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### Bacteriological studies on some bacteria causing bovine skin lesions \*Nahed, M.A. Shawky; \*Ahlam, K.A. Wahba;\*Aliaa, A. Mohamed and \*\*M. Makin El-Bardisy

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#### Abstract

Skin diseases are very common in bovine globally greatly affect the economy by recorded production and performance of their animals. From buffaloes and cows clinically showing skin lesions in different farms at Giza governorate, a total of 100 samples of hair, pus, exudates and skin scraping scales were collected (50 for each) and subjected to the bacteriological examination. The results showed that the bacterial pathogens isolated from affected buffaloes and cows either in a single or a mixed form included Staphylococcus aureus (33.3%), Coryne bacterium pseudotuberculoses, Dermatophiluscongolensis and Pseudomonas aeruginosa(16.7% of each), Escherichia coli (11.1) and Enterococcus faecalis (5.5%). Antibiograms of the most commonly isolated bacteria were studied using disc diffusion method and group of antimicrobial agents of the most common used in the fields. The test revealed that, most of the isolates were sensitive to gentamycin, kanamycin, enerofloxacin, erythromycin, amoxicillin/clavulanic acid (AMC) and trimethoprim/sulphamethazole (St) and also most of them were resistant to nalidixic acid (NA), ampicillin, pencillin, streptomycin and tetracyclin. So these results were enhanced by the detection of drug resistance genes to the most common bacterial isolates using polymerase chain reaction test (PCR) to determine and choose optimize antibiotic groups to highlights success therapy with selection of first choice drug. Field recommendations for protection of bovine from skin diseases were pointed out.

Key words: Skin lesion, Antimicrobial potential, buffaloes and Traditional antibiotic.

#### Introduction

Recently, the prevalence of the skin affection has significantly reduced in many developed nations of the world compared to the developing countries due to improved social, economic, health care and hygiene practice factors evident in the former. Skin diseases can be caused by viruses, bacteria, fungi, or parasites.

Herpes simplex is the most common viral skin disease (Havlickova *et al.*, 2008 and Ilkit, 2010).

The bacterial skin affections of animals cause many economic loses among affected animals and may cause zoonotic infection to the contact humans, the most common bacterial skin pathogens are *Staphylococcus aureus* and group  $A\beta$ -hemolytic Streptococci, and also *Escherichia coli, Klebsiella, Corynebacterium, Enterococcus* and *Dermatophiluscongolensis* were isolated from cattle suffered from skin affection (Hassan *et al.*, 2015).

*Dermatophilus* and *staphylococcus* infections affected skin of buffaloes cause skin disease, several factors are involved in their pathogenesis, among them are the mechanical injury to the skin, rainfall, tick infestation, concurrent diseases and or stresses that compromise the hosts immune system (Amabrose, 1996 and Harman *et al.*, 2001). *Dermatophilus* congolensis а wellis recognized Gram-positive, non-acid-fast, branching filamentous rod. These microorganisms are facultative anaerobic, capnophilic or aerobic tolerant bacteria that belong to the Actinomycetes affecting mainly livestock, occasionally companion animal and wildlife, and rarely human (Dalis et al., 2014). It is an atypical bacterium because it produces infective motile zoospores and aerial mycelia (Giuffrida, 2016).

*Corynebacterium pseudotuberculosisis* a Gram positive pleomorphic rod-shaped, intracellular, facultative anaerobe with worldwide distribution. Infection with *C. pseudotuberculosis* has been reported in sheep, goats, cattle, buffalo, camel, equineand humans. The portal of entry of this soil borne organism is thought to be through abrasions or wounds in the skin or mucous membranes (Spier, 2006).

Phospholipase D (Pld) is the most important virulence factor in *C. pseudotuberculosis* (Hodgson *et al.*, 1999). Pldis an exotoxin induces increased vascular permeability through catalyzing sphingomyelin dissociation, resulting in spread and survival of *C. pseudotuberculosis* in cells, and consequently, the invasion of the body and transport by phagocytesto regional lymph nodes (Corrêa *et al.*, 2018). *Pld* gene detection is used as a diagnostic tool for *C. pseudotuberculosis*.

*Staphylococcus aureus* is a Gram-positive bacterium that naturally inhabits human and other animals skin and mucous membranes, however, this bacterium can infect other tissues and become an opportunistic pathogen the pathogenic strains produce virulence factors such as potent protein toxins (Stevens *et al.*, 2005 and Belizário *et al.*, 2015).

Naturally, *S. aureus* is susceptible to most known antibiotics (**Thomer** *et al.*, **2016**). However, there are antibiotic-resistant strains of *S. aureus*. The resistance genes expressed by these strains are mainly acquired from external sources; this could be either natural or due to human actions mainly by antimicrobial abuse, misuse and lead to chromosomal mutation (Montanaro *et al.*, 2016). The emergence and worldwide spread of antibiotic-resistant strains of *S. aureus* such as methicillin-resistant *Staphylococcus aureus* (MRSA) is of health and socio-economic importance (Humphreys *et al.*, 2016).

Cows and buffaloes were identified as a potential carrier of MRSA in Bihar (India). The isolation of vancomyc in resistant *Staphylococcus aureus* (VRSA) indicates the emergence of VRSA in animal population which may be transmitted to the human beings working in close contact to the animals (Kumar *et al.*, 2017).

Polymerase chain reaction (PCR) test allows the detection and identification of different pathogens and also has been successfully used for rapid identification and evaluation of specific antibiotic resistances genes in bacteria grown in cultures (Memon *et al.*, 2013).

Therefore, the present study was undertaken to detect the prevalence rate of some bacterial causes of skin lesions of buffaloes and cows in some farms in Giza governorate, in addition it aimed to study the antibiograms of the most commonly isolated organisms in order to determine the antibiotic resistant genes of this bacteria by PCR test to optimize antibiotic the rapy to high lights success therapy in common generalized bovine skin lesions with selection of first-choice drugs.

### **Materials and Methods**

### 1. Samples collection and preparation:

A total of 100 samples (hair, pus, exudates and skin scraping scales) were collected from (50) buffaloes and (50) cows clinically showing skin lesions and selected from different farms at Giza governorate for bacteriological examination, the affected skin areas of the animal body were cleaned with 70% alcohol and skin scrapings were taken from the edges of the lesions by scalpel blade and hair as mentioned by **Refai** *et al.* (2014). In cases of edematous skin disease in buffalo aspiration of pus from closed sterile lesion was carried out. The samples were collected in clean labeled envelops and sent to the laboratory in an ice box.

### 2. Isolation and identification of causative bacterial agents:

# A. Direct microscopical examination (Quinn *et al.*, 2002)

Small pieces were taken from the underside of the scab and softened in few drops of distilled water on a clean microscope slide; a smear was made and stained by Loffler's methylene blue and Gram's stains.

# **B.** Isolation and identification of causative agent:

A part of samples were inoculated into the test tubes containing nutrient broth and were incubated at 37°C for 24 hours aerobically. The subcultures were also made on nutrient agar, 5% sheep blood, eosin methylene blue (EMB), brain heart infusion (BHI) and Baird Parker (BP) agar plates and incubated aerobically at 37°C for overnight. Based on morphological and staining characteristics, hemolytic activities on blood agar and biochemical characters, the growing surface colonies were identified according to Quinn et al. (2002) and Anon (2007). Coagulase test was applied for staphylococcus isolates as recommended bv Flandrois and Carret (1981), also they were tested using the numerically API Kits (bioMerieux, Marcy-l'Etoile, France) and the results were interpreted according to Finegold and Baron (1986).

#### C. Isolation and identification of dermatophilus species (Haalstra, 1965):

A small amount of scab material was ground up, placed in a screw capped bottle, moistened with one ml sterilized distilled water and allowed to stand open for 3 and half hours on the bench. Then the opened bottle transferred to candle jar with a candle was burned within the jar to obtain 10 - 20% CO2 tension (so the motile zoospores were chemo-tactically attracted to the CO enhanced atmosphere and move to the surface of distilled water). After 15 minutes, the bottle was carefully removed and a drop was taken from the water surface with a bacteriological loop and cultivated on brain heart infusion agar plates which were incubated at 37°C in 20% CO2 tension for 24 to 48 hours. The suspected colonies were identified as recommended by Silva *et al.* (2003) and Anon (2007).

#### D. Antibiotic sensitivity test:

According to clinical and laboratory standard institute (CLSI, 2008), bacterial strains having high incidence rate in the study and historically play an important role in the disease occurrence were subjected to antimicrobial susceptibility testing by disc diffusion method using a group of common used antibiotics in the field was determined on Muellar-Hinton agar medium (Oxoid) supplemented with 5 % blood as described. Antibiotic discs were ampicillin (25µg), gentamycin (30µg), enerofloxacin streptomycin (30µg),  $(10 \mu g)$ , amoxicillin clavulanic acid AMC (30µg), nalidixicacidNA trimethoprim/sulphamethazole  $(30 \mu g),$ St (25µg) and penicillin (10IU), tetracycline (25µg), kanamycin (15µg) and erythromycin (15µg).

# E. PCR detection of antibiotic resistant genes:

**DNA extraction:** DNA extraction from some isolate samples resisted to antibiotics by disc diffusion method was performed using the QI-Aamp DNA Mini kit (Qiagen, Germany, GmbH). Briefly, 200  $\mu$ l of the sample suspension was incubated with 10  $\mu$ l of proteins K and 200  $\mu$ l of lysis buffer at 56°C for 10 min. After incubation, 200  $\mu$ 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  $\mu$ l of elution buffer.

**Oligonucleotide Primer:** Primers used were supplied from Metabion (Germany) are listed in Table (1).

**PCR amplification:** Primers was performed in a 25-  $\mu$ l reaction containing 12.5  $\mu$ l of Emerald Amp Max PCR Master Mix (Takara, Japan), 1  $\mu$ l of each primer of 20pmolconcentration, 4.5  $\mu$ l of water, and 6  $\mu$ l of DNA template. The reaction was performed in an applied bios stem 2720 thermal cycler.

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, 20  $\mu$ l of the products was loaded in each gel slot. Gelpilot 100 bp, 100 bp plus DNA Ladders (Qiagen, Germany, GmbH) and generuler 100 bp ladder (Fermentas, Germany) were used to determine the fragment sizes. The gel was photographed by a gel documentation system (AlphaInnotech, Biometra) and the data was analyzed through computer software.

### Table (1): Primers sequences, target genes, amplicon sizes and cycling conditions:

			Amplified	Primary	Ampli	ification (35 cyc	cles)	Final extension		
Target agent	Target gene	Primers sequences	segment (bp)	denaturation	Secondary denaturation	Annealing Extension			Reference	
	mefA	AGTATCATTAATCACTAGTGC TTCTTCTGGTACTAAAAGTGG	345	94°C 5 min.	94°C 30 sec.	55°C 40 sec.	72°C 40 sec.	72°C 10 min.	Morvan et al., 2010	
Coryne	ermX	GAGATCGGRCCAGGAAGC GTGTGCACCATCGCCTGA	488	94°C 5 min.	94°C 30 sec.	58°C 40 sec.	72°C 45 sec.	72°C 10 min.	Klima et al., 2014	
	bla	ATGAAAGAAGTTCAAAAATATTTAGA G TTAGTGCCAATTGTTCATGATGG	780	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 45 sec.	72°C 10 min.	Catalán et al., 2010	
	Aada2	TGTTGGTTACTGTGGCCGTA GATCTCGCCTTTCACAAAGC	622	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 45 sec.	72°C 10 min.	Walker et al., 2001	
	blaZ	TACAACTGTAATATCGGAGGG CATTACACTCTTGGCGGTTTC	833	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 45 sec.	72°C 10 min.	Bagcigil et al. 2012	
	mphC	GAGACTACCAAGAAGACCTGACG CATACGCCGATTCTCCTGAT	722	94°C 5 min.	94°C 30 sec.	55°C 40 sec.	72°C 45 sec.	72°C 10 min.	Schlegelova et al., 2008	
Staph	msrA	GCAAATGGTGTAGGTAAGACAACT ATCATGTGATGTAAACAAAAT	400	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 40 sec.	72°C 10 min.		
	norA	TTCACCAAGCCATCAAAAAG CTTGCCTTTCTCCAGCAATA	620	94°C 5 min.	94°C 30 sec.	50°C 40 sec.	72°C 45 sec.	72°C 10 min.	Pourmand et al., 2014	
	mphA	GTGAGGAGGAGCTTCGCGAG TGCCGCAGGACTCGGAGGTC	403	94°C 5 min.	94°C 30 sec.	58°C 40 sec.	72°C 40 sec.	72°C 10 min.	Nguyen et al., 2009	
	blaIMP	CATGGTTTGGTGGTTCTTGT ATAATTTGGCGGACTTTGGC	488	94°C 5 min.	94°C 30 sec.	53°C 40 sec.	72°C 45 sec.	72°C 10 min.	Xia et al., 2012	
P.aerogenosa	blaVIM	AGTGGTGAGTATCCGACA ATGAAAGTGCGTGGAGAC	280	94°C 5 min.	94°C 30 sec.	53°C 30 sec.	72°C 30 sec.	72°C 7 min.		
	qnrS	ACGACATTCGTCAACTGCAA TAAATTGGCACCCTGTAGGC	417	94°C 5 min.	94°C 30 sec.	55°C 40 sec.	72°C 45 sec.	72°C 10 min.	Robicseket al., 2006	

#### Results

Table (2). Results of bacteriological examination of the collected samples from bovine skin lesions:

Animal Species	Total number of examined samples		itive 1ples	Negative samples		
	-	No.	%	No.	%	
Cow Buffaloes				17 21	*34 *42	
Total	Total 100			38	**38	

\*% was calculated according to the number of examined samples from each species (50).

\*\*% calculated according to the total number of examined samples (100).

Table (3). Prevalence rate of bacterial isolates recovered from examined bovine skin lesion samples:

	Buffa	Cows			
Bacterial isolates	No. (50)	* %	No. (50)	* %	
Single infections:					
Staphylococcus aureus	4	8	6	12	
Corynebacterium pseudotuberculoses	12	24	3	6	
Dermatophilus congolensis	2	4	9	18	
Mixed infections:					
$\overline{S. aureus + E. fecalis}$	1	2	2	4	
S. aureus + P. aeruginosa	5	10	6	12	
S. aureus + E. coli	2	4	4	8	
E. fecalis+P.aeruginosa	1	2	1	2	
D. congolensis + $P$ . aeruginosa + E. coli	1	2	1	2 2	
$E. \ coli + D. \ congolensis.$	1	2	1	2	
Total	29	58	33	66	

\*% was calculated according to the total number of samples examined from each species.

 Table (4). Number and percentages of bacterial species isolated from examined skin lesion (single and mixed infection):

30	33.3	
15		
15	16.7	
15	16.7	
15	16.7	
10	11.1	
5	5.50	
90	100	
	15 15 10 5	15       16.7         15       16.7         10       11.1         5       5.50

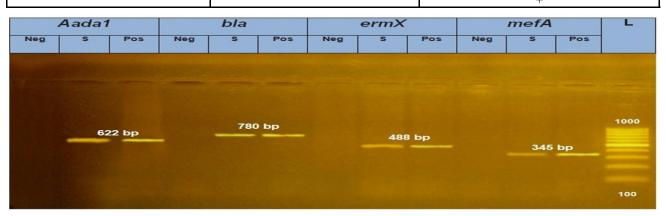
\*% was calculated according to the total number of isolates (90).

Anitmicrobial drugs	C. pseudotuberculosis N(15)				D. congolensis N(15)				S. aureus				P. aeruginosa				
	Senstive		Resistant		Senstive		Resistant		Senstive		Resistant		Senstive		Resistat		
	N	%	N	%	ľ	N	%	N	%	N	%	N	%	N	%	N	%
Trimethoprime/SulphamethazoleST 25 µg Genamycin CN10 µg Nalidixic acid NA 30µg Amoxicillin/Clavulanic acid 30µg Erythromycin E 15 µg Enrofloxacin ENR 15 µg Ampicillin AM 10 µg Penicillin G 10 IU Tetracycline Kanamycin Streptomycin	15 10 0 15 11 11 0 6 5 12	100 66 0 100 73.6 73.6 0 40 34 77	0 5 15 0 4 4 15 9 10 3	0 44 10 26 26 10 60 60 60 22	4 0 .4 .4 0 5	15 9 12 10 10 15 9 5 6 11	100 60 80 66 66 100 60 34 40 73	0 6 3 5 5 0 6 10 9 4	0 40 20 34 34 0 40 66 60 27	30 25 30 0 26 25 0 6 14 25	100 82.5 100 0 85.8 82.5 0 20 47 82.5	0 5 0 30 4 5 30 24 16 5	0 17.5 0 100 14.2 17.5 100 80 53 14.5	0 9 11 9 0 10 0 9 9 9	0 60 73.3 60 0 66.7 0 60 60 80	15 6 4 6 15 5 15 6 6 3	100 40 30.8 40 100 33.3 100 40 40 20
	3	20	12	8	)	5	34	10	66	4	13	26	87	3	20	12	80

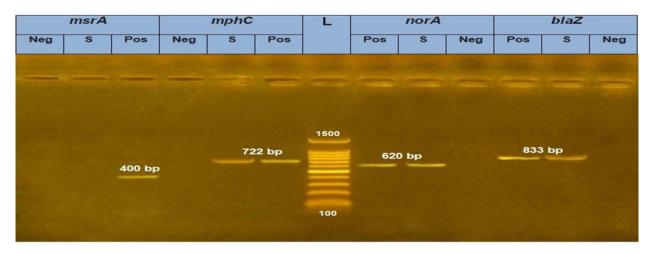
Table (5). Antimicrobial susceptibility pattern in the isolates of bovine's skin:

Table (6). Detection of the antibiotic resistance genes in some bacterial isolates

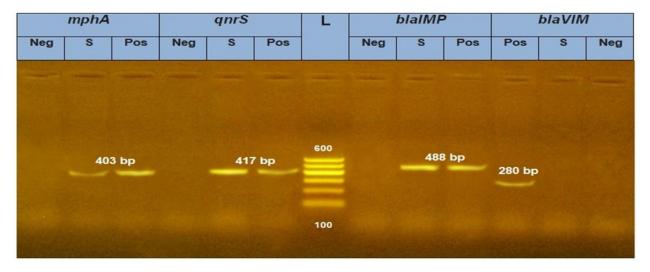
Bacterial	Antibiotic	
Isolates	resistance genes	Results
	MefA	+
C. pseudotuberculosis	ermX	+
	bla	+
	Aada2	+
	blaZ	
S. aureus	norA	+
	mphC	+
	msr.A	+
	blavVIM	_
P. aeruginosa	blaIMP	_
	qnrs	+
	mphA	+
	*	+



**Fig. (1):** Detection of antibiotic resistance genes (*Aada1, bla, ermX and mefA*) of *C. pseudotuberculosis* by polymerase chain reaction (PCR).L. - DNA ladder (1000 -100 bp.). Pos. - Positive control. Neg.-Nigative control. S.- sample Lanes arrangement from the left to right showing (*Aada, bla,ermXandmefA*) genes amplifications (622 bp,780 bp,488 bp and 345 bp) respectively.



**Fig. (2):** Detection of antibiotic resistance genes (*msrA*, *mphc*, *norAb* and *blaZ*) of *S. aureus* by polymerase chain reaction (PCR). L. - DNA ladder (1500-100 bp.). Pos. - Positive control. Neg. -Nigative control. S. – sample Lane of *mphc* gene amplification showing 722 bp.Lane of gene amplification showing 620 bp. Lane of *blaZ* gene amplification showing 833 bp.



**Fig. (3):** Detection of antibiotic resistance genes (*mphA*, *qnrS*, *blaIMP* and *blaVIM*) of *P. eruginosa* by polymerase chain reaction (PCR): L. - DNA ladder (600 -100 bp.). Pos. - Positive control. Neg.-Nigative control. S. – sample Lane of *mphA* gene amplification showing 403 bp. Lane of *qnrS* gene amplification showing 417 bp. Lane of *blaIMP* gene amplification showing 488 bp

#### Discussion

The skin provides a remarkably good barrier against bacterial infections. Although many bacteria come in contact with or reside on the skin, they are normally unable to establish an infection. The emerging infectious diseases and the development of drug resistance in the pathogenic bacteria at an alarming rate is a matter of serious concern. Despite the increased knowledge of microbial pathogenesis and application of modern therapeutics, the morbidity and mortality associated with the

# microbial infections still remains high (Kolar et al., 2001).

The infection with *D. congolensis* occurs when the integrity of the skin is impaired, as in case of long exposure to rain or traumatic injuries resulting from arthropod bites which serve as mechanical transmitters of microorganisms into epidermal layers, where germination zoospores takes places. The high relative humidity has a significant influence on the maturation and motility of the infective zoospores and it has been claimed (Zaria, 1993 and Burd

#### et al., 2007).

In the present study Table (2)illustrated that, out of (50) samples examined from buffaloes skin lesions 29 (58%) were positive for bacteriological examination while 21(42%) were negative. On the other hand out of (50) samples examined from cow skin lesions 33 (66%) were positive for bacteriological examination and 17 (28%) were negative.

Table (3) showed that, C. pseudotuberculosis, S. aureus, D. congolensis which considered the main causes of skin lesions in bovine were isolated in a sigle form from buffalo skin lesions in a percentage of (24), (8) and (4) respectively, while in cow their percentage of isolation were (6), (12) and (18). The mixed infections in both animal were (S. aureus+ E. feacalis), (S. aureus + P. aeruginosa), (S. aureus + E. coli), (E. feacalis+ P. aeruginosa), (D. congolensis + P. aeruginosa+ E. coli) and (E. coli +D. congolensis) in percentage of (2), (10), (4), (2), (2) and (2) in buffaloes and (2), (12), (8), (2), (2) and (2) in cow respectively. These results revealed that buffaloes were more susceptible for infection with C. pseudotuberculosis which causes edematous skin disease (OSD), that affect buffaloes mainly and characterized with its special lesion. These results agreed with Sohier et al. (2013) who isolated C. pseudotuberculosis from buffalo OSD at the rate of (25%). The presence of E. Feacalis and E. coli contamination which not recorded as causes to skin lesions affections is not an unexpected finding. It has been suggested that their found in the skin lesion probably represent its normal inhabit in environment and widely distributed in soil, faces, water and in plant as well as in the intestine of animals and human as reported in clinical veterinary microbiology book (Quien et al., 2002). These results also agree with Awadalla et al. (2015) and Jiang and Zhang (2013) who isolated E. coli from diarrheic calves. Table (3) also revealed that, cows were more susceptible for infection with D. congolensis which was the main cause of skin lesions in cow called dermatophilosis, we were in agreement with Mannan et al. (2009) who isolated *D. congolensis* from 11% of cow skin lesions, also **Hassan** *et al.* (2014) isolated 6 species of bacteria namely *Staphylococcus*, *E. coli, Klebsiela, Corynebacterium, Enterococcus* and *Streptococcus* species from diseased buffaloes and also **Hassan** *et al.* (2015) recovered *D. congolensis* from cow suffered from skin affection.

Table (4) showed that, the incidence of total number of isolates for both single and mixed infection were 33.3%, 16.7%, 16.7%, 16.7, 11.1% and 5.5% for *S. aureus*, *C. pseudotuber-culosis*, *D. congolensis*, *P. aeruginosa*, *E. coli* and *E. faecalis* respectively. These results agreed with **Hassan** *et al.* (2015) that isolated *S. aureus* and *D. congolensis* at an incidence of (15% and 13%) from hairs and (17% and 14%) from scales of skin of buffaloes.

Table (5) showed that, C. pseudotuberculosis resist ampicillin 25µg and nalidixic acid 30µg, but sensitive for enerofloxacin 10µg, erythromycin 15µg, amoxycillinclavulanic acid 30µg, gentamycin 30µg and trimethoprim sulphmethazole 25µg. This table also showed that D. congolensisresist nalidixic acid 30µg and sentive for all the rest in the table, so the treatment in cases of dermatophilosis was simple just accurate diagnosis was needed to avoid false diagnosis with some fungi these results were agreed with Mannan et al. (2009) and Aires et al. (2017) who used different protocols for the in vivo treatment of bovine dermatophilosis and they reported that, although beta-lactams penicillin, aminoglycosides streptomycin, and tetracyclines were recorded as the first-line antimicrobials to the treatment of localized cutaneous lesions of dermatophilosis among livestock (Giuffrida, 2016). Also the result in the table revealed that, S. aureus resist ampicillin 25µg penicillin and nalidixic acid 30µg and sensitive for the other drugs, these results agreed with the results of Awadalla et al. (2016). P. aerogenosa were resist ampicillin 25µg, trimethoprim sulphamethazole 25µg and erythromycin 15µg but sensitive for the rest of drugs under testing. On the other hand

most of strains were more resistance to penicillin (10IU).

Table (6) showed that, the C. pseudotuberculosis was positive for the presence of antibiotic resistance genes (mefA gene, erXm gene, bla gene and Aada2 gene), meanwhile S. aureus were positive for the presence of antibiotic resistance genes (blaZ gene, norA gene and *mphC gene*) and were negative for the presence of antibiotic resistance gene msrA. On the other hand P. aeruginosa was negative for the presence of antibiotic resistance gene blaVIM but positive for the presence of antibiotic resistance genes (blaIMP gene, qnrSgene and mphA gene). Resistance against beta-lactams and presence of *blaZ*gene in our isolates is in agreement with Green and Bradley (2004) who reported that, S. aureus resistance to beta lactams is due to production of beta-lactamase. Olsen et al. (2006) found that, in Brazilian buffalo, blaZ (39.6%) gene was detected in Staphylococcus species isolates using PCR, at rate of (39.6%). Memon et al. (2013) determined the antimicrobial resistance traits of 34 S. aureus isolated from subclinical mastitis in Eastern China, and found that, *blaZgene* were detected in 82% isolates. While Awadalla et al. (2015) detected blaZ gene inmost of strains of S. aureus isolated from buffalo milk samples, also Otarigho et al. (2018) improved analysis of antibiotics resistant genes in different strains of S. aureus.

The periodical examination of animals for skin affections pathogens should be undertaken. All environmental factors which predispose for these affections must be under hygeinic measures and good control. Our study proved that, buffaloes are more susceptible to infection with *C. pseudotuberculosis*, while cows are more susceptible to infection with *D. congolensis*, both organisms together with *S. aureus* are major causes of bovine skin disease, also there is no standard procedure for in vitro antimicrobial susceptibility tests for some bacteria caused skin lesion. So our results were improve dusing PCR test which revealed that *S. aureus*, *C. pseudotuberculosis* and *P. aeur*-

*ginosa* were interconnected in function and become more resist to some drugs when one or more other genes are expressed although trimethoprim/ sulphamethazole, aminoglycosides (gentamycin) and macrolide (erythromycin) are reported as the first-line antimicrobials to the effective therapy of generalized bovine skin infection based on modified in vitro disk diffusion method.

#### Recommendations

Strict hygienic measures should be applied in animal farms by periodical application of effective disinfectants against bacteria and other pathogenic agents for protection of animals.

Avoid miss use of antibiotics and use of them according to the results of laboratory because it resulted in increased resistance of bacteria to the antibiotics.

Prevention and control of viral skin diseases as lumpy skin disease and herps as it cause invitation to bacterial infection and usually accompanied with it and this can occur by vaccination program against viral diseases.

Rapid diagnosis of skin diseases affected animals with application as soon as possible of effective treatment either locally or systemic.

#### References

- Aires, W.; Armindo, P.; Siomara, M. and Ivette, E. (2017). Occurrence of bovine dermatophilosis in Huambo province, Angola Rev. Salud Anim., 39 (2): 2224-469.
- Amabrose, N.C. (1996). The pathogenesis of Dermatophilosis. Trop.Anim. Health-peod., 26: 295-375.
- Anon, S.K. (2007). Dermatophilus de rmatitis with clinical observations and laboratory finding. J. Clin. Microbiol.9:7-21.
- Awadalla, A.; Mohamed, A. and Shawky, N. (2016). Diversity of some virulence factors associated with *Escherichia coli* Infection in buffalo calves. Animal Health Research Journal Vol. 3 (4): 27-46.
- Awadalla, A., Wahba, A. and El-Mahrouk, A. (2015). Studies on some virulence factors of *Staphylococcus aureus* isolated from buf-

falo milk'. Animal Health Research Journal 3 (2): 76-90

- Bagcigil, A.B.; Taponen, S.; Koort, J.; Bengtsson, B.; Myllyniemi, A. and Pyörälä, S. (2012). Genetic basis of penicillin resistance of *S. aureus* isolated in bovine mastitis. Acta Veterinaria Scandinavica. 54:69.
- Belizário, J.E.; Napolitano, M. Frontiers in microbiology. (2015). Human microbiomes and their roles in dysbiosis, common diseases, and novel therapeutic approach, Department of Pharmacology, Institute of Biomedical Sciences, University of São Paulo, São Paulo Brazi, 2015 Oct 6;6:1050. doi: 10.3389/fmicb.2015.01050. Collection 2015.
- Burd, E.M.; Juzych, L.A.; Rudrik, J.T. andHabib, F. (2007). Pustular dermatitis caused by *Dermatophiluscongolensis*. J. of Clin. Microbiol. 45(5):1655-1658.
- Catalán, A.; Espoz, M.C.; Cortés, W.; Sagua, H.; González, J. and Araya, J.E. (2010). Tetracycline and penicillin resistant *Clostridium perfringens* isolated from the fangs and venom glands of Loxosceleslaeta: Its implications in loxoscelism treatment. Toxicon, 56: 890
- **Clinical and laboratory standards institute** (**CLSI 2008**). Performance standards for antimicrobial disk and dilution susceptibility tests for bacteria isolated from animals; Approved Standard. 3<sup>rd</sup> ed. (CLSI document M31-A3.Wayne, PA: CL SI, 2008.
- Corrêa, J.I.; Stocker, A.; Trindade, S.C.; Vale, V.; Brito, T.;Bastos, B.;Raynal, J.T.; Miranda, P.M.; Alcantara, A.C.; Freire, S.M.; Costa, L.M. and Meyer, R. (2018). In vivo and in vitro expression of five genes involved in *Corynebacteriumpseudotuberculosis* virulence. AMB Expr. 8(1): 89.
- Dalis, J.S.; Kazeem, H.M.; Kwaga, J.K.P. and Kwanashie, C.N. (2014). Severe generalized skin lesions due to mixed infection with Sporothrixschenkii and *Dermatophiluscongolensis* in a bull from Jos, Nigeria. Vet. Microbiol.172:475-478.
- Finegold, S.M. and Baron, E.J. (1986). Diagnostic Microbiology" The biochemical char-

acterization and serological identification. 7th Edition. The C.V. Mosby Co. St. Louis, London.

- Flandrois, J.P. and Carret, G. (1981). Study of the staphylococcal affinity to fibrinogen by passive hemagglutination: a tool for the *Staphylococcus aureus* identification. Zbl. Bakt. Hyg. Orig., A251:171-176.
- Giuffrida, R. Dermatofilose. In: Megid, J.; Ribeiro, M.G.; paes, A.C. (Eds.) (2016). Doenças Infecciosasem Animais de Produção e de Companhia. Rio de Janeiro: Roca, 81-86.
- Green, M. and Bradley, A. (2004):Clinical Forum- *Staphylococcus aureus* mastitis in cattle. UK Vet, 9: 1-9.
- Haalstra, R. (1965).Isolation of Dermatophiluscongolensis from skin lesions in the diagnosis of streptothricosis. Vet. Rec., 77: 824-834
- Harman, M.; Sekin, S. and Akdeniz, S. (2001). Human Dermatophilosis mimicking ringworm. Br. Dermatol., 145(1): 170-171.
- Hassan A. Atef., Hanan K. Mahmoud, TahaHesham and Rasha M.H. (2015). Herbal biosynthesis of zinc Nan particles and evaluation of their antifungal and antibacterial effect for buffaloes skin affections. *Int. Journal of Current Research*, (12):24338-24349.
- Hassan, A.A.; Noha, H. Oraby; Aliaa. A.E. Mohamed and Mahmoud H.H. (2014). The possibility of using Zinc Oxide nanoparticles in controlling some fungal and bacterial strains isolated from buffaloes. Egypt. J. of Appl. Sci., 29 (3):58-83.
- Havlickova, B.; Czaika, V.A. and Friedrich, M. (2008). Epidemiological trends in skin mycoses worldwide. Mycoses 51:2-15. Hay RJ. 2003.
- Hodgson, A.L. M.; Carter, K.; Tachedjian, M.; Krywult, J.; Corner, L.A.; McColl, M. and Cameron, A. (1999). Efficacy of an ovine caseous lymphadenitis vaccine formulated using agenaticaly in activated form the *Coryne bacterium pseudotuberculosis* phospholipase D. Vaccine, 17(7-8): 802-808.

- Humphreys, H.; Becker, K.;Dohmen, P.M.;
  Petrosillo, N.; Spencer, M.; van Rijen, M.,
  Wechsler-Fördös, A.; Pujol, M.; Dubouix,
  A. and Garau, J. (2016). *Staphylococcus aureus* and surgical site infections: benefits of screening and decolonization before surgery.J.Hosp Infect. 94(3):295-304.
- **Ilkit, M. (2010**).Favus of the scalp: an overview and update. Mycopathologia. 170: 143-154.
- Jiang, Y. and Zhang, X. (2013). Resistance patterns and detection of resistance genes in *Escherichia coli* isolated from diarrhoeic calves in Northeastern China. African Journal of Microbiology Research,7(5):389-397.
- Klima, C.L.; Alexander, T.W.; Hendrick, S. and McAllister, T.A. (2014). Characterization of *Mannheimia haemolytica* isolated from feedlot cattlethatwas healthy or treated for bovine respiratory disease. 2016 Feb 16; 6:8.doi: 10.3389/fcimb.2016.00008. eCollection 2016.Canad. J. of Vet.Res.78:38–45.
- Kolar, M.; Urbanek, K. and Latal, T. (2001). Antibiotic selective pressure and development of bacterial resistance. Int J Antimicrob., 17:357–363.
- Kumar, A.; Kaushik, P.; Anjay, K.P. and Kumar, M. (2017). Prevalence of methicillin -resistant *Staphylococcus aureus* skin and nasal carriage isolates from bovines and its Antibiogram, Veterinary World, 10(6): 593-597.
- Mannan, M.A.; Khan, M.S.; Rahman, M.M. and Uddin M.Z. (2009). Isolation and identification of dermatophilus bacteria from the skin of cattle. *J.Vet. Med.* 7(2): 342–347.
- Memon, J.; Yang, Y.; Kashif, J.; Yaqoob, M.; Buriro, R.; Soomro, J.; Liping, W. and Hongjie, F. (2013). Genotypes, virulence factors and antimicrobial resistance genes of *Staphylococcus aureus*isolated in bovine sub clinical mastitis from Eastern China. Pak Vet J,33(4):486-491.
- Montanaro, L.; Ravaioli, S.; Ruppitsch, W.; Campoccia, D.; Pietrocola, G.; Visai, L.; Speziale, P.; Allerberger, F. and Arciola, C.R. (2016). Molecular Characterization of a Prevalent Ribocluster of Methicillin-

Sensitive *Staphylococcusaureus* from Orthopedic Implant Infections. Correspondence with MLST CC30. Front Cell Infect Microbiol. 6:8. doi: 10.3389/fcimb.2016.00008. e Collection 2016.

- Morvan, A.; Moubareck, C.; Leclercq,
  A.; Hervé-Bazin, M.; Bremont, S.; Lecuit,
  M.; Courvalin, P. and Le Monnier, A.
  (2007). Antimicrobial Resistance of *Listeria* monocytogenes strains isolated from humans in France. Antimicrobial agents and chemotherapy. 54 (6):2728–2731.
- Nguyen, M.; Woerther, P.; Bouvet, M.; Andremont, A.; Leclercq, R. and Canu, A. (2009. *Escherichia coli* as reservoir for macrolide resistance genes. Emerging infectious diseases.15 (10).
- Olsen, J.E.; Christensen, H. and Aarestrup, F.M. (2006). Diversity and evolution of blaZ from *Staphylococcus aureus* and coagulase negative staphylococci. J AntimicrobChemother 57:450–460.
- Otarigho, B. and Falade, M. (2018). Analysis of antibiotics resistant genes in different strains of *Staphylococcus aureus*. Bio- information mar 2018 31;14(3):113-122.
- Pourmand, M.R.; Yousefi, M.; Salami, S.A. and Amini, M. (2014). Evaluation of Expression of *NorA*Efflux Pump in Ciprofloxacin Resistant *Staphylococcus aureus* against Hexahydroquinoline Derivative by Real-Time PCR. Acta Med Iran 52(6):424-9.
- Quinn, P.J.; Markey, B.K.; Carter, M.E.; Donnelly, W.J. and Leonard, F.C.(2002). Veterinary Microbiology and Microbial Disease, Blackwell science Ltd, 21: 131136.
- Refai, M.; Heidy Abo El-Yazid and El-Hariri, M. (2014). Monograph on Dermatophytesa guide for isolation and identification of dermatophytes, diseases and treatment. Academia edu.egy.
- Robicsek, A.; Strahilevitz, J.; Jacoby, G.A.; Macielag, M.; Abbanat, D.; Park, C.H.; Bush, K. and Hooper, D.C. (2006). Fluoroquinolone modifying enzyme: a new adaptation of a common aminoglyco side acetyltransferase. Nat Med 12:83-88.

- Schlegelova, J.; Vlkova, H.; Babak, V.; Holasova, M.; Jaglic, Z.; Stosova, T. and Sauer, P. (2008). Resistance to erythromycin of *Staphylococcus* spp. isolates from the food chain. Veterinarian Medicina, 53, 2008 (6): 307–314.
- Silva, L.A.F.; Verissimo, A.C.C.; Vinna, P.R.; Silva, O.C.; Fioravnti, M.C.S; Robeto, R.S.; Paula, N.B. and Romani, A.F. (2003). Assessment of the topical effect of sodium hypochlorite associated with the parentral use of Streptomycine in the treatment of Dermatophilosis in Nelore calves. A horaveterinaria, 23 (134): 45-48.
- Sohier, M.S.; Hakim, A.S.; Riham, H. H. and Selim, S .A. (2013). Characterization of Virulence Genes Present in *Corynebacteriumpseudotuberculosis* Strains Isolated from Buffaloes. Global Veterinaria 10 (5): 585-591.
- **Spier, S.J. (2006)**. Dryland Distemper-*Corynebacteriumpseudotuberculosis* infections in horses. California Vet, 38: 24-26.

Stevens, D.L.; Bisno, A.L.; Chambers, H.F.; Everett, E.D. Dellinger, P.; Goldstein, E.J.; Gorbach, S.L.; Hirschmann, J.V.; Kaplan E.L.; Montoya, J.G. and Wade, J.C. (2005). Practice guidelines for the diagnosis and management of skin and soft-tissue infections.Clinical Infectious Diseases. 2005, 41:10.

- Thomer, L.; Schneewind, O. and Missiakas
  D. (2016). Annual Review of Pathology Mechanisms of Disease. 2016 May 23; 11:343-64. Doi: 10.1146/annurev-pathol-012615-044351. Epub 2016Feb 25. Review.
- Walker, R.A.; Lindsay, E.; Woodward, M. J.; Word,L. R. and Threlfall, E. J. (2001).Variation in clonality and antibioticresistance genes among multi-resistant Salmonella enterica serotype Typhimurium phage-type U302 (MR U302) from humans, animals, and foods. Microbiological Research 7:13–21.
- Xia, Y.; Liang, Z.; Su, X. and Xiong, Y. (2012). Characterization of Carbapenemase Genes in *Enterobacteriaceae* Species Exhibiting Decreased Susceptibility to Car-

bapenems in a University Hospital in Chongqing, China. Ann Lab Med; 32:270-275.

Zaria, L.T. (1993). *Dermatophiluscongolensis* infection (dermatophilosis) in animals and man! An update. Comparative Immunology and Microbiology Infectious Diseases, 16 (3): 179-222.