

A cluster of Chlamydia serpentis cases in captive snakes

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- 1 Vet. Microbiol.
- 2 A cluster of *Chlamydia serpentis* cases in captive snakes
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17 Abstract

Following the occurrence of sudden death cases in a zoo reptile collection, histological analyses conducted on tissues from two common adders suggested an infection due to *Chlamydia*. The survey was extended to 22 individual snakes from the same collection and a PCR analysis targeting a conserved gene in *Chlamydiaceae* revealed bacterial shedding in six of them. The infection resolved spontaneously in one snake whereas another one succumbed one month later. The antibiotic treatment administered (marbofloxacin) to the remaining four PCR positive animals stopped the mortalities and the shedding. Analysis of the 16S and 23S ribosomal gene sequences 25 identified *C. serpentis*, a recently described novel chlamydial species in snakes. A PCR tool for a

26 quick and specific identification of this new chlamydial species was developed in this study.

27 Highlights

- 28 *C. serpentis* cases in captive snakes
- 29 efficient antibiotic treatment with Marbofloxacin
- 30 *C. serpentis* specific real-time PCR
- 31

32 Short Communication

Chlamydiae are obligate intracellular bacteria that cause a variety of human and animal diseases (Rohde et al., 2010). *Chlamydia (C.) serpentis, C. poikilothermis,* as well as Candidati *C. corallus,* and *C. sanzinia* are newly discovered or proposed chlamydial species identified so far in captive snakes (Taylor-Brown et al., 2016, 2017; Staub et al., 2018). Very little knowledge is available about their pathogenic potential. Here, we report a cluster of *C. serpentis* cases among captive snakes, along with the therapeutic protocol adopted and the new PCR-based detection tool developed for a quick and specific identification of this new chlamydial species.

40 In the Parc Zoologique de Paris, two common adders (Vipera berus, female ZB4023 and male ZB4024) kept in racks died in summer 2018, less than a month apart. The 3-years old female 41 ZB4023 initially exhibited stomatitis and suffered from anorexia for two months. A treatment with 42 long acting penicillin (Shotapen®, 3.5mg/kg benzylpenicillin, 4.4mg/kg dihydrostreptomycin, IM, 43 every 3 days, during 12 days) was initiated, but the stomatitis remained. Neurological signs (tilted 44 head) appeared one month later, the animal was treated with metronidazole (Flagyl®, 20mg/kg, PO, 45 once a day during 5 days), but it eventually died. Necropsy was performed and the subsequent 46 histological analysis revealed chronic multifocal hepatitis, splenitis, stomatitis, esophagitis, 47 enteritis, myocarditis, oophoritis and encephalitis with granuloma formation as typically seen in 48 cases of chlamydial infection in snakes (Jacobson et al., 1989). While the male ZB4024 did not 49

show any clinical sign and seemed to be in good physical condition until the day of death, the 50 necropsy revealed global lung congestion and necrosis in the distal 3-4 cm of the caudal lung 51 parenchyma suggesting a fibrinous and necrotizing pneumonia. The presence of Chlamydia in 52 multifocal granulomas in inner organs of these two snakes confirmed by 53 was immunohistochemistry using a Chlamydiaceae family specific monoclonal antibody directed 54 against the chlamydial lipopolysaccharide (ACI-P, Progen Biotechnik) (Figure 1). 55

As a follow-up of these two *Chlamydia*-positive cases, 22 individual snakes belonging to five different species from the zoo collection were identified as potential "contact animals" after a risk analysis and then, were sampled for PCR analysis (**Table 1, Figure 2**). Tracheal and cloacal swabs were taken and DNA extraction (Qiamp DNA mini kit, Qiagen, France) was performed followed by a real-time PCR targeting the *Chlamydiaceae* family as previously described (Ehricht et al., 2006). Samples with Ct values higher than 39 were considered negative.

The first set of analysis was performed on eight specimens on August 24th 2018 (Table 1). The 62 ZB4025 common adder, housed in a rack close to ZB4023 and ZB4024, tested positive (Ct 26 and 63 64 29 for the trachea and cloaca, respectively) as well as three aspics (Vipera aspis), which were hosted three months earlier in racks (Figure 2). A viperine snake (Natrix maura, ZB8018) kept in 65 proximity of the common adders tested negative. Despite the administration of antibiotic treatment 66 (oxytetracycline 10 mg/kg, every 2 days, five doses), the ZB4025 common adder died few days 67 after the end of treatment. Like ZB4023, this adder exhibited ptyalism and suffered from anorexia 68 and stomatitis. PCR analysis revealed a high level of *Chlamydiaceae* infection in all organs, with 69 highest Ct values obtained for heart (Ct 19.2) and brain (Ct 17.6) tissues, as also confirmed by the 70 71 histological analysis (presence of chlamydial inclusions, data not shown).

On October 9th, the PCR screening (Table 1) was extended to *Natrix maura* (n=5), *Sanzinia madagascariensis* (n=4) and *Rhinechis scalaris* (n=3) specimens kept in the Zoo de Paris collection.
The three *Vipera berus* and the three *Vipera aspis* previously tested by PCR on August were re-

tested. Shedding was confirmed for two Vipera aspis (ZB7047 and ZB7048) whereas two Rhinechis 75 scalaris specimens tested positive (ZB4614 and ZB3104). These four PCR positive animals were 76 treated with marbofloxacin (5 mg/kg, IM, single in day, until PCR results became negative), 77 78 following a protocol previously reported for infection with C. pneumoniae in snakes (Rüegg et al., 2015). The tracheal and cloacal shedding was monitored by PCR each week. Within less than 45 79 days later, all animals tested negative (Table 1). Through clinical exam, no toxicity of the treatment 80 was observed. Interestingly, the Vipera aspis ZB7045 tested positive in August was negative by 81 PCR in October despite any treatment administered. Spontaneous resolution of infection without 82 antibiotic administration was previously reported for C. pneumoniae (Rüegg et al., 2015). 83

Further molecular characterization of the chlamydial species circulating in this snake collection was performed. The almost full length 16S (1334 bp) and the partial 23S (922 bp) rRNA gene sequences of ZB4025, ZB7047 and ZB7048 were amplified as previously described (Aaziz et al., 2015). Sequences were all identical and their comparison with sequences present in the databases showed a high sequence identity rate (more than 99.7%) with H15-1957-10C, the reference strain for *C. serpentis*. To note, the 16S rRNA sequences were identical to the genotype 1 (2464-255) sequence obtained from a *Montivipera albizona* specimen (Taylor-Brown et al., 2015).

From the whole genome sequence of C. serpentis (Staub et al., 2018), specific primers 91 Serpentis 192F (5'-TGA AGA CTT AAG AGA AGA TGC GGT-3') and Serpentis 291R (5'-TGC 92 GGG GAC TTT TAC TAG CC-3') as well as a specific probe Serpentis 251P (5'-FAM- ACG 93 TTC CAG AGT CTT TAG GGG-TAMRA 3') were designed using the primer3 software. This 94 specific qPCR assay was designed based on the Glutamyl-tRNA(Gln) amidotransferase subunit C 95 (gatC) gene locus only identified so far in C. serpentis. Amplification was performed using the 2X 96 97 TaqMan Universal PCR Master Mix (Applied Biosystems, Courtaboeuf, France). The final volume 98 of the reaction mixture was 20 µL including 10 µL of master mix, 2 µL of DNA sample, 0.6 µM of each primer, 0.1 µM of the probe and sterile PCR water. Amplification was carried out on a Viia7 99

thermocycler (Applied Biosystems) using the following cycling parameters: heating at 95 °C for 10
min, 50 cycles of 95 °C for 15 s and 60 °C for 1 min. The specificity of the new real-time PCR
system was evaluated *in silico* and validated on 32 *Chlamydiaceae* strains, including the H15-1957102 reference strain of *C. serpentis* (**Table S1**). All *Chlamydiaceae* PCR-positive samples from this
study tested positive with this new PCR system confirming the circulation of *C. serpentis* among
these snakes.

106 The administration of a targeted antibiotic treatment to Chlamydia-infected snakes depends on the 107 establishment of a correct diagnosis of chlamydiosis, a disease due to an obligate intracellular bacterium not included in the list of first-line pathogens affecting snakes. This cluster of cases 108 among captive snakes as well as other recent reports (Frutos et al., 2014, Rüegg et al., 2015) 109 showed that chlamydiae do not necessarily induce clinical signs in their hosts, but that the outcome 110 can be fatal if not treated. The chlamydial infection source for snakes remains unknown to date. 111 112 Interestingly, the three PCR-positive Vipera aspis were hosted in the rack storage, where the three Vipera berus died. Racks were cleaned and quickly disinfected before the introduction of the new 113 114 snakes. These animals, without any apparent clinical signs, could have been infected from their new 115 environment incompletely disinfected or healthy carriers, without direct or indirect link with the fatal cases. No other circulating pathogen that could have induced an immunocompromised status 116 was identified in this snake population, but a mite infestation (Ophionyssus natricis) was noted 3 117 weeks before the first death (ZB4024). All three common adders (ZB4023, ZB4024 and ZB4025) 118 were treated with fipronil (Frontline®, topical on skin, once) and the distant environment was 119 fumigated with one insecticide combination (Moxy®: pyrethrin, permethrin, pyperonyl butoxid). 120 While relevance of this ectoparasite presence remains unknown regarding onset of clinical signs, 121 the ability of *Chlamydia* mechanical transmission through such a blood suckling arthropod could 122 not be ruled out (Emmerson et al, 2000). 123

PCR stands as a powerful tool for the diagnosis of *Chlamydia* infection and shedding in snakes, as chlamydial culture remains a technical challenge and has a low sensitivity, leading to false negative results (Jacobson et al, 1989).

The only species that remained negative among all contact animals were snakes of the species *Sanzinia madagascarensis*. Of note, this is also the snake species with highest preferred body temperature range among contact species. Different incubation temperatures may variably impact replication of individual chlamydial species as recently shown by Onorini et al, 2019. Moreover, the existence of several chlamydial species in snakes may indicate their species-driven specificity for certain ophidian species or genera hosts.

The zoonotic potential of the new species *C. serpentis* is yet unknown but it shows a high phylogenetic relationship to *C. pneumoniae*, which is zoonotic and also detected in herpetofauna (Ebani, 2017). None of the people in contact with the infected snakes reported specific clinical signs concomitantly to the circulation of *C. serpentis* in these snakes, but basic protective measures (gloves) are included in daily husbandry protocols, and were enhanced (mask) during the course of treatment and sampling.

139 Since these index cases, all snakes entering the collection of the zoo are tested for *Chlamydiaceae*140 by PCR, as routine quarantine examination.

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142 Conflict of interest statement

143 None of the authors has any financial or personal relationships that could inappropriately influence144 or bias the content of the paper.

145

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149

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189 Tables & Figures

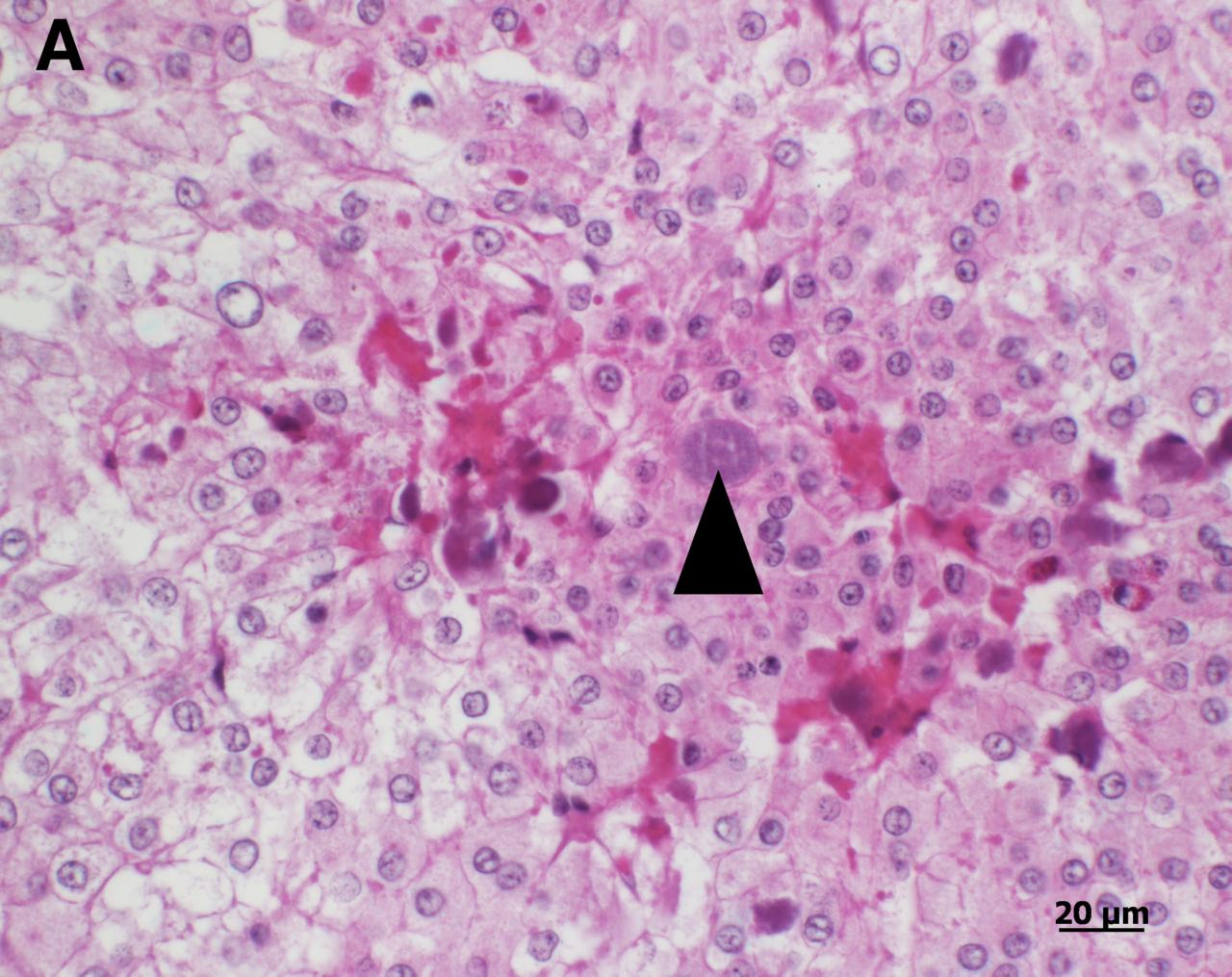
Figure 1. Histopathology (haematoxylin and eosin staining, panel A and C) and 190 immunohistochemistry (3-amino-9-ethylcarbazole (AEC)-peroxidase method with haematoxylin 191 192 counterstain, panel B and D) for Chlamydiaceae antigen of snake ZB4023 (Vipera berus) that was positive for C. serpentis. Magnification 400x. A. Large histiocytic granuloma in the heart with 193 intra-histiocytic basophilic chlamydial inclusion (arrowhead). B. Positive red granular 194 195 immunostaining in the cytoplasm of histiocytes within a granuloma of the heart (pericardium). C. Granulomatous oophoritis with intralesional chlamydial inclusions (arrowheads). D. Positive red 196 197 granular immunostaining in granulomas of the ovary.

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199	Figure S1. Movements	of reptiles in Ma	y and their location in	n August 2018.

201	Table	1.	Data	summary	table
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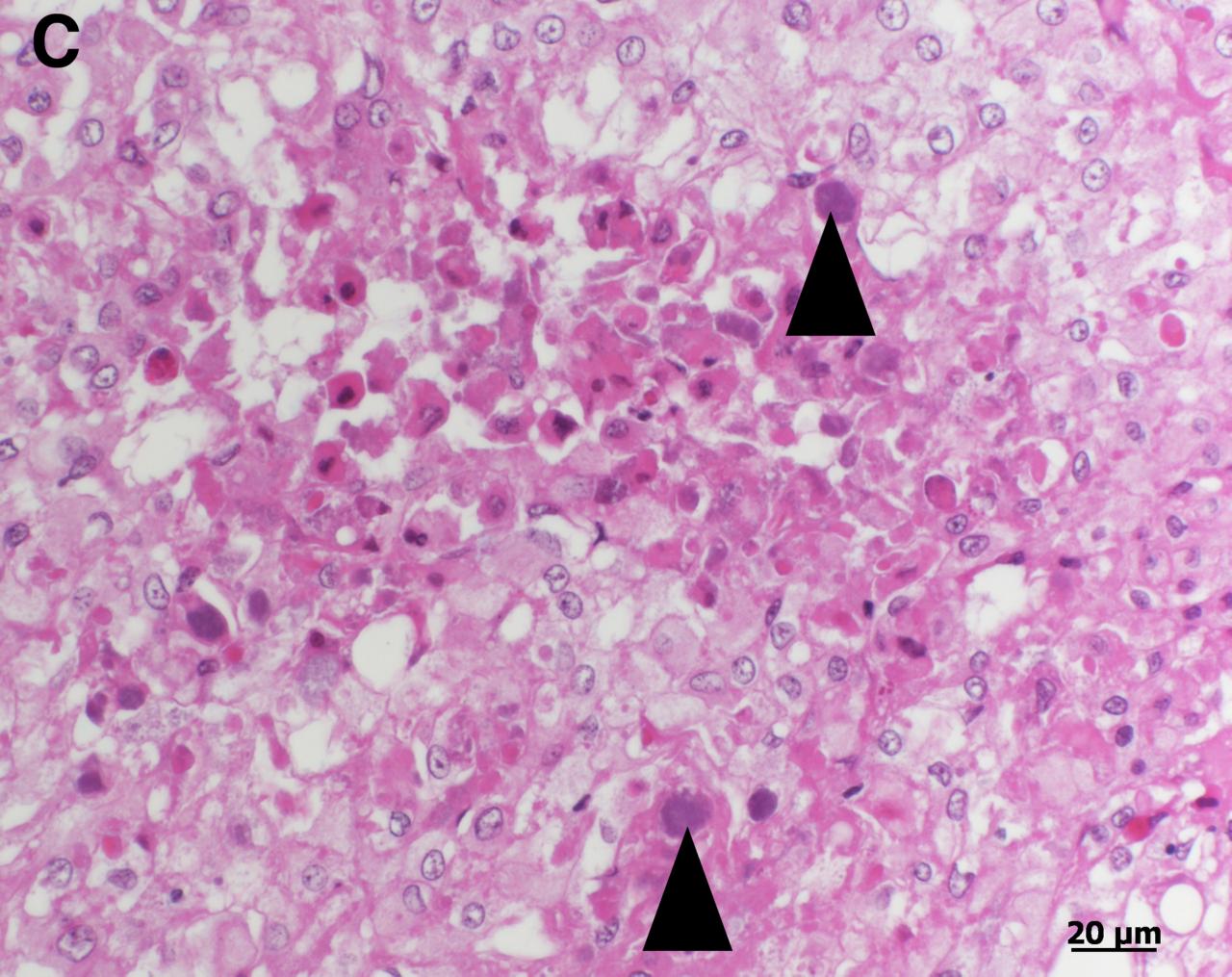
203	Table S1. Chlamydial strains and isolates used for determination of specificity of the C. serpentis
204	specific real-time PCR assay.

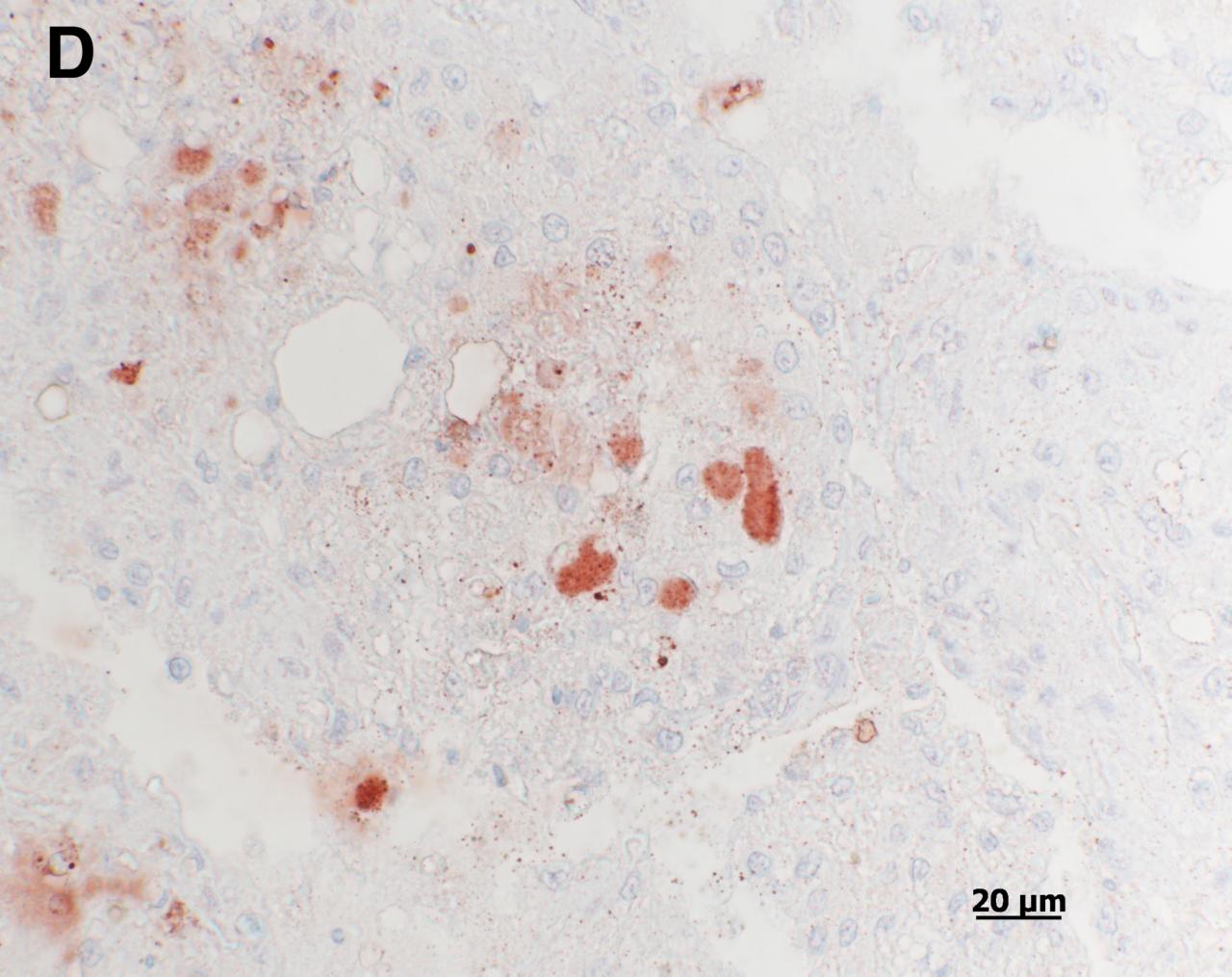


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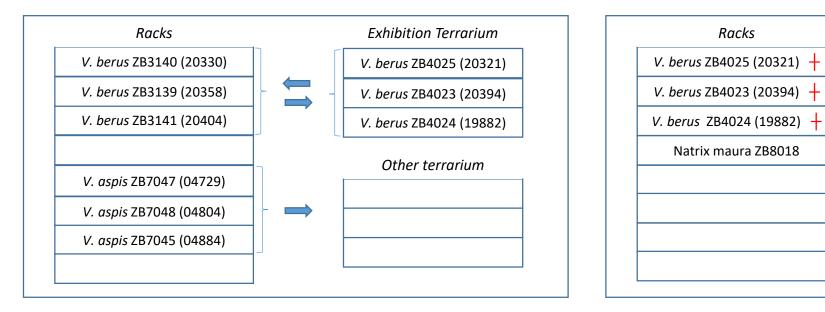
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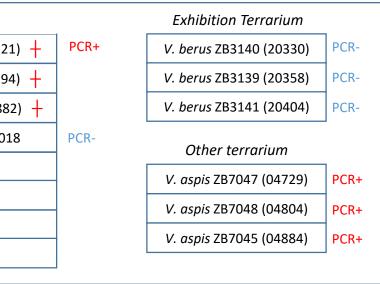




Location in May 2018, before movements

Situation in August 2018





	House name ZB	Species		PCR Chlamydiaceae			-	Antibiotic treatment																
ID			Location after	24/08	/2018	09/10/2018		Date of	Histology/Immuno-		03/1	03/11/18		09/11/18		1/18	23/11/18		30/1	1/18	07/1	2/18	14/12/18	
			May 2018	Trachea (Ct)	Cloaca (Ct)	Trachea (Ct)	Cloaca (Ct)	death	histochemistry	started on 29/10/2018	Trachea (Ct)	Cloaca (Ct)												
Ec 04729	ZB7047			33.6	29.4	33.7	31.1			+	35.6	-	38.8	36.0	-	36.4	-	-	-	-	nd	nd	-	-
Ec 04804	ZB7048	Vipera aspis	Other Terrarium	31.5	30.0	33.9	31.0			+	35.2	33.8	38.8	32.8	37.2	34.9	-	35.1	-	37.9	-	37.1	-	-
Ec 04884	ZB7045		Terranum	35.4	34.5	-	-																	
Ec 20330	ZB3140			-	-	-	-																	
Ec 20358	ZB3139	Vipera berus	Exhibition	-	-	-	-																	
Ec 20404	ZB3141		terrarium	-	-	-	-																	
Ec 20394	ZB4023							03/08/18	+															
Ec 19882	ZB4024	Vipera berus	Racks					15/07/18	+															
Ec 20321	ZB4025			26.0	29.0			27/09/18	+															
Ec 16806	ZB8018			-	-																			
Ec 01505	ZB8022					-	-																	
Ec 01554	ZB8023	Natrix maura				-	-																	
Ec 01460	ZB8021					-	-	05/02/19																
Ec 30109 Ec 30112	ZB8026 ZB8025					-	-																	
	ZB6233					-	_																	
	ZB6234	Sanzinia				-	-																	
	ZB6243	madagascarensis				-	-																	
	ZB6244	-				-	-																	
Ec 19971	ZB4614					-	31.8			+	38.5	-	-	35.8	-	35.9	38.4	36.2	-	37.9	-	35.9	-	-
Ec 20797	ZB3104	Rhinechis scalaris				-	35.4			+	-	38.3	-	38.7	-	-	-	-	-	-	nd	nd	-	-
Ec 20369	ZB3122					-	-																	
* nd: not done																								