

21 **Abstract**

22 We report blood culture results of 43 foals admitted to an equine hospital for medical or
23 surgical disorders and determine minimal inhibitory concentrations (MIC) of different
24 antibiotics. Eleven foals had a positive blood culture result despite prior administration of
25 antibiotics in 10 of these animals. MIC values above EUCAST and/or CLSI breakpoints were
26 identified in coagulase-negative *staphylococci*, methicillin-resistant *Staphylococcus aureus*
27 (MRSA) and *Enterococcus faecium*. Gram-negative isolates were less frequently identified
28 and did not appear to exhibit increased MIC values. This study shows that bloodstream
29 infections in Switzerland are caused by diverse bacteria including Gram-positive bacteria
30 which exhibit resistance to several classes of antibiotics.

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41 **Keywords:** Antibiotics, Bacteremia, Horse, Minimal inhibitory concentration, Sepsis

42 **Resistenzprofile bakterieller Pathogene in Blutkulturen von** 43 **Fohlen in der Schweiz**

44 Im Rahmen dieser Studie präsentieren wir Resultate von Blutkulturen von 43 Fohlen, die
45 aufgrund einer internistischen oder chirurgischen Erkrankung in der Pferdeklinik vorgestellt
46 wurden. Elf dieser Fohlen zeigten ein bakterielles Wachstum in der Blutkultur obwohl 10 von
47 ihnen bereits vom Privattierarzt mit Antibiotika vorbehandelt wurden. Coagulase-negative
48 *Staphylokokken*, Methicillin-resistente *Staphylococcus aureus* und *Enterococcus faecium*
49 zeigten minimale Hemmstoffkonzentrationen oberhalb der EUCAST und/oder CLSI
50 Referenzen. Gram-negative Bakterien wurden seltener identifiziert und zeigten keinen
51 Anstieg minimaler Hemmstoffkonzentrationen. Diese Studie zeigt, dass septische Infektionen
52 in der Schweiz durch ein breites Spektrum an Bakterien verursacht werden können. Unter
53 Anderem kommt in dieser Studie Gram-positiven Bakterien eine besondere Bedeutung zu
54 aufgrund der erhöhten Resistenzen gegen diverse Antibiotika.

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61 **Schlüsselwörter:** Antibiotika, Bakteriämie, Pferd, Minimale Hemmstoffkonzentration, Sepsis

62 Selection of appropriate antimicrobials for treatment of bacterial infections is a challenging
63 procedure in veterinary medicine due to the number of specifications that need to be
64 considered. Drug dosages are defined on the basis of pharmacokinetic and -dynamic studies
65 which need to be performed specifically in every species, weight and age group. Bacterial
66 diversity and susceptibility patterns may change over time (Theelen et al., 2014; Theelen et
67 al., 2014) which impedes re-evaluation of drug dosage for target organisms on a regular basis.
68 Furthermore, defined resistance breakpoints are sparse for veterinary pathogens and are often
69 extrapolated from those set in human medicine (Turnidge et al., 2007), potentially making
70 interpretation of susceptibility tests difficult. It is therefore imperative to have guidelines for
71 antibiotic susceptibility tests available for veterinary medicine to permit targeted therapy and
72 to perform studies of bacterial prevalence and evaluate and report minimal inhibitory
73 concentrations on a regular basis (Theelen et al., 2014). This is especially important in
74 populations such as foals where bacterial infections and sepsis often have detrimental
75 consequences (Cohen, 1994). The objective of this study was to determine which bacterial
76 species are present in blood cultures from foals in Switzerland and to assess their minimal
77 inhibitory concentrations to relevant antibiotics.

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79 A total of 43 foals admitted to the equine hospital between 2014 and 2016 were included in
80 the study on the basis that they had an intravenous catheter inserted for the treatment of a
81 medical or surgical disorder. Ten milliliters of blood were collected aseptically into a 10-ml
82 Isolator™ tube (Isolator™ 10 Tube Blood Culture System, Thermo Fisher Scientific, Pratteln,
83 Switzerland) and processed according to the manufacturer's protocol to provide bacteria for
84 further isolation, identification, and susceptibility testing. After centrifugation, 100 µl of the
85 lysed blood concentrate was plated on trypticase soy agar plate containing 5% defibrinated
86 sheep blood (TSA-SB) (BD™ Trypticase™ Soy Agar II with 5% Sheep Blood, Becton

87 Dickinson, Allschwil, Switzerland) for the cultivation of aerobic and capnophilic bacteria,
88 selective BROLAC agar (Thermo Fisher Scientific, Pratteln, Switzerland) for
89 Enterobacteriaceae, Brucella Blood Agar with Hemin and Vitamin K1 for anaerobic bacteria
90 (Becton Dickinson, Allschwil, Switzerland) and in thioglycolate medium for enrichment
91 (Becton Dickinson, Allschwil, Switzerland). All the media were incubated at 37°C for 48h
92 under appropriate atmospheres. The resulting cultures were subcultivated on TSA-SB and
93 isolates were identified by Matrix-Assisted-Laser-Desorption/Ionization-Time-Of-Flight-
94 Mass-Spectrometry (MALDI-TOF MS) (Microflex LT, Bruker Daltonics GmbH, Bremen).
95 Antimicrobial susceptibility to antibiotics representing major drug classes was determined by
96 microbroth dilution in Müller-Hinton broth using different sensititre plates (Sensititre™
97 Complete Automated System, Thermo Fisher Scientific, CH- Reinach) and according to the
98 EUCAST guidelines. (www.eucast.org). Minimal inhibitory concentrations (MIC) of
99 antibiotics were tentatively interpreted using CLSI (CLSI, 2017) and EUCAST (EUCAST,
100 2018) criteria set for human bacteria as no criteria exist for bacteria isolated from blood
101 cultures of horses in the CLSI guidelines for bacteria from animals (CLSI, 2015) (Table 2 and
102 Table 3). The use of these criteria is only indicative of the presence of a possible resistance
103 mechanism in the bacteria under test and may not be appropriate for clinical use.
104 Characterization of methicillin-resistant *Staphylococcus aureus* (MRSA) was performed as
105 previously described (Sieber et al., 2011). In addition to blood culture results, the following
106 information was recorded: age, sex, breed, diagnosis, and antibiotic treatment prior to
107 presentation.

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109 Forty-three foals of various breeds were included in the three-year study period. Foals were
110 aged between 1 and 146 days (9.4 ± 23.8 [mean \pm SD]) and there were 20 fillies and 23 colts.
111 Reasons for hospitalization included failure of transfer of passive immunity, sepsis,
112 herniation, colic, meconium impaction, perinatal asphyxia syndrome, pneumonia, choke,

113 lameness, injury, renal disease, neonatal isoerythrolysis and prematurity. Hospitalization time
114 ranged from 1 to 30 days. Thirty foals survived and were discharged. Five died and eight were
115 euthanized. Eleven foals had a positive blood culture. Ten of them received an antibiotic
116 treatment prior to presentation, including cefquinome, penicillin, gentamicin, amikacin or
117 doxycycline (Table 1). None of the 32 foals with a sterile blood culture were pre-treated with
118 antimicrobials (Table 1). Out of the 11 foals with positive blood culture, one one
119 microorganism was cultured in seven animals (foals 5, 7, 11, 12, 14, 25, 43), whereas in four
120 animals (foals 1, 35, 37 and 41) several bacteria could be cultured. The blood culture of two
121 foals contained both Gram-positive and Gram-negative bacteria. Overall 12 Gram-positive
122 and four Gram-negative bacteria were isolated and revealed 14 different species of
123 *Staphylococcus*, *Enterococcus*, *Streptococcus*, *Macrococcus*, *Acinetobacter*, *Escherichia* and
124 *Actinobacillus* (Table 1).

125 Staphylococci were the most frequent Gram-positive bacteria. Among them, two *S. aureus*
126 were cultured, of which one was confirmed as MRSA sequence type ST 398 based on an MIC
127 > 8 mg/l for oxacillin sodium, presence of the *mecA* gene, and multilocus sequence typing. In
128 addition to resistance to beta-lactams, this MRSA showed markedly increased MIC values for
129 other antibiotics including gentamicin, tetracycline and trimethoprim (Table 2). Among the
130 coagulase-negative staphylococci, decreased susceptibility was observed for several
131 antibiotics including penicillin, erythromycin, trimethoprim, sulfamethoxazole and fusidic
132 acid (Table 2). *Enterococcus faecium* showed increased MIC values for ampicillin,
133 tetracycline, erythromycin, trimethoprim and for high-level resistance to gentamicin. None of
134 the Gram-negative isolates exhibited MIC above EUCAST or CSLI breakpoints when these
135 values were available. Additionally MICs were frequently situated below the lowest
136 concentrations of the antibiotics tested suggesting the absence of acquired resistance against
137 these antibiotics (Table 3).

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139 This study, although including a low number of cases, gives an overview of species diversity
140 and antibiotic susceptibility patterns of bacteria cultured in blood samples of diseased foals in
141 Switzerland. Bacterial diversity and resistance patterns were previously published including a
142 higher number of septic foals in the US (Marsh et al., 2001; Theelen et al., 2014; Theelen et
143 al., 2014), Australia (Russell et al., 2008), New Zealand (Toombs-Ruane et al., 2016), the UK
144 (Corley et al., 2007) and the Czech Republic (Hytychová et al., 2015), but MIC values were
145 only reported in one study (Theelen et al., 2014). These studies reported increasing prevalence
146 of Gram-positive bacteria over recent years (Hytychová et al., 2015; Russell et al., 2008;
147 Theelen et al., 2014; Theelen et al., 2014) although, with the exception of a single study
148 looking at bacterial cultures from foals in general (Toombs-Ruane et al., 2016), more Gram-
149 negative than Gram-positive bacteria were cultured. This reflects the general bacterial
150 diversity in the equine population as reflected by culture results from a Swiss equine hospital
151 (van Spijk et al., 2016). The low number of positive blood samples in this study did not allow
152 the description of bacterial prevalence over time. However, we observed more Gram-positive
153 than Gram-negative isolates in the blood cultures from foals, comparable to trends in human
154 medicine (Martin et al., 2003). A possible explanation for the predominance of Gram-positive
155 bacteria in our study group is the potential influence of prior antimicrobial treatment on
156 bacterial distribution in the blood cultures. Antimicrobial treatment has been shown to
157 influence the selection of resistant *E. coli* in horses (Dunowska et al., 2006) but there is, to our
158 knowledge, no report about the influence of antimicrobial treatment on bacterial diversity in
159 septic foals. The presence of multidrug resistant bacteria defined as isolates with acquired
160 resistance towards ≥ 1 agent in ≥ 3 defined antimicrobial categories (Magiorakos et al., 2012),
161 is of more concern since treatment of infections caused by such bacteria may require the use
162 of so-called human medicine “last resort” antibiotics like vancomycin (Weese, 2009). The

163 occurrence of multidrug resistant bacteria with clinical significance (also including *S. aureus*,
164 coagulase-negative *staphylococci* and *enterococci*) has previously been reported in
165 Switzerland (van Spijk et al., 2016). It is therefore not surprising to observe the presence of
166 such antibiotic-resistant isolates in blood cultures of foals.

167 The major limitation of this report is the low number of positive blood cultures in the study
168 population and the fact that contamination cannot be excluded, especially if polymicrobial
169 growth with bacteria of the normal skin flora occurs.

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171 In conclusion, blood stream infections in this geographical area of Switzerland are caused by
172 a diversity of Gram-negative and Gram-positive bacteria, some of the latter exhibiting
173 resistance to several classes of antibiotics. MIC values above EUCAST and/or CLSI
174 breakpoints were identified in coagulase-negative *staphylococci*, MRSA and *Enterococcus*
175 *faecium* whereas the four Gram-negative isolates did not appear to exhibit increased MIC
176 values. This study emphasizes again the importance of vigilant use of antimicrobial drugs in
177 veterinary medicine and use of antimicrobial susceptibility testing to identify isolates with
178 increased MIC values.

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180 **Acknowledgement**

181 We thank the technical personal of the Institute of Veterinary Bacteriology for assistance in
182 bacteriological analysis and the clinical assistants of the equine hospital for their support. This
183 study was financed by internal funds of the Swiss Institute of Equine Medicine (ISME) and
184 the Institute of Veterinary Bacteriology, Vetsuisse Faculty, University of Bern, Switzerland.

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