

# Vibrios as causal agents of zoonoses

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B. Austin. Vibrios as causal agents of zoonoses. Veterinary Microbiology, 2010, 140 (3-4), pp.310. 10.1016/j.vetmic.2009.03.015. hal-00556049

HAL Id: hal-00556049

https://hal.science/hal-00556049

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# Accepted Manuscript

Title: Vibrios as causal agents of zoonoses

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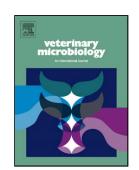
PII: \$0378-1135(09)00119-9

DOI: doi:10.1016/j.vetmic.2009.03.015

Reference: VETMIC 4385

To appear in: *VETMIC* 

Received date: 9-1-2009 Revised date: 9-2-2009 Accepted date: 2-3-2009



Please cite this article as: Austin, B., Vibrios as causal agents of zoonoses, *Veterinary Microbiology* (2008), doi:10.1016/j.vetmic.2009.03.015

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# 23 Abstract

24 Vibrios are Gram-negative rod shaped bacteria that are widespread in the coastal 25 and estuarine environments. Some species, e.g. Vibrio anguillarum and V. tapetis, 26 comprise serious pathogens of aquatic vertebrates or invertebrates. Other groups, 27 including Grimontia (= Vibrio) hollisae, Photobacterium (= Vibrio) damselae 28 subsp. damselae, V. alginolyticus, V. carchariae (= V. harveyi), V. cholerae, V. 29 fluvialis, V. furnissii, V. metschnikovii, V. mimicus, V. parahaemolyticus and V. 30 vulnificus, may cause disease in both aquatic animals and humans. The human 31 outbreaks, although low in number, typically involve wound infections and gastro-32 intestinal disease often with watery diarrhoea. In a minority of cases, for example 33 V. vulnificus, there is good evidence to actually associate human infections with 34 diseased animals. In other cases, the link is certainly feasible but hard evidence is 35 mostly lacking.

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37 Keywords: Vibrios; Fish; Invertebrates; Wound infections; Gastro-enteritis

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## Contents

- 40 1. Introduction
- 41 2. Higher risk organisms
- 42 2.1. *Vibrio cholerae*
- 43 2.2. Vibrio parahaemolyticus
- 44 2.3. *Vibrio vulnificus*
- 45 3. Lower risk organisms
- 46 3.1. *Grimontia hollisae*

47

48 3.1. Photobacterium damselae subsp. damselae 49 3.2. Vibrio alginolyticus 3.3. Vibrio harveyi (V. carchariae) 50 51 3.4. Vibrio fluvialis 52 3.5. Vibrio furnissii 53 3.6. Vibrio metschnikovii 54 3.7. Vibrio mimicus 55 4. Future perspectives 56 5. References 57 58

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## 60 1. **Introduction**

61 The vibrios are Gram-negative rod shaped bacteria that are fermentative. 62 catalase and oxidase positive, motile by polar flagella, are usually sensitive to the 63 vibriostatic agent, O/129, and mostly have a requirement for sodium chloride 64 (Farmer et al., 2005). Taxonomic improvements have resulted in some vibrios 65 transferred to new genera, e.g. Vibrio hollisae which was re-classified to the newly 66 created genus Grimontia as G. hollisae, or moved to other genera, e.g. V. damsela 67 which was transferred to *Photobacterium* as *P. damselae* (Farmer et al., 2005). 68 The organisms are generally widespread in the coastal and estuarine environments; 69 some species, e.g. V. parahaemolyticus, are commonplace in/on aquatic animals, 70 notably invertebrates (Farmer et al., 2005). Certainly, a steadily increasing 71 number of taxa, e.g. V. anguillarum and V. tapetis, have been associated with 72 diseases of aquatic animals, whereas other species, e.g. V. cholerae, comprise 73 serious pathogens of humans (Farmer et al., 2005; Austin and Austin, 2007). A 74 comparatively small number of species, e.g. V. parahaemolyticus and V. 75 vulnificus, cause disease in both aquatic animals and humans. However, there is a 76 dilemma that because an organism occurs in an aquatic animal, it does not 77 necessarily mean that this is the source of human infections. Indeed, the evidence 78 linking vibrios with zoonoses is at best incomplete and sometimes the subject of 79 conjecture. Fortunately, the number of cases of human diseases that may be traced 80 to animals is small, although comprehensive official statistics are missing. The 81 candidates for discussion include G. hollisae, P. damselae subsp. damselae, V. 82 alginolyticus, V. harveyi (= V. carchariae), V. cholerae, V. fluvialis, V. furnissii, 83 V. metschnikovii, V. mimicus, V. parahaemolyticus and V. vulnificus (Table 1). It 84 should be emphasized that the source of most of the organisms causing human

disease cannot be linked definitively to animals. Indeed, the origin of some of these bacteria may well be the waters in which the aquatic animals are found. Transmission to humans is inevitably via wound or may be food/water borne and involving direct entry into the digestive tract. Certainly, all the taxa included in this review have the potential to cause human disease although the evidence for a definite link between animals and humans is not always proven. The narrative will be divided into those organisms, e.g. *V. vulnificus*, for which there is a higher risk and good evidence linking them with zoonoses, and those for which the risk is lower and the data may be more uncertain.

# 2. Higher risk organisms

Three taxa, namely *V. cholerae, V. parahaemolyticus* and *V. vulnificus*, have been either repeatedly involved in disease outbreaks or have the potential to do so.

## 2.1. Vibrio cholerae

An epizootic, attributed to V. cholerae occurred in a wild population of ayu ( $Plecoglossus\ altivelis$ ) in the River Amano, Japan, with disease signs including petechial haemorrhages on the body surface and congestion of the organs (Austin and Austin, 2007). A similar organism was recovered from septicaemic goldfish in Australia and from sharks (see Austin and Austin, 2007). Also, there is some indication that V. cholerae (non-O1 and O139) may be involved in shrimp disease, specifically of  $Penaeus\ monodon$  (Haldari et al., 2007) and ornamental fish (Swaminathan et al., 2007) in India. Infectivity experiments suggested that V. cholerae was highly virulent to ayu and eels following immersion in 1.26 x  $10^4$  cells  $ml^{-1}$  and  $1.26 \times 10^2$  cells  $ml^{-1}$ , respectively. Yamanoi et al. (1980) reported

that with ayu, mortalities began in 2-7 days at water temperatures of 21 and 26°C, but deaths did not occur if the water temperature was at only 16°C. Only 10% mortalities occurred in eels within 5 days at a water temperature of 21°C, and 30% deaths in 3-7 days at 26°C.

V. cholerae is the cause of the human pandemics of cholerae, which is caused by cholera-toxin producing strains, and develop into extreme gastro-enteritis with copious quantities of watery diarrhoea leading to dehydration (Morris, 2003). Historically, cholera has been associated with toxigenic serogroup O1 strains, but subsequently there was the emergence of cholera-toxin producing ability in other groups, i.e. serogroup O139/non-O1. The question of relevance to the current context is whether or not strains from aquatic animals carry the toxin gene? Unfortunately, there is indeed evidence that some of the environmental isolates have been associated with toxigenicity. Toxin-gene (ctxA and zot) carrying strains have most certainly been recovered from marine waters off the west coast of USA (Jiang et al., 2003).

The source of some outbreaks has been linked with contaminated shellfish, including raw oysters (Morris, 2003) and crabs (CDC, 1991), and involves non-O1 and non-O139 strains (Farama et al., 2008). An outbreak of cholera in Louisiana, USA in 1978 was associated with shellfish caught in the Gulf of Mexico (Blake et al., 1980). Crabs, which had been transported from Ecuador to New York in 1991, resulted in three individuals developing cholera. These people and samples of crab meat revealed the presence of the pathogen (CDC, 1991). Also, cells have been transferred in the water used to transport ornamental fish from countries in

which cholera occurs (Manfrin et al., 2001). In one study between 1997 and 1998, 34 out of 420 water samples (= 8.09% of the total) revealed the presence of *V. cholerae* non-O1, and it was considered that their enterotoxins could pose a potential risk of gastro-enteritis in humans especially those operating aquaria or keeping pet fish (Manfrin et al., 2001).

## 2.2. Vibrio parahaemolyticus

The organism has been associated with mortalities in Iberian toothcarp (*Aphanius iberus*) with the signs centering on external haemorrhages, and tail rot (Austin and Austin, 2007). Cultures regarded as intermediate between *V. alginolyticus* and *V. parahaemolyticus* were recovered from diseased milkfish (*Chanos chanos*) in the Philippines (Austin and Austin, 2007). Certainly, *V. parahaemolyticus* is a well-recognized pathogen of invertebrates, including abalone, *Haliotis diversicolor supertexta* (e.g. Cai et al., 2007) and shrimp (e.g. Jayasree et al., 2006). Disease signs in abalone include a change in colour to white and a detachment from the diatom films on which they are cultured (Cai et al., 2007). In *Penaeus monodon*, the organism has been implicated as a cause of red disease in India (Jayasree et al., 2006). Pathogenicity has been established in tiger prawns with the LD<sub>50</sub> dose of 1 x 10<sup>5</sup> CFU shrimp<sup>-1</sup> (Sudheesh and Xu, 2001). The corresponding value in abalone post-larvae was 3.5 x 10<sup>5</sup> CFU ml<sup>-1</sup> with the disease mirroring that of natural infections (Cai et al., 2007).

V. parahaemolyticus may spread into humans orally via contaminated food, particularly molluscs such as oysters (DePaola et al., 2003; Drake et al., 2007) leading to the development of acute gastro-enteritis with diarrhoea (Cho et al.,

2008). In Denmark during 1987-1992, the organism was recovered from 13 patients of whom 3 and 10 displayed wound and ear infections, respectively. With many cases, there was a prior association with the marine environment (Hornstrup and Gahrnhansen, 1993). A seasonality in diarrhoeal cases, which was not linked to age, was reported in Korea between 2004-2006 (Cho et al., 2008). Virulence factors centre on proteases, β-haemolysins, notably the thermostable direct haemolysin (tdh) and the tdh-related haemolysin (trh), adhesins and the expression of *V. cholerae* virulence genes including the *toxR* operons (DePaola et al., 2003; Snoussi et al., 2008).,

# 2.3. Vibrio vulnificus

The organism was recognized as a serious pathogen of eels in Japan during the 1970's with subsequent cases in Spain and Denmark (Austin and Austin, 2007). In addition, *V. vulnificus* has been mentioned as a cause of disease in *Penaeus monodon* in India (Jayasree et al., 2006). Overall, the disease is characterized by haemorrhaging seen as redness on the body surface, and later as involvement of the gastro-intestinal tract, gills, heart, liver and spleen (Austin and Austin, 2007). In 2005, the pathogen caused substantial mortality in farmed ovate pompano (*Trachinotus ovatus*) in P.R.C., with signs including external haemorrhaging and ulcers, and haemorrhaging of the gills, intestine and liver (Li et al., 2006). A new serogroup, i.e. *V. vulnificus* biotype 2 serovar A was recognized in Spain in 2000 and Denmark by 2004; the affected eels demonstrated extensive haemorrhaging and necrosis (Fouz et al., 2006). *V. vulnificus* has been recovered from fish caught in the US Gulf Coast (DePaola et al., 1994), with minimum and maximum numbers occurring in winter and April to October, respectively DePaola et al.

(1994). The highest levels, i.e.  $10^8$  bacteria  $100 \text{ g}^{-1}$ , were associated with the gut contents of bottom-feeding fish, which ate molluscs and crustacea. Lower populations were recovered from plankton-feeding fish, i.e.  $10^5 \text{ V. vulnificus}$  cells  $100 \text{ g}^{-1}$ .

A vaccine, named Vulnivaccine, which inactivated whole cells, comprises capsular antigens and toxoids of serovar E was administered by immersion for 1 h in three doses at 12 day intervals, and led to good protection in eels (RPS = 60-90%) (Esteve-Gassent et al., 2003). During field trials by prolonged immersion and boostering after 14 and 24-28 days of 9.5 million glass eels in Spain and with parallel work in Denmark, Vulnivaccine led to an RPS of 62-86% (Fouz et al., 2001). With the appearance of a second serotype of *V. vulnificus*, i.e. A, a bivalent vaccine was formulated, and determined to be protective following oral application, by anal and oral intubation, and by intraperitoneal injection (RPS = 80-100%) (Esteve-Gassent et al., 2004).

In human, *V. vulnificus* has been associated with a small but increasing number of serious life-threatening conditions, many stemming from wound infections which become septicaemic (e.g. Mouzopoulos et al., 2008). The onset of symptoms is often abrupt, with a rapid progression to septic shock and thus death despite the intervention of antibiotics, typically doxycycline (Haq and Dayal, 2005). In the USA, *V. vulnificus* has been regarded as being responsible for most of the seafood-related deaths since the first report in 1979 (e.g. Oliver, 2005). Indeed, a regular source of infection with the pathogen is the consumption of contaminated raw seafood, notably molluscs (e.g. Drake et al., 2007). Specifically

within Louisiana, USA during 1980-2004, 252 cases of *V. vulnificus* infection were reported of which 116 cases followed consumption of crabs (Barton and Ratard, 2006). In Japan between 1999 and 2003, 94 cases were reported in June to November but not at all in winter among 1045 hospitals, albeit with a mortality rate of 75% among those with sepsis (Inoue et al., 2008). With the more serious cases, patients often have underlying problems such as lymphocytic leukaemia and hypogammaglobulinaemia (Barton and Ratard, 2006), immunosuppression, diabetes and kidney disease (Kuo et al., 2007), liver disease (including alcohol related cirrhosis) and secondary skin lesions (cellulitis, oedema and haemorrhagic bulla) (e.g. Miyoshi, 2006). One outcome may be the need for amputation. Thus in the case of some patients who developed necrotizing fasciitis, which is a soft tissue infection, leg amputation proceeded when the excision of diseased tissue failed to halt the infection (Mouzopoulos et al., 2008). Another patient developed osteomyelitis after excision of necrotic soft tissue failed (Mouzopoulos et al., 2008).

A link between human infections and fish developed as a result of cases in The Netherlands and Israel. However, genetic differences have been identified between eel and human isolates (Wang et al., 2008). In one case in The Netherlands, a 63-year old man was hospitalized with severe pain in his right arm, which became progressively swollen (Veenstra et al., 1992). Also, there were small wounds on his hands. In hospital, the patient deteriorated with widespread skin and muscle necrosis, leading to surgery, which removed the diseased tissue. *V. vulnificus* was isolated from the blood, and determined to resemble a culture recovered previously from eels in a Dutch eel farm (Veenstra et al., 1992).

Eventually the patient recovered. Apparently, the day before the onset of symptoms, he had cleaned eels, which had been purchased from a local market. It was thought likely that the man became infected from the eels through open wounds on his hand. The second example concerns a major outbreak that developed in Israeli fish market workers in 1996, and was considered to reflect possible climate change insofar as the period coincided with the hottest ever recorded summer, temperatures (Paz et al., 2007). In fact, the outbreak started 25-30 days after the hottest temperatures had occurred, and concern was expressed that high water temperatures might have led to the emergence of the disease (Paz et al., 2007).

Because of the serious nature of human disease attributed to *V. vulnificus*, a great deal of attention has focused on understanding the pathogenicity mechanisms. It has been determined that isolates produce a range of pathogenicity factors including a polysaccharide capsule, haemolysin, type IV pili and various proteases, principally a serine protease (Wang et al., 2008) and a 45 kDa metalloprotease, which is regulated through quorum sensing more efficiently at 25°C rather than 37°C [this protease may therefore be produced mostly in interstitial tissues in the limbs which have lower temperature than the rest of the body], may well be responsible for skin lesions (Shinoda, 2005; Miyoshi, 2006). Purified preparations of the metalloprotease enhance vascular permeability and induces haemorrhaging through digestion of vascular basement membranes (Miyoshi, 2006). The metalloprotease degrades a number of complex macromolecules, including elastin, fibrinogen and plasma proteinase inhibitors of complement (Shinoda, 2005). Compared to an environmental isolate, a

pathogenic culture led to higher cytotoxicity and a concomitant reduction in the number of macrophages in mice during the early stage of infection (Tsuchiya et al., 2007).

## 3. Lower risk organisms

#### 3.1. Grimontia hollisae

There is limited information pointing to a role for *G. hollisae* in fish pathology. Specifically, the organism has been recovered from amberjack (*Seriola dumerili*) with vibriosis, i.e. haemorrhagic septicaemia (Ji et al., 2008). Moreover, the organism is occasionally associated in humans with moderate to severe gastroenteritis linked to the consumption of raw shellfish (Abbott and Janda, 1994). One case led to hypotension and acute kidney failure (Hinestrosa et al., 2007). An even less common occurrence in humans is sepsis (Abbott and Janda, 1994). There is scant information on the pathogenicity mechanism in humans, with the data emphasizing aerobactin which is produced in response to iron starvation (Suzuki et al., 20060

## 3.2. Photobacterium damselae subsp. damselae

P. damselae subsp. damselae (= V. damsela) was recovered initially from ulcers on the pectoral fin and caudal peduncle of the damselfish, blacksmith (Chromis punctipinnis) (Love et al., 1981). The fish were caught in the coastal waters of southern California, USA during August to October, and at Ship Rock, Catalina Island during June to October (Love et al., 1981). This suggests a seasonal distribution in the disease, possibly coinciding with warmer water temperatures and lowered resistance resulting from physiological changes in the

host during sexual maturity. The ulcers, which occur particularly in the region of the pectoral fin and caudal peduncle, may reach 5-20 mm in diameter (Love et al., 1981). Histopathology points to the presence of granulomatous ulcerative dermatitis. Subsequently, the organism was recovered from a wide range of other marine animals, including sharks, turbot (Scophthalmus maximus), yellowtail (Seriola quinqueradiata) and red banded sea bream (Pagrus auriga) (see Austin and Austin, 2007). Pathogenicity was confirmed with infectivity experiments using blacksmith in which 4-6 scales were removed, the dermis scarified, and the wound swabbed with  $10^7$ - $10^8$  viable cells of *P. damselae* subsp. *damselae*. At water temperatures of 16.0-16.5°C, the infected fish developed large ulcers within 3 days, with death following one day later (Love et al., 1981). In terms of pathogenic mechanisms, a neurotoxic acetylcholinesterase has been described (Pérez et al., 1998). Also, extracellular products (ECPs) with low proteolytic activity have been implicated with cytotoxicity, with the LD<sub>50</sub> dose ranging from 0.02-0.43 µg of protein g<sup>-1</sup> of fish with mortalities occurring 4 and 72 h later (Fouz et al., 1993). In addition, a siderophore-mediated iron sequestering system is thought to be involved in pathogenicity (Fouz et al., 1997).

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The role in human disease stems from the recovery of the organism from wound infections (Love et al., 1981).

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#### 3.3 Vibrio alginolyticus

V. alginolyticus is pathogenic to fin- and shellfish. In finfish, the organism causes septicaemia in sea bream (Sparus aurata), exophthalmia and corneal opaqueness in grouper (Epinephelus malabaricus), ascites, lethargy and melanosis

in cobia (Rachycentrib canadum), and ulcers (see Austin and Austin, 2007). Also, *V. alginolyticus* has caused large-scale mortalities in silver sea bream (Sparus sarba) in Hong Kong, gilt-head sea bream (Sparus aurata) in Spain, cultured black sea bream (Mylio macrocephalus) fry in Japan and cobia (se Austin and Austin, 2007). Indeed, Liu et al. (2004) calculated the LD<sub>50</sub> as 3.28 x 10<sup>4</sup> for cobia, and Lee (1995) described an ECP, which was lethal at 0.52 μg g<sup>-1</sup> of fish, and contained a 44 kDa toxic protease with a minimum lethal dose of 0.17 μg g<sup>-1</sup> of fish. ECP, with haemolytic and proteolytic activity, led to an effect on hepatic heat shock protein (Deane et al., 2004). A divalent vaccine containing formalized cells and ECP of *V. alginolyticus* has been developed (Moriñigo et al., 2002).

 $V.\ alginolyticus$  has been associated with shell disease and white spot in shrimp, Penaeus monodon, in India and Taiwan, with necrosis in Macrobrachium rosenbergii larvae in India, and with mass mortalities in carpet shell clam (Ruditapes decussates) larvae in Spain (e.g. Lee et al., 1996; Selvin and Lipton, 2003). With white spot, the diseased shrimp developed a reddish colour and displayed white spots in the cuticle (Selvin and Lipton, 2003). Isolates have been reported to cause mortalities when administered to shrimp, with the LD<sub>50</sub> calculated variously as  $1.13 \times 10^5 \, \text{g}^{-1}$  (Lee et al., 1996) and  $5 \times 10^6$  colony forming units (CFU) animal<sup>-1</sup> (Selvin and Lipton, 2003).

In humans, *V. alginolyticus* has been implicated with ear, soft tissue and wound infections, of which antibiotic-resistance has been cited as a major issue (Horii et al., 2005). In Denmark from 1987-1992, *V. alginolyticus* was recovered from 17

patients with mild ear infections, all of whom had been exposed previously to seawater (Hornstrup and Gahrnhansen, 1993).

# 3.4. Vibrio fluvialis

V. fluvialis-like bacteria, which were identified biochemically and by pulsed field gel electrophoresis, have been implicated as the cause of limp lobster disease of the American lobster, Homarus americanus (Tall et al., 2003) and pustule disease of abalone (Haliotis discus hannai Ino) in P.R. China (Dalian coast) (Li et al., 1998). With this condition, several sites and different growth stages of the animals were affected with 50-60% mortalities (Li et al., 1998). Experimental infectivity experiments pointed to transmission through lesions in the abalone foot with disease developing rapidly after intramuscular injection (Li et al., 1998).

An outbreak of food poisoning in India leading to gastro-enteritis during 1981 has been blamed on *V. fluvialis* insofar as the stools of 9/14 stool samples revealed the presence of the organism (Thekdi et al., 1990). Also, the taxon has been reported as a cause of wound infection leading to haemorrhagic cellulitis and cerebritis with the source considered being multiple fire-ant stings and wading in brackish water (Huang and Hsu, 2005).

### 3.5. Vibrio furnissii

V. furnissii has been associated albeit tenuously with eel disease in Spain (Austin and Austin, 2007) and with mortalities in tiger shrimp (Penaeus monodon) (Sung et al., 2001).

There has been uncertainty about a role for this organism in human disease. Certainly, it has been recovered from stool specimens, and has been implicated with infantile diarrhoea, and diarrhoeal disease from 16 patients in Brazil (e.g. Magalhaes et al., 1993) and during a cholera surveillance programme in Peru during 1994 (Dalsgaard et al., 1997). The Brazilian isolates were haemolytic and ECPs damaged HeLa cells pointing to the presence of cytolysins (Magalhaes et al., 1993). Phosphomannomutase (PPM) has been linked to significant intestinal damage within 3-days in mice following oral uptake. In contrast, PPM deficient mutants led to reduced virulence, loss of O-antigen and reduced serum resistance (Kim et al., 2003).

# 3.6. Vibrio harveyi (= V. carchariae)

An organism named as *V. carchariae* was originally recovered from a dead sandbar shark (*Carcharhinus plumbeus*) with vasculitis, which died at the National Aquarium in Baltimore, USA, in 1982 (Grimes et al., 1984). Infected animals became lethargic, inappetant, were disorientated, and developed necrotic subdermal cysts. Postmortem examination revealed encephalitis, meningitis, kidney necrosis, vasculitis, and unspecified liver and spleen damage. Other isolations were from lemon sharks (*Negraprion brevirostris*) and from gastroenteritis and heavy mortalities in grouper (*Epinephelus coioides*). A similar organism was isolated from a chronic skin ulcer on a shark (see Austin and Austin, 2007).

In a separate development, *V. harveyi* was recovered from opaque white corneas leading to blindness in common snook (*Centropomus undecimalis*) within

24 h of capture in Florida, USA (Kraxberger-Beatty et al., 1990). In jack crevalle (Caranx hippos), deep dermal lesions but not any internal damage were observed in wild specimens also from Florida (Kraxberger-Beatty et al., 1990). Meanwhile, Saeed (1995) attributed V. harveyi with mortalities in cultured brown spotted grouper (Epinephelus tauvina) and silvery black porgy (Acanthopagrus cuvieri) in Kuwait. Then, DNA:DNA hybridization led Ishimaru and Muroga (1997) to realize that pathogenic vibrios recovered from milkfish in Japan were also V. harvevi. Moreover, the organism was recovered from eye lesions in the short sunfish (Mola mola) in Spain (Hispano et al., 1997), with the reason attributed to the biting behaviour of other fish. In addition, V. harveyi has been involved with flounder infectious necrotizing enteritis, in which the abdomen becomes distended and filled with opaque fluid. There was necrosis of the posterior intestine, reddening around the anus, lethargy and inappetance in farmed summer flounder in Rhode Island, USA (Gauger et al., 2006). Also, skin ulcers and haemorrhaging around the mouth and fins was noted in sole (Solea senegalensis) in Spain (Zorrilla et al., 2003). The organism has been linked with infectious gastroenteritis (swollen intestine containing yellow fluid) in cultured red drum (Sciaenops ocelatus) from Taiwan (Liu et al., 2003).

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V. harveyi has developed into a serious pathogen of penaeids, being associated with luminous vibriosis, in which the affected shrimp glow in the dark, and Bolitas negricans involving the blockage of the digestive gland with balls of tissue (Austin and Zhang, 2006). The organism has been reported to be a factor in loose shell syndrome and white gut disease in Penaeus monodon in India (Jayasree et al., 2006).

Pedersen et al. (1998) deduced that *V. carchariae* was a junior synonym of *V. harveyi*, which was confirmed by Gauger and Gómez-Chairri (2002) from the results of 16S rDNA sequencing. Moreover, a disease, resembling vibriosis and equated to a new species, i.e. *V. trachuri*, occurred in Japanese horse mackerel (*Trachurus japonicus*) especially during summer when the seawater temperature exceeded 25°C (Iwamoto et al., 1995). Infected fish swam erratically, developed melanosis, and developed bilateral exophthalmia and internal haemorrhages. However, the organism is now recognised as synonym of *V. harveyi* (Thompson et al., 2002).

Certainly because of its importance in aquaculture, emphasis has been placed on improving diagnostics. In this connection, a polymerase chain reaction (PCR) using the toxR gene enabled detection of 4.0 x  $10^3$  cells ml<sup>-1</sup> (including cells within diseased tissues) in <5 h, but not of other vibrios (Pang et al., 2006).

Prevention of *V. harveyi* infections by vaccination has met with some success. Thus, a bivalent vaccine (with *P. damselae* subsp. *piscicida*) comprising formalized cells and ECP administered by immersion with booster by intraperitoneal injection led to high levels of protection (relative percent protection [RPS] =  $\sim$ 88%) for 4 months (Arijo et al., 2005).

In terms of human disease, *V. harveyi* (= *V. carchariae*) has been recovered from wound infections, specifically from a leg wound resulting from a shark bite in South Carolina, USA (Pavia et al., 1989).

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#### 3.7. Vibrio metschnikovii

*V. metschnikovii* is regarded as potentially pathogenic to larval giant clams, *Tridacna gigas* with infection leading to general disintegration of the tissues and total mortality after exposure to 10<sup>7</sup> bacteria ml<sup>-1</sup> (Sutton and Garrick, 1993). The organism has been recovered from raw fish and shellfish in markets and shops, and is deemed to pose a risk to human health (Buck, 1991) with pathogenic factors reflecting the presence of haemolysins and verotoxins (Matte et al., 2007).

## 3.8. Vibrio mimicus

V. mimicus has been considered as a secondary invader of red claw crayfish (Cherax quadricarinatus), which were weakened by poor management, overcrowding and/or adverse water quality (Eaves and Ketterer, 1994). The association with human illness is in connection with food borne infections leading to gastro-enteritis and diarrhoea in which an enterotoxic haemolysin is produced that targets intestinal epithelia cells effecting ion transport (Takahashi et al., 2007; Mizuno et al., 2009).

## 4. Future perspectives

New pathogenic *Vibrio* species are frequently described. Therefore, the range of zoonotic organisms may well increase. Diagnosticians need to be vigilant and aware of this possibility. Certainly, the seriousness of *V. vulnificus* as a pathogen of both aquatic animals and humans cannot be overstated, and the number of cases of disease attributed to this organism seems likely to grow. The involvement of vibrios with disease has prompted excellent work particularly in the realms of

459 ecology, pathogenicity and disease control strategies; this trend may be expected 460 to continue. 461 462 5. Conflict of Interest Statement 463 The author does not have any conflict of interest. The views expressed in the 464 article are those of the author, and they have not been influenced by any 465 external interest. 466 6. References 467 Abbott, S.L., Janda, J.M., 1994. Severe gastroenteritis associated with Vibrio 468 469 hollisae infection - report of 2 cases and review. Clin. Infect. Dis. 18, 310-470 312. Arijo, S., Rico, R., Chabrillon, M., Diaz-Rosales, P., Martínez-Manzanares, E., 471 472 Balebona, M.C., Toranzo, A.E., Moriñigo, M.A., 2005. Effectiveness of a 473 divalent vaccine for sole, Solea senegalensis (Kaup), against Vibrio harveyi and Photobacterium damselae subsp. piscicida. J. Fish Dis. 28, 33-38. 474 475 Austin, B., Zhang, X.-H., 2006. Under the Microscope. Vibrio harveyi: a 476 significant pathogen of marine vertebrates and invertebrates. Lett. Appl. 477 Microbiol. 43, 119-124. Austin, B., Austin, D.A., 2007. Bacterial Fish Pathogens, Disease of Farmed and 478 Wild Fish, 4<sup>th</sup> edn. Springer Praxis, Godalming. 479 480 Barton, J.C., Ratard, R.C., 2006. Vibrio vulnificus bacteraemia associated with chronic lymphocytic leukemia, hypogammaglobulinemia, and hepatic 481

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Table 1

Differential characteristics of zoonotic vibrios and their association with human and animal diseases (based on Farmer et al., 2005).

Characteristic:	G. hollisae	P. damselae subsp. damselae	V. alginolyticus	V. harveyi	V. cholerae	V. fluvialis	V. furnissii	V. metschnikov ii	.V. mimicus	V. parahaemol yticus	V. vulnificus
Oxidase production	+	+	+	+	+	+	+	-	+	+	(+)
Arginine dihydrolase	-	+	-	-	-	+	+	D	-	-	-
Lysine decarboxylase	-	D	+	+	+	-	-	-	+	+	+
Gas from glucose	-	+	-	-	-	-	+	-	-	-	-
Indole production	+	-	+	+	+	D	-	-	+	+	+
Voges	-	(+)	(+)	-	+	-	-	+	-	-	-

Proskauer reaction											
Utilization of cellobiose	-	-	-	+	-	D	D	-	-	-	(+)
Growth in 0% NaCl	-	-	-	-	+	+	+	-	+	-	-
Growth in 0.3% NaCl	-	D	-	-	+	+	+	+	+	-	+
Growth in 12% NaCl	-	-	+	-	-	-	(-)	-	-	-	-
Cause of wound infections in humans		+	+	+		+					+
Cause of gastro-intestinal	+				+	+	+	+	+	+	+

disease in

humans

invertebrate

disease

<sup>+, -</sup> and D correspond to 100%, 0% and 21-79% of positive results, respectively. (+) and (-) correspond to  $\geq$ 80% and  $\leq$ 20% of positive results.