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Retraction

Retracted: Divergent Analyses of Genetic Relatedness and Evidence-Based Assessment of Therapeutics of *Staphylococcus* aureus from Semi-intensive Dairy Systems

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This article has been retracted by Hindawi following an investigation undertaken by the publisher [1]. This investigation has uncovered evidence of one or more of the following indicators of systematic manipulation of the publication process:

- (1) Discrepancies in scope
- (2) Discrepancies in the description of the research reported
- (3) Discrepancies between the availability of data and the research described
- (4) Inappropriate citations
- (5) Incoherent, meaningless and/or irrelevant content included in the article
- (6) Manipulated or compromised peer review

The presence of these indicators undermines our confidence in the integrity of the article's content and we cannot, therefore, vouch for its reliability. Please note that this notice is intended solely to alert readers that the content of this article is unreliable. We have not investigated whether authors were aware of or involved in the systematic manipulation of the publication process.

Wiley and Hindawi regrets that the usual quality checks did not identify these issues before publication and have since put additional measures in place to safeguard research integrity.

We wish to credit our own Research Integrity and Research Publishing teams and anonymous and named external researchers and research integrity experts for contributing to this investigation. The corresponding author, as the representative of all authors, has been given the opportunity to register their agreement or disagreement to this retraction. We have kept a record of any response received.

References

[1] S. Aziz, N. M. Saeed, H. O. Dyary et al., "Divergent Analyses of Genetic Relatedness and Evidence-Based Assessment of Therapeutics of *Staphylococcus aureus* from Semi-intensive Dairy Systems," *BioMed Research International*, vol. 2022, Article ID 5313654, 13 pages, 2022. Hindawi BioMed Research International Volume 2022, Article ID 5313654, 13 pages https://doi.org/10.1155/2022/5313654



Research Article

Divergent Analyses of Genetic Relatedness and Evidence-Based Assessment of Therapeutics of *Staphylococcus aureus* from Semi-intensive Dairy Systems

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Use of antibiotics without following standard guidelines is routine practice in developing countries which is giving rise to genetic divergence and increased drug resistance. The current study analyzed genetic divergence and drug resistance by *S. aureus* and therapeutic efficacy of novel antibiotic combinations. The study revealed that 42.30% (minimum 20%-maximum 70%) of milk samples are positive for *S. aureus*. Study also revealed seven SNPs in the *S. aureus nuc* gene (c.53A>G, c.61A>G, c.73T>C, c.93C>A, c.217C>T, c.280T>C, and c.331T>A). Local isolates Staph-2 and Staph-3 were closely related to *Bos taurus nuc* gene (bovine *S. aureus*), while Staph-1 was closely related to *Homo sapiens* (human *S. aureus*) indicating shifting of host. Change of two amino acids and staphylococcal nuclease conserved domain was observed in all local isolates of *S. aureus*. The isoelectric points predicted by protParam of Staph-1, Staph-2, and Staph-3 proteins were 9.30, 9.20, and 9.20, respectively. The antibiotic susceptibility profile of *S. aureus* presented highest resistance against penicillin (46.67%) and glycopeptide (43.33%). When a single antibiotic regimen was adopted in a field trial, the highest efficacy was reported in the case of oxytetracycline (80%) while lowest was presented by azithromycin. Among antibiotics' combined regimen, the highest efficacy (80%) was presented by gentamicin with oxytetracycline: cefotaxime with vancomycin; and ciprofloxacin with vancomycin. The current study concluded rising percentages of *S. aureus* from dairy milk, proofs of genetic host shifts, and altered responses of in on field therapeutics.

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1. Introduction

Semi-intensive dairy systems represent 21% of milk production in Mexican dairy milk collection systems [1], while in other parts of the world, predominantly Asian countries, it is increasing day by day. Losses are attributed to the spread of different bacteria salient of which is Staphylococcus aureus (S. aureus). This bacterium is commensal and opportunistic that can colonize various animal species and humans [2]. The bacteria cause severe infections in humans and animals. The former infection involves skin and soft tissue infection (SSTI), which is clinically manifested as puffy infectious blood vessels, abscesses, papules, tuberculosis, and Staphylococcal scalded skin syndrome (SSSS). Isolated infections include toxic shock syndrome (TSS), pneumonia, or neonatal TSS-like human excitation [3]. Skin, mucous membrane, upper and lower respiratory tract, and urogenital tract are significant attacking sites in humans and animals [4, 5]. Pathogens may appear as fatal due to septic shock following intramammary infections in animals [6].

S. aureus is a widespread and infectious pathogen that exists in 30-40% of all cases of mastitis and 80% of subclinical bovine mastitis which may cost 35 USD yearly as losses worldwide [7, 8]. The capability of producing mastitis is governed by numerous virulence factors that are structural or secretory [9, 10]. The structural virulence factors belong to adhesions, protein A, and capsular polysaccharide, whereas in secretory proteases, hemolysins, coagulase, lipase, and hyaluronidase are included [11, 12]. Infection increases due to increased resistance to multiple antibiotics such as methicillin-resistant S. aureus (MRSA). Spread of this pathogen is restricted not only to bovine but also to other animals like goats [13]. Newer strains of S. aureus, i.e., vancomycin-resistant S. aureus (VRSA), are also rising in bovine milk [14] in addition to already reported MRSAs. These strains are the most common cause of food poisoning and hospital infections [15-17] because of exoenzymes, exoproteins, and toxins [15, 18]. Ancestry analysis provided specificity within animals that is now changed to host shifts from one animal to another. Moreover, the pathogen is required to be considered for studying phenomena of protein folding and other molecular structures [16, 19].

S. aureus has the ability to yield extracellular thermostable nuclease, which is encoded by nuc gene. Among several other genes, this gene is found successful in distinguishing S. aureus in staphylococcal spp. This gene is thus considered a specific marker of S. aureus identification through PCR [16]. There are several researchers reporting nuc gene as a fast and reliable identification marker for S. aureus. Specificity and sensitivity of nuc gene to identify S. aureus have been reported as 89.6% and 93.3%, respectively [20]. Keeping in view the influencing semi-intensive dairy systems, this study aimed at (a) probing divergence of genetic relatedness of S. aureus within host and across host, (b) estimating the modified pattern of drug resistance profile against all classes of antibiotics, and (c) finding response of single and double antibiotic regimens against S. aureusbased clinical mastitis.

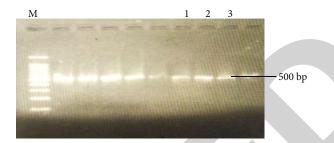


FIGURE 1: PCR amplicons of nuc gene (*S. aureus*). M = 1 kb DNA ladder (gene on 1 kb DNA ladder); Lane 1: Staph-1; Lane 2: Staph-2; Lane 3: Staph-3.

2. Results

2.1. Genetic Relatedness for Host Shift Analysis. Molecular identification of biochemically characterized S. aureus was targeted at 500 bp of nuc gene. The positive samples which were made part of this genetic relatedness are also pointed out along with other positive samples in Figure 1. Alignment of nucleic acid and protein sequences is given in Figures 2 and 3, respectively. Seven SNPs were identified in the S. aureus nuc gene at position c.53A>G (transition), c.61A>G (transition), c.73T>C (transition), c.93C>A (transversion), c.217C>T (transition), c.280T>C (transition), and c.331T>A (transversion) (Table 1). Nucleic acid alignment revealed that Staph-1, Staph-2, and Staph-3 were 97.37%, 98.02%, and 99.13% identical with a reference sequence, respectively. A phylogenetic tree of the S. aureus nuc gene was constructed. Five clades were observed in the phylogenetic tree when local S. aureus samples were compared with the S. aureus nuc gene of different species (different sources) from the NCBI database. Local S. aureus nuc (Staph-2 and Staph-3) gene sequences were closely related to the S. aureus nuc isolated from Bos taurus. These two local isolates (Staph-2 and Staph-3) clustered together only. Staph-1 (local isolate) gene sequence was closely related to S. aureus nuc isolated from Homo sapiens (vaginal and blood). This indicated that 33.33% of host shifts as one among three isolates were related to humans. Staph-1 clustered with Homo sapiens (blood, stool, sputum, contaminated platelets, wound, and swab), international space station surface, pork, food, and Bos taurus (Figure 2). The nucleic acid motif p value of the reference sequence was 4.66e - 191. The p value of sample Staph-1 was 2.01e - 190. Staph-2 and Staph-3 have the same p value (1.64e – 191). Sequences of motifs were discriminated by different colors represented in Figure 4. The protein motif p value of the reference sequence was found 4.31e - 160 (Figure 5). The p value of sample Staph-1 was 1.77e – 159. Staph-2 and Staph-3 have the same p value (2.88e - 160). Sequences of motifs were discriminated by different colors represented in Figure 3. Nucleotide motif construction involved an 1832 bp sequence, while amino acid motif construction involved a 608 bp sequence. Frequency of adenine and thiamine nucleotide in motifs was 0.328 while cytosine and guanine frequencies were 0.172. The only coding region was involved in the nucleotide structure (Figure 6). Asparagine was replaced by aspartic acid

Staph-1 Referencence	TAGTTGTTTAGTGTTAACTTTAGTTGTAGTTTCAAGTCTAAGTAGCTCAGCA <mark>A</mark> ATGCATC TAGTTGTTTAGTGTTAACTTTAGTTGTAGTTTCAAGTCTAAGTAGCTCAGCA <mark>A</mark> ATGCATC	60 60
Staph-2 Staph-3	TAGTTGTTTAGTGTTAACTTTAGTTGTAGTTTCAAGTCTAAGTAGCTCAGCAGATGCATC TAGTTGTTTAGTGTTAACTTTAGTTGTAGTTTCAAGTCTAAGTAGCTCAGCAGATGCATC ***********************************	60
Staph-1	GCAAACAGATAA <mark>C</mark> GGCGTAAATAGAAGTGGTT <mark>A</mark> TGAAGATCCAACAGTATATAGTGCAAC	120
Referencence	ACAAACAGATAA <mark>T</mark> GGCGTAAATAGAAGTGGTT <mark>C</mark> TGAAGATCCAACAGTATATAGTGCAAC	120
Staph-2	ACAAACAGATAA CGGCGTAAATAGAAGTGGTT CTGAAGATCCAACAGTATATAGTGCAAC	120
Staph-3	ACAAACAGATAACGGCGTAAATAGAAGTGGTTCTGAAGATCCAACAGTATATAGTGCAAC	120
Staph-1	TTCAACTAAAAAATTACATAAAGAACCTGCGACATTAATTA	180
Referencence	TTCAACTAAAAATTACATAAAGAACCTGCGACATTAATTA	180
Staph-2	TTCAACTAAAAAATTACATAAAGAACCTGCGACATTAATTA	180
Staph-3	TTCAACTAAAAATTACATAAAGAACCTGCGACATTAATTA	180

Staph-1	CCTTA A ATTA A TCTA CA A ACCTCA A CC A ATCA C ATT <mark>T</mark> A CACTATTA TTCCTTC ATA CACC	240
Referencence	GGTTAAATTAATGTACAAAGGTCAACCAATGACATTTAGACTATTATTGGTTGATACACC	
Staph-2	GGTTAAATTAATGTACAAAGGTCAACCAATGACATT <mark>C</mark> AGACTATTATTGGTTGATACACC GGTTAAATTAATGTACAAAGGTCAACCAATGACATT T AGACTATTATTGGTTGATACACC	240 240
Staph-3	GGTTAAATTAATGTACAAAGGTCAACCAATGACATTTAGACTATTATTGGTTGATACACC	240
otupii 3	**************************************	240
Staph-1	TGAAACAAAGCATCCTAAAAAAGGTGTAGAGAAATATGG <mark>C</mark> CCTGAAGCAAGTGCATTTAC	300
Referencence	TGAAACAAAGCATCCTAAAAAAGGTGTAGAGAAATATGG <mark>TC</mark> CTGAAGCAAGTGCATTTAC	300
Staph-2	TGAAACAAAGCATCCTAAAAAAAGGTGTAGAGAAATATGGTCCTGAAGCAAGTGCATTTAC	300
Staph-3	TGAAACAAAGCATCCTAAAAAAAGGTGTAGAGAAATATGG <mark>T</mark> CCTGAAGCAAGTGCATTTAC	300
otupii 3	****************	
Staph-1	GAAAAAAAATGGTAGAAAATGCAAAGAAAAT <mark>A</mark> GAAGTCGAGTTTGACAAAGGTCAAAGAAC	360
Referencence	GAAAAAAATGGTAGAAAATGCAAAGAAAATTGAAGTCGAGTTTGACAAAGGTCAAAGAAC	360
Staph-2	GAAAAAAAT GGTAGAAAA TGCAAAGAAAATT GAAGTCGAGTTTGACAAAGGTCAAAGAAC	360
Staph-3	GAAAAAAATGGTAGAAAATGCAAAGAAAATT GAAGTCGAGTTTGACAAAGGTCAAAGAAC	360
otupii 3	**************************************	300
Staph-1	TGATAAATATGGACGTGGCTTAGCGTATATTTATGCTGATGGAAAAATGGTAAACGAAGC	420
Referencence	TGATAAATATGGACGTGGCTTAGCGTATATTTATGCTGATGGAAAAATGGTAAACGAAGC	420
Staph-2	TGATAAATATGGACGTGGCTTAGCGTATATTTATGCTGATGGAAAAATGGTAAACGAAGC TGATAAATATGGACGTGGCTTAGCGTATATTTATGCTGATGGAAAAATGGTAAACGAAGC	420
Staph-3	TGATAAATATGGACGTGGCTTAGCGTATATTTATCCTGATGGAAAAATGGTAAACGAAGC TGATAAATATGGACGTGGCTTAGCGTATATTTATCCTGATGGAAAAATGGTAAACGAAGC	420
otapii 3	****************	120
Ct.uh 1	THE ACTURE AND COURT AND COURT AND COURT AND COURT AND COURT	
Staph-1	TTTAGTTCGTCAAGGCTTGGCTAAAGTTGCTTATGTTT 458 TTTTAGTTCGTCAAGGCTTGGCTAAAGTTGCTTATGTTT 458	
Referencence Staph-2	TTTAGTTCGTCAAGGCTTGGCTAAAGTTGCTTATGTTT 458	
Staph-3	TTTAGTTCGTCAAGGCTTGGCTAAAGTTGCTTATGTTT 458	
Stapii-3	************	

FIGURE 2: Alignment of S. aureus nuc gene (Staph-1, Staph-2, Staph-3, and reference).

Staph-2 Staph-3	S CLV LTLVVVSSLSS S ADA SQTDNGVNR SGSEDPTVYSATST K KLHKEPATLIKA I DGDT SCLV LTLVVVSSLSS S ADA SQTDNGVNR SGSEDPTVYSATST K KLHKEPATLIKA I DGDT	60 60
Referencence Staph-1	SCLV LTLVVVSSLSS S ANA SQTDNGVNR SGSEDPTVYSATST K KLHKEPATLIKAI DGDT SCLV LTLVVVSSLSS S ANA SQTDNGVNR SGYEDPTVYSATST K KLHKEPATLIKAI DGDT **********************************	60 60
Staph-2 Staph-3 Referencence Staph-1	VKLMYKGQPMTFR L L L VDTPETKHPKKGVEKYGPEA SAFTKKMVENAKKI EVEFDKGQRT	120 120 120 120
•	**** * * * * * * * * * * * * * * * * * *	
Staph-2	DKYGRGLAY I YADGKMVNEALVRQGLAKVAYV 152	
Staph-3	DKYGRGLAY I YADGKMVNEALVRQGLAKVAYV 152	
Referencence	DKYGRGLAY I YADGKMVNEALVRQGLAKVAYV 152	
Staph-1	DKYGRGLAY I YADGKMVNEALVRQGLAKVAYV 152 ************************************	

Figure 3: Alignment of S. aureus nuc protein (Staph-1, Staph-2, Staph-3, and reference sequence).

Table 1: S. aureus nuc protein conserved domain structure (reference sequence, Staph-1, Staph-2, and Staph-3).

Sample ID	Identified domain	Similarity score	Total nr sequences	Total architecture	Conserved domain structure
Reference protein, Staph-1, Staph-2, and Staph-3	Chain A, staphylococcal nuclease	1	5902	144	' SNc' 149
Staph-1 protein	Chain A, staphylococcal nuclease	1	5902	144	SNc 149
Staph-2 protein	Chain A, staphylococcal nuclease	1	5902	144	SNc 149
Staph-3 protein	Chain A, staphylococcal nuclease	1	5902	144	SNc 149

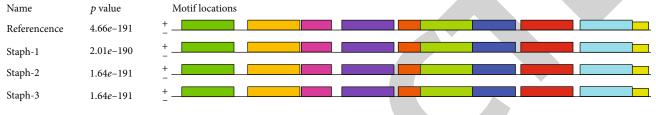




FIGURE 4: Nucleotide motifs of S. aureus nuc gene.

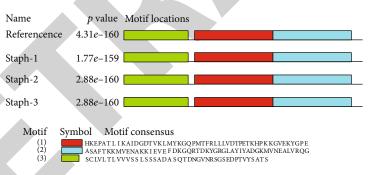


FIGURE 5: nuc protein motifs of *S. aureus*.

(p.N18D), and serine was replaced by tyrosine (p.S31Y) (Table 2). The conserved domain of staphylococcal nuclease was observed in reference, Staph-1, Staph-2, and Staph-3 protein sequences. The gene structure (exonic region) of *S. aureus* nuc gene was found similar to the reference sequence (Figure 7). The protein structure of reference, Staph-1, Staph-2, and Staph-3 proteins resembles the staphylococcal nuclease protein (Figure 8). Protein-protein interaction was found in Staph-1, Staph-2, and Staph-3 proteins (Figure 9). Predicted functional partners of *S. aureus nuc* protein are given in Figure 10. STRING software predicted the association between genes based on observed patterns of simultaneous expression of genes (Figure 11).

2.2. Pattern of Prevalence and Drug Susceptibility Profile of S. aureus. The study found 42.33% (127/300) of milk samples

from commercial dairy farms positive for S. aureus. The range of S. aureus prevalence at the farm level varied from 20% (three farms in the study area) to 70% (only one farm observed). Four farms presented 30-37.04%, while one farm showed a 42.8% prevalence of S. aureus (Figure 12). Antibiogram of S. aureus against 24 antibiotics from eight antibiotic groups showed varied responses. As an average effect of a class of antibiotics, penicillin and glycopeptides were found least effective in that 46.67 and 43.33% of S. aureus were resistant to these antibiotics (Table 3). On the other hand, fluoroquinolones, aminoglycosides, sulfonamides, macrolides, and tetracyclines were the most effective against S. aureus in the current study. Against cephalosporins, S. aureus were 36.67, 30%, and 33.33% resistant, intermediate, and sensitive, respectively. The pattern of susceptibility of isolate against individual antibiotics is

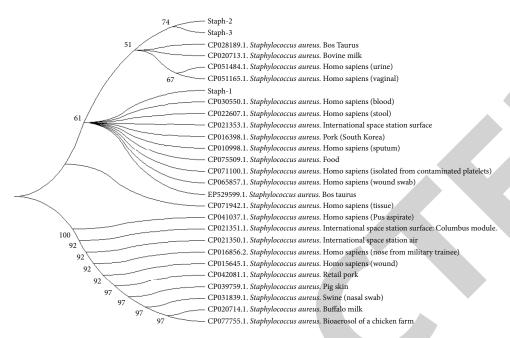


FIGURE 6: Phylogenetic tree of S. aureus nuc gene.

Table 2: S. aureus nuc protein physical and chemical properties (Staph-1, Staph-2, Staph-3, and reference sequence).

Sample ID	Reference protein	Staph-1 protein	Staph-2 protein	Staph-3 protein
Number of amino acids	152	152	152	152
MW	16561.02	16637.12	16562.01	16562.01
pI	9.32	9.30	9.2	9.2
Number of negatively charged residues	17	17	18	18
Number of positively charged residues	23	23	23	23
Formula	$C_{732}H_{1194}N_{198}O_{227}S_5$	$C_{738}H_{1198}N_{198}O_{227}S_5$	$C_{732}H_{1193}N_{197}O_{228}S_5$	$C_{732}H_{1193}N_{197}O_{228}S_5$
Total number of atoms	2356	2366	2355	2355
II	30.78	28.46	30.22	30.22
Aliphatic index	80.79	80.79	80.79	80.79
GRAVY	-0.388	-0.391	-0.388	-0.388

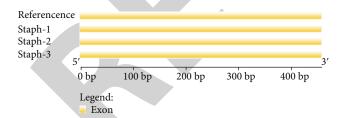


FIGURE 7: Gene structure (exonic region) of S. aureus nuc gene.

shown in Figures 13(a)–13(h). There were 40-50% isolates resistant to cefoxitin, cefotaxime, sulfathiazole, oxacillin, clarithromycin, and dalbavancin. The study also showed that 60% of isolates are resistant to ampicillin and vancomycin. The highest sensitivity was found against enoxacin (80%), followed by sulfamethoxazole/trimethoprim, amikacin (70%), gentamicin (60%), azithromycin (60%), and oxytetracycline (60%). About 40% of isolates expressed intermediate susceptibility against streptomycin, cefixime, sulfaphenazole, sulfadiazine, and clarithromycin.

2.3. Field Trials. The study noted that oxytetracycline showed the highest efficacy (80%) among single antibiotic regimens while azithromycin showed the least efficacy (20%). Cefotaxime, vancomycin, and ciprofloxacin showed 60% efficacy while 40% of cases supported gentamicin, sulfadimidine, and azithromycin (Table 4). Combination regimens showed an 80% success rate in favor of gentamicin with oxytetracycline, cefotaxime with vancomycin, and ciprofloxacin with vancomycin. Azithromycin in combination with sulfadimidine and azithromycin with gentamicin were the least effective drug regimens found in this trial.

3. Discussion

The clue of host shift of *S. aureus* in the current study (one of three *S. aureus* to be closely related to humans while distantly related to cows) was in line with findings of [21]. They reported clonal complexes (CCs), i.e., CC97 *S. aureus* isolate of cattle transmitted to humans while CC22 of humans found in cattle in Algeria. Human-associated strains of *S.*

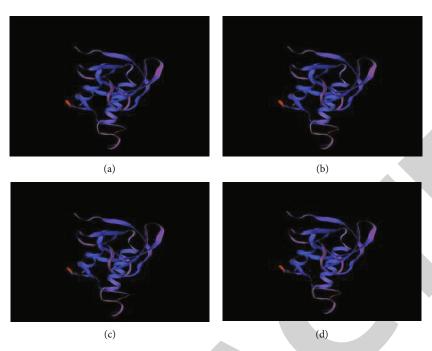


FIGURE 8: Protein structure (exonic region) of S. aureus nuc protein.

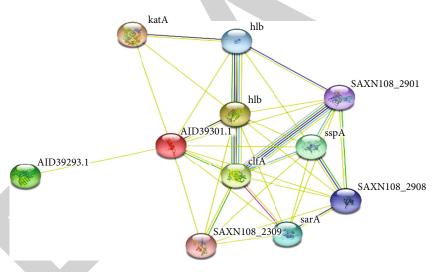


FIGURE 9: Protein-protein interaction of S. aureus nuc protein (Staph-1 protein, Staph-2 protein, and Staph-3 protein).

aureus, e.g., CC22 MRSA which was strictly responsible for hospital-acquired MRSA and community-acquired MRSA infections [22], were reported predominantly in Germany from dogs and cats [23]. S. aureus genes identified in humans' milk were found in S. aureus isolated from bovine milk [24]. SNP identification in this study was more than those identified by [25, 26]. They found 3 SNP clades, two belonging to bovine mastitis while one clade belonging to international human isolates. SNP-based analysis indicated the combination of clades existing in humans and animals. In close agreement with the findings of the current study, 5 SNP clusters were identified in bovine mastitis [26]. In another study, 15 SNPs were identified with resembling phenotype [27]. In another study, 12 genome SNPs were identified from bovine in UK. The livestock-associated S. aureus

strain (LA-MRSA), CC398, presented close phylogenetic relation to humans and turkeys. SNPs in the *nuc* gene lead to amino acid change revealed by in silico analysis. This change of amino acids might be associated with changes in the activity of the enzyme.

There is debate about the use of different genes to indicate differences and similarities with reported sequences. In our study, *nuc* gene was preferred for *S. aureus*. Sequence analysis and genotyping of the *S. aureus nuc* gene proved to be a suitable tool for detecting mastitis in dairy farm animals [27]. The results of [28] revealed that *nuc* genes are derived from thermophilic bacteria and picked up by common ancestor staphylococci. In a study, homology analysis revealed no significant similarities between two *nuc* genes (*nuc*1 and *nuc*2) [28]. *nuc*1 is specific to *S. aureus*. 79%

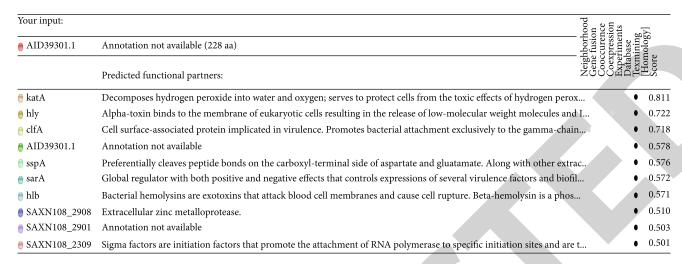


FIGURE 10: Predicted functional partners of S. aureus nuc protein (Staph-1 protein, Staph-2 protein, and Staph-3 protein).

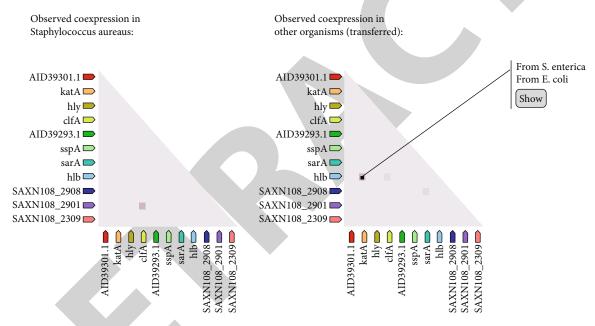


FIGURE 11: Coexpression of S. aureus nuc protein (Staph-1 protein, Staph-2 protein, and Staph-3 protein).

identity of nuc2 gene was observed with Staphylococcus epidermidis gene. This identity suggested a close relationship of this gene with other species in the Staphylococcus genus. Phylogenetic trees of nuc2 and nuc1 genes were found in different clusters in another study [29]. Staphylococci were differentiated using the nuc gene similarly to 16S rRNA sequences used for taxonomy classification [20]. Homology comparison of the nuc gene revealed that this gene is present everywhere in the genus Staphylococcus except Staphylococcus sciuri [30]. More than 70% similarity with nuc2 thermonuclease protein sequence from different species of Staphylococcus was observed in a study. Less than 60% similarity was observed with S. aureus nuc1. A higher-level homology of Staphylococcus was observed in the case of S. epidermidis (89.3%), Staphylococcus hominis (84.0%), and Staphylococcus lugdunensis (85.6%) [28]. Other scientists also used nuc gene to identify S. aureus [31]. Hamidi and

his colleagues assessed the ability of GENECUBE assays to detect *nuc* gene (identification of *S. aureus*) using a blood culture medium. They have found 100% specificity and sensitivity of GENECUBE assays in detecting *S. aureus* [32]. *S. aureus* presence in milk samples for confirmation of subclinical mastitis was examined by Hida et al. [33].

The higher prevalence of *S. aureus* contradicted with findings of another study conducted in the same country [34]. The reason for the discrepancy might be because they focused only on subclinical *S. aureus* and did not include clinical and normal milk samples. In another study, 39.03% of *S. aureus* were noted from subclinical mastitis. Another study reported a very high prevalence of *S. aureus* (61.60%) from subclinical mastitis cases [35]. Subclinical mastitis in the province of the study area revolves around 40-55%. In that context, the current study alarms to find new plans to combat this pathogen. The high rise in this

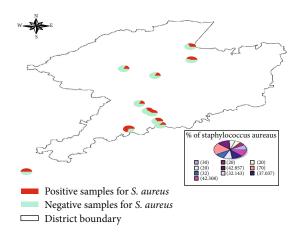


FIGURE 12: Distribution of *S. aureus* at different dairy farms; red color indicates positive cases. Percentage is also given in pie chart indicating the percentage of *S. aureus* at different farms which are indicated in different colors.

Table 3: Average percentages of antibiogram by different classes of antibiogram against *S. aureus*.

Class of antibiotic	Resistant (%)	Intermediate (%)	Sensitive (%)
Penicillins	46.67	26.67	26.66
Cephalosporins	36.67	30	33.33
Aminoglycosides	20	26.67	53.33
Sulfonamides	20	33.33	46.67
Macrolides	33.33	16.67	50
Tetracyclines	23.33	30	46.67
Fluoroquinolones	10	10	80
Glycopeptides	43.33	26.67	30

pathogen is attributed to no or lack of preventive measures. The pathogen is contagious, while its transfer is reported between animal-animal, animal-human, and human-human. In a recent study, 72.91% of nasal samples produced *S. aureus*, while among these were 34.29% (24/70) pathogenic as identified by the *mecA* gene [36]. From animal sources (cat, dog, buffalo, calf, and buck), 28.7% of multiple drug-resistant *S. aureus* were noted [37]. These facts indicate the significant spread of this pathogen among dairy animals, pets, and humans.

There was 100% resistance of *S. aureus* (camel mastitis origin) against cefoxitin and oxacillin in a previous study [38]. *S. aureus* from bovine milk were found 100% sensitive to ciprofloxacin and trimethoprim/sulfamethoxazole, 90% against gentamicin and levofloxacin, 60% against tylosin, 50% against fusidic acid, and 40% against oxytetracycline [38, 39]. Another study on MRSA showed 80% sensitivity against ciprofloxacin. Resistance against antibiotics in this pathogen is attributed to extended beta-lactamase production encoded to be blaCTX-M55, ST-23 complex, ST-410, ST-167 genes, blaCTX-M15, blaCTX-M14, and ST-10. Such kind of response of antibiotics is not only confined to *S. aureus* of mastitis but also extended to *E. coli* from endometritis [40].

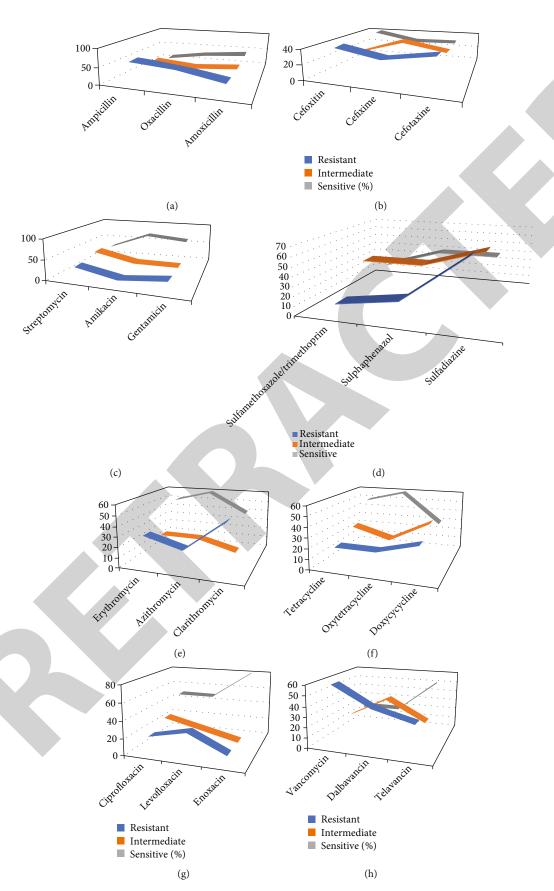
4. Materials and Methods

4.1. Milk Sample Collection. The study area consisted of developing commercial dairy systems with semi-intensive dairy systems in District Khanewal, Punjab, Pakistan. On a random basis, n=10 dairy farms having not less than n=50 animals in milking situation but with a commercial dairy system were approached with prior consent of the farmers. A total of n=300 milk samples (n=30 milk samples from each farm) were collected on a convenient sampling basis. The samples were aseptically collected in sterile tubes labeled with tags and shifted to the laboratory of central diagnostic, Cholistan University of Veterinary and Animal Sciences, Bahawalpur, Pakistan.

4.2. Isolation and Identification of S. aureus. Milk samples were centrifuged at 6000 rpm/15 minutes, and the supernatant was discarded. Sterile nutrient broth was added for further incubation at 37°C for 24 hours as prescribed in previous studies [36, 37]. The incubated samples were swabbed on mannitol salt agar, and growth obtained after 24 hours at 37°C was proceeded for biochemical analysis as per guidelines of Bergey's manual of determinative bacteriology. The pooled information was used to declare confirmation of bacteria.

4.3. Molecular Analysis. Isolates identified from biochemical tests were put to molecular analysis. For this purpose, randomly, 50% of S. aureus (n = 64) were selected. Primers of the nuc gene were designed using Primer 3 (https://www .ncbi.nlm.nih.gov/tools/primer-blast/) software (Nuc_forward 5'AAGGGCAATACGCAAAGAG3' and Nuc reverse 5'AAACATAAGCAACTTTAGCCAAG3'). The reaction mixture contains PCR 2x master mix = 10μ L (ThermoScientific Catalog # K0171), forward primer = $1 \mu L$ (10 pmoL), reverse primer = $1 \mu L$ (10 pmoL), DNA = $2 \mu L$ (50 ng/L), deionized water = $6 \mu L$, and reaction volume was $20 \mu L$. Touchdown PCR (35 cycles) was used to amplify the nuc gene of S. aureus. Thermocycler profile includes initial denaturation 94°C (5 min), denaturation 94°C (45 sec), annealing 63°C-53°C (45 sec), extension 72°C (45 sec), and final extension 72°C (5 min). The dilutions of DNA (50 ng/ μ L) were made, and nuc gene was amplified. After amplification, these amplicons were purified using a purification kit (Gene JET PCR Purification Kit Catalog number: K0701) and sent for sequencing. S. aureus positive for nuc gene and presenting multidrug resistance were sent for sequence analysis. Isolates showing similar sequences were excluded while those (n = 3)presenting genetic variations and showing the highest drug resistance were discussed in this paper.

Single-nucleotide polymorphisms were observed in sequencing chromatograms using chromas software. BLAST (Basic Local Alignment Search Tool) was used to check the similarity of the *S. aureus nuc* gene with the reference sequence. Clustal omega was used for the alignment of nucleic acid and protein sequences. A phylogenetic tree was constructed using Mega X. Nucleic acid and protein motifs were constructed using MEME Suit (Multiple Expectation maximizations for Motif Elicitation) [41]. The gene



2738, 2022, 1, Downloaded from https://onlinelibrary.wiley.com/doi/10.1155/2022/5313654 by Technische Universitat Muncher-MUNCHE047S, Wiley Online Library on [04.02.2025]. See the Terms and Conditions (https://onlinelibrary.wiley.com/denion) on Wiley Online Library for rules of use; OA articles are governed by the applicable Creative Commons License

FIGURE 13: Comparison of percentage susceptibility (resistant, intermediate, and sensitive) isolates of *S. aureus* against individual antibiotics of different classes: (a) penicillin; (b) cephalosporins; (c) aminoglycosides; (d) sulfonamides; (e) macrolides; (f) tetracyclines.

Table 4: Percentage efficacy of different treatment groups against S. aureus-based clinical mastitis.

(a)

Class of antibiotic	Bacteriostatic with bacteriostatic ($n = 5$)				
Class of antibiotic	Antibiotic with dose rate	Alone	Sulfadimidine	Azithromycin	Oxytetracycline
Aminoglycoside	Gentamicin (G) (2.2-6 mg/kg BW)	2/5 (40%)	3/5 (60%)	2/5 (40%)	4/5 (80%)
Sulfonamide	Sulfadimidine (45 mg/kg BW) IM	2/5 (40%)	_	2/5 (40%)	3/5 (60%)
Macrolide	Azithromycin (A) (6-10 mg/kg BW)	1/5 (20%)	_	_	3/5 (60%)
Tetracycline	Oxytetracycline (O) (17 mg/kg BW)	4/5 (80%)	_	_	A - \

(b)

Class of antibiotic	Bactericidal with bactericidal $(n = 5)$			
Class of antibiotic	Antibiotic with dose rate	Alone	Ciprofloxacin	Vancomycin
Cephalosporin	Cefotaxime (Ce) (10 mg/kg BW)	3/5 (60%)	3/5 (60%)	4/5 (80%)
Fluoroquinolones	Ciprofloxacin (Ci) (5-10 mg/kg body weight) (IV)	3/5 (60%)	_	4/5 (80%)
Glycopeptides	Vancomycin (V) (8-12 mg/kg BW) (IV)	3/5 (60%)	_	_

TABLE 5: Names of antibiotics along with their classes used in the study.

Antibiotic group	Name of antibiotic	Antibiotic group	Name of antibiotic
	Ampicillin		Erythromycin
(1) Penicillin	Oxacillin	(2) Macrolides	Azithromycin
	Amoxicillin		Clarithromycin
	Cefoxitin		Tetracycline
(3) Cephalosporin	Cefixime	(4) Tetracyclines	Oxytetracycline
	Cefotaxime		Doxycycline
	Streptomycin	Y	Ciprofloxacin
(5) Aminoglycoside	Amikacin Gentamicin	(6) Fluoroquinolones	Levofloxacin
			Enoxacin
	Sulfamethoxazole/trimethoprim		Vancomycin
(7) Sulfonamide	Sulfaphenazole	(8) Glycopeptides	Dalbavancin
	Sulfadiazine		Telavancin

structure of *S. aureus nuc* gene was determined by using a gene structure display server. Swiss model software predicted the 3D structure of thermonuclease. Protein-protein interactions were determined using STRING software (Search Tool for the Retrieval of Interacting Genes/Proteins). The physical and chemical properties of proteins were predicted by protParam *S. aureus* using guidelines given in the Clinical and Laboratory Standard Institute.

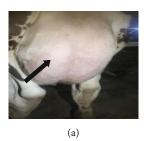
4.4. Susceptibility Profile. The genetically identified S. aureus was processed to respond to eight classes of antibiotics, each with three representative antibiotics (Table 5). The Clinical and Laboratory Standard Institute's [42] instructions were used to find the susceptibility (resistant, intermediate, and sensitive) profile of bacteria by both the disc diffusion method and the broth microdilution method. Where felt necessary, European Committee on Antimicrobial Susceptibility Testing was also consulted for analysis [43]. The need for the antibiotic profile of bacteria was deemed necessary because dairy systems lack proper veterinary sanitary control and technology for milk collection. These

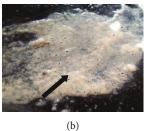
directly affect the spread of pathogens along with their surge in resistance [44, 45].

4.5. Field Trial of Different Antibiotics against S. aureus. This trial consisted of the evaluation of different antibiotics against S. aureus-based clinical mastitis. The following criteria were used for this trial (Table 4, Figure 14).

4.5.1. Inclusion Criteria for Antibiotics

- (i) Field trial consisted of antibiotic groups based on their activity in *in vitro* trial
- (ii) Class of antibiotics representing more than 30% response against bacteria was included in field trial keeping in view their resistance. Penicillin was thus excluded with this criterion
- (iii) From each class, one antibiotic was selected based on its availability in the study area and its use as parenteral route to cover infection at ease





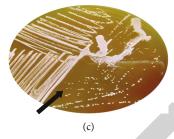


FIGURE 14: Clinical mastitis cases as an indication of inclusion criteria of animals for field trial of antibiotics: (a) udder inflammation, arrow is pointing out; (b) flakes in milk; (c) S. aureus growth on mannitol salt agar, arrow pointing out typical pinpoint colonies.

- (iv) All the antibiotics were used in a single regimen and next as a combination regimen
- (v) Combination was made on their apparent mode of action, i.e., bacteriostatic was used in combination with bacteriostatic while bactericidal in combination with bactericidal. The regimen consisted of nonsteroidal anti-inflammatory drug (NSAID) and antibiotics. Flunixin meglumine (Loxin, Selmore Pharmaceutical, Pakistan) was used at a dose rate of 2.2 mg/kg (single in a day)

4.5.2. Inclusion Criteria for Animals for Field Trials

- (i) Cattle suffering from clinical mastitis
- (ii) Cattle positive for S. aureus

Indicators of Success of Treatment. The success of treatment was measured based on the absence of clinical signs and clearance of *S. aureus* infection from milk. The latter was done based on bacteriological examination of milk samples as per standard protocols described in Bergey's manual of determinative bacteriology for the identification of bacteria. The presence of any or both indicators were considered a unsuccessful treatment.

4.6. Statistical Analysis. A nonparametric test was applied to calculate prevalence and antibiotic susceptibility using SPSS 22 version of statistical computer software. A phylogenetic tree was constructed using Mega X. Nucleic acid and protein motifs were created using MEME Suit (Multiple Expectation maximizations for Motif Elicitation).

Formulae:

Prevalence of S.aureus =
$$\left(\frac{\text{number of S.aureus isolated from milk}}{\text{number of milk samples tested}}\right)$$
100

%susceptibility of *S.aureus* against antibiotics
$$= \left(\frac{\text{number of } \textit{S.aureus} \text{ susceptible against antibiotic}}{\text{number of } \textit{S.aureus} \text{ tested}}\right) 100.$$

NB: susceptible isolates were either resistant, intermediate, or sensitive which were decided based on their response to antibiotics against set standards.

5. Conclusions

Semi-intensive dairy systems were prevalent with antibiotic resistant S. aureus. SNPs and change of amino acids in thermonuclease protein in S. aureus reflected evidence of host shift. On the basis of group of antibiotics, penicillin and glycopeptides were the least effective while macrolides were found the highest efficacious group in an in-vitro trial. On an individual antibiotic basis, ampicillin and vancomycin were least effective while enoxacin and sulfamethoxazole/trimethoprim were most effective in an *in-vitro* trial. Response of a single antibiotic regimen, in field trial, supported oxytetracycline while a double antibiotic regimen supported gentamicin with oxytetracycline, cefotaxime with vancomycin, and ciprofloxacin with vancomycin. The study thus proposed adoption of evidence based therapeutics against bacterial pathogens keeping molecular study as an integral part of any treatment protocol.

Data Availability

No data were used.

(1)

Conflicts of Interest

The authors declare that they have no conflicts of interest.

Authors' Contributions

Data curation was performed by Sidra Aziz and Laiba Shafique; formal analysis was performed by Amjad Islam Aqib, Arslan Saleem, and Muhammad Shafeeq; funding acquisition was performed by Muhammad Mudassir Ali and Amjad Islam Aqib; Investigation was performed by Amjad Islam Aqib, Sammina Mahmood, and Arslan Saleem; resources were secured by Zaeem Sarwar and Khurram Ashfaq; software was secured by Muhammad Mudassir Ali and Arslan Saleem; supervision was performed by Amjad Islam Aqib; visualization was performed by Tean Zaheer and Rao Zahid Abbas; writing (original draft) was performed by Sidra Aziz, Amjad Islam Aqib, and Laiba Shafique; writing (review and editing) was performed by Hiewa Othman Dyary, Tean Zaheer, Fakhara Khanum, MugheesAizaz Alvi, and Nahla Muhammad Saeed. Sidra Aziz, Nahla Muhammad Saeed, and Amjad Islam Aqib share equal contribution.

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