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Jack of all trades spotted in the Clinical Centre of Vojvodina – first detection of *Aeromonas hydrophila* from urinary tract infection samples

"Мајстор свих заната" детектован у Клиничком центру Војводине – прва изолација Aeromonas hydrophila из узорака уринарних инфекција

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SUMMARY

Aeromonas hydrophila is representative of group within the Aeromonadaceae family that mainly cause Aeromonads can induce infections in humans. meningitis, septicemia, respiratory and hemolytic uremic syndrome as well as gastroenteritis. Regarding diverse mechanisms involved in virulence and metabolic adaptation of A. hydrophila to various hosts and environments it is often introduced as "Jack of all trades". Here we report first isolation of Aeromonas hydrophila from urine samples of the three patients from Urology Department within Clinical Centre of Vojvodina. Epidemiological survey identified contact with surface water as only mutual risk parameter. Following that, novel antibacterial agents against A. hydrophila are discussed.

Keywords: A. hydrophila; urinary infection; resistance; antimicrobials

Сажетак

Aeromonas hydrophila је представник групе унутар фамилије Аеромонадацеае, која најчешће доводи до обољења људи, укључујући менингитис, респираторни и септикемију, хемолитички уремијски синдром, као и гастроентеририс, где се A. hydrophila сматра најчешћим узроковачем. Захваљујући различитим механизмима развоја вируленције и метаболичке адаптације наспрам различитих домаћина и утицаја спољашње средине, често се назива "мајстором свих заната". У овом раду извештавамо о првој изолацији Aeromonas hydrophila из узорака урина три пацијента Клинике за урологију Клиничког центра Војводине. Епидемиолошком анкетом је контакт са површинским водама идентификован као једини заједнички фактор ризика. Остатак текста је посвећен прегледу нових приступа антимикробне терапије против Aeromonas hydrophila

Кључне речи: *А. hydrophila*; уринарне инфекције, резистенција, антибиотици

Aeromonas hydrophila is detected in a broad variety of aquatic systems and it is regarded as an opportunistic pathogen. It is Gram negative bacterium and representative of group within Aeromonadaceae family that mainly cause infections in humans — motile aeromonads [1]. The presence of motile aeromonads was reported in a wide spectrum of food industry products (fish, meat, vegetables, milk, etc.), with predominance of A. hydrophila [2].

It is known that aeromonads have different virulence factors and can induce meningitis, septicemia, necrotizing fasciitis, respiratory and hemolytic uremic syndrome, and finally gastroenteritis in humans, where *A. hydrophila* was noted as most common causative agent [1, 3–7]. Zhou et al. [8] reported that *A. hydrophila* induce extra-intestinal infections more often in patients with malignancy.

Contamination of food is mainly repercussion of using water contaminated with *Aeromonas spp.*, as well as consequence of overall poor hygiene in working area during food processing or storage. It should be mentioned that milk is an exceptional medium for *A*.

hydrophila growth, as a result of its nutrient composition, pH and moisture content. Moreover, detection of A. hydrophila was reported in cheese, raw and pasteurized milk [2].

Since *A. hydrophila* has adopted diverse mechanisms involved in virulence and metabolic adaptation to various hosts and environments, it is often introduced as "Jack of all trades" [9]. Regarding wide presence and pathogenicity of *Aeromonas spp.* strains, extensive and protracted use of antibiotics in treatment and prevention finally resulted in evolution of antimicrobial resistant strains, mainly in aquatic microbial pathogen group [2, 5, 10, 11]. Furthermore, Daood reported a possible link between rising antibiotic resistance of aquatic strains and decreasing effect of antimicrobials in patients with *A. hydrophila* infections [12]. And indeed, carbapenem-resistant Aeromonas spp. were reported recently in humans [13]. Besides that, *A. hydrophila* resistance to chlorine, low temperature and ability to form biofilm is described [14].

Here we report the first isolation of *Aeromonas hydrophila* from urine samples of the three patients from the Urology Department within Clinical Centre of Vojvodina. Epidemiological survey was conducted in all three patients, where contact with surface water was identified as only mutual risk parameter. All three samples were inoculated on blood agar, endo agar and chromogenic agar and were examined after an incubation period of 18–24 hours. Due to the atypical growth over the plates, Matrix Assisted Laser Desorption Ionization - Time of Flight mass spectrometry was used (MALDI Biotyper, Bruker), where presence of *A. hydrophyla* was confirmed. Standard susceptibility to antimicrobials was determined via Kirby-Bauer disc diffusion method, therefore all three patients were treated with fluoroquinolones and reached remission.

Considering rising problem of multi-resistant *A. hydrophila*, several approaches have been recently suggested in order to outflank acquired bacterial resistance mechanisms.

Vijayakumar et al. have demonstrated remarkable effect of fucoidan, marine brown seaweed extract, coated with gold nanoparticles. The tested substance showed larger inhibition zone compared to chloramphenicol (23.2 mm vs 17.3 mm), as well as impressive biofilm inhibition activity against *A. hydrophila* [11]. Considering the treatment of aquatic organisms, as well as human patients, Rama Devi et al. conducted experiment with approach to target the quorum sensing system of *A. hydrophila* by introducing rosmarinic acid. They reported effect that includes significant inhibition of biofilm formation and production of

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virulence factors in three A. hydrophila isolates (AH 1, AH 12 and MTCC 1739) [10].

Stanković et al. [15] introduced millipede Pachyiuli hungaricus defensive secretion

compounds as potential antimicrobial agents. Even lowest concentrations of isolated

compounds (0.20–0.25 mg/ml) were reported as effective in A. hydrophila growth inhibition.

They identified a total of 44 compounds, within which 2-methyl-1,4,-benzoginone and 2-

metoxy-3-methyl-1,4-benzoquinone were most dominant. Antimicrobial activity of Serbian

Propolis against A. hydrophila was demonstrated by Ristivojević et al. by a MIC assay, where

zones of inhibition appeared at 0.05 mg/disc, while at a concentration of 0.20 mg/disc

inhibition zone diameter was larger than 12 mm [16]. Ramena et al. [17] tested antimicrobial

activity of various plant extracts against A. hydrophila. In most cases antimicrobial effect was

insufficient compared to oxytetracycline, where only clove and cinnamon extracts showed

inhibition zone diameter of 10.36 mm and 9.76 mm at concentration of 50 mg.

In conclusion, considering effect of reported compounds against A. hydrophila, wide

range of question arises regarding compound isolation and stability, standardisation and

effectiveness in animal models respecting pharmacokinetics and pharmacodynamics

parameters that will finally influence potenial usefulness of novel agents. It should be noted

that multi-resistant A. hydrophila strains are still not present in samples from Clinical Centre

of Vojvodina, although the possibility for the emergence of resistant strains remains.

Ethical approval: All procedures described in this paper involving human participants

were in accordance with the ethical standards and with the 1964 Helsinki declaration and its

later amendments or comparable ethical standards.

Conflict of interest: None declared.

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