prepare salad were washed in polluted water from a tank

located near to sewage pit [4]. Humans can acquire the

infection by ingestion of contaminated fish, sea foods, raw

milk, raw meat, raw vegetables, and water contaminated with

A. hydrophila. Infection can also occur through open wound

contamination [3]. Drinking of contaminated water and

consumption of contaminated foods are important risk factors,

which predispose the individuals to A. hydrophila infections.

Swimming in contaminated water can also pose a risk to

infection. The incubation period of disease is usually 24 to 48

hours. The affected person exhibits gastrointestinal symptoms,

such as abdominal pain, nausea, vomiting, and diarrhea. In

addition, localized wound infections, which include cellulitis,

myonecrosis, necrotic fascilitis, and erythema gangrenosum are

also noticed [3]. In few patients, extra-intestinal infections,

such as otitis, peritonitis, meningitis, ocular and urinary tract

carcinoma, leukemia, and HIV/AIDS. The diagnosis should be

confirmed by isolation of A. hydrophila from clinical

specimens mainly the stool on microbial media, such as

ampicillin dextrin agar, Pyan's medium and starch ampicillin

agar [3]. It is advised that trypticase soy broth with ampicillin

should be used for enrichment of the organism. Currently,

molecular tools are employed for diagnosing A. hydrophila

infection. Ampicillin dextrin agar was employed for the

recovery of A. hydrophia from the stool of a man who

developed diarrhea following consumption of contaminated

fish [3]. Membrane filtration technique has been employed for

the isolation of A. hvdrophila from the drinking water [9]. The

bacterium should be differentiated from Plesiomonas

shigelloides, Vibrio cholera, V. parahaemolyicus and V.

vulnificus by employing standard microbiological techniques.

Aeromonas hydrophila is susceptible to a plethora of antibiotics

like ceftriaxone, cefuroxine, cephotoxamine, chroramphenicol,

ciprofloxacin, enrofloxacin, gentamycin, kanamycin, nalidix

acid, and ofloxacin. Any of these antibacterial antibiotics can

be used to treat the patients. However, there are evidences to

believe that in clinical practice, the patients are usually treated

with ciprofloxacin and enrofloxacin with encouraging results

[3]. Heat treatment of foods, pasteurization of milk,

chlorination of water, use of clean water for washing

vegetables, keeping the foods in cold chain before

consumption, maintenance of good hygiene in food processing

plants keeping raw and processed food separately, and

surveillance of food and water can certainly reduce the risk of

foodborne aeromoniasis. The persons with open wound are

advised not to handle the contaminated fish or swim in

The infection

occur.

immunocompromised patients

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is

who are suffering from

severe in

Is Aeromonas hydrophila a potential pathogen of food safety concern?

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disorders may

Editorial

Microbial food safety is growing public health issue, which is confronting the industrialized as well as developing nations of the world. Food safety gives assurance that food will not cause any harm to the consumer when it is prepared and/or eaten [1]. There are several organisms, such as Listeria monocytogenese, Aeromonas hydrophila, Yersinia enterocolitica, Campylobacter jejuni, Escherichia coli 0157: H7, Plesiomonas shigelloides, Vibrio parahaemolyticus, and Bacillus cereus, which are considered important from food safety point of view [1,2]. Aeromonas hydrophila is an aquatic organism of medical important that was originally isolated from frogs, in which it produces the red leg disease. The disease aeromoniasis is caused by A. hydrophila, A. caviae, and A. sobria. Among these, A. hydrophila is an emerging foodborne bacterial zoonotic pathogen, which has been reported from many countries of the world including India. It can cause disease in immunocompetent as well as immnocompromised persons. The causative agent is facultative anaerobe, Gram negative, heterotrophic, polar flagellated, straight rod, coccoid or rod shaped, oxidase positive, and indole positive [3,4]. Aeromonas hydrophila is widely distributed in fresh water, salt water, water supplies, sludge, sewage, and fish tank. The organism is susceptible to chlorine, but resistance to cold temperature and common antibiotics, such as penicillin, ampicillin, and colistin. It has a wide temperature range as it can grow from -2 to 45°C. A number of factors, such as enterotoxins, hemolysin, amylase, aerolysin, gelatinase, lipase, and chitinase are believed to be attributed in the pathogenesis of A. hydrophila [5,6]. One study indicated that over 50% of the raw milk samples were contaminated with A. hydrophila [7]. The multiplication of organism probably occurs during storage in refrigerated bulk tanks. Aeromonas hydrophila is a psychrotophic bacterium, and therefore, it grows well in foods during refrigeration [8]. The author has isolated A. hydrophila from water, fish, meat, poultry, and milk. It is mentioned that fish, water, milk, ice cream, meat, vegetables, and sea foods are incriminated in A. hydrophila infections. Many workers from different countries have described the involvement of A. hydrophila with diarrhea particularly in children of developing nations. The disease can occur in sporadic as well as in epidemic form. An outbreak of A. hydrophila occurred in China in 1993 in which 82 persons were affected, and the source of infection was drinking water, which was contaminated with sewage. A recent massive foodborne outbreak of A. hydrophila involving more than 200 college students was reported from China during 2012. The students developed acute diarrhea, abdominal pain, headache, vomiting, and fever. The epidemiological investigation implicated cold salad as the vehicle of transmission in this outbreak. The vegetables used to

contaminated water [3]. Sincere efforts should be made to educate the food handlers, food preparers, and consumers about the principles of food hygiene. It is emphasized that all food establishments should implement the good hygienic practice, good manufacturing practice, and hazard analysis critical control point from food safety point of view. As *Ahydrophila hydrophila* is a psychrotoph (cold loving organism), its growing role an important pathogen in the safety of various foods needs to be further investigated.

References

- 1. Pal M, Mahendra R. Sanitation in Food Establishments 2015, 1st Edition. LAMBERT, Saarbruchen, Germany.
- Pal M. Campylobacter jejuni: An emerging foodborne pathogen of global significance. J Exp Food Chem. 2017; 3:1-4.
- 3. Pal M. Zoonoses 2007, 2nd Edition. Satyam Publishers, Jaipur, India.
- 4. Zhang Q, Shi GQ, Tang GP, et al. A foodborne outbreak of Aeromonas hydrophila in a college, Xingyi city, Guizhou, China. Western Pac Surveill Response J. 2012;3:39-45.
- 5. Cahill MM. Virulence factors in Aeromona spp. J Appl Bacteriol. 1990; 69:1-16.

- 6. Yang SM, Wand MS. Aeromonas hydrophila and its pathogenesis to humans. Chinese J Disease Control and Prevention. 2006;10:511-14.
- Kirov SM, Huli DS, Hayward LJ. Milk as a potential source of Aeromonas gastrointestinal infection. J Food Prot. 1993;56:36-9.
- 8. Daskalov H. The importance of Aeromonas in food safety. Food Control. 2006;17: 474-83.
- 9. Holmas P, Sartory DP. An evaluation of media for the membrane filtration enumeration of Aeromonas from drinking water. Lett Appl Microbiol. 1993;17:58-60.

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