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Bacteriological and Molecular Studies on *Serratia Marcescens* causing Bovine Mastitis Marawan A. Marawan * and Asmaa A. El-gendy **

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ABSTRACT

Yerratia marcescens (S. marcescens) is considered an important opportunistic pathogen and has been found to be associated with outbreaks of mastitis among dairy ruminants. Like other various bacterial diseases, multidrug resistance strains pose a serious threat to public health and are considered a great obstacle during treatment of such field problems. The aim of this study was to investigate Serratia species, antimicrobial susceptibility, and presence of resistance genes of S. marcescens isolates associated with mastitis cases. Eighty mastitic milk samples were collected from different dairy farms located in Menoufia Province. S. marcescens was isolated and confirmed in 6 mastitis milk samples out of 80 (7.5%) using culturing and gram staining .VITEK 2 (bioMérieux) System was used to complete the identification of S. marcescens. The cultured bacteria were then purified for detection of resistance gene. Further, the resistance of these isolates against antibiotics had been investigated by disk diffusion method and the findings revealed that the isolated strains are sensitive to some antibiotic as cefepime $(6 \land 6, 100\%)$, ceftazidime $(5 \land 6, 83.3\%)$, cefotaxime (4\6, 66.6%), Amoxicillin-Clavulanic acid (6\6,100%), whereas wide differences were observed in the patterns of resistance among the bacterial isolates in particular, Ampicillin (6\6, 100%), chloramphenicol (5\6, % 83.3%), imipenem (4\6, 66.6%). Additionally, The results of resistance genes detection in S. marcescens revealed that the most prevalent resistant genes encodings β -Lactams were bla*TEM* (6\6,100%), bla CTX-M (6\6, 100%),CYM(CIT) (4 6,66.6%), genes encoding chloramphenicol floR (5 \6, % 83.3%), and genes encoding carbapenemases bla IMP (6\6,100%), OXA (2\6, 33.3%), SME (2|6, 33.3%).

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INTRODUCTION.

According to Yang et al. (2018), one of the most common and expensive diseases affecting the dairy cattle business is bovine mastitis. According to Zadoks et al. (2001), the etiopathology of this illness typically involves three variables: exposure to microbes, host defense systems, and environmental factors. Serratia marcescens, which is regarded as an important opportunistic pathogen and has been found to be associated with outbreaks of mastitis in dairy cows, is considered an environmental pathogen that has received little attention despite significant progress being made in controlling contagious mastitis pathogens through improved milking hygiene (Friman et al. 2019).

Serratia species are rod-shaped Gramnegative bacteria, which were recently classified under the new family of the order Enterobacterales: Yersiniaceae (Adeolu et al. 2016). It is aerobic, motile and produces a red water insoluble pigment besides some heat resistant enzymes (Bi et al., 2016). Approximately 20 different Serratia spp. have described been (Parte AC 2018). Serratia spp., in particular S. marcescens, and Serratia liquefaciens are ubiquitous environmental bacteria capable of causing opportunistic infections in humans and many animal species (Mahlen, 2011) including mastitis in dairy cows (Schukken et al. 2012) as well as they are capable of causing spoilage at different points of milk processing (Desimo et al. 2014).

Antibiotic therapy is the main method for treating most of the bacterial infections including *S. marcescens* (Tavares-Carreon et al. 2023). However, the therapeutic effectiveness has been attenuated by emerging resistant strains (Iguchi et al. 2014). As a result, the common multidrug-resistant nature of *S. marcescens* complicates the treatment of its infections (González-Juarbe et al. 2015).

Indeed, lines of studies revealed an alarming increase in *S. marcescens* resistance to the commonly used beta-lactams (Abbas et al. 2020). Antimicrobial resistance of *S. marcescens* is mainly attributed to different resistance determinants, such as genes of extended-spectrum beta-lactamase (eg, bla *SHV*, *blaTEM*, and bla *CTX*) and carbapenemases (eg, bla *OXA-48*, *KPC*, and *NDM*) for betalactam resistance and bacterial effector proteins (eg, *sdeB*, *sdeD*, and *sdeY*) for multidrug resistance. Moreover, the pathogenicity of *S*. *marcescens* is mediated by an arsenal of virulence factors including hemolysin, lipase, protease, prodigiosin, and motility (Khayyat et al. 2021).

Accordingly, the aim of the current study is to detect the *S. marcescens* antibiotic resistance besides identification of resistance genes associated with *S. marcescens* bovine mastitis that might pave the way for controlling such crucial field problem especial in dairy industry.

2. MATERIALS and METHODS

2.1. Ethical approval

All procedures, including the handling and collection of milk samples, were approved by the Benha University ethical committee for animal studies (BUFVTM 05-06-23). The owners of cattle were informed, and permission was taken from them for collection of milk samples.

2.2. Sample Collection

In this study, 80 milk samples of bovine mastitis were collected from different commercial dairy herds in Menoufia Province. Clinical examinations of the udder of lactating cows were conducted according to Massé et al., 2020. In short, the symmetry of one quarter of each cow's udder was checked. Then, possible fibrosis, inflammation, swelling, visible damage, tissue atrophy, and swelling of lymph nodes was tested through palpation. The viscosity and appearance of milk secretion from each quarter segment for the presence of clots, thin sections, blood, and water secretions, in order to determine clinical mastitis (Tezera and Aman 2021). As well as apparently normal milk was subjected to CMT for detection of subclinical mastitis as described by Balamurugan and Ranjith (2018). Eighty samples (63 and 17 from clinical and subclinical) respectively were collected aseptically and transmitted in cold condition .

Prior to milk samples collection, the udder was washed directly with tap water to remove dirt then dry with clean towel, the teat dip in Iodine solution 1:1000 and leave to dry than the teat was dip in 70% alcohol than dry, before sample taken one or two streams of milk discarded. Milk was collected in sterile vial (test tube 10 ml). These samples were transferred in an ice box directly within an hour to Animal health research institute to be bacteriologically examined with a minimum delay.

2.3. Identification of Serratia marcescens

2.3.1 Cultural and microscopical characteristics

The examined milk samples were streaked into nutrient agar then cultured on Mac-Conkey agar, Xylose lysine deoxycholate agar by streaking method.

Further, light microscopy and gram staining were carried out to differentiate whether the bacteria are Gram-negative or Grampositive. The isolates were subcultured twice and the fresh clinical isolates were subcultured once on MacConkey agar plates for 18 to 24 h at 37°C, before they were tested in the VITEK 2 system. A bacterial suspension was adjusted to a McFarland standard of 0.5 in 2.5 ml of a 0.45% sodium chloride solution by using a Densicheck (bioMérieux). Afterward, the VITEK 2 system ID-GNB card and the bacterial suspension were manually loaded into the VITEK 2 system (bioMérieux, Marcy l'Etoile, France). The VITEK 2 system reported the results automatically with software release 2.01.

2.3.2 Antimicrobial Susceptibility Testing

Antimicrobial susceptibility of *S. marcescens* to 12 antimicrobial agents was determined via disk diffusion method on Mueller–Hinton agar (MHA; Oxoid, United Kingdom) according to the Clinical and Laboratory Standards Institute (CLSI, 2018).

Antimicrobial agents tested in this study include Ampicillin (10 μ g), cefepime (30 μ g) ceftazidime (30 μ g), cefotaxime (30 μ g),

imipenem (10 µg), gentamicin (10 µg), tetracycline (30 µg), levofloxacin (5 µg), chloramphenicol (30 µg), trimethoprim/ sulfamethoxazole (1.25/23.75 µ \cdot) Amoxicillin-Clavulanic acid (20/10 µg) and Amikacin (30 µg).

Escherichia coli ATCC 25922 used as quality control strain. The results were logged as susceptible or resistant by the measurement of Diameter of the inhibition zone in millimeter. Multidrug resistance was defined as isolates that were resistant to at least 3 classes of the tested antimicrobial agents. (Drieux et al. 2008)

2.3.3 Detection of resistance genes

2.3.3.1 DNA extraction.

DNA extraction from samples was performed using the QIAamp DNA Mini kit (Qiagen, Germany, GmbH) with modifications from the manufacturer's recommendations. Briefly, 200 μ l of the sample suspension was incubated with 10 μ l of proteinase K and 200 μ l of lysis buffer at 56°C for 10 min. After incubation, 200 μ l of 100% ethanol was added to the lysate. The sample was then washed and centrifuged following the manufacturer's recommendations. Nucleic acid was eluted with 100 μ l of elution buffer provided in the kit.

2.3.3.2 Oligonucleotide Primer.

Primers used were supplied from Metabion (Germany) are listed in table (1).

2.3.3.3 PCR amplification.

Primers were utilized in a 25- μ l reaction containing 12.5 μ l of EmeraldAmp Max PCR Master Mix (Takara, Japan), 1 μ l of each primer of 20 pmol concentrations, 5.5 μ l of water, and 5 μ l of DNA template. The reaction was performed in an Applied bio system 2720 thermal cycler.

2.3.3.4. Analysis of the PCR Products.

The products of PCR were separated by electrophoresis on 1.5% agarose gel (Applichem, Germany, GmbH) in 1x TBE buffer at room temperature using gradients of 5V/cm. For gel analysis, 15 μ l of the products was loaded in each gel slot. A generuler 100 bp ladder (Fermentas, Germany) was used to

determine the fragment sizes. The gel was photographed by a gel documentation system (Alpha Innotech, Biometra) and the data was analyzed through computer software.

Table 1. Primers see	quences, target gen	es, amplicon sizes an	d cycling conditions.
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Target gene	Primers sequences	Amplified segment (bp)	Primary denatur- ation	Amplification (35 cycles)			Final exten- sion	Reference
				Second- ary dena- turation	Anneal- ing	Exten- sion		
bla _{TEM}	ATCAGCAATAAAC- CAGC	516	94°C	94°C	54°C	72°C	72°C	Colom <i>et al.</i> , 2003
	CCCCGAAGAAC- GTTTTC		5 min.	30 sec.	40 sec.	45 sec.	10 min.	2003
BlaCTX- M	ATG TGC AGY ACC AGT AAR GTK ATG GC	593	94°C 5 min.	94°C 30 sec.	54°C 40 sec.	72°C 40 sec.	72°C 10 min.	Archambault <i>et al</i> , 2006
	TGG GTR AAR TAR GTS ACC AGA AYC AGC GG							
floR	TTTGGWCCGCTMT- CRGAC	494	94°C 5 min.	94°C 30 sec.	54°C 40 sec.	72°C 45	72°C 10	Doublet <i>et al.</i> , 2003
	SGAGAARAAGAC- GAAGAAG					sec.	min.	
CIT (CMY2)	TGG CCA GAA CTG ACA GGC AAA	462	94°C 5 min.	94°C 30 sec.	55°C 40 sec.	72°C 45	72°C 10	Pérez-Pérez and Hanson, 2002
	TTT CTC CTG AAC GTG GCT GGC					sec.	min.	
blaIMP	CATGGTTT-	488	94°C 5 min.	94°C 30 sec.	53°C 40 sec.	72°C 45	72°C 10	Xia et al., 2012
	GGTGGTTCTTGT ATAATTTGGCG- GACTTTGGC					sec.	min.	Xia et al., 2012 Xia et al., 2012
OXA	TTTTCTGTTGTTT- GGGTTTT	519	94°C 5 min.	94°C 30 sec.	48°C 40 sec.	72°C 45	72°C 10	
	TTTCTT- GGCTTTTATGCTTG					sec.	min.	
SME	AAC- GGCTTCATTTTTGTT TAG GCTTCCGCAA- TAGTTTTATCA	820	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 50 sec.	72°C 10 min.	

3. RESULTS

3.1. Cultural and microscopical characteristics

The results of bacterial isolation revealed that out of 80 milk samples, six samples belonged to *Serratia marcescens* representing 7.5 %. Further, the culture characters showed different morphological features of bacteria on different media, after incubation at 37 °C for 24 hours, *S. marcescens* is generally easy to characterize and differentiate from other *Enterobacteriaceae* as most strains are red pigmented on nutrient agar as showed in Figure (1), On MacConkey agar, colonies were lactose fermenter and appear red due to the ability of *Serratia marcescens* to produce pigment as showed in Figure (2). Microscopic examination of the isolated bacteria showed Gram negative rods. A total of 6 bacterial isolates with gram-negative bacillus-like morphology from positive subcultures were investigated by VITEK 2 system which identified all tested isolates as *S. marcescens*, the analysis time was about 6.30 hours with probability rate 99%.

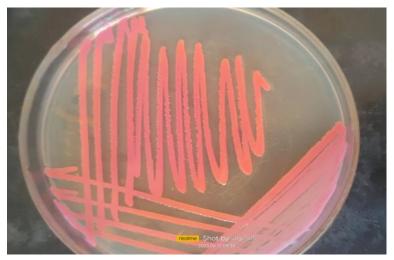


Figure (1): Serratia marcescens on nutrient agar showing red pigment due to prodigiosin production.



Figure (2): Serratia marcescens on MacConkey agar colonies appeared are lactose fermenter and appear red colonies.

3.2. Antibiotics Susceptibility Testing.

The results of antibiotics susceptibility test showed that *Serratia marcescens* were resistant to Ampicillin ($6\6$, 100%), chloramphenicol (5 $\6$, % 83.3%), imipenem ($4\6$, 66.6%), tetracycline ($3\6$, 50%) were ineffective against most of the bacterial isolates tested. However, tested isolates were susceptible to cefepime (6 \6,100%), ceftazidime (5\6, 83.3%), cefotaxime (4\6, 66.6%), and Amoxicillin-Clavulanic acid (6\6,100%). While intermediate to gentamicin (5\6, 83.3%), trimethoprim/ sulfamethoxazole (4\6, 66.6%), levofloxacin (6 \6, 100%) and Amikacin (3\6, 50%). Besides, 4 (4/6, 66.6%) of *S. marcescens* isolates were found to be multidrug resistance as shown in **Figure (3) and table (2).**

 Table 2. Results of antibiotic resistance expressed as numbers and present of sensitive, Intermediate and resistant antibiotic to *S. marcescens*.

Antibiotic	Sens	itive	Interm	ediate	Resis	Resistant	
	Number	%	Number %		Number	%	
Ampicillin (10 µg)	0	0 %	0	0 %	6	10 %	
Chloramphenicol	1	16.6%	0	0 %	5	83.%	
(30 µg) ¹							
Imipenem (30 µg)	2	33.3%	0	0 %	4	66.%	
Tetracycline(30 µg)	1	16.6 %	2	33.3%	3	50%	
Cefepime (30 µg)	6	100%	0	0%	0	0%	
Ceftazidime (30 µg)	5	83.3%	1	16.6 %	0	0%	
Cefotaxime (30 µg)	4	66.6%	2	33.3%	0	0%	
Amoxicillin-	6	100%	0	0%	0	0%	
Clavulanic acid (30							
μg)							
Gentamicin (30 µg)	1	16.6 %	5	83.3%	0	0%	
Trimethoprim/	2	33.3%	4	66.6%	0	0%	
sulfamethoxazole							
(30 µg)							
Levofloxacin(5µg)	0	0%	6	100%	0	0%	
Amikacin (30 µg)	3	50%	3	50%	0	0%	
120%							
100%							
80%				_			
					sensitiv	/A	
60%							
40%					interm		
20%					■ Resista	nt	
20/0							
0%							
10HB	OHE OHE	ue 20	48 OHE OH	2 OHE DEB	5.		
illin to col	3° en 13° inel30	ne si ne isi	mels 12012	cin is notato			
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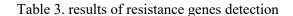
Figure (3) Results of antibiotics Susceptibility test in 6 isolates of S. marcescens

3.3. Screening of resistance genes

Resistance encoding genes of the *S. marcescens* isolates had been detected Table(3). The results of resistant genes encoding extended-spectrum beta-lactamase showed that all *S. marcescens* isolates carried *bla TEM* (6 (6,100%), *bla CTX-M* (6(6,100%)) and *CIT*

(*CMY*)(4\6,6.66%). as shown in **figures (4,5, 6)**. The results of resistance gene encoding chloramphenicol *floR* (5\6, 83.3%), as shown in **figures (7)**. Finally, the results of genes encoding carbapenemases *bla IMP* (6\6,100%), SME (2\6, 33.3%), OXA (5|6, 83.3%) as shown in **figures (8, 9 and 10)**.

Sample	blaTEM	BlaCTX-M	floR	blaIMP	OXA	CIT (CMY2)	SME
1	+	+	-	+	+	+	-
2	+	+	+	+	-	+	+
3	+	+	+	+	+	-	-
4	+	+	+	+	-	+	+
5	+	+	+	+	-	+	-
6	+	+	+	+	-	-	-



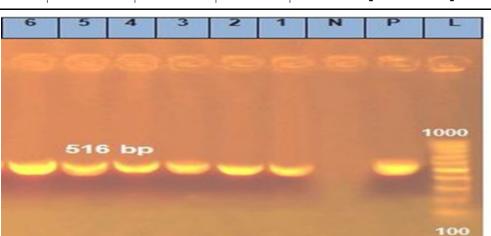


Figure (4): Results of resistant genes encoding extended-spectrum beta-lactamase (*blaTEM*). P: positive control at (516 bp), N: negative control. Lanes (1-6) represent samples and all lanes are considered positive.

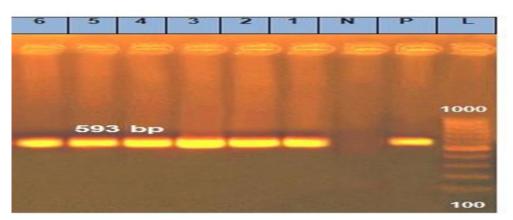


Figure (5): Results of resistant genes encoding extended-spectrum beta-lactamase (*CTX-M*) P: positive control at (593 bp), N: negative control. Lanes (1-6) represent samples and all lanes are considered positive.

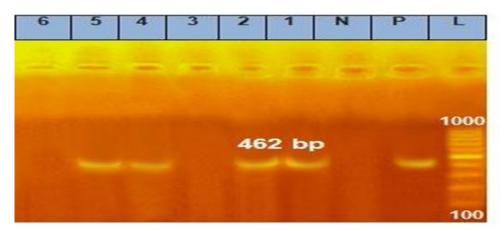


Figure (6): Results of resistant genes encoding extended-spectrum beta-lactamase *CIT(CMY)*. P: positive control at (462 bp), N: negative control. Lanes (1-6) represent samples and lanes 1,2,4,5 are considered positive.

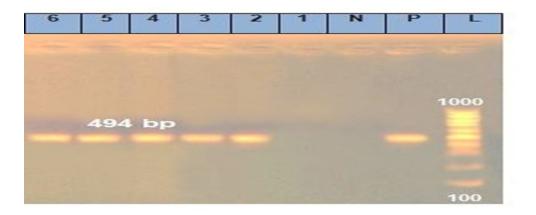


Figure (7): Results of resistance genes encoding chloramphenicol (*floR*). P: positive control at (494 bp), N: Negative control. Lanes (1-6) represent samples and lanes 2, 3, 4, 5, 6 considered positive

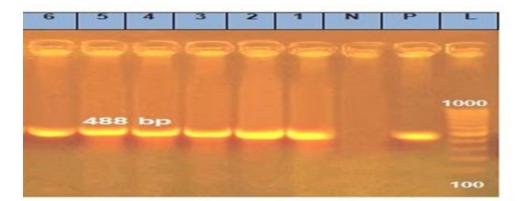


Figure (8): Results of resistance genes encoding carbapenemases (*IMP*). P: positive result at (488 bp), N: negative control. Lanes (1-6) represent samples and all lanes are considered positive.

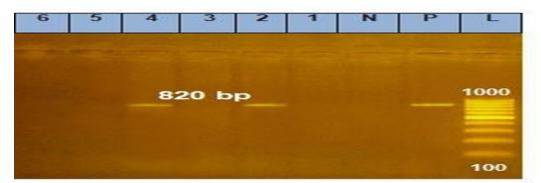


Figure (9): Results of resistance genes encoding carbapenemases (*SME*). P: positive control at (820 bp), N: negative control. Lanes (1-6) represent samples lans 2, 4 are considered positive.

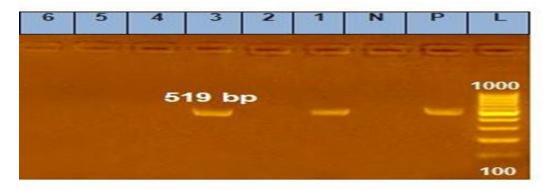


Figure (10): Results of resistance genes encoding carbapenemases (*OXA*). P: positive control at (519 bp), N: Negative control. Lanes (1-6) represent samples and lanes 1, 3 are considered positive

DISCUSSION.

Serratia marcescens is considered an important opportunistic pathogen and has been found to be associated with outbreaks of mastitis in dairy cows. In the current study, bacterial isolation of 80 milk samples showed that six samples were belong to Serratia marcescens represented 7.5% from milk samples, this finding higher than Di Guardo et al. (1997) who found that 4 out of 120 (3%) cow affected by Serratia marcescens mastitis and a previous study reported in China that 1.5% of the bovine mastitis samples were positive for S. marcescens in bovine mastitis (Bi et al. 2016). Also higher than Friman et al. (2019) who revealed that 45 S. marcescens isolate out of 1000 (4.5%) reported in Korea, but lower than 35-39% in outbreaks of mastitis in Finland

Antibiotic therapy is the chemotherapy of choice for treating infections caused by *S. marcescens.* However, owing to the global problem of antibiotic resistance, the therapeu-

tic effectiveness of antibacterial agents has been diminished. The prolonged and extensive use of these antimicrobials on dairy farms may be the cause of the high resistance (Swinkels et al. 2015). Additionally, a rise in drugresistant strains can result from increased exposure to antimicrobial medications (Dos Santos et al. 2016). The chloramphenicolresistant bacteria that farm veterinarians carry are subsequently transferred to Serratia marcescens by plasmid-mediated transfer. Farm veterinarians may be exposed to chloramphenicol settings The last line of defense among lactam antibiotics for treating infections brought on by multidrug-resistant Gramnegative bacteria is carbapenems. Unfortunately, with the increased clinical usage of carbapenems, carbapenem-resistant bacteria have arisen and now pose a serious threat to human health. (Chen et al. 2022). The results of antibiotics susceptibility test showed that Serratia marcescens were resistant to Ampicillin (6\6, 100%), chloramphenicol (4\6, %

66.6), imipenem (4\6, 66.6%), tetracycline (3 \6, 50%), similar results were reported and revealed that both *S. marcescens* and other Enterobacteriaceae isolates from bovine mastitis frequently exhibited resistance to these antimicrobials (Ahmed & Shimamoto 2011; Hawkey & Choy 2015 and Yang et al. 2018). Moreover, Wilfert et al. (1970) showed that Serratia Spp. was highly resistant to Cephalosporin and the Polymyxin *B*, but all of the isolates were susceptible to Gentamicin.

Regarding the genotypic resistance profiles of S. marcescens, the resistant genes against β -lactams, chloramphenicol and carbapenem were detected. In this study we found that all S. marcescens isolates carried blaTEM combined with bla CTX-M and showed resistance to at least one of the tested β -lactams. Similarly, *floR* gene was found in all of chloramphenicol-resistant isolates. These findings were consistent with other reports that these genes were frequently observed in Enterobacteriaceae isolates from food producing animals in many countries (Cao et al. 2020), (Bischoff et al. 2005). On the other hand, Carbapenem resistance, mediated by acquired carbapenemase genes, has been increasingly reported (Lee et al. 2005), nearly Similar results were obtained in our study in which IMP, OXA and SME genes represent (100%, 33.3%, 33.3%) respectively. In addition the results of antibiotics susceptibility testing is closely related with resistance genes screening, All isolates were resistant to Ampicillin (100%), and the genes encoding β -lactamase *blaTEM*, *bla CTX-M* and CIT (CMY2) were found with percentage (100%, 100%, 66.6%) respectively. Besides that, 5 isolate were resistant to chloramphenicol (83.3%) and the *floR* gene was also detected in (83.3%) of isolates. Carbapenem like imipenem was found resistant with percentage of 66.6%, this is nearly close to detected genes (blaIMP, OXA,SM,) (100%, 33.3%,33,3%).

CONCLUSION

n conclusion, the occurrence of *S. marcescens* causing bovine mastitis is considered low in comparison with other Enterobacteriace, but the high frequencies of phenotypic and genotypic resistance to Betalactam, carbapenemases, chloramphenicol as well as the multidrug resistance remind the authorities to pay special attention to the antimicrobial agents used in dairy industry. Importantly, the emergence of multi-drug resistant *S. marcescens* poses an alarming threat to public health due to the transmission of resistant determinants through the food chain. Further investigations are to be conducted to under-stand the pathogenicity of the individual virulent factor.

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REFERENCES

- Abbas HA, Hegazy WA. 2020. "Repurposing anti-diabetic drug "Sitagliptin" as a novel virulence attenuating agent in *Serratia marcescens*". PLoS One. 15(4): e0231625. doi:10.1371journal.pone.0231625.
- Adeolu M, Alnajar S, Naushad S, Gupta RS. 2016. "Genome-based phylogeny and taxonomy of the 'Enterobacteriales': proposal for Enterobacterales ord. Nov. Divided into thefailies *Enterobacteriaceae*, *Erwiniaceae* fam. Nov., *Pectobacteriaceae* fam. Nov., *Yersiniaceae* fam.Nov., *Hafniaceae* fam. Nov., *Morganellaceae* fam. Nov., and *Budviciaceae* fam. Nov. Int J Syst Evol Microbial. (12):5575–99.
- Ahmed AM, Shimamoto T. 2011 . "Molecular characterization of antimicrobial resistance in Gram-negative bacteria isolated from bovine mastitis in Egypt." Microbial Immunol. 2011; 55(5):318–327. doi:10.1111/j.1348-0421.2011.00323.x
- Archambault M, Petrov P, Hendriksen RS, Asseva G, Bangtrakulnonth A, Hasman H, Aarestrup FM. 2006. Molecular characterization and occurrence of extendedspectrum beta-lactamase resistance genes among Salmonella enterica serovar Corval-

lis from Thailand, Bulgaria, and Denmark. Microb Drug Resist. 2006 Fall;12(3):192-8.

- Balamurugan S, Ranjith R. 2018. Cold metal transfer (CMT) technology – A review. International Journal of Pure and Applied Mathematics (119): 2185-2196
- Bi, Y, Wang YJ, Qin Y, Guix Vallverdú R, Maldonado GJ, Sun W. 2016. Prevalence of Bovine Mastitis Pathogens in Bulk Tank Milk in China. PLoS ONE 11(5): e0155621.
- Bischoff KM, White DG, Hume ME. 2005."The chloramphenicol resistance gene *cmlA* is disseminated on transferable plasmids that confer multiple-drug resistance in swine Escherichia coli". FEMS Microbial Lett. 2005; 243(1):285–291. doi:10.1016/j.femsle.2004.12.01.
- Cao Z, Xu J, Gao M. 2020. "Prevalence and antimicrobial resistance of Salmonella isolates from goose farms in Northeast China". Iran J Vet Res 21 (4): 287 Doi: 10.1186/2047-2994-4-s1-p14.
- Chen D, Xiao L, Hong D. 2022. Epidemiology of resistance of carbapenemaseproducing Klebsiella pneumoniae to ceftazidime-avibactam in a Chinese hospital. J Appl Microbiol. 2022; 132(1):237– 243. doi:10.1111/jam.1516
- Clinical and Laboratory Standards Institute 2018. Performance standards for dilution antimicrobial susceptibility tests for bacteria that grow aerobically, 11th ed CLSI standard M07 Clinical and Laboratory Standards Institute, Wayne, PA.
- Colom K, Pèrez J, Alonso R, Fernández-Aranguiz A, Lariňo E, Cisterna R. 2003. Simple and reliable multiplex PCR assay for detection of *bla*_{TEM},*bla*_{SHV} and *bla*_{OXA-1} genes in Enterobacteriaceae. FEMS Microbiology Letters 223 (2003) 147-151.
- Dos Santos FF, Mendonça LC, de Lima Reis DR. 2016. Presence of mecA-positive multidrug-resistant Staphylococcus epidermidis in bovine milk samples in Brazil. J Dairy Sci. 2016; 99(2):1374–1382.
- Decimo M, Morandi S, Silvetti T, Brasca M. 2014. Characterization of Gram-negative psychotropic bacteria isolated from Italian bulk tank milk. J Food Sci. 79: M2081–90.

- Di Guardo G, Battisti, A, Agrimi U, Forletta R, Reitano ME, Calderini P. 1997. "Pathology of Serratia marcescens mastitis in cattle", Zentralbl Veterinarmed B. 1997; 44(9):537-463.
- Doublet B, Lailler R, Meunier D, Brisabois A, Boyd D, Mulvey MR, Chaslus-Dancla E, Cloeckaert A. 2003. Variant *Salmonella* Genomic Island 1 Antibiotic Resistance Gene Cluster in *Salmonella enteric* Serovar Albany. Emerging Infectious Diseases Vol. 9, No. (5): 585-591.
- Drieux L, Brossier F, Sougakoff W, Jarlier V. 2008. Phenotypic detection of extendedspectrum β-lactamase production in *Enterobacteriaceae*: review and bench guide. *Clin Microbiol Infect* 2008;14(Suppl 1): 90–103.
- Friman MJ, Eklund MH, Pitkälä AH. 2019. Description of two Serratia marcescens associated mastitis outbreaks in Finnish dairy farms and a review of literature. Acta Vet Scand.; 61(1):1–11. doi:10.1186/s13028-019-0488-7.
- González-Juarbe N, Mares CA, Hinojosa CA. 2015. Requirement for Serratia marcescens cytolysin in a murine model of hemorrhagic pneumonia. Infect Immun. 83(2):614–624. doi:10.1128/IAI.01822-14.
- Hawkey S, Choy A. 2015. "Serratia marcescens: a Rare Cause of Recurrent Implantable Cardioverter Defibrillator Site Infection." Clin Res Cardio 2015; 2015:1–3. doi:10.1155/2015/64129.
- Iguchi A, Nagaya Y, Pradel E. 2014. Genome evolution and plasticity of Serratia marcescens, an important multidrug-resistant nosocomial pathogen. Genome Biol Evol. 2014; 6(8):2096–2110. doi:10.1093/gbe/ evu160.
- Khleen k, Charlene H, John Maurer Stephan, David G. White M. Lee D. 2000. Detection of Florfenicol Resistance Genes in *Escherichia coli* Isolated from Sick Chickens Department Medical Microbiology and Parasitology, The University of Georgia, Athens,
- Khayyat AN, Hegazy WA, Shaldam MA. 2021. Xylitol inhibits growth and blocks

virulence in Serratia marcescens. Microorganisms. 2021; 9 (5):1083. Doi: 10.3390/ microorganisms 9051083.

- Lee K, Yum JH, Yong D. 2005." Novel acquired metallo-β-lactamase gene, *bla SIMl*, in a class 1 integron from *A cinetobacter baumannii* clinical isolates from Korea". Antimicrob Agents Chemother. 2005; 49 (11):4485–4491
- Mahlen SD. 2011. *Serratia* infections: from military experiments to current practice. Clin Microbial Rev. 2011; (24):755–91.
- Massé J, Dufour S, Archambault M. 2020 Characterization of Klebsiella isolates obtained from clinical mastitis cases in dairy cattle. J Dairy Sci. 2020; 103(4):3392–3400. doi:10.3168/jds.2019-17324.
- Muellner P, Zadoks RN, Perez AM, Spencer SE, Schukken YH, French NP. 2001." Integration of molecular tools into veterinary and spatial epidemiology". Spat Spatiotemporal Epidemiol. 2001; (3):159–71.
- Parte AC. 2018. LPSN—List of prokaryotic names with standing in nomenclature. LPSN, 2018. http://www.bacterio.net/serratia.html.
- Pérez-Pérez FJ, Hanson ND. 2002. Detection of Plasmid-Mediated AmpC ß-Lactamase Genes in Clinical Isolates by Using Multiplex PCR. JOURNAL OF CLINICAL MI-CROBIOLOGY, June 2002, p. 2153–2162.
- Ruegg PL, Guterbock WM, Holmberg CA, Gay JM, Weaver LD, Walton RW. 1992 "Microbiologic investigation of an epizootic of mastitis caused by *Serratia marcescens* in a dairy herd". J Am Vet Med Assoc. 1992; (200):184–9.
- Schukken Y. 2012. the "other" Gram-negative bacteria in mastitis. Vet Clin N Am Food Anim Pract. 2012; (28):239–56.
- Swinkels, J., Hilkens, A., Zoche-Golob, V., 2015 Social influences on the duration of antibiotic treatment of clinical mastitis in dairy cows. J Dairy Sci 2015:98(4):2369-2380.
- Tavares-Carreon F, De Anda-Mora K, Rojas-Barrera IC, Andrade A. 2023. "Serratia marcescens antibiotic resistance mechanisms of an opportunistic pathogen": a liter-

ature review. PeerJ. 2023; 11:e14399. doi:10.7717/peerj.14399.

- Tezera M, Aman Ali E. 2021. "Prevalence and associated risk factors of Bovine mastitis in dairy cows in and around Assosa town", Benishangul-Gumuz Regional State, Western Ethiopia. Veter Med Sci. 2021; 7 (4):1280–1286. doi:10.1002/vms3.454
- Wilfert JN, Barrett FF, Ewing WH, Finland M, Kass EH. 1970 Serratia marcescens: biochemical, serological, and epidemiological characteristics and antibiotic susceptibility, Appl Microbial. 1970; 19(2):345-52.
- Yang F, Zhang S, Shang X. 2018. "Characteristics of quinolone-resistant *Escherichia coli* isolated from bovine mastitis in China." J Dairy Sci. 2018; 101(7):6244– 6252. doi:10.3168/jds.2017-14156
- Yong, D, Walsh TR, Bell J, Ritchie B, Pratt R, Toleman MA. 2007. 47th Interscience Conference on Antimicrobial Agents and Chemotherapy, Boston, USA, Sept 17–20.
- Zadoks F, Allore H, Barkema H. 2001 ."Cow -and quarter-level risk factors for Streptococcus uberis and Staphylococcus aureus mastitis." J Dairy Sci. 2001; 84(12):2649– 2663.