



Research Article

Bacteriologic and Cytologic Examination Results of Mares with Pneumovagina in Bursa Region

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ABSTRACT

Pneumovagina is one of the most important causes for bacteria origin infectious infertility in mares. The aim of this study was to determine side effects of the pneumovagina on uterus bacteriology and cytology and its prevalence in Bursa region. A total of 156 mares were evaluated regarding to prevalence of pneumovagina, and bacteriologic and cytologic examination results. Group I had 11 mares with pneumovagina (n=11), and group II was control group including 23 mares (n=23). Bacteriologic culture and cytological examination were performed from samples taken by endometrial swabs in both groups. The prevalence of pneumovagina was 7.1% (n=11). Microbiologically, group I had 100% positive culture results. The rate of *Escherichia coli*, *Streptococcus equi* subsp. *zooepidemicus*, *Streptococcus equinus* and *Enterococcus faecium* were 40.0-15.0-10.0%, respectively. Group II had 30.4% (n=23) positive results. Seven of them were including 14.3% rate of *Escherichia coli*, 28.5% rate of yeasts, and 57.2% rate of 4 different microorganisms. There were intense neutrophils in cytological preparations of group I. Antimicrobial susceptibility was performed in both groups' microorganisms and penicillin, cefquinom, marbofloxacin tetracycline, erythromycin, florfenicol Ceftiofur amoxicillin, amoxicillin / clavulanic acid, enrofloxacin, gentamicin gentamicin colistin and Sulfamethoxazole/Trimethoprim were selected as antibiotics for this test. Isolates were much more resistant to tetracycline, erythromycin, gentamicin, colistin and sulfamethoxazole/trimethoprim. As a conclusion, it has been emphasized that examination of endometrial bacteriology and cytology in mares with pneumovagina should be done to determinate early stage genital system infections.

Key words: Pneumovagina, Mare, Bacteriology, Cytology

INTRODUCTION

Bacterial infections of the genital canal are responsible to infertility in mares (Schliesser and Behtelsman, 1976; Asbury, 1986; Erdeger *et al.*, 1999; Zonturlu and Kacar, 2004; Neves *et al.*, 2007; Koca *et al.*, 2016). Pathogenic microorganisms introduce to genital canal during natural breeding, artificial insemination, during and after parturition, during gynecological examination and as a result of the failure in anatomophysiological vaginal barrier (ie. pneumovagina) in mares. In addition, when uterine defense mechanism is not functional properly, the bacterial infections are seen in mares (Asbury *et al.*, 1982; Evans *et al.*, 1986; Nikolakopoulos and Watson, 1999; Patrick, 2008).

Perineal mal-conformation is associated with pneumovagina due to predispose factors such as deficiency of the one-way vulvovaginal "valve" mechanism and vestibule-sphincter weakness in the mares and it can cause to uterine infections and infertility. The pneumovagina also affects the body condition and estrous (etc. diestrous) in foaling (Easley, 1993; Pycock, 2001; Pascoe, 2007; Newcombe, 2011). It also leads to early stage embryonic dead, infections and infertility (LeBlanc *et al.*, 2007). Thus, spectrum of the vaginal, cervical and bacterial flora of the uterus is so crucial to determine the chronic infertility problems of the mare (Zonturlu and Kacar, 2004). Here, we aimed to determine prevalence and affectivity of the pneumovagina on uterus bacteriology and cytology in mares.

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MATERIALS AND METHODS

Animals and Collections of the Samples

In this study, a total of 156 (age 2-20 years) mares were examined to determine the pneumovagina between October 2013 and April 2015. They were also evaluated by abnormal perineal conformation in two study groups (Group I: mares with pneumovagina n=11, and Group II: mares without pneumovagina (control) group n=23) in Bursa region.

A total of 34 uterine swabs were collected from mares in groups. Before sampling, external genital region of the mares was cleaned by an antiseptic solution and swabs were taken carefully with the help of Polanski speculum. All endometrial swabs were transported using Amies Agar Gel –With Charcoal transport swabs (COPAN ITALIA,114C.USE) to the microbiology laboratory.

Bacteriological and Mycological Isolations

The endometrial samples preserving in cold chain were inoculated on Columbia Agar with 5% sheep blood, Tryptic Soy Agar, Mac Conkey Agar, Eosin Methylene Blue Agar (EMB) as agars and Serum Broth, Brain Heart Infusion Broth as broths for general microbiological examination. These samples were also inoculated on Eugon Chocolate Agar (ECA) for isolation of *Taylorella equigenitalis* and Sabouraud Dextrose Agar (SDA) for mycological isolation. For general bacteriological examination, all agars and broths were incubated both aerobically and anaerobically at 37°C for 1-5 days; ECA was incubated in 5-10% CO₂ atmosphere at 37°C for 5-7 days. For mycology examination, SDA was incubated at 25°C for 7-15 days and they were controlled daily.

Identification

The bacterial identification was performed with routine methods (colony morphology, hemolysis characteristics, microscopy morphology, Gram stain and features of biochemical tests). In bacterial isolation, API systems (api 20Strep, api 20E, api Coryne, api Staph; BioMerieux Industry, Italy) were utilized for identification of pure cultures.

Antibiotic Susceptibility Test

The bacteria isolates were used for antibiotic susceptibility testing by the Kirby-Bauer Disc Diffusion method. The antibiotics (Penicillin G (10 IU), Cefquinom (30 µg), Marbofloxacin (10 µg), Tetracycline (30µg), Erythromycin (30µg), Florfenicol (15µg), Ceftiofur (30µg), Amoxicillin / Clavulanic acid (30µg), Amoxicillin (25 µg), Enrofloxacin (5µg), Gentamicin (10µg), Colistin (50 µg), Sulfamethoxazole/Trimethoprim 1: 19 (25µg) (Oxoid)) were selected according to bacteria strains complying to the direction of Clinical and Laboratory Standards Institute (CLSI):

Endometrial Cytology

Endometrial swabs were taken for microbiological and cytological examinations using double-guarded swabs introduced inside the uterus (Equi-Vet®, Kruuse, Marslev, Denmark). The samples were stained using Diff Quik (Hemacolor TM) after air drying and methanol fixation.

The samples were examined under light microscope (Olympus®, U-DO3, Tokyo, Japan).

RESULTS AND DISCUSSION

Eleven (n=11) pneumovagina (7.1%) in different degree were diagnosed. Particularly, *Escherichia coli*, *Streptococcus equi* subsp. *zooepidemicus* was the potential pathogens in mares with pneumovagina. Fecal origin bacteria were isolated more commonly in the samples taken from mares with pneumovagina (Table 1). This result was due to mechanical dysfunction of the genital tract resulted from pneumovagina, which led to bacterial location. Mycotic agents were more common in normal flora of mares. *Taylorella equigenitalis* is a responsible agent for contagious metritis in mares that this microorganism was not obtained in both groups (Duquesne *et al.*, 2007). Macroscopic and microscopic evaluations of the samples revealed *Aspergillus fumigatus* and *Aspergillus* spp in two and one cases of the control group, respectively. In both groups, isolated microorganisms (*Escherichia coli*, *Streptococcus equi* subsp. *zooepidemicus*, *Streptococcus intermedius*, *Streptococcus equinus*, *Enterococcus faecium*, *Gardnerella vaginalis* and *Corynebacterium glucuronolyticum*) were evaluated in terms of antibiotic susceptibility against to 13 microbial agents including penicillin, tetracycline, erythromycin, florfenicol, ceftiofur, amoxicillin, amoxicillin / clavulanic acid, enrofloxacin, gentamicin and cefquinome. Isolates had maximum resists to tetracycline, erythromycin, gentamicin, colistin and sulfamethoxazole/trimethoprim (Table 2). In cytologic smear prepared, neutrophil rate was 3.8% in group I and 37.5% in group II.

Trauma to the vulva during foaling and decreasing in the muscular tone with age may lead to a compromise of the vulvar seal and that situation predisposes organ to pneumovagina or “wind-sucking” problem. Sloping of the vulva secondary to recession of the anus and/or poor muscular tone to the labia of the vulva may predispose the mare to an ascending infection of the uterus (Caslick, 1937). As a disease, pneumovagina predisposes the genital tracts for bacterial infections (equine endometritis); thus, it is the most important factor for infertility (Senuver *et al.*, 1997).

Table 1: Cultured microorganisms' rate (%) in groups.

Microorganisms	Group I	Group II
<i>Escherichia coli</i>	8 (40%)	1 (14.3%)
<i>Streptococcus equi</i> subsp. <i>zooepidemicus</i>	3 (15%)	-
<i>Staphylococcus intermedius</i>	1 (5%)	-
<i>Streptococcus equinus</i>	2 (10%)	-
<i>Enterococcus faecium</i>	2 (10%)	-
<i>Bacillus circulans</i>	1 (5%)	-
<i>Bacillus licheniformis</i>	1 (5%)	-
<i>Bacillus brevis</i>	1 (5%)	-
<i>Gardnerella vaginalis</i>	-	1 (14.3%)
<i>Corynebacterium glucuronolyticum</i>	-	1 (14.3%)
<i>Aspergillus</i> sp.	-	1 (14.3%)
<i>Aspergillus fumigatus</i>	1 (5%)	1 (14.3%)
Yeast	-	2 (28.5%)
<i>Taylorella equigenitalis</i>	-	-
TOTAL	20 (100%)	7 (100%)

Table 2: The bacteria strains and their antibiogram results isolated from mares in groups

Bacteria	Group no	R,I,S	Antibiotics												
			P	CEQ	MAR	TE	E	FF	EFT	AMC	AML	EN	GM	CO	SXT
<i>Escherichia coli</i>	I	R	100		12.5	12.5		12.5		37.5		37.5	87.5		12.5
		I		37.5			37.5		62.5	62.5	25		37.5		
		S		62.5	87.5	87.5	62.5	87.5	100		37.5	37.5	12.5	62.5	87.5
	II	R	100			100	100								
<i>Streptococcus equi</i> subsp. <i>zooepidemicus</i>	I	I									100	100			
		S		100	100			100	100	100		100	100	100	
		R				66.6							66.6		
	II	I				33.3					100		33.3	33.3	
<i>Staphylococcus intermedius</i>	I	S	100	100	100		100	100	100	100	100		100		66.6
		R	100			100	100						100	100	
		I		100	100				100						
	II	S						100	100		100	100		100	
<i>Streptococcus equinus</i>	I	R										100	100	100	
		I			100										
		S	100	100		100	100	100	100	100				100	
	II	R			100	100	100							100	
<i>Enterococcus faecium</i>	I	I							100			100			
		S	100	100				100		100	100		100	100	
		R													
	II	I													
<i>Gardnerella vaginalis</i>	I	S	100	100					100		100	100		100	100
		R													
		I		100					100						
	II	S	100		100	100	100	100		100	100	100		100	
<i>Corynebacterium glucuronolyticum</i>	I	R													
		I													
		S	100	100	100	100	100	100	100	100	100	100	100	100	
	II	R													

R: Resistant, I: Intermediate, S: Sensitive, P: Penicillin, CEQ: Cefquinome, MAR: Marbofloxacin, TE: Tetracycline, E: Erythromycin, FF: Florfenicol, EFT: Ceftiofur, AMC: Amoxicillin/Clavulanic Acid, AML: Amoxicillin, EN: Enrofloxacin, GM: Gentamicin, CO: Colistin, SXT: Sulfamethoxazole/Trimethoprim

Microorganisms most often isolated from mares with uterine infection include bacteria including *Streptococcus zooepidemicus*, *Escherichia coli*, *Klebsiella pneumoniae*, *Pseudomonas aeruginosa* and various yeast species such as *Candida* or *Aspergillus* (LeBlanc, 2008; Asbury, 1986; Albihn *et al.*, 2003). The bacterium more commonly isolated during routine cultures of the uterus in mares is *Streptococcus equi* subspecies *zooepidemicus* (McCue *et al.*, 1991; Ricketts *et al.*, 1993). However, *Escherichia coli* is the primary bacteria of mares had uterus problem (LeBlanc *et al.*, 2007). In this study, there was a similarity between the culture results of both groups.

Many authors (LeBlanc, 2008; Asbury, 1986; Albihn *et al.*, 2003) have reported *Streptococcus zooepidemicus* and *E. coli* in uterus infections of mares. *Escherichia coli* is a normal residence of gastrointestinal tract in most mammals (Maddox *et al.*, 2015). We determined that *Escherichia coli* were the dominant agent in mares with pneumovagina. Its rate was 40.0%. The following microorganisms were *Streptococcus equi* subsp. *zooepidemicus* (15%), *Streptococcus equinus* (10%), *Enterococcus faecium* (10%). In addition, 2 yeast and 3 funguses were isolated in both groups.

It is stated that genital manipulations, wrong and irregular antibiotic usage are the cause of fungal infections (Blue, 1983). Amaral *et al.* (2007) have been reported penicillium (35.4%), aspergillus (20.3%) and candida (13.9%) in cultures of the uterus samples. In presented study, the isolation rate of *Aspergillus fumigatus* and *Aspergillus* sp was 33.6%, and isolated yeast rate was 28.5%.

Treatment regimen in bacterial infections resulted from pneumovagina should be planned complying the antibiotic susceptibility results. The main cause of the

untreatable infectious infertility is irregular antibiotic usage without antibiotic susceptibility, which leads to antibiotic resistant bacteria (Cohen, 1992). Therefore, in presented study, antibiotic susceptibility was planned in both groups.

In a study performed on infertile mares (Frontoso, 2008), different antibiotics (amoxicillin clavulanic acid, enrofloxacin, erythromycin, gentamicin, rifampicin, sulfamethoxazole/trimethoprim, kanamycin and ampicillin) are used for the purpose of antibiotic susceptibility test. Here, 13 antibiotics were selected for antibiotic susceptibility test given in Table 2. Microorganisms had different sensibility rate. In both groups, antibiotic susceptibility results of *Escherichia coli* were 87.5% for marbofloxacin, florfenicol, ceftiofur and sulfamethoxazole/trimethoprim, and *Streptococcus equi* subsp. *zooepidemicus* was 66.6% sensible to tetracycline and colistin.

Neutrophil chemotaxis induced by bacteria is usually observed in the uterine lumen infections, and neutrophil migration aggravates the inflammation (Tibary *et al.*, 2014). The cytological smear evaluation in both groups revealed neutrophilia in group II with the rate of 37.5%.

As a conclusion, pneumovagina should be considered as a common problem in infertile mares. This condition characterized by continuous or intermittent air-sucking into the vagina can result in infection and chronic inflammation of the vagina and uterus in mares.

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