





Phylogenetic background of enterotoxigenic and enteroinvasive *Escherichia coli* from patients with diarrhea in Sirjan, Iran

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ABSTRACT

Background and Objectives: Diarrheagenic *Escherichia coli* (DEC) strains are a major cause of intestinal syndromes in the developing countries. The aim of this study was to determine the prevalence of enterotoxigenic *E. coli* (ETEC) and entero-invasive *E. coli* (ETEC) in relation to phylogenetic background from patients with diarrhea.

Materials and Methods: A total of 110 *E. coli* isolates were obtained from diarrhea patients in Sirjan, southeast of Iran. The *E. coli* isolates were confirmed using biochemical and bacteriological tests. DNA of *E. coli* isolates was extracted by boiling method and checked for existence of ETEC (*LT* and *ST* genes) and EIEC (*ipaH* gene) pathotypes and also characterize the phylogenetic groups on the basis of presence or absence of the *chuA*, *yjaA* genes and an anonymous DNA fragment, TspE4. C2 by multiplex PCR.

Results: Out of 110 *E. coli* isolates, 32 (29.09%) were positive for ETEC (*LT* and *ST* genes) and 6 (5.45%) possessed EIEC (*ipaH* gene) pathotypes. Isolates fall into four phylogenetic groups: A (39.09%), B1 (20%), B2 (15.45%) and D (25.45%). Phylotyping of isolates of DEC indicated they were distributed in four phylogenetic groups including A (12 isolates), B1 (7), B2 (9) and D (10).

Conclusion: In this study, the DEC isolates were segregated into different phylogenetic groups. The majority of isolates belonged to phylo-groups A and D.

Keywords: Diarrheagenic Escherichia coli, Phylogenetic group, Diarrhea

INTRODUCTION

Diarrhea is one of great concern throughout the world with high morbidity and mortality, especially in developing countries. The major causes of diarrhea differ considerably in developing and industrialized countries. Among the bacterial pathogens, diarrheagenic *Escherichia coli* (DEC) is one of the important cause of endemic and epidemic diarrhea worldwide (1). In relation to diarrhea, *E. coli* strains have been classified into six groups, according to their serotypes and virulence factors and these include enterotoxigenic *E. coli* (ETEC), enteroinvasive *E. coli* (EIEC), enteropathogenic *E. coli* (EPEC), enterohaemorrhagic *E. coli* (EHEC), enteroaggregative *E. coli* (EAggEC) and diffusely adherent *E. coli* (DAEC) (2). Among the six recognized diarrheagen-

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ic categories of E. coli, ETEC is the most common cause of E. coli-mediated diarrhoea, is contracted by consumption or use of contaminated food or water. Clinical human ETEC isolates produce one or both of two enterotoxins; the heat stable toxins (ST) and heat labile toxin (LT) (3). As expected, it has become clear that relative proportions of LT, ST, and LT/ST toxin-producing ETEC vary from one geographic area to another in patients with ETEC diarrhea (4-6). EIEC is mainly cause of bacillary dysentery that responsible for a substantial proportion of acute diarrhoeal diseases worldwide (7). The Invasion associated Pathogen Antigen or *ipaH* gene is a key virulence factor for EIEC, and thus dysentery is characterized by fever, painful abdominal cramps and diarrhea, sometimes vomiting and the stool contains blood and leukocyte (8).

Strains of *E. coli* are genetically diverse and have been categorized into four major phylogenetic groups, A, B1, B2, and D. Phylogenetic groups differ in their genotypic and phenotypic characteristics, comprising their antibiotic resistance and virulence genes profiles. The most diarrheagenic *E. coli* strains assign mostly to D phylo-group and the commensal strains to groups A and B1 (9, 10).

The main objectives of the present study were to determine the prevalence of ETEC and EIEC and distribution of phylogenetic groups in *E. coli* isolated from diarrhea patients in Sirjan, Iran.

MATERIALS AND METHODS

Bacterial strains. One hundred and ten E. coli isolates were obtained from patients with diarrhea who referred to different hospitals and clinical laboratories in Sirjan city (southeastern of Iran) from May to December 2014. The samples were from 62 males and 48 females. Diarrheic samples were recognized as the incidence of unformed and watery stools with or without one of the following symptoms: fever, abdominal cramps, tenesmus and nausea. Stool specimens were directly streaked onto EMB and Mac-Conkey agar (Biolife Laboratories, Milan, Italy) for isolation of E. coli. After overnight incubation at 37 °C, lactose-fermenting colonies were selected and identified by the biochemical and bacteriological testes. From every sample, one confirmed colony of E. coli isolate was selected and was stored in Luria-Bertani broth (Invitrogen, Paisley, Scotland) with 30% sterile glycerol at -70 °C.

DNA extraction. DNA of *E. coli* isolates and reference strains was extracted by boiling method. Approximately, 3 to 5 colonies from fresh pure cultures were suspended in 0.5 mL sterile distilled water. The suspension lysed by heating at 95 °C for 10 minutes. The supernatant (template DNA) was obtained by centrifugation at 8,000 rpm for 5 minutes.

Diarrheagenic *E. coli* genes identification. All isolates were examined by multiplex PCR assay for the presence of the ETEC (*ST* and *LT* genes) and EIEC (*ipaH* gene) pathotypes. In the present study two *E. coli* strains were used as positive controls for identification of diarrheagenic *E. coli* genes: *E. coli* 10407 for ETEC and *E. coli* 85b for EIEC. *E. coli* strain MG1655 was used as a negative control for virulence genes.

Three primers used in this study are listed in Table 1 as instructed by Aranda et al. (11).

Phylogenetic background. The phylogenetic analyses of the isolates were done by presence or absence of three genetic markers *chuA*, *yjaA* and DNA fragment TspE4.C2 by a triplex PCR method (9). ECOR62 was used as positive control for *chuA*+, *yjaA*+ and TspE4.C2+ and *E. coli* strain MG1655 as a negative control for phylogenetic grouping. The reference strains were from the bacterial collection of Microbiology Department of Ecole Nationale Vétérinaire Toulouse, France. The specific primers used in this study are presented in Table 1.

RESULTS

Multiplex PCR study revealed that 38 *E. coli* isolates (34.54%) were DEC strains. In regard to individual DEC categories as expected, that ETEC was the most common (32 isolates) DEC isolated (15 with the *LT* and *ST* genes, 10 with only *ST* gene and 7 with *LT* gene) (29% of isolates). Out of *E. coli* isolates examined, 6 had *ipaH*, which characterized presumptively as EIEC pathotype (5.45% of isolates) because there are additional confirmatory phenotypic tests for EIEC (12) (Table 2) (Fig. 1).

PCR phylotyping showed that 110 *E. coli* isolates segregated into phylogenetic groups A (39.09%), B1 (20%), B2 (15.45%) and D (25.45%) (Table 3) (Fig. 2).

Gene	Primer Sequence (5'-3')	Product size (bp)
LT	GGCGACAGATTATACCGTGC	450
	CGGTCTCTATATTCCCTGTT	
ST	ATTTTTCTTTCTGTATTGTCTT	190
	CACCCGGTACAAGCAGGATT	
ipaH	GTTCCTTGACCGCCTTTCCGATACCGTC	600
	GCCGGTCAGCCACCCTCTGAGAGTAC	
chuA	GACGAACCAACGGTCAGGAT	279
	TGCCGCCAGTACCAAAGACA	
yjaA	TGAAGTGTCAGGAGACGCTG	211
	ATGGAGAATGCGTTCCTCAAC	
TspE4C2	GAGTAATGTCGGGGGCATTCA	152
	CGCGCCAACAAAGTATTACG	

Table 1. Oligonucleotide primers used in the present study

Table 2. Distribution of ETEC and EIEC pathotypes in phylogenetic groups

DEC	Gene	TotalN (%)	Phylo-group			
			А	B1	B2	D
ETEC	ST	10 (10.00)	2 (20,00)	2 (20.00)	2 (20.00)	4 (40.00)
	LT	7 (6.36)	1 (14.28)	3 (42.85)	2 (28.57)	1 (14.28)
	LT/ST	15 (12.72)	8 (53.33)	2 (13.33)	3 (20.00)	2 (13.33)
EIEC	ipaH	6 (5.45)	1 (16.66)	2 (33.33)	-	3 (50.00)
Total		38 (34.54)	12 (31.57)	9 (23.68)	7 (18.42)	10 (26.31)

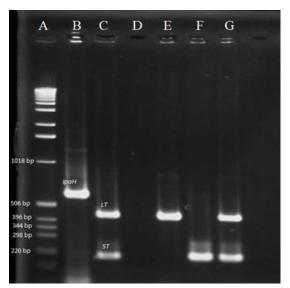


Fig 1. A: ladder 1Kb, B: positive control *E. coli* 85b, C: positive control *E. coli* 10407, D: positive control *E. coli* MG1655, E: the positive isolate for LT gene, F: the positive isolate for ST gene, G: the positive isolate for LT and ST genes.

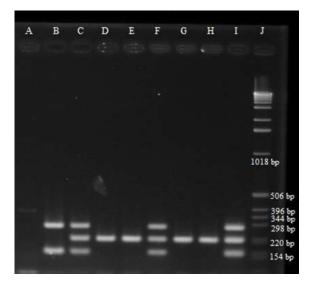


Fig 2. A: negative control *E. coli* MG1655, B: D phylo-group, C, F: B2 phylo-group, D, E, G, H: A phylo-group, I: positive control E. coli ECOR62, J: ladder 1Kb

Phy	Total			
А	B1	B2	D	
43 (39.09)	22 (20.00)	17 (15.45)	28 (25.46)	110 (100.00)

Results of phylotyping of DEC isolates indicated that they were distributed in four phylogenetic groups including A (n=12), B1 (n=7), B2 (n=9) and D (n=10). Ten *ST* positive diarrheic isolates belonged to A (n=2), B1 (n=2), B2 (n=2) and D (n=4) groups, whereas 7 *E. coli* isolates possessed *LT* gene fell into A (n=1), B1 (n=3 isolates), B2 (n=2) and D (n=1) groups. Phylotyping of *ST/LT* positive isolates indicated that these belonged to A (n=8), B1 (n=2), B2 (n=3) and D (n=2) phylo-groups. Of the 6 *ipaH* positive isolates, 1, 2 and 3 belonged to A, B2 and D phylo-groups respectively (Table 2).

DISCUSSION

Diarrheal disease caused by ETEC is the most common cause of travelers' diarrhea and diarrhea in all age groups in regions with poor sanitation in the developing countries including Iran (3, 12, 13). EIEC group represents an important enteric pathogen in different region of the world. A potential contributor to the lack of attention to the epidemiology of EIEC is that it is often observed to be an uncommon cause of diarrhea relative to other DEC (14, 15). The epidemiological features of DEC as a causative agent of diarrhea have a regional variation. A similar profile has also been observed between and within countries from the same geographical region (1, 2). In the present study, DEC was detected in 34.54% of all screened patients. Difference in the frequency of ETEC toxin types may occur from year to year and among different geographic regions. In this study, isolates carrying only the ST gene were more prevalent (10/32) than those carrying genes for LT (7/32) or both ST and LT genes (15/32). This result is similar to the report of previous studies in Iran (16), Bangladesh (5) and Tunisia (17) that the ST-expressing ETEC was the most common form. However, other studies conducted in Latin American countries, included Mexico, Peru, and Argentina reported that ETEC strains have shifted from ST-producers to significantly more LT-producing strains (18). On the other hand, in developing world the occurrence of ETEC related diarrhea decreases during the first five years of life whereas, children and adults from developed countries that travel to these countries are susceptible to this type of diarrhea, indicating that natural immunity develops (19). Infrequent studies have been done on EIEC in Iran. In this study, *ipaH* gene was used to identify EIEC from diarrheal samples. The low prevalence of EIEC isolates in the present study (5.45%) and the low rate of its recovery in previous studies suggest that this pathotype may play a less important role in diarrhea in developing areas (20). The prevalence of EIEC has been reported to be various in different geographical regions (21, 22). Vieira et al, reported high prevalence rates of EIEC (42/915) infection in diarrhea in 22 rural communities in northwestern Ecuador (13). In Colombia one (0.29%) EIEC isolate was identified from 466 stool samples in patients and 349 stool samples from controls (23).

E. coli strains fell into four main phylogenetic groups, each represents ecological specialization which prerequisite to understanding the epidemiology of infectious diseases (24). A strategy for recognizing the evolutionary origins of pathogenic E. coli is to determine the phylogenetic background of the virulence factors (25). In phylogenetic analyses performed to date, it has been reported that intestinal infection strains mostly belong to group D and groups A and B1 bacteria are considered to be commensal isolates (10). Phylogenetic group A was the most prevalent (39.09%) in E. coli isolates in this study. This result is in accordance with other studies in Iran and worldwide (26-28). Distribution of the other groups was as follows: D (25.45%), B1 (20%), and B2 (15.45%). According to the results, DEC (ETEC and EIEC) isolates were present among the isolates from A (n=12), B1 (n=7), B2 (n=9) and D (n=10) phylogenetic groups. Usein et al. in Rumania found that 51% of the examined DEC isolates from children belonged to group A, followed by group B2 (23%) (29). Another study analyzing commensal E.coli strains isolated from the stool of three geographically distinct human populations (France, Croatia and Mali) showed that strains from phylogenetic groups A and B1 were the most common, followed by phylogenetic group D strains (30). Several studies also revealed that EPEC and STEC strains segregate mainly into phylogenetic group B1 and confirms the rarity of the phylogenetic group B2. The remaining strains belonged to phylogenetic groups A and D (25, 31, 32). In a study in Costa

Rica, commensal *E. coli* isolates from children were associated to phylo-groups A and D (36%), while the studied DEC fell into B1 (35%), A (29%), B2 (23%), and D (14%) (33). These differences in distribution of the phylogenetic background among the strains of geographically distinct populations in different studies may be due to the use of antibiotics, differences arising from different sampling areas, dietary factors, health status of the host, geographic climatic conditions, or host genetic factors.

In conclusion, the DEC isolates were segregated into different phylogenetic groups and the majority of isolates fell into the phylogenetic groups A and D. ETEC was recovered at high rates from diarrhea in the study population.

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REFERENCES

- Jafari F, Shokrzadeh L, Hamidian M, Salmanzadeh-Ahrabi S, Zali MR. Acute diarrhea due to Enteropathogenic bacteria in patients at hospitals in Tehran. *Jpn J Infect Dis* 2008; 61: 269-273.
- Amisano G, Fornasero S, Migliaretti G, Caramello S, Tarasco V, Savino F. Diarrheagenic *Escherichia coli* in acute gastroenteritis in infants in North-West Italy. *New Microbiol* 2011; 34: 45-51.
- Shahrokhi N, Bouzari S, Jafari A. Comparison of virulence markers and antibiotic resistance in enterotoxigenic *Escherichia coli* isolated ten years apart in Tehran. *J Infect Dev Ctries* 2011; 5: 248-254.
- Abu-Elyazeed R, Wierzba TF, Mourad AS, Peruski LF, Kay BA, Rao M, et al. Epidemiology of enterotoxigenic *Escherichia coli* diarrhea in a pediatric cohort in a periurban area of lower Egypt. *J Infect Dis* 1999; 179: 382-389.
- Qadri F, Das SK, Faruque AS, Fuchs GJ, Albert MJ, Sack RB, et al. Prevalence of toxin types and colonization factors in enterotoxigenic *Escherichia coli* isolated during a 2-year period from diarrheal patients in Bangladesh. *J Clin Microbiol* 2000; 38: 27-31.
- Rao MR, Abu-Elyazeed R, Savarino SJ, Naficy AB, Wierzba TF, Abdel-Messih I, et al. High disease burden of diarrhea due to enterotoxigenic *Escherichia coli*

among rural Egyptian infants and young children. *J Clin Microbiol* 2003; 41: 4862-4864.

- Peng J, Yang J, Jin Q. The molecular evolutionary history of *Shigella* spp. and enteroinvasive *Escherichia coli. Infect Genet Evol* 2009; 9: 147-152.
- Ahmed AM, Miyoshi S, Shinoda S, Shimamoto T. Molecular characterization of a multidrug-resistant strain of enteroinvasive *Escherichia coli* O164 isolated in Japan. *J Med Microbiol* 2005; 54: 273-278.
- Clermont O, Bonacorsi S, Bingen E. Rapid and simple determination of the *Escherichia coli* phylogenetic group. *Appl Environ Microbiol* 2000; 66: 4555-4558.
- Carlos C, Pires MM, Stoppe NC, Hachich EM, Sato MIZ, Gomes TAT, et al. *Escherichia coli* phylogenetic group determination and its application in the identification of the major animal source of fecal contamination. *BMC Microbiol* 2010; 10: 161.
- Aranda KRS, Fagundes-Neto U, Scaletsky IC A. Evaluation of multiplex PCRs for diagnosis of infection with diarrheagenic *Escherichia coli* and *Shigella* spp. *J Clin Microbiol* 2004; 42: 5849-5853.
- Jafari A, Aslani MM, Bouzari S. *Escherichia coli:* a brief review of diarrheagenic pathotypes and their role in diarrheal diseases in Iran. *Iran J Microbiol* 2012; 4: 102-117.
- Alizade H, Ghanbarpour R, Aflatoonian MR. Molecular study on diarrheagenic *Escherichia coli* pathotypes isolated from under 5 years old children in southeast of Iran. *Asian Pac J Trop Dis* 2014; 4(Suppl 2): S813-S817
- Vieira N, Bates SJ, Solberg OD, Ponce K, Howsmon R, Cevallos W, et al. High prevalence of enteroinvasive *Escherichia coli* isolated in a remote region of northern coastal Ecuador. *Am J Trop Med Hyg* 2007; 76: 528-533.
- Constantiniu S, Buzdugan I, Romaniuc A, Cozma L, Filimon R, Dumbrava M, et al. Setotypes of *Escherichia coli* enteroinvasive in northeastern districts of Romania. *J Prev Med* 2001; 9: 67-73.
- Alizade H, Sharifi H, Naderi Z, Ghanbarpour R, Bamorovat M, Aflatoonian MR. High frequency of diarrheagenic *Escherichia coli* in HIV-infected patients and patients with thalassemia in Kerman, Iran. *J Int Assoc Provid AIDS Care DOI:* 10.1177/2325957415617831
- Al-Gallas N, Abbassi SM, Hassan AB, Aissa RB. Genotypic and phenotypic profiles of enterotoxigenic *Escherichia coli* associated with acute diarrhea in Tunis, Tunisia. *Curr Microbiol* 2007; 55: 47-55.
- Harris AM, Chowdhury F, Begum YA, Khan AI, Faruque ASG, Svennerholm AM, et al. Shifting prevalence of major diarrheal pathogens in patients seeking hospital care during floods in 1998, 2004, and 2007 in Dahka, Bangladesh. *Am J Trop Med Hyg* 2008; 79: 708-714.
- 19. Rodas C, Mamani R, Blanco J, Blanco JE, Wiklund

G, Svennerholm AM, et al. Enterotoxins, colonization factors, serotypes and antimicrobial resistance of enterotoxigenic *Escherichia coli* (ETEC) strains isolated from hospitalized children with diarrhea in Bolivia. *Braz J Infect Dis* 2011; 15: 132-137.

- 20. Pourakbari B, Heydari H, Mahmoudi S, Sabouni F, Teymuri M, Ferdosian F, et al. Diarrhoeagenic *E. coli* pathotypes in children with and without diarrhoea in an Iranian referral paediatrics centre. *East Mediterr Health J* 2013; 19: 617-621.
- 21. Sharifi Yazdi MK, Akbari A, Soltan Dallal MM. Multiplex polymerase chain reaction (PCR) assay for simultaneous detection of shiga-like toxin (*stx1* and *stx2*), intimin (eae) and invasive plasmid antigen H (*ipaH*) genes in diarrheagenic *Escherichia coli*. *Afr J Biotechnol* 2011; 10: 1522-1526.
- 22. Nguyen TV, Van Le P, Huy Le C, Weintraub A. Antibiotic resistance in diarrheagenic *Escherichia coli* and *Shigella* strains isolated from children in Hanoi, Vietnam. *Antimicrob Agents Chemother* 2005; 49: 816-819.
- Gomez-Duarte OG, Romero-Herazo YC, Paez-Canro CZ, Eslava Schmalbach JH, Arzuza O. Enterotoxigenic *Escherichia coli* associated with childhood diarrhoea in Colombia, South America. *J Infect Dev Ctries* 2013; 7: 372-381.
- Derakhshandeh A, Firouzi R, Moatamedifar M, Motamedi A, Bahadori M, Naziri Z. Phylogenetic analysis of *Escherichia coli* strains isolated from human samples. *Mol Biol Res Commun* 2013; 2: 143-149.
- 25. Girardeau JP, Dalmasso A, Bertin Y, Ducrot C, Bord S, Livrelli V, et al. Association of virulence genotype with phylogenetic background in comparison to different seropathotypes of shiga toxin-Producing *Escherichia coli* isolates. *J Clin Microbiol* 2005; 43: 6098-6107.
- Alizade H, Fallah F, Ghanbarpour R, Aflatoonian MR, Goudarzi H, Sharifi H. Phylotyping of *bla*_{CTX-M-15} gene

in extended spectrum beta lactamase producing *Escherichia coli* isolates from clinical samples in Iran. *HVM Bioflux* 2014; 6, 169-173.

- 27. Alizade H, Fallah F, Ghanbarpour R, Aflatoonian MR, Goudarzi H, Sharifi H. Phylogenetic groups, extended-spectrum β-lactamases and metallo-β-lactamase in *Escherichia coli* isolated from fecal samples of patients with diarrhea in Iran. *Gastroenterol Hepatol Bed Bench* 2015; 8, 207-214.
- Dhanji H, Patel R, Wall R, Doumith M, Patel B, Hope R, et al. Variation in the genetic environments of *bla*_{CTX-M-15} in *Escherichia coli* from the faeces of travelers returning to the United Kingdom. *J Antimicrob Chemother* 2011; 66, 1005-1012.
- Usein CR, Tatu-Chitoiu D, Ciontea S, Condei M, Damian M. *Escherichia coli* pathotypes associated with diarrhea in Romanian children younger than 5 years of age. *Jpn J Infect Dis* 2009; 62: 289-293.
- Duriez P, Clermont O, Bonacorsi S, Bingen E, Chaventre A, Elion J, et al. Commensal *Escherichia coli* isolates are phylogenetically distributed among geographically distinct human populations. *Microbiology* 2001;147:1671-1676.
- Donnenberg MS, Whittam TS. Pathogenesis and evolution of virulence in enteropathogenic and enterohemorrhagic *Escherichia coli*. J Clin Investig 2001; 107: 539-548.
- 32. Escobar-Paramo P, Clermont O, Blanc-Potard AB, Bui H, Le Bouguenec C, Denamur E. A specific genetic background is required for acquisition and expression of virulence factors in *Escherichia coli*. *Mol Biol Evol* 2004; 21: 1085-1094.
- Perez C, Gomez-Duarte OG, Arias ML. Diarrheagenic *Escherichia coli* in children from Costa Rica. *Am J Trop Med Hyg* 2010; 83: 292-297.