Nairobi, Kenya. Afr. J. Food Agric. Nutr. Dev. 5: 1-14.
- Mukhopadhyay HK, Pillai RM, Pal UK, Ajay VJ (2009). Microbial quality of fresh chevon and beef in retail outlets of Pondicherry, India . J. Vet Anim. Sci. 5:33-36.
- Ohiokpehai O (2003). Nutritional aspects of street foods in Botswana. Pak. J. Nutr. 2:76-81.
- Okonko IO, Ogun AA, Adejoye OD, Ogunjobi AA, Nkang AO, Adebayo-Tayo BC (2009).Hazards analysis critical control points (HACCP) and Microbiology qualities of Sea-foods as affected by Handler's Hygiene in Ibadan and Lagos, Nigeria. Afr. J. Food Sci. 3:035-050.
- Pether JVS, Gilbert RJ (1971). The survival of *Salmonellas* on fingertips and transfer of the organisms to food. J. Hyg. 69: 673-681.
- Postgate JR (2000). Microbes and Man. Oxford, UK; New York: Cambridge University Press. 1-373.
- Roller S (1999). Physiology of food spoilage organisms. Int. J. Food Microbiol. 50: 151-153.
- Selvan P, Narendra BR, Sureshkumar S, Venkataramanujam V (2007). Microbial quality of retail meat products available in Chennai City. Am. J. Food Technol. 2:55-59.

- Smith HV, Rose JB (1998). waterborne cryptosporidiosis current status. Parasitol. Today 14:14-22.
- Tasew H, Alemseged A, Getenet B, Solomon GS (2010). Microbiological flora and food borne pathogens on minced meat and their susceptibility to anti-microbial agents. Ethiop J Health Sci. 20:3-10.
- Tekinsen CO, Yurtyeri A. Mutluer B (1980). Bacteriological quality of ground meat in Ankara. J. Vet. Med. Ankara Univ. 27:45-63.
- Umoh VJ, Dangana A, Umoh JU (1984). Isolation of Yersinia enterocolidca from milk and milk products in Zaria. Nigeria. Int. J. Zoonoses 11:223-228.
- Umoh VJ, Dangana A, Umoh JU (1985).Contamination of infant powdered milk in use with enterotoxigenic Staphylococcus *aureus*. Food Microbiol. 2: 255-261.
- Unnevehr L, Hirschhorn N (2000). Food safety issues in the developing world. World Bank Washington, D.C., USA. Report No. 469:311-321.
- Van Kampen J, Gross R, Schultnik W, Usfar A (1998). The microbiological quality of street foods in Jakarta as compared to home - prepared foods and from tourist hotels. Int. Food Sci. Nutr. 49:17-26.
- Warriss PD (2001). Meat Science an Introductory Text (2nd Edn.) .CABI Publishing Publishing. pp. 120-203.
- WHO (1984). Technical Report, the role of food safety in health and development: Report of a Joint FAO/WHO Expert Committee on Food Safety Series, No. 705.
- World Health Organization (WHO) (1996). Essential Safety Requirements for Street-vended Foods. Revised edition, WHOIFNUIFOSI96.7. Genev. A Major Risk Factor for Diarrhea and Associated Malnutrition. Bull. World Health Org. 71:79-92.
- Yah SC, Nwinyi CO, Chinedu NS (2009). Assessment of bacteriological quality of ready to eat food (Meat pie) in Benin City metropolis Nigeria. Afr. J. Microbiol. Res. 3(6):390-395.

African Journal of Microbiology Research

Related Journals Published by Academic Journals

African Journal of Biotechnology
 African Journal of Biochemistry Research
 Journal of Bacteriology Research
 Journal of Evolutionary Biology Research
 Journal of Yeast and Fungal Research
 Journal of Brewing and Distilling

academiclournals