

# Multi-Drug Resistant (MDR) Detection in *Escherichia coli* in Canary Birds (*Serinus canaria*) Imported from Malaysia

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#### Abstract

The frequency of canary imports continues to increase every year. Antibiotic resistance is a global problem that threatens human and animal health worldwide. Human interaction with birds as pets is a public health concern because it has the potential to increase zoonotic diseases. This study was conducted to identify the antibiotic resistance of E. coli using fecal swab samples of imported canaries from Malaysia. Samples were grown on an EMBA medium for the isolation test, Gram staining test, and IMViC test were performed to continue the identification test -Kirby-Bauer diffusion test - to determine antibiotic sensitivity. Based on morphological culture, Gram staining, and biochemical tests, the sample examination results showed 18% (27/150) were positive for E. coli, 16% (24/150) showed the highest resistance to tetracycline, 15,33% (23/150) amoxicillin, 12,66% (19/150) trimethoprimsulfamethoxazole, 6% (9/150) ciprofloxacin, and 14,66% (22/150) isolates were confirmed MDR because they were resistant to three to four antibiotics. Further efforts are needed to understand and address the factors that lead to antibiotic resistance in the context of animal and public health. Prudent management of antibiotic use and monitoring of antibiotic resistance needs to be improved to maintain animal health and prevent the risk of transmission of resistant bacteria to humans.

#### Keywords

Communicable disease, *Escherichia coli*, multi-drug resistance, public health concern.

#### Introduction

The high public interest in keeping pet birds has led to an increase in the bird trade in Indonesia, especially in East Java. The frequency of canary imports from Malaysia continues to increase every year. According to data from the East Java Animal, Fish, and Plant Quarantine Center in 2021, there were four imports of canaries totaling 4,250 birds. In 2022, the frequency of imports increased to 14 times with a total of 11,807 birds. It should be noted that bird trade traffic during travel can allow the transmission of antibiotic-resistant bacteria or antimicrobial resistance (AMR) genes (Oteo et al., 2018; Bottery et al., 2021). Pet birds are considered a source of multi-drug resistance bacteria (MDR) (Diren Sigirci et al., 2020).

Antibiotic resistance is a global problem that threatens human and animal health worldwide (Zawack et al., 2016; WHO, 2023). The World Health Organization (WHO) states that antibiotic resistance poses a serious challenge to human health, causing more than 700,000 deaths from bacterial infections each year worldwide (Zarei-Baygi et al., 2021). Research by O'Neill (2016) stated that the threat of antibiotic resistance, if uncontrolled, could lead to an increase in mortality. Human interaction with birds as pets is a public health concern because it has the potential to increase zoonotic diseases (Ahmed *et al.*, 2021; Mohamed et al., 2022). Poultry, especially birds as pets, have been identified as an environment where antibiotic-resistant bacteria can thrive (Dalazen et al., 2023; Islam et al., 2023). This statement was reinforced by Fuentes-Castillo et al. (2019) and Melo et al. (2019) who state that there are antibiotics resistant to E. coli bacteria. Aklilu et al. (2022) suggested that poultry can be a reservoir of MDR E. coli, which has the potential to cause human infections. Pathogenic *E. coli* can cause gastroenteritis, bacteremia, and urinary tract infections in humans (Ong *et al.*, 2020). In poultry, *E. coli* causes aerosacculitis, polyserositis, septicemia, and other extraintestinal diseases (Varriale *et al.*, 2020). Resistant pathogenic bacteria can proliferate in humans, animals, and the environment, threatening public health (Landecker, 2016).

Antibiotic resistance refers to changes in bacteria that make them immune to the effects of antibiotics (Apriliani and Pinatih, 2017). E. coli is a reservoir of antibiotic-resistance genes and can transfer genes encoding antibioticresistance traits to other bacterial species (O'Neill, 2016; Harijani *et al.*, 2020). *E. coli* can be resistant to more than one type of antibiotic (Xia et al., 2016). In the study conducted by Diren Sigirci et al. (2020), it was found that the majority of E. coli isolates exhibited resistance to tetracycline (84%), sulfamethoxazole (46%), streptomycin (34%), and kanamycin (25%). The results of research by Mohamed et al. (2022) stated that E. coli isolates showed multi-drug resistance to all antibiotics. One of the signs and characteristics of E. coli can spread resistance genes because of its ability to form MDR (Effendi *et al.*, 2022).

The administration of antibiotics without medical control is common and contributes to the increase in antibiotic resistance (Varriale *et al.,* 2020). Antibiotic resistance of *E. coli* bacteria in humans, animals, and the environment is considered a public health issue (Yılmaz and Dolar, 2017). However, research data indicating MDR resistance to *E. coli* bacteria in imported bird traffic are limited. With the increasing frequency of imported birds from Malaysia, research is needed to detect MDR resistance in *E. coli*. This study is expected to provide an overview of the potential of imported canary bird traffic as a reservoir for the spread of *E. coli* 



capable of producing multi-drug resistance in the community.

# Materials and Methods Study Period and Location

The study was conducted from October to December 2023. Fecal swab samples of imported canaries from Malaysia were taken at the Animal Quarantine Installation in Malang City, and bacterial isolation and sensitivity tests were conducted at the East Java Animal, Fish, and Plant Quarantine Center Laboratory. Sample

As many as 150 fecal swab samples of imported canaries from Malaysia with fresh feces criteria were collected. Swabs were labeled, sampling and was performed Sterile sticks aseptically. swab (Oxoid, Bangistoke, UK) were placed in tubes containing 2.5% Buffered Peptone Water (BPW). Then, the samples were stored in a cooler box and brought to the laboratory. **Isolation and Identification** 

Canary fecal swab samples (n=150) were grown on Eosin Methylene Blue Agar (EMBA) media in streaks and incubated at 37°C for 24 hours to select and isolate *E. coli*. One colony with typical *E. coli* morphology was selected and identified using conventional methods (Yilmaz and Guvensen, 2016).

#### Sensitivity Test

The antibiotic sensitivity test using the Kirby-Baurer method with the disk diffusion test produces qualitative categories with sensitive, intermediate, and resistant assessments (Indana *et al.,* 2020). Bacterial cultures obtained from colonies found on EMBA media were grown in test tubes containing 8 ml of physiological NaCl, homogenized using a vortex until a turbidity equal to the McFarland standard of 0.5 was obtained, equivalent to  $1.5 \times 10^8$  cfu/ml. Then, 0.2 ml was taken and applied to the entire surface of Mueller Hinton Agar (MHA) media. Germs were allowed to stick to the media for 15 minutes, then antibiotic disks were placed on MHA media. The disc was slightly pressed on the surface of the agar and then the bacterial culture incubated at  $37^{\circ}$ C for 24 hours.

#### **Results and Discussion** Isolation and identification

The results of morphological culture, Gram staining, and biochemical testing, showed that 19, 33% (29/150) presented E. coli (Table 1). The presence of metallic green bacterial colonies on EMBA media signifies a successful morphological culture of E. coli (Figure 1). The presence of red colonies and short rods on the Gram stain indicates a negative Gram stain result (Figure 2). Indole ring on SIM test (positive Indole), inverted fir tree formation on SIM test (Motile), red color change on methyl red (MR) test (positive MR), vellow color on Voges-Proskauer (VP) test (negative VP), and green color on citrate test (negative citrate) indicate that the IMViC test results are positive for E. coli (Figure 3). IMViC test results showed 18% (27/150) were positive for *E. coli* (Table 1).

Test	Eosin Methylene Blue Agar	Indole	Motile	Citrate	Methyl Red	Voges Proskauer
Total	29	27	27	27	27	27





Figure 1. Escherichia coli colonies in Eosin Methylene Blue Agar.

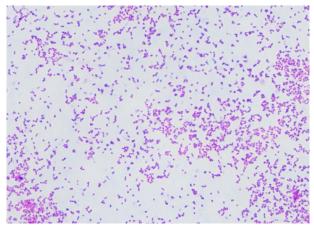


Figure 2. Gram-stained Escherichia coli colonies under the microscope.



Figure 3. IMViC test results indicate Escherichia coli

EMBA media culture contains *E. coli* bacteria; the acid produced during lactose fermentation will produce green colonies with

a metallic sheen (Ansharieta *et al.*, 2021). With microscopic identification at 1000x magnification, Gram-stained *E. coli* bacteria



showed a short rod-shaped morphology and a red color. This is because the thin nature of the Gram-negative bacterial cell wall, which consists of lipoproteins and peptidoglycan, prevents *E. coli* from retaining crystal violet dye during the Gram-staining procedure (Rahmahani *et al.*, 2020).

Positive indole test results are evidenced by a red ring at the top after the addition of Kovac's reagent, and there is turbidity that resembles an upside-down fir tree in the area of the needle prick. The observed turbidity serves as evidence of *E. coli's* capability to move on semisolid substrates (Yanestria *et al.*, 2022). The enzyme tryptophanase, synthesized by *E. coli*, catalyzes the breakdown of tryptophan into indole and pyruvic acid, resulting in the development of a red ring (Jayan and Sun, 2022).

A positive methyl-red test result is indicated by a yellow-to-red color change. This is because bacteria oxidize glucose by producing acid, the methyl-red test results turn red (Bren *et al.*, 2016). A methyl red pH indicator was added after the media was incubated for 48 hours. The pH of the media can drop to  $\leq$ 4.4 as a consequence of glucose fermentation and the production of various acidic chemicals by *E. coli* (Rombouts *et al.*, 2020). After being diluted with  $\alpha$ -naphthol and a 40% KOH solution, the Voges-Proskauer test showed a negative result marked by a change in color to brownish yellow. This can be attributed to *E. coli's* capacity to convert carbohydrates into acidic compounds instead of neutral products like acetoin (Förster and Gescher, 2014).

The results of the citrate test performed with Simmons Citrate Agar (SCA) medium (CM0155 Oxoid<sup>TM</sup>) after a 24-hour incubation period at 37°C were characterized by a green color. However, no color change was observed on the citrate test media, indicating a negative result for *E. coli*. This is because *E. coli* bacteria do not utilize citrate as a carbon source in the environment (Zlatkov and Unlin, 2019).

#### **Antibiotic Sensitivity Test**

The Kirby-Bauer diffusion method was used to determine the sensitivity of bacteria on MHA media using a 0.5 McFarland standard bacterial suspension. The zone of inhibition was measured with a caliper and then compared with the CLSI 2020 standard (Table 2) after the media was incubated for 24 hours at 37°C. 22 *E. coli* isolates showed resistance to three to four different antibiotics, with an MDR of 14.66% (22/150).

Antibiotics	Disk Content	<b>Resistant</b> ≤ mm	Intermediate	Sensitive ≥ mm
Ceftazidime	30 µg	17	18-20	21
Amoxicillin	20 µg	13	14-17	18
Ciprofloxacin	5 µg	21	22-25	26
Tetracycline	30 µg	11	12-14	15
Trimethoprim	23.75 µg	10	11-15	16
sulfamethoxazole				

**Table 2.** Interpretation of inhibition zone measurements based on the provisions of the Clinical and Laboratory Standard Institute (CLSI, 2020).



The results of the *E. coli* antibiotic resistance test showed the highest level of resistance to tetracycline 16% (24/150). This study determined the level of resistance of *E. coli* to various antibiotics, including 15,33%

Table ? Desistance Test

(23/150) to amoxicillin, 12, 66% (19/150) to trimethoprim-sulfamethoxazole, 6% (9/150) to ciprofloxacin, and no antibiotic resistance to ceftazidime, as shown in Table 3.

Antibiotics	Resistant	Intermediate	Sensitive
CAZ	-	-	27
AML	23	-	4
CIP	9	-	18
TE	24	1	2
SXT	19	-	8

**Notes:** CAZ = Ceftazidime, AML = Amoxicillin, CIP = Ciprofloxacin, TE = Tetracycline, SXT = Trimethoprim sulfamethoxazole.

The antibiotic resistance profile based on the results of the *E. coli* resistance test showed that of the 18% (27/150) positive *E. coli*, one isolate was resistant to one class of antibiotics, while two isolates were resistant to two classes of antibiotics, and 14% (22/150) isolates were confirmed MDR because they were resistant to three to four classes of antibiotics (Figure 4). The pattern of antibiotic resistance is as follows: AML-TE-SXT, AML-CIP-TE, and AML-CIP-TE-SXT, each with one isolate (Table 4).

Total				
14				
4				
4				
22				

**Notes:** CAZ = Ceftazidime, AML = Amoxicillin, CIP = Ciprofloxacin, TE = Tetracycline, SXT = Trimethoprim sulfamethoxazole.



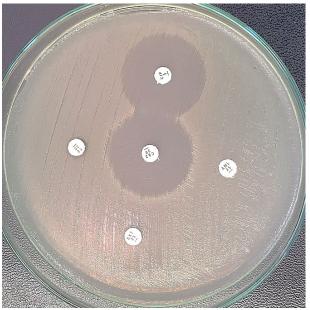


Figure 4. Analysis of the susceptibility to antibiotics of an Escherichia coli

Antibiotic resistance is one of the public health problems facing the world. Organisms resistant to antibiotics can spread rapidly, posing a danger to the population in the form of more difficult-to-cure and treat types of infectious diseases (Li and Webster, 2018). There were 24 isolates (16%) that showed the highest resistance to tetracycline. Tetracycline is a bacteriostatic antibiotic (Simanjuntak et al., 2022). Tetracycline works by inhibiting protein synthesis in the 70s and 80s subunits of the ribosome. The mechanism of action of tetracyclines involves suppression of protein synthesis in bacterial cells, which can be achieved through direct inhibition as well as structural modifications to inhibit the protein synthesis process. Resistance to tetracycline is due to the presence of genes encoding resistance, namely extrachromosomal genes that can replicate and synthesize proteins for plasmid needs (Agustanty and Andre, 2022).

Amoxicillin includes antibiotics in the form of  $\beta$ -lactam with a broad spectrum that is bactericidal, and effective in inhibiting Gram-

positive and Gram-negative bacteria (Maida and Kinanti, 2019). There were 23 isolates (15,33%) that showed antibiotic resistance to amoxicillin. Amoxicillin works by inhibiting bacterial cell wall synthesis through binding to penicillin-binding proteins (PBPs). This results in the inhibition of the final stage in the transpeptidase of peptidoglycan synthesis in the bacterial cell wall. As a result, the cell wall biosynthesis process is inhibited, and the bacterial cell is lysed because the  $\beta$ -lactam compound binds to one or more of the penicillin-protein bonds (Anggita *et al.*, 2022).

There were 19 isolates (12, 66%) that showed the maximum level of antibiotic resistance to trimethoprim-sulfamethoxazole. Trimethoprim is considered a sulfonamide potentiator used in combination with sulfonamides. This drug combination has a effect, blocking synergistic folic acid metabolism in bacteria through two different mechanisms. However, misuse of trimethoprim leads to drug residues in animal foods and bacterial resistance in farm animals.



The effects of trimethoprim residues in humans can cause serious problems, such as antibiotic resistance, nausea, emesis, headache, pruritus, and rash (Chen *et al.*, 2017).

Treatment failure may occur due to resistance to effective microbial broadspectrum antibiotics. Treatment failure and difficult-to-treat infections can lead to high mortality rates. Drug target mutations (DNA gyrase and DNA topoisomerase IV), are mutations that limit drug accumulation, and plasmids that protect cells from lethal effects (Aslam et al., 2018). Three mechanisms of ciprofloxacin resistance that have been found are changes in target enzymes, changes in drug permeation, and plasmid-mediated quinolone resistance (Syari'ati et al., 2022). There were nine isolates (6%) that showed the maximum level of antibiotic resistance to ciprofloxacin.

The occurrence of MDR E. coli in imported birds can be caused by several environmental factors, including factors related to the feeding habits of the birds. Different feeding habits affect the presence of E. coli pathogens in birds, as reported in several surveys (Hughes et al., 2009; Kobayashi et al., 2009). In addition, high humidity and low temperature are a good atmosphere for E. coli to survive (Calero-Cáceres et al., 2017). Research results from Al-Mustapha et al. (2023) reported the occurrence of phenotypic resistance to 1-7 classes of antibiotics (MDR) other than beta-lactam antibiotics. The most common resistance was to fluoroquinolones (especially ciprofloxacin, nalidixic acid, levofloxacin, and moxifloxacin), tetracyclines (oxytetracycline and tigecycline), (gentamicin, streptomycin, aminoglycosides kanamycin, and tobramycin) and phenicols (florfenicol chloramphenicol). and These findings align with other studies conducted in Nigeria, which have also reported multi-drug resistance (MDR) among extended-spectrum beta-lactamase (ESBL) *E. coli* isolates of poultry origin (Ayandiran *et al.*, 2018; Ayeni *et al.*, 2020; Aworh *et al.*, 2021; Tama *et al.*, 2021; Al-Mustapha *et al.*, 2022). Mohamed *et al.* (2022) reported all *E. coli* isolates showed resistance to all antibiotics tested, with 100% MDR (196/196) from wild bird, chicken, and environmental samples in Malaysia.

Antibiotic resistance can be caused by factors originating from the bacteria themselves. Genetic changes that occur in bacteria can cause bacteria that are initially sensitive to an antibiotic to become less sensitive or even completely insensitive or resistant (Islam et al., 2023). Genetic changes can occur through multi-drug resistance mutations, transposons, and integrons. This mechanism causes the carrier gene (plasmid) to fuse into the bacterial chromosome so that the resistance that occurs persists and can even be passed down to the next generation (Sari et al., 2015).

In Nigeria, several studies have reported the overuse and prescription of antibiotics in humans and animals, particularly, ESBL E. coli (Ojo et al., 2016; Ayandiran et al., 2018; Al-Mustapha et al., 2020). To date, it remains unclear whether this is a major driver of lowmiddle-income resistance. In and countries (LMICs), other contextual factors such as poor diagnostic capacity, a lack of antibiotic stewardship programs, poor animal disease surveillance systems, and biosecurity measures, may be involved. The use of unconfirmed infection-spectrum antimicrobials may contribute to the emergence and dissemination of multi-drug resistance bacteria, including extended-spectrum betalactamase (ESBL) E. coli, in both humans and animals (Ikhimiukor et al., 2022). Despite the widespread belief that illicit antimicrobial use is the primary cause of antimicrobial resistance (AMR) (Holmes et al., 2016), research has shown that several other determinants impact the emergence and spread of AMR pathogens (Holmes et al., 2016; Silva et al., 2021). In general, there is no single solution, and multiple synergistic, overlapping, and complementary approaches are required, with the overarching common goal of reducing bacterial zoonotic transmission and associated economic losses.

#### Conclusion

Identification results showed that 18% (27/150) were positive for *E. coli*. Antibiotic sensitivity tests showed 14, 66% (22/150) of *E. coli* isolates were confirmed MDR as they were resistant to two to three antibiotics, with the highest level of resistance to tetracycline. This study provides important insights into the level of antibiotic resistance of *E. coli* in imported canaries from Malaysia. Further efforts need to be made to understand and address the factors causing resistance. Prudent management of antibiotic use and resistance monitoring need to be improved to maintain animal health and prevent the risk of transmission of resistant bacteria to humans.

# **Approval of Ethical Commission**

All tests were conducted without harming or sacrificing any live animals. Therefore, ethical clearance for animal experiments was deemed unnecessary. Field investigations were executed with official approval from the Quarantine Agency in Indonesia, ensuring no animals were harmed for the duration of the study. Additionally, no human participants were engaged in this research.

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#### Author's Contribution

II. MHE, and M'AK: Conceived, designed, and coordinated the study. FKS, TEP, and DAR: Designed data collection tools and supervised the field sample and data collection, laboratory work, and data entry. M and BS: Validation, supervision, and formal analysis. DR: Carried out the statistical analysis and interpretation and participated in preparing the manuscript. All authors have read, reviewed, and approved the final manuscript.

#### **Conflict of Interest**

The authors declare no relevant conflicts of interest related to this research, whether financial, personal, or professional.

# Data Availability Statement

The data used in this study are the result of our research and have been included in this manuscript, including tables, graphs, and appendices.

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