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## Detection of Staphylococcal Enterotoxin, Methicillin-Resistant, Panton-Valentine Leukocidin Genes and Antibiotic Susceptibility in Staphylococci and Current Bacteria Associated with Subclinical Mastitis in Cattle

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**ABSTRACT:** Bovine mastitis is a significant infectious disease affecting dairy animals, resulting in substantial economic losses. Staphylococci are the predominant causative agents of mastitis. This study aimed to identify the bacteria isolated from cow's milk with subclinical mastitis using MALDI-TOF mass spectrometry, assess their antibiotic susceptibility, and examine the presence of staphylococcal enterotoxin, *pvl* (Panton-Valentine Leukocidin), and *mecA* genes in *Staphylococcus* spp. Out of 301 milk samples, 73 isolates were identified as bacteria, with 40 (54.8%) being staphylococci. The antibiotic resistance rates of staphylococci were as follow: benzylpenicillin 57.5% (n:23), tetracycline 22.5% (n:9), erythromycin 17.5% (n:7), gentamicin 12.5% (n:5), cefoxitin 10.0% (n:4), ciprofloxacin 7.5% (n:3), tigecycline 7.5 % (n:3), trimethoprim/sulfamethoxazole 5.0% (n:2), and rifampicin 2.5% (n:1). Among the *Staphylococcus haemolyticus* isolates, 5 (11.62%) carried the *mecA* gene, and interestingly, 3 of these were phenotypically sensitive to cefoxitin despite harboring the *mecA* gene. However, none of the isolates carried the enterotoxin and *pvl* genes. This study was emphasized that *mecA*, staphylococcal enterotoxin and *pvl* genes were not found in staphylococci isolated from subclinical cows with mastitis.

**Keywords:** Subclinical mastitis; staphylococci; Panton-Valentine Leukocidin; methicillin resistance; animal health

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## INTRODUCTION

**M**astitis, an inflammation of the udder gland, is a pervasive issue in dairy herds worldwide. It manifests in two primary forms, clinical and subclinical, each with distinct characteristics. Clinical mastitis is characterized by noticeable systemic changes in milk, the mammary gland, or even the cow's overall health. In contrast, subclinical mastitis presents with no discernible symptoms in milk or the mammary gland, yet it leads to reduced milk production and altered milk composition (Erskine, 2020).

Subclinical mastitis (SCM) is notably more prevalent than clinical mastitis and is believed to inflict more substantial economic losses on the dairy industry (Paramasivam et al., 2023). Among the bacterial pathogens responsible for mastitis, *Staphylococcus aureus*, Coagulase-Negative Staphylococci (CNS), *Streptococcus dysgalactiae*, *Streptococcus uberis*, *Streptococcus agalactiae*, and *Escherichia coli* are the most frequently identified agents (Ali et al., 2021). Of these, *Staphylococcus* species, particularly *Staphylococcus aureus* (*S. aureus*), stand out as major contributors to bovine mastitis (BM), inflicting considerable economic losses on dairy farms and posing public health concerns (Ünal et al., 2012; Ünal and Cinar, 2012; Yang et al., 2023).

Although CNS are often considered smaller pathogens in comparison to *S. aureus*, recent research highlights their substantial role in subclinical mastitis in ruminants (Deng et al., 2023; Raspanti et al., 2016; Ünal et al., 2012). Understanding the prevalence and significance of these bacterial pathogens is crucial for effective mastitis control strategies, emphasizing the need for ongoing research and surveillance in both the dairy industry and public health sectors.

The widespread use of antibiotic for the prevention and treatment of mastitis in dairy cows, contributing to the emergence and dissemination of antibiotic-resistant bacteria, notably methicillin-resistant *Staphylococcus aureus* (MRSA). Methicillin-resistance arises due to the acquisition of the *mecA* gene, which encodes an alternative penicillin-binding protein, PBP2a (or PBP2'), which has a low affinity for most  $\beta$ -lactam antibiotics (Morgan, 2008). Epidemiological evidence suggests horizontal transfer of resistance, such as methicillin, to initially susceptible *S. aureus* strains (Harkins et al., 2017; Lee et al., 2018). MRSA is a significant concern for nosocomial infections, foodborne illnesses, and post-surgical infections worldwide, with dairy cows considered poten-

tial reservoirs for these resistant bacteria (Kulangara et al., 2017).

Staphylococcal enterotoxins (SEs), including classical (SEA, SEB, SEC, SED, and SEE) and novel SEs (SEG, SEH, and SEI), along with staphylococcal enterotoxin-like (SEIJ, SEIK, SEIL, SEIM, SEIN, SEIO, SEIP, SEIQ, SEIR, SEIU, and SEIV), play a pivotal role in staphylococcal food poisoning, one of the most common foodborne illnesses in humans (Wang, 2009).

Panton-Valentine leukocidin (PVL), a  $\beta$ -pore-forming toxin associated with leukocyte destruction and tissue damage, enhances the virulence of *Staphylococcus* spp. While the *pvl* gene rapidly spreads among human staphylococci, its sporadic presence has been noted in staphylococci isolated from cows with subclinical mastitis (Unal et al., 1992; Ünal et al., 2012; Ünal and Cinar, 2012; Kulangara et al., 2017; Şeker et al., 2019).

In conclusion, the detection of virulence and *mecA* genes in bovine milk poses potential risks to public, animal, and environmental health, aligning with the 'One Health' approach. This study aimed to use MALDI-TOF for the identification of bacteria isolated from cow's milk with subclinical mastitis, assess their antibiotic susceptibility, and investigate the presence of staphylococcal enterotoxin and *pvl* genes in *Staphylococcus* spp., providing insights into the multifaceted aspects of this critical issue.

## MATERIALS AND METHODS

### Bacterial strains

Between May and August 2022, a comprehensive study was conducted across three distinct dairy farms in Ankara. A total of 301 milk samples were meticulously collected from 78 cows and transported to our laboratory for analysis. Each milk sample was processed by inoculating ten microliters onto blood agar plates (Merck, Germany), with subsequent aerobic incubation at 37°C for 24 hours. The infection status of the samples was determined using protocols recommended by the National Mastitis Council.

Bacterial colonies were identified based on Gram staining, morphological characteristics, hemolysis patterns, and additional tests including tube coagulase, catalase, and oxidase. Furthermore, the identification of bacterial strains was refined using MALDI-TOF mass spectrometry. All identified isolates

were preserved in brain heart infusion broth supplemented with 15% glycerol at -20°C, awaiting further analysis and investigation (Merck, Germany).

### Antimicrobial susceptibility test of *Staphylococcus* spp.

In this study, 40 *Staphylococcus* spp. strains, comprising 4 *Staphylococcus aureus* and 36 coagulase-negative staphylococci (CNS), were cultivated from 24-hour fresh cultures. Suspensions with McFarland 0.5 turbidity in sterile saline (0.85% NaCl) were prepared from these strains and evenly spread on Mueller Hinton agar medium using sterile swabs. Susceptibility testing for *Staphylococcus* spp. species was performed against a panel of antibiotics, including benzylpenicillin (1U), gentamicin (10 µg), erythromycin (15 µg), rifampicin (5 µg), cefoxitin (30 µg), trimethoprim/sulfamethoxazole (1.25/23.7 µg), tetracycline (30 µg), ciprofloxacin (5 µg), enrofloxacin (5 µg), and tigecycline (15 µg) using a disc diffusion method. The resulting inhibition zones were meticulously measured and evaluated in accordance with EUCAST standards following the incubation period. To ensure the quality control of the testing procedure, *Staphylococcus aureus* ATCC 29213.

### Genomic DNA Extraction

In preparation for PCR analysis, the DNA of *Staphylococcus* spp. was extracted following a protocol. Initially, fresh bacterial suspension of the isolates were subjected to centrifugation at 5,000 rpm for 10 minutes. The resulting cell pellets were subsequently washed twice in 1 ml of TE buffer (comprising 10 mM Tris-HCl and 1 mM EDTA, pH 8.0). For DNA extraction, a stepwise process was employed. Initially, 50 microliters of lysostaphin enzyme (100 µg/ml) were added to the cell pellet, followed by the addition of 50 µl of proteinase K enzyme (100 µg/ml). This mixture was then incubated for 10 minutes at a time at 37°C each step. Finally, to inactivate proteinase K, the sample was heated at 100°C for 10 minutes. The extracted DNA samples were then stored at -20°C for subsequent use (Unal et al., 1992).

### Detection of Staphylococcal enterotoxins, *mecA* and *pvl* genes

In this study, we use employed a protocol for PCR amplification to detect the presence of genes, including staphylococcal *sea*, *seb*, *sec*, *sed*, *see*, *seg*, *seh*, *sei*, *sej* enterotoxin genes, the 16S rRNA gene, the *mecA* gene, and the *pvl* gene. The primer sequences

used for these genes were based on previous literature references (Monday and Bohach, 1999; Lovseth et al., 2004; Malik et al., 2006; Lina et al., 1999). For the amplification of the *mecA* and *pvl* genes, a PCR mix was prepared, consisting of 1x Taq polymerase buffer, 4 mM MgCl<sub>2</sub>, 1U Taq polymerase, 400 µM deoxynucleoside triphosphate each, and 300 nM of each primer. To this mix, 5 µl of the DNA sample was added to initiate the PCR amplification. The amplification program included an initial denaturation step at 95°C for 5 minutes, followed by 30 cycles at 94°C for 1 minute, 55°C for 30 seconds, 72°C for 1 minute for extension, and a final extension step at 72°C for 5 minutes.

To differentiate PCR products of certain enterotoxin genes with similar sizes, ten primers were divided into two groups: reaction mixture 1 included primers for *sea*, *seb-sec*, *sec*, *seh*, and *sej*, while reaction mixture 2 contained primers for *sed*, *see*, *seg*, *sei*, and 16S rRNA. Multiplex-PCR (m-PCR) amplification was performed by adding 5 µl of DNA to 45 µl of PCR mix, which included 1x Taq polymerase buffer, 4 mM MgCl<sub>2</sub>, 400 µM deoxynucleoside triphosphate each, 300 nM of each primer, and 2 U of Taq polymerase. The m-PCR program consisted of an initial DNA denaturation at 95°C for 10 minutes, followed by 30 cycles of 95°C for 1 minute, 64°C for 45 seconds, 72°C for 1 minute, and a final extension at 72°C for 1 minute using a thermocycler (amplified using TC-PRO/Boeco).

To visualize the amplified PCR products, agarose gel electrophoresis (1.5%) was conducted at 100 V for 100 minutes, followed by UV transillumination (Syngene G:Box). The sizes of the PCR products were determined relative to a 100-bp marker (Vivantis, NL0401).

In this study, reference strains of *S. aureus*, including D4508 (*sea*, *seh*), FRI913 (*see*), RIMD 31092 (*seb*, *seg*, *sei*), NTCC9393 (*sej*, *sed*, *seg*, *sei*), FRI137 (*sec*, *seh*), and ATCC 49775 (*pvl*), as well as *S. aureus* 43300 (*mecA*), were utilized for quality control and validation purposes.

## RESULTS

A total of 301 milk samples were collected from 78 animals, resulting in the isolation of 73 bacterial strains from 36 animals across 62 udder lobes. The identification of these bacterial strains was carried out by MALDI-TOF mass spectrometry, revealing a

diverse array of species. Among the isolates, 4 were identified as *Staphylococcus aureus*, 14 as *Staphylococcus haemolyticus*, 9 as *Staphylococcus chromogenes*, 9 as *Staphylococcus epidermidis*, 2 as *Staphylococcus borealis*, 2 as *Staphylococcus hominis*, 11 as *Aerococcus viridans*, 3 as *Streptococcus agalactiae*, 2 as *Streptococcus dysgalactiae*, 5 as *Streptococcus uberis*, 6 as *Acinetobacter* spp., and 4 as other bacterial species (Table 1).

#### Antimicrobial susceptibility test of *Staphylococcus* spp.

In this study, 40 *Staphylococcus* spp. to susceptibility for tested antibiotics was determined by disc diffusion method. Thirty-four of a totally 40 isolates were determined to be resistant against one or more antibiotics. Cefoxitin discs were used for phenotypic detection of MRSA strains. Three *S. haemolyticus* and one *S. chromogenes* isolates have phenotypic cefoxitin resistant in this study were determined. The resistance rates to *Staphylococcus* spp. isolates to benzylpenicillin, tetracycline, erythromycin, gentamicin, cefoxitin, ciprofloxacin, tigecycline, trimethoprim/sulfamethoxazole and rifampicin were found as

57.5% (n:23), 22.5% (n:9), 17.5% (n:7), 12.5% (n:5), 10.0% (n:4), 7.5% (n:3), 7.5% (n:3), 5.0% (n:2), and 2.5% (n:1) respectively (Table 2). Enrofloxacin was effective against all staphylococci. Besides thirteen isolates were be susceptible all antibiotics in this study. Multi-drug resistance profile was observed in fourteen isolates (2 and/or more), with one *S. chromogenes* isolate resistant to all eight antibiotics.

#### Exotoxins profiles of *Staphylococcus* spp.

In this study, none of the isolates harbored enterotoxin and *pvl* genes. All isolates were harbored 16S RNA gene. A total of 5 (11.62%) staphylococci isolates were harboring the *mecA* gene. All staphylococci carrying the *mecA* gene were *S. haemolyticus*. 2 *S. haemolyticus* isolates were phenotypically resistant to cefoxitin and carried the *mecA* gene.

#### DISCUSSION

Subclinical mastitis stands as a significant concern within the dairy industry, incurring substantial economic losses worldwide, as highlighted by recent studies (Abed et al., 2021). In this current investigation, we observed a prevalence rate of 43.59% (34/78)

**Table 1.** Bacteria isolated in the study

| Identified bacteria by MALDITOFF              | Number of isolates | Prevalance % |
|---|--------------------|--------------|
| <i>S.aureus</i>                               | 4                  | 5,47         |
| Coagulase negative <i>Staphylococcus</i> spp. |                    |              |
| <i>S.borealis</i>                             | 2                  | 2,73         |
| <i>S.chromogenes</i>                          | 9                  | 12,32        |
| <i>S.epidermidis</i>                          | 9                  | 12,32        |
| <i>S.haemolyticus</i>                         | 14                 | 19,17        |
| <i>S.hominis</i>                              | 2                  | 2,73         |
| Catalase negative coccus                      |                    |              |
| <i>Aerococcus viridans</i>                    | 11                 | 15,06        |
| <i>Enterococcus casselifilavus</i>            | 1                  | 1,36         |
| <i>Enterococcus faecium</i>                   | 1                  | 1,36         |
| <i>Streptococcus agalactiae</i>               | 3                  | 4,1          |
| <i>Streptococcus dysgalactiae</i>             | 2                  | 2,73         |
| <i>Streptococcus uberis</i>                   | 5                  | 6,84         |
| <i>Acinetobacter</i> spp.                     |                    |              |
| <i>Acinetobacter johnsonii</i>                | 1                  | 1,36         |
| <i>Acinetobacter indicus</i>                  | 1                  | 1,36         |
| <i>Acinetobacter pseudowoffii</i>             | 2                  | 2,73         |
| <i>Acinetobacter towneri</i>                  | 2                  | 2,73         |
| Others  |                    |              |
| <i>Clostridium cochlearium</i>                | 1                  | 1,36         |
| <i>Bacillus licheniformis</i>                 | 1                  | 1,36         |
| <i>Corynebacterium amycolatum</i>             | 1                  | 1,36         |
| <i>Corynebacterium xerosis</i>                | 1                  | 1,36         |
| <b>Total</b>                                  | <b>73</b>          | <b>100</b>   |

**Table 2.** Levels of resistance to tested antibiotics in *Staphylococcus* spp.

| Antibiotics                   | Resistant (%) | Susceptible (%) |
|-------------------------------|---------------|-----------------|
| Benzylpenicillin              | 23 (57,5)     | 17 (42,5)       |
| Tetracycline                  | 9 (22,5)      | 31 (77,5)       |
| Erythromycin                  | 7 (17,5)      | 33 (82,5)       |
| Gentamicin                    | 5 (12,5)      | 35 (87,5)       |
| Cefoxitin                     | 4 (10)        | 36 (90)         |
| Ciprofloxacin                 | 3 (7,5)       | 37 (92,5)       |
| Tigecycline                   | 3 (7,5)       | 37 (92,5)       |
| Trimethoptim/ sulfametoxazole | 2 (5)         | 35 (95)         |
| Rifampicin                    | 1 (2,5)       | 39 (97,5)       |
| Enrofloxacin                  | 0 (0)         | 40 (100)        |

for subclinical mastitis, consistent with the range reported in the literature (Abed et al., 2021; Ibrahim et al., 2023; Patel et al., 2023), which underscores the persistent challenge posed by this condition.

More than 135 distinct microbial pathogens have been identified as potential contributors to mastitis, including notable culprits such as *Staphylococcus aureus*, CNS, *Streptococcus* spp. (particularly *S. agalactiae* and *S. dysgalactiae*), and *Escherichia coli* (Constable et al., 2017). In our study, we identified a similar pattern of bacterial pathogens, with CNS being the most frequently isolated agents, followed by *Aerococcus viridans*, *Streptococcus* spp., *Acinetobacter* spp., and *S. aureus*. Prevalence of *S. aureus* was 6.06 % in this study. In addition, *A. viridans* isolates reported in the current literatures were found at a rate of 16.67% in this study (Song et al., 2020; Sun et al., 2017). In conclusion, CNS is still the most frequently isolated pathogens, while the prevalences of *A. viridans* and *Acinetobacter* spp. are increasing. *A. viridans* and *Acinetobacter* spp. are becoming an important cause of subclinical bovine mastitis similar to Song et al. (2020) reported. In this study, 49.32 % (36 of them) of 73 bacteria isolated from the milk of cows with subclinical mastitis were identified as non-coagulase *Staphylococcus* spp. Interestingly, we observed a low prevalence of *S. aureus* and the absence of *E. coli*, potentially attributed to improved milking hygiene practices and the utilization of milking machines. This bacterial analysis provides insights into the diverse microbiological landscape of cow's milk affected by subclinical mastitis. Understanding the distribution of these bacterial agents is crucial for the development of effective management and control strategies to mitigate the economic losses associated with this condition in dairy cattle.

Furthermore, we examined revealed varying de-

grees of resistance, with penicillin resistance being the most prominent, consistent with previous findings (Yilmaz and Şeker, 2022). Importantly, a substantial portion of staphylococci strains displayed resistance to at least one antibiotic (85%), with 42.5% exhibiting resistance to two or more antibiotics. These findings underscore the global challenge of antibiotic resistance and the importance of prudent antibiotic use in veterinary medicine.

Antibiotic resistance crisis has become a rising problem as a result of the global spread of resistant bacteria. Antibiotics are predominantly administration for control of udder diseases by local and/or systemic. In this study, the resistance of *Staphylococcus* species to the antibiotics tested ranged from 57.5% to 2.5%. The penicillin resistance to *Staphylococcus* spp. isolates of our current study closely proximate with the findings of Yilmaz and Şeker (2022), but slightly lower than the findings of Demil et al. (2022) and Bentayeb et al. (2023). Penicillin generally showed the highest rate of resistance in most studies, but rates of resistance to other antibiotics varied. Additionally, antimicrobial susceptibility testing showed that 85% staphylococci strains were resistant to at least one antibiotic, 42.5% to two or more antibiotics. Other studies detecting multiple resistance to antibiotics in staphylococci isolates declared that Algeria, South Africa, Bangladesh, and Canada showed MDR rates of 77.0%, 51.0%, 49.0%, and 15.0%, respectively (Hoque et al., 2018; Phophi et al., 2019; Saini et al., 2012). Differences in antibiotic resistance in mastitis-derived staphylococci may differ depending on regions, herds within the same region, and the origin of the samples taken (Hoque et al., 2018).

Methicillin-resistant staphylococci remain an important health problem for the environment, human and animal health. *mecA*-positive staphylococci are

resistant to penicillins, penems, carbapenems, and cephalosporins, complicating therapy if linked with infections (Chambers, 1997). Five CNS were found to have the *mecA* gene in our study. All these isolates were *S. haemolyticus* (11.62%). In addition, cefoxitin resistance was determined phenotypically in two of the isolates. The same findings were reported by Ünal and Cinar (2012) and 2 of the isolates carrying *mecA* were found to be *S. haemolyticus*. *mecA* carriage rates in isolates other than MRSA are typically low, which is corroborated by certain investigations in the literature (Bal et al., 2010; Xu et al., 2015). Although few *S. aureus* (4) isolates were studied in our current analysis, none of them had the *mecA* gene. Similar results were obtained by Şeker et al. (2019), Ren et al. (2020) and Munive Nuñez et al. (2023) who did not identify the *mecA* gene in *S. aureus*. Contrary to these studies, Singh et al. (2023) reported a higher rate of *S. aureus* carrying *mecA* from bovine suffering with mastitis.

*Staphylococcus* species carrying virulence, enterotoxins (*sea*, *seb*, *sec*, *sed*, *see*, *seg*, *seh*, *sei*) and cytotoxin (*pvl*) genes are very important in the pathogenicity of infections in humans and animals. No isolates in this study carried the enterotoxin and *pvl* genes. Contrary to this study, it has been stated in the literature that the *pvl* gene is carried at a rate of up to

3-47% in *Staphylococcus* spp. (Ünal, 2013; Roshan et al., 2022; Rossi et al., 2019; Ünal et al., 2012; Ünal and Cinar, 2012).

## CONCLUSION

*Staphylococci* are still among the important pathogens in subclinical bovine mastitis. CNS were isolated more frequently than *S. aureus*, and the prevalences of *A. viridans* and *Acinetobacter* spp. were increased in milks with subclinical mastitis. Beside, staphylococcal enterotoxin genes and *pvl* gene were not detected among isolated staphylococci strains. This was an extremely positive outcome for both animal and human health. This study showed that bacteria species causing subclinical mastitis in cows, antibiotic resistance profiles and *se* and *pvl* genes carriers of staphylococci vary according to years and regions. So, it should be managed by ongoing surveillance research.

## CONFLICT OF INTEREST

The authors declared that there is no conflict of interest.

## DATA AVAILABILITY STATEMENT

Data related to this study are available from the corresponding author upon request.

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