

Human Journals **Research Article** July 2022 Vol.:22, Issue:1 © All rights are reserved by Nogueira, B. A. et al.

Multidrug-Resistance and Virulence-Related Properties of Diarrheagenic *Escherichia coli* in Urban River: A Possible Source and Dissemination of Human Infections



Nogueira, B. A.*a; Olivella, J. G. B.^b; Sued-Karam, B. R. ^b; Ribeiro, P. M. A. P. ^b; Oliveira, V. W. ^b; Rochade-Souza, C. M. ^c; Fracalanzza, S. E. L.^d; Mattos-Guaraldi, A. L.^b; Ignácio, A. C. P. R.^b

^a Laboratório de Tecnologia Bacteriana – LATEB, Fundação Oswaldo Cruz – FIOCRUZ, Rio de Janeiro, RJ, Brasil. ^b Departamento de Microbiologia e Imunologia, Faculdade de Ciências Médicas, Universidade do Estado do Rio de Janeiro – UERJ, Rio de Janeiro, RJ, Brasil. ^c Laboratório de Pesquisa em Infecção Hospitalar, Instituto Oswaldo Cruz, Fundação Oswaldo Cruz – FIOCRUZ, Rio de Janeiro, RJ, Brasil. ^d Instituto de Microbiologia Paulo Góes, Universidade Federal do Rio de Janeiro – UFRJ, Rio de Janeiro, RJ, Brasil.

Submitted:	23 June 2022		
Accepted:	28 June 2022		
Published:	30 July 2022		





www.ijsrm.humanjournals.com

Keywords: *Escherichia coli*; aquatic environment; multidrug resistance; diarrheagenic; intestinal epithelial cell.

ABSTRACT

The presence of multi-drug resistant (MDR)E. coli harboring virulence pathotypes in aquatic systems is a public health concern due to an increased number of cases of infections and outbreaks in industrialized and developing countries. The present study aimed to evaluate the microbiological quality of the Joana river, located in Rio de Janeiro, by analyzing *E. coli* bacteria contamination and investigating virulence properties and MDR profiles by phenotypic and genotypic methods, including bacterial interaction with Caco-2 cells. A total of 34 E. Coli were identified by MALDI-TOF and 20 E. coli were characterized as MDR when submitted to antimicrobial susceptibility test. Evaluation by multiplex-PCR of MDR E. *coli* demonstrated the presence of virulence pathotypes: EHEC (stx1, stx2, eae genes), STEC (stx2 gene), and EIEC/STEC (stx2, iaL genes). Virulence potential was demonstrated by the ability to adhere and survive within Caco-2 cells of MDR E. coli pathotypes (n=4). In conclusion, this study demonstrates the presence of diarrheagenic MDR *E. coli* in river water in Rio de Janeiro. The possibility of aquatic environment dissemination of antimicrobial resistance and human contamination leading to community and nosocomial infections due to virulent MDR E. coli water-borne pathogens is a matter of concern.

INTRODUCTION

Urban rivers may act as a reservoir of several human pathogens, including *Escherichia coli*, a commensal inhabitant of the human gastrointestinal tract, considered the main indicator of water potability (Lanna *et al.*, 2020; Guzmán *et al.*, 2015). Although most *E. coli* strains live harmlessly in the colon, several pathogenic strains can cause intestinal and extraintestinal diseases, through different virulence factors, in healthy and immunocompromised individuals (Leimbach *et al.*, 2013).

Diarrheal illnesses are a severe public health problem and a major cause of morbidity and mortality, especially in Africa, Asia, and Latin America due to poor living conditions, including poor environmental hygiene and sanitation. Diarrheagenic *E. coli*(DEC) is one of the most important of the various etiological agents of diarrhea, where strains have evolved to the acquisition, through horizontal gene transfer, of a particular set of characteristics that have persisted in the host. The DEC pathotypes are classified as Enteropathogenic *E. coli* (EPEC), Enterohaemorrhagic (Shiga toxin-producing) *E. coli* (EHEC/STEC), Enteroaggregative *E. coli* (EAEC), Enterotoxigenic *E. coli* (ETEC) and enteroinvasive. *coli* (EIEC - based on the presence of seven virulence genes: *eaeA*, *stx1*, *stx2*, *iaL*, *Lt*, *St*, and *egg* respectively. Each of these pathotypes represents a group of clones that share specific virulence factors. (Gomi*et al.*, 2015; Gomes at al. 2016).

Several reports indicate ETEC as a major cause of diarrheal illness in poor areas of the world where they contribute to unacceptable mortality, particularly among young children (Fleckenstein; Kuhlmann, 2019); EHEC strains secret Shiga toxin (*Stx*) which can lead to hemolytic uremic syndrome; EPEC is an important cause of infant diarrhea and mortality worldwide; EIEC strains are involved in invasive intestinal infections and dysentery; EAEC strains cause persistent diarrhea due to a heat-stable enterotoxin activity(Abe et al., 2008; Serapio-Palacios, Finlay, 2020); STEC may cause outbreaks, sporadic cases of hemorrhagic colitis and are associated with the hemolytic uremic syndrome and thrombotic thrombocytopenic purpura (Beutin*et al.*, 2004). Pathogenic *E. Coli* strains may colonize human tissues by attaching and/or invading host cells. Clinical manifestations induced by each of these strains are associated with a watery form of diarrhea or inflammatory presentation of the disease (Kalita, Hu, Torres, 2014; Wang *et al.*, 2017; Lanna*et al.*, 2020).

Population heterogeneity of *E. coli* has been linked to environmental changes and genome plasticity evolution of some lineages associated with human diseases due to new combinations of virulence genes and phenotypic diversity, contributing to survival, higher virulence profiles, and multi-resistance dissemination (Ashbolt, 2004; Brito *et al.*, 2008; Hartland and Leong, 2013).

Although bacterial interaction within the gastrointestinal human tract is essential to maintain members of the normal microflora, it is also considered a critical phase in all diarrheal infections caused by pathogenic *E. coli* strains (Kalita, Hu, Torres, 2014). Epithelial cell invasion is a virulence mechanism expressed by EIEC strains leading to dysentery-like illness. Invasive properties to cultured epithelial cells have been also reported for EPEC strains (Luck *et al.*, 2005). Therefore, understanding the occurrence of pathogenic *E. Coli* and their ability to adhere, invade and persist in the host cell will improve the knowledge of environmental transmission media to humans and its important role in emergence outbreaks creating potential threats and becoming a public health risk (Xiong*et al.*, 2015). However, further studies remain necessary.

This present study aimed to evaluate the microbiological quality of the Joana river, located in the Rio de Janeiro metropolitan area, by analyzing *E. coli* bacteria contamination and investigating virulence-related properties and multidrug-resistance profiles by phenotypic and genotypic methods, including host-cell interaction.

MATERIALS AND METHODS

Study area and sample collection.

Water samples were collected from the Joana River located in front of a University Hospital in the Rio de Janeiro metropolitan area, Southeast Brazil, which receives water from different sources including residences, State universities, rain, and hospital sewage.

Approximately 100 mL of water samples were collected, stored in sterilized bags, and transported to the laboratory for analysis. Samples were inoculated in 100mL of Brain Hearth Infusion broth – BHI (2x), incubated for 24h at 37°C, and subsequently cultivated onto MacConckey ágar (24h at 37°C), as previously described (Nogueira *et al.*, 2015). *E. coli* strains were identified using Matrix Assisted Laser Desorption Ionization Time-Of-Flight (MALDI-TOF) mass spectrometry. This method analyzes the profiles of bacterial macromolecules that are

obtained from whole bacteria. The procedure provides a unique mass spectral fingerprint of the microorganisms, biopolymer molecules normally present in the condensed phase be converted into intact, isolated ionized molecules in the gas phase. Then, ions are separated according to their molecular weight after migration in an electric field. Each molecule detected is characterized by molecular mass, the charge, the ratio mass/charge, and the relative intensity of the signal (Carbonelle *et al.*, 2011).

Antimicrobial susceptibility assays.

Antimicrobial susceptibility testing was done by the disc diffusion method (Bauer *et al.*, 1966), and the results were interpreted according to Clinical Laboratory Standards Institute (CLSI) guidelines (CLSI, 2019). The following antimicrobial drugs were tested: cephalothin, cefazolin, cefoxitin, cefuroxime, cefotaxime, ceftriaxone, ceftazidime, cefepime, gentamicin, amikacin, kanamycin, tobramycin, ampicillin, piperacillin/taxobactam, amoxicillin/clavulanic acid, ampicillin/sulbactam, ciprofloxacin, norfloxacin, imipenem, ertapenem, meropenem, aztreonam, chloramphenicol, tetracycline, cotrimoxazole, and colistin. Multidrug resistance was considered when strains were resistant to three or more antimicrobial agents of interest class (beta-lactams, fluoroquinolones, aminoglycoside, and carbapenems) (Magiorakos *et al.*, 2012).

Biofilm formation on hydrophobic polystyrene surface.

Biofilm assays on polystyrene surfaces were performed for all *E. coli* strains. The optical density (OD) of the stained attached bacteria and control wells were read at $\lambda = 570$ nm. The cut-off OD (ODc) was defined as the mean OD of the negative control (TSB only). Based on the ODs of the bacterial biofilms, all strains were classified into the following categories: non-adherent (-: OD \leq ODc), weakly adherent (+: ODc> OD \leq 2x ODc), moderately adherent (++: 2x ODc> OD \leq 4x ODc), or strongly adherent (++:OD>4x ODc). Each assay was performed in triplicate and repeated three times. *S. epidermidis* strain ATCC 35984 was used as a positive controll (Van Belkum *et al.*, 2007).

Biofilm formation on a hydrophilic glass surface.

Microorganisms were inoculated in glass tubes (15x100 mm) containing 5 mL of TSB medium and incubated at 37°C for 48 h. The supernatants containing non-adherent bacterial cells were

discarded. Fresh sterile TSB (5 mL) was added to the test tubes and re-incubated for 48 h. This procedure was repeated twice. Glass-adherent bacteria created a confluent coat of cells on the sides of the tube. Microorganisms were classified as non-adherent (-: absence of adherence), weakly adherent (+: adherent bacteria appeared as a ring at the interface between the medium and the air), moderately adherent (++: bacteria attached on the side of the glass tubes), or strongly adherent (+++: bacteria attached on the side of the glass tubes and at the interface between the medium and the air). *S. epidermidis* strain ATCC 35984 was used as a positive control (Mattos-Guaraldi and Formiga, 1991).

Multiplex-polymerase chain reaction (PCR)assays

Twenty *E. Coli* strains were submitted to a simple boiling method for DNA extraction, suspended in water injection, and maintained at -20°C (Nogueira *et al.*, 2015) to search for EHEC, EPEC, STEC, EIEC, EAEC and ETEC, PCR targeting *eaeA* (917 bp), *stx1* (614 bp), *stx2* (779 bp), *ial* (630 bp), *Lt* (450 bp) and *St* (160 bp) genes was employed. The amplification was performed using a reaction mixture that contained 20 µL containing 1X PCR buffer (10 mM Tris HCl, pH 8,4; 25 mM KCl), 1.5 mM MgCl₂, 200 µM dNTPs (Promega, Madison, WI, USA), 0.5 µM of each primer (Integrated DNA Technologies, Coralville, IA, USA), 1 U Taq DNA polymerase (Phoneutria, Belo Horizonte, MG, Brazil), and 2 µL of DNA. In each batch of positive reactions, controls were employed. The amplification conditions used were as follows: an initial denaturation step at 95 °C for 5 min was performed, followed by 35 cycles of 94 °C for 45 s, annealing at 55 °C for 1 min, and elongation at 62 °C for 2 min. A final elongation step was executed at 72 °C for 5 min. Amplicons were resolved by electrophoresis on SYBR Safe DNA Gel Stain (ThermoFisher Scientific, Vilnius, Lithuania). Gels were evaluated using E-gel Imager, and amplicon sizes were compared with a 100 bp DNA ladder (ThermoFisher Scientific, Vilnius, Lithuania) (Chandra *et al.*, 2013).

Bacterial interaction with human colon adenocarcinoma cell line Caco-2 -

Human colon adenocarcinoma cells Cao-2 were used in adherence, invasion, and persistence assays (Pereira *et al.*, 2008). Epithelial cells were grown in 96-well cell culture clusters to confluent monolayers (10⁷ cells per well) in Minimum Essential Medium Eagle (Sigma-Aldrich) supplemented with 10% bovine fetal serum. Mid-log-phase bacteria were cultured in Trip Soy

Broth – TSB for 24h at 37°C and reach OD 580 nm of 0.2 were then added to each well with MOI of 10 and 100 bacteria per epithelial cell to test the influence of the amount of inoculated bacteria on the number of internalized bacteria. Internalization assays were allowed to occur for 2 h and 4 h at 37°C in an atmosphere of 94% air–6% CO2.

To determine the level of bacterial adhesion, 96-well plates containing epithelial cells incubated with mid-log-phase bacteria had been prewashed three times with PBS and lysed with 100 ul PBS-triton (Sigma-Aldrich) to enumerate adherent bacteria added. All strains were shown to be susceptible to ≤ 150 mg/mL of gentamicin in the invasion experiments and were incubated for 1 h to determine the bacterial invasion. After the incubation period, monolayers were washed three times with saline and lysed with 0.1% Triton X-100 to determine the viable counts of released intracellular bacteria. Invasion ability was expressed as the percentage of inoculum that survived 150 mg of gentamicin per ml treatment. Following the invasion period as described above, an assay of resistance was demonstrated after 24 h. The infected cells were incubated at 37°C in 5% CO2 using 150 mg of gentamicin per ml. The results were recorded as a percentage of the original inoculum. All assays were conducted in triplicate and were repeated independently at least three times (Hirata Jr. *et al.*, 2004; Sahly*et al.*, 2000).

RESULTS

HUMAN

In this study, a total of 34 *E. coli* strains were identified by MALDI-TOF mass spectrometry with $a \ge 2$ score. Analysis of data showed that all strains presented resistance to at least one group of antimicrobial agents tested, and expressed a resistant (R) profile. Interestingly, 20 of 34 (58.8%) *E. coli* river isolates presented resistance to three or more antimicrobial groups of interest and were considered multi-drug resistance (MDR). Multi-drug resistance of *E. coli* river isolates included resistance to 3rd and 4th cephalosporin, aminoglycosides, fluoroquinolones, and carbapenems (**Table 1**).

Table No 1: Resistance profile of *E. coli* strains isolated at Joana river, located in Rio de Janeiro metropolitan area, Brazil

E. coli			
strain	Antimic	crobial resistance profiles	
S			
E 10	MDD	CFZ/CFO/CRX/CTX/CRO/CAZ/CPM/GEN/AMI/KAN/TOB/PPT/AMC	
<i>Ec10</i>	MDR	/ASB/CIP/NOR/IMI/ETP/ATM/SUT	
E 21	MDD	CFL/CTX/ CRO/CAZ/CPM	
Ec31	MDR	GEN/KAN/TOB/AMP/AMC/ASB/NOR/SUT/TET	
Ec21	MDR	CFL/CFZ/CRX/CTX/CRO/GEN/AMI/AMP/AMC/CIP/NOR/SUT/TET	
Ec30	MDR	CFL/CFZ/CFO/CRX/CTX/CRO/CAZ/KAN/TOB/ETP/ATM/TET	
Ec27	MDR	CFL/CFZ/CFO/CRX/CTX/CRO/CAZ/CPM/GEN/AMI/KAN/TOB/NOR/	
EC27	MDR	ETP/ATM/SUT	
E-04	MDD	CFL/CFZ/CRX/CTX/CRO/CPM/AMI/KAN/AMP/AMC/ASB/CIP/NOR/	
Ec04	MDR	IMI/ETP/TET	
Ec06	MDR	CFL/CFZ/CFO/CRX/CTX/CRO/CAZ/CPM/AMI/KAN/TOB/AMP/IMI/	
ECOO	MDR	ETP/ATM/SUT	
Ec03	MDR	CFL/CFZ/CRX/CTX/CRO/CAZ/CPM/AMI/KAN/AMP/NOR/IMI/ETP/	
LCOJ	MDK	ATM/CLO	
Ec23	MDR	CFL/CFZ/CRX/CTX/CRO/GEN/AMP/PPT/AMC/ASB/CIP/NOR/SUT/T	
LC2J	MDK	ET	
<i>Ec32</i>	MDR	CFL/CFZ/CFO/CRX/CTX/CRO/CAZ/CPM/GEN/KAN/TOB/ETP/ATM	
Ec33	MDR	CFL/CFZ/CTX/GEN/AMI/TOB/AMP/AMC/ASB/CIP/NOR/TET	
<i>Ec34</i>	MDR	CFL/CFZ/CTX/GEN/AMI/TOB/AMP/AMC/ASB/CIP/NOR/TET	
Ec01	MDR	CFL/CFZ/CRX/CTX/AMI/ CIP/NOR/IMI/ETP AMP/ATM/TET	
<i>Ec22</i>	MDR	CFZ/CRX/CTX/GEN/KAN/TOB/AMP/CIP/NOR/SUT/TET	
Ec16	MDR	CFL/CRX/CTX/GEN/AMI/TOB/AMP/AMC/SUT/TET	
Ec15	MDR	CFL/CFZ/CRX/CRO/CPM/CIP/NOR/IMI/TET	
<i>Ec24</i>	MDR	CRX/CTX/GEN/AMI/AMP/NOR/SUT/TET	
<i>Ec29</i>	MDR	GEN/TOB//ETP/AMP/ASB/NOR/SUT/TET	

<i>Ec08</i>	MDR	CFL/CFZ/CRX/CTX/GEN/AMP/NOR/TET
Ec18	MDR	CFL/CFZ/CFO/CRX/CAZ/KAN/TOB/ETP
Ec13	R	CFL/CFZ/CFO/CTX/CRO/CAZ/AMP/PPT/AMC/CIP/TET
<i>Ec05</i>	R	CFL/CFZ/CRX/CTX/CRO/CPM/AMP/IMI/ATM/SUT
<i>Ec20</i>	R	CFL/CFZ/CFO/CTX/GEN/AMI/TOB/AMP/SUT/TET
Ec19	R	CFZ/CTX/GEN/AMI/AMP/ASB/SUT/TET
<i>Ec02</i>	R	CFL/CFZ/CRX/CTX/CRO/AMP/IMI/SUT
Ec17	R	CFL/CFZ/CTX/GEN/AMP/SUT/TET
<i>Ec07</i>	R	CFL/CFZ/CRX/CTX/GEN/AMP
<i>Ec26</i>	R	GEN/AMP/AMC/SUT/TET
Ec11	R	CFL/CFZ/CRX/AMP/SUT
<i>Ec12</i>	R	CFL/CFZ/CRX/CRO/AMP
<i>Ec25</i>	R	CTX/GEN/AMP/SUT/TET
Ec28	R	CTX/GEN/AMP/SUT/TET
<i>Ec09</i>	R	CFL/CFZ/AMP/AMC
Ec14	R	CFL/CFZ/CRX/AMP

HUMAN

Legend: R- resistant, MDR-multi-drug resistant; CFL-cephalothin, CFZ-cefazolin, CFOcefoxitin, CRX-cefuroxime, CTX-cefotaxime, CRO-ceftriaxone, CAZ-ceftazidime, CPMcefepime, GEN-gentamicin, AMI-amikacin, KAN-kanamycin, TOB-tobramycin, AMPampicillin, PPT-piperacillin/taxobactam, AMC-amoxicillin/clavulanic ASBacid, ampicillin/sulbactam, CIP-ciprofloxacin, NOR-norfloxacin, IMI-imipenem, ETP-ertapenem, MER-meropenem, ATM-aztreonam, CLO-chloramphenicol, TET-tetracycline, SUTcotrimoxazole, COL-colistin

Analysis of the biofilm formation ability of resistant and MDR *E. coli* strains demonstrated that all strains were able to promote biofilm formation on polystyrene surfaces at different levels. Of the 20 MDR *E. coli* strains, 40% (n=8) were considered as strongly adherent on both polyestinere and glass surfaces, followed by 20% (n=7) moderated adherent, 20% (n=4) weakly adherent, and 5% (n=1) non-adherent. Resistant *E. coli* also demonstrated heterogeneity among both polyestinere and glass biofilm formation: 42.8% (n=6) were able to promote biofilm

formation and were considered as weakly adherent, followed by, 35.7% (n=5) as moderated adherent and 7.2% (n=1) as strongly adherent, while 14.3% (n=2) of resistant *E. coli* strains were considered as non-adherent (**Table 2**).

EC10 SA +++ EC31 SA +++ EC21 SA +++ EC30 SA +++ EC30 SA +++ EC4 WA + EC04 WA + EC05 MA ++ EC06 MA ++ EC03 WA + EC31 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC35 MA ++ EC36 MA ++ EC37 MA ++ EC38 MA ++ EC39 SA +++ EC16 WA + EC16 WA + EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	E. COLI	BIOFILM FORMATI	ON	
EC31 SA +++ EC21 SA +++ EC30 SA +++ EC30 SA +++ EC04 WA + EC05 MA ++ EC06 MA ++ EC03 WA + EC04 WA + EC05 MA ++ EC06 MA ++ EC31 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC35 MA ++ EC34 MA ++ EC16 WA + EC16 WA + EC22 SA +++ EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC13 MA +	STRAIN	Polystyrene Surface	Glass surface	
EC21 SA +++ EC30 SA +++ EC30 SA +++ EC04 WA + EC06 MA ++ EC03 WA + EC03 MA ++ EC03 WA + EC32 MA ++ EC33 MA ++ EC34 MA ++ EC35 MA ++ EC36 MA ++ EC37 MA ++ EC38 MA ++ EC16 MA ++ EC16 WA + EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC10	SA	+++	
EC30 SA +++ EC30 SA +++ EC04 WA + EC06 MA ++ EC03 WA + EC03 WA + EC03 MA ++ EC33 MA ++ EC33 MA ++ EC34 MA ++ EC35 MA ++ EC34 MA ++ EC05 MA ++ EC16 MA ++ EC16 VA + EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC31	SA	+++	
EC27 MA ++ EC04 WA + EC06 MA ++ EC03 WA + EC03 WA + EC03 WA + EC23 MA ++ EC32 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC35 MA ++ EC16 MA ++ EC16 WA + EC24 NA - EC25 SA +++ EC26 SA +++ EC15 SA +++ EC29 SA +++ EC18 WA + EC18 WA +	EC21	SA	+++	
EC04 WA + EC06 MA ++ EC03 WA + EC03 MA ++ EC23 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC01 MA ++ EC16 WA ++ EC15 SA +++ EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC30	SA	+++	
EC06 MA ++ EC03 WA + EC03 MA ++ EC23 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC34 MA ++ EC14 MA ++ EC25 SA +++ EC16 WA + EC15 SA +++ EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC27	MA	++	
EC03 WA + EC23 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC01 MA ++ EC10 MA ++ EC11 MA ++ EC22 SA +++ EC16 WA + EC15 SA ++++ EC24 NA - EC29 SA ++++ EC08 SA ++++ EC18 WA + EC13 MA ++	EC04	WA	+	
EC23 MA ++ EC32 MA ++ EC33 MA ++ EC34 MA ++ EC01 MA ++ EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC06	MA	++	
EC32 MA ++ EC33 MA ++ EC34 MA ++ EC01 MA ++ EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC03	WA	+	
EC32 MA ++ EC33 MA ++ EC34 MA ++ EC01 MA ++ EC01 MA ++ EC10 MA ++ EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC23			
EC34 MA ++ EC01 MA ++ EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA +++	EC32			
EC01 MA ++ EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA +	EC33	MA	++	
EC22 SA +++ EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC34	MA	++	
EC16 WA + EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA +	EC01	MA	++	
EC15 SA +++ EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC22	SA	+++	
EC24 NA - EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC16	WA	+	
EC29 SA +++ EC08 SA +++ EC18 WA + EC13 MA ++	EC15	SA	+++	
EC08 SA +++ EC18 WA + EC13 MA ++	EC24	NA	-	
EC18 WA + EC13 MA ++	EC29	SA	+++	
EC13 MA ++	EC08	SA	+++	
	EC18	WA	+	
EC05 WA +	EC13	MA	++	
	EC05	WA	+	

 Table No 2: Biofilm formation ability of *E. coli* strains isolated at Joana river, located in

 Rio de Janeiro metropolitan area, Brazil

EC20	MA	++
EC19	SA	+++
EC02	MA	++
EC17	WA	+
EC07	WA	+
EC26	MA	++
EC11	WA	+
EC12	WA	+
EC25	WA	+
EC28	NA	-
EC09	MA	++
EC14	NA	-

Legend: SA/ +++: strongly adherent, MA/++: moderated adherent; +: adherent bacteria appeared as a ring at the interface between the medium and the air.

Further analysis of virulence pathotypes of MDR *E. Coli* strains was displayed in Table 3 and Figure 1. Data showed that 20% (n=4) of MDR *E. coli* river isolates expressed virulence pathotypes: EHEC (Ec31); STEC and EIEC – hybrid (Ec21) and STEC (Ec30 and Ec10) while 80% (n=16) did not present any virulence pathotypes analyzed. Evaluation of the presence of virulence genes demonstrated heterogeneity among the isolates. All four strains presented *stx2* gene followed by *stx1* (n=1), *iaL* (n=1) and *eaeA* (n=1). Multiplex-PCR for *Lt*, *St*, and *aegg* genes presented negative results in all opportunities (**Figure 1**).

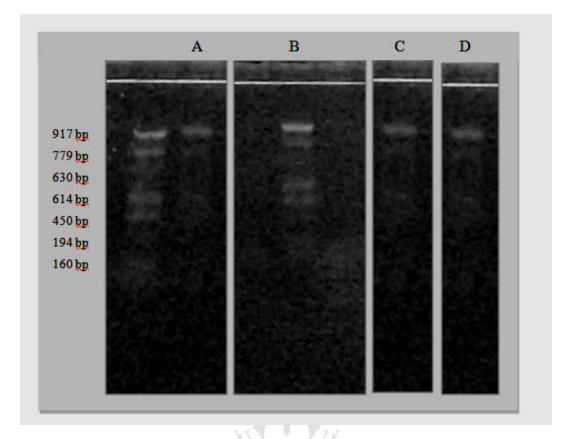


Figure 1: Amplification profile scheme generated by mPCR for multidrug-resistant *Escherichia coli* and determination of virulence genes: *eaeA* (917 bp), *stx1* (614 bp), *stx2* (779 bp), *iaL* (630 bp), *Lt* (450 bp) and *St* (160 bp) corresponding to A- STEC and EIEC (Ec21); B-EHEC (Ec31) and C and D-STEC (Ec30 and Ec10) strains.

The results of the quantitative cell-associated MDR *E. coli* river isolates (n=4) harboring virulence patothypes were shown in Table 2. The highest level of adherence to Caco-2 cells was observed with STEC (Ec10 and Ec30) strains to present the *stx2* gene: 63.1% and 45.9% respectively. EIEC/STEC (Ec21) and EHEC (Ec31) strains expressed lower ability of adherence to human epithelial cell line: 35.4% and 27.8% respectively. Viable internalized bacteria were detected at 1 h post-infection of the monolayers, regardless of the *E. coli* pathotypes but at different levels. The highest percentages of viable intracellular bacteria deduced from Caco-2 cell-associated bacteria were observed for both STEC (Ec10 and Ec30) strains: 3.5% and 0.1% respectively. EIEC/STEC (Ec21) and EHEC (Ec31) strains presented lower percentages of viable intracellular bacteria: 0.007% and 0.01% respectively. Bacterial persistence following a long period of incubation (24h) was displayed in Table 2. All four MDR *E. coli* analyzed strains were

able to survive in the presence of Caco-2 cells at different levels: EIEC/STEC (Ec21) 1.8%; EHEC (Ec31) 3.14%, STEC (Ec30) 18.3% and STEC (Ec10) 145.8%. Interestingly, the STEC (Ec10) isolate not only persisted viable but also was capable to multiply within the Caco-2 cell (**Table 3**).

Table 3: Virulence genes, pathotypes, and cell interaction results of MDR Escherichia coli

 isolated from river environment located at Rio de Janeiro metropolitan area, Brazil.

	Virulence genes	Pathotypes	Caco-2 epithelial cells			
Strains			Control	Adherence	Internalized bacteria (1h)	Persistence (24h)
EC31	Stx1, stx2, eaeA	EHEC	6.1x10 ⁸	1.7x10 ⁸ (27.8%)	2.1x10 ⁴ (0.01%)	6.6x10 ² (3.14%)
EC21	Stx2, iaL	EIEC; STEC	4.8x10 ⁸	1.7x10 ⁸ (35.4%)	1.2x10 ⁴ (0.007%)	2.2x 10 ² (1.8%)
EC30	Stx2	STEC	3.7x10 ⁸	1.7x10 ⁸ (45.9%)	6x10 ⁴ (3.5%)	1.1.x10 ³ (18.3%)
EC10	Stx2	STEC	3.8x10 ⁸	2.4x10 ⁸ (63.1%)	2.4x10 ⁵ (0.1%)	3.5x10 ⁵ (145.8%)

DISCUSSION

E. Coli strains are highly affected by the propagation of resistance and virulence genes in urban rivers when compared to other *Enterobacteriaceae* (Tortora, Funke, Case, 2008, Kittinger *et al.*, 2016). However, there is still a poor understanding of the environmental factors that may alleviate the spread of antibiotic resistance. At present, it is not clear to what extent environmental antibiotic-resistant bacteria (ARB) and antibiotic-resistant genes (ARGs) promote the acquisition and spread of antibiotic resistance among clinically relevant bacteria, or whether ARGs that are acquired by both clinically relevant bacteria and strictly environmental bacteria originate from the same reservoirs (Berendonk, *et al.*, 2015).

In this present study, we documented the presence of resistance and MDR*E*. *Coli* strains are isolated from the Joana river, located in Rio de Janeiro metropolitan area, Brazil. Heterogeneity among virulence pathotypes as well as host-pathogen interaction with Caco-2 cells was verified among MDR river isolates. The presence of antimicrobial-resistant *E. coli* in aquatic systems released from anthropogenic sources such as communities, industries, veterinary, and hospitals, is a public health concern in industrialized and developing countries due to its relevance to the environmental dissemination of antimicrobial resistance (Djordjevic, Stokes, Chowdhury, 2013; Berendonk, *et al.*, 2015).

Although generally harmless, *E. coli* strains may express virulence potential properties that account for human localized and invasive infections in both communities and hospital environments (Hall-Stoodley, Costerson, Stoodley, 2004). The plasticity of the *E. coli* genome has hindered the identification of certain *E. coli* isolates as a pathotype, because some isolates combine the main virulence characteristics of different pathotypes and are thus considered potentially more virulent hybrid pathogenic strains. In this study, MDR *E. Coli River* isolates presented the following distinct pathotypes: STEC, EHEC, and EIEC/STEC.

MDR *E. coli* Ec31isolated strain was classified as EHEC due to the ability to produce *stx1* and *stx2*Shiga toxin (Stx) cytotoxin associated with *eaeA* gene. MDR *E. coli* strains Ec21, Ec30 and Ec10 presented *stx2* Shiga toxin (Stx) cytotoxins. The association of Stxcytotoxins, especially *stx2*, with severe diseases has been extensively studied by using endothelial cell lines and their ability to adhere is related to EHEC/STEC pathogenesis (Rivas *et al.*, 2016). In addition, biofilm may act as bacterial protection against adverse environmental conditions, especially in aquatic environments. A study conducted by Biscola and co-workers (2011) evaluated the capacity of biofilm formation in EHEC/STEC strains isolated from different reservoirs and demonstrated a strong ability to adhere on both glass and polystyrene surfaces. Cell invasion and survival of EHEC/STEC strains in cultured human intestinal epithelial cells have been previously described (Cordeiro *et al.*, 2013) and may be related to biofilm strongly adherence. It should be mentioned that this invasive characteristic has been identified in EHEC/STEC serotypes, responsible for human infections (Mateus-Guimarães *et al.*, 2014; Cordeiro *et al.*, 2013) and isolated from water representing an important vehicle of transmission (Lascowski *et al.*, 2013).

Our studies also demonstrated the presence of MDR enteroinvasive. *coli* Ec21 strain. EIEC is a causative agent of dysentery in humans, especially in developing countries, due to its ability to invade and penetrate cells by endocytosis, as shown in Table 2. Despite the similarities in invasion mechanism and symptoms of the disease, the infectious dose of EIEC appears to be a milder and self-limiting form when compared to *Shigella, which* leads to an exacerbation of proinflammatory response. EIEC was responsible for several outbreaks, but there are few reports on routes of transmission and distribution of this bacterium in nature, including water and cheese (Marier*et al.*, 1973; Valentini *et al.*, 1992) as well as the direct transmission through person-to-person contact. The isolation of EIEC in Brazil has ranged from 0.5 to 15%, depending on the population investigated (Moreno *et al.*, 2010; Lozer *et al.*, 2013). Toledo and Trabulsi (1990) investigated the presence of this microorganism in different areas of the city of São Paulo. This bacterium has been found related to children with diarrhea (15.9%). Studies performed outside the city of São Paulo showed a low prevalence of these bacteria, 0.5–2.5% (Oliveira *et al.*, 1989).

Few studies have been conducted to investigate pathogenic *E. Coli* strains in urban rivers, although pollution of surface waters with these pathogens has been implicated in an increased number of disease outbreaks and consequent deaths (Masters *et al.*, 2011).

In an attempt to investigate the virulence potential of *E. coli* environmental isolates expressing MDR profiles and virulence genes, were investigated for the ability to interact with Caco-2 human intestinal epithelial cells. All MDR *E. Coli* strains of STEC, EHEC, and EIEC/STEC pathotypes were able to adhere to epithelial cell surfaces. MDR *E. coli* (Ec 10 and Ec30) isolates, classified as STEC pathotypes and presenting *stx2* gene, expressed a higher ability of adherence, internalization, and persistence within Caco-2 epithelial cells. Previous reports documented that STEC annually was responsible for 2,801,000 cases of acute illness, 3890 HUS cases, 270 permanent end-stage renal disease, and 270 deaths worldwide and cases of infections have been traced to person-to-person transmission (Duffy, Burgess, Bolton, 2014; Majowicz *et al.*, 2014).

Presently, the MDR *E. coli* strain (Ec21) of EIEC pathotypes and harboring gene, showed the ability of adherence, internalization, and persistence within Caco-2 epithelial cells. EIEC infection occurs via fecal-oral route by the ingestion of contaminated food or water and invasion of colonic epithelium, causing abdominal cramps, and bloody and mucous diarrhea. During the

last decades, there are an increasing number of EIEC cases in varied countries, including two large outbreaks in Europe (Thong *et al.*, 2005; Bueris *et al.*, 2007; Michelacci *et al.*, 2020).

Moreover, one MDR *E. coli* (Ec31) river isolate was characterized as EHEC, presenting lower levels of adherence, internalization, and persistence within Caco-2 epithelial cells. The virulence potential of these pathotypes is partially demonstrated by the ability to attach intimately and effacing microvilli of epithelial intestinal cells that can directly induce renal and endothelial lesions due to the expression of *eaeA*, *Stx1* and*Stx2* genes (Donnenberg, 1993; Maule, 2000; Gomes *et al.*, 2016). Survival and persistence of EHEC in contact with surfaces and exposure to water environments among other conditions should be recognized as important risk factors in the spread of this pathogen, including rivers located in metropolitan areas. Data that deserves attention.

In this study, one MDR *E. coli* (Ec31) river isolate was characterized as EHEC, presenting lower levels of adherence, internalization, and persistence within Caco-2 epithelial cells, possibly related to previously described cytotoxicity abilities - whether apoptosis and/or necrosis (Donnenberg, 1993; Maule, 2000; Gomes *et al.*, 2016; Abul-Milh *et al.*, 2001). Data reinforce the fact that survival and persistence of EHEC in contact with surfaces and exposure to water environments among other conditions should be recognized as important risk factors in the spread of this pathogen, including rivers located in metropolitan areas. Information that deserves attention concerning the virulence potential and risk of contamination by EHEC pathotypes is the ability to cause acute infections with only ten bacterial cells indicating a high virulence level (Maule, 2000).

CONCLUSION

In conclusion, this study demonstrates the presence of diarrheagenic *E. coli* strains in the river water source in Rio de Janeiro metropolitan area, Brazil. However, a subset of these strains demonstrated a high pathogenic potential as they exhibited a multi-drug resistant phenotype and virulence genes. The possibility of contamination leading to human infection and causing gastrointestinal disease due to MDR *E. coli* presenting virulence pathotypes of water-borne pathogens is a matter of concern. The presence of diarrheagenic *E. coli* in river waters warrants the implementation of environmental safety strategies to avoid the dissemination of clones to

people leaving in the area but particularly those more vulnerable communities who utilize these waters for domestic purposes, including Rio de Janeiro.

REFERENCES

- 1. Abe, C. M.; Salvador, F. A.; Falsetti, I. N.; Vieira, M. A.; Blanco, J.; Blanco, J. E.; et al. Uropathogenic*Escherichia coli* (UPEC) strains may carry virulence properties of diarrhoeagenic *E. coli*. FEMS **Immunology Medical Microbiology**, v. 52, p. 397-406, 2008.
- 2. Abul-Milh, M.; Wu, Y.; Lau, B.; Lingwood, C. A.; Foster, D. B. Induction of epithelial cell death including apoptosis by enteropathogenic *Escherichia coli* expressing bundle-forming pili. **Infection and Immunity**, 2001.
- 3. Ashbolt, N.J. Microbial contamination of drinking water and disease outcomes in developing regions. **Elsevier**. 198:3: 229-238; 2004.
- 4. Bauer, A. W.; Kirby, W. M.; Sherris, J. C.; Turck, M. Antibiotic susceptibility testing by a standardized single disk method. **American Journal of Clinical Pathology**, v. 45, p. 493-496, 1966.
- 5. Berendonk, T. U.; Manaia, C. M.; Merlin, C.; Fatta-Kassionos, D.; Cytryn, E.; Walsh, F.; Burgmann, H.; *et al.* Tackling antibiotic resistance: the environmental framework. **Nature Reviews Microbiology**, 2015.
- 6. Beutin, L.; Krause, G.; Zimmermann, S.; Kaulfuss, S.; Gleier, K. Characterization of Shiga Toxin-Producing *Escherichia coli* Strains Isolated from Human Patients in Germany over a 3-Year Period. Journal of Clinical Microbiology, V. 42, n. 3, p. 1099-1108, 2004.
- Biscola F.T.; Abe C.M.; Guth B.E.C. Determination of adhesin gene sequences in, and biofilm formation by, O157 and non-O157 Shiga toxin-producing *Escherichia coli* strains isolated from different sources. Applied Environmental Microbiology, v. 77, n. 7, 2011
- 8. Bueris, V.; Sircili, M. P.; Taddei, C. R.; Santos, M. F.; Franzolin, M. R.; Martinez, M. B.; Ferrer, S. R.; Barreto, M. L.; Trabulsi, L. R. Detection of diarrheagenic Escherichia coli from children with and without diarrhea in Salvador, Bahia, Brazil. **Memórias do Instituto Oswaldo Cruz**, v. 102, n. 7, p. 839-844, 2007.
- 9. Brito, B.G.; Vidotto, M.C.; Berbel, M.M.; Tagliari, K.C. Virulence factors of uropathogenic*Escherichia coli*-UPEC strains for pigs. **Ciência Rural**. 34:2; 2004.
- Carbonnelle, E.; Mesquita, C.; Bille, E.; Day, N.; Dauphin, B.; Beretti, J. L.; Ferroni, A.; Gutmann, L.; Nassif, X. Maldi-tof mass spectrometry tools for bacterial identification in clinical microbiology laboratory. Clinical Biochemistry, v.44, 2011.
- 11. Chandra, M.; Cheng, P.; Rondeau, G.; Porwollik, S.; McClelland, M. A single step multiplex PCR for identification of six diarrheagenic *E. coli* pathotypes and *Salmonella*. International Journal of Medical Microbiology, v. 303, p. 210-216, 2013.
- 12. Cordeiro F., Silva R.I.K., Vargas-Stampe T.L.Z., Cerqueira A.M.F., Andrade J.R.C. Cell invasion and survival of Shiga toxin-producing *Escherichia coli* within cultured human intestinal epithelial cells. **Microbiology**, V. 159, p. 1683-1694, 2013
- CLSI- Clinical Laboratories Standards Institute. Performance Standards for antimicrobial disk susceptibility tests. Approved Standard CLSI Document M2, 2019. Clinical Laboratories Standards Institute, Waine. PA EUA.
- Djordjevic SP, Stokes HW, Chowdhury PR. Mobile elements, zoonotic pathogens and commensal bacteria: conduits for the delivery of resistance genes into humans, production animals and soil microbiota. Frontiers in Microbiology. 2013;4(86):1–12.
- 15. Donnenberg, M. S.; Tzipori, S.; McKee, M. L.; O'Brien, A. D.; Alroy, J.; Kaper, J. B. The role of the *eae* gene of enterohemorrhagic *Escherichia coli* in intimate attachment in vitro and in a porcine model. **The Journal of Clinical Investigation**, v. 9, n. 3, p. 1418-1424, 1993.

- Duffy, G., Burgess, C. M., Bolton, D. J. A review of factors that affect transmission and survival of verocytotoxigenic Escherichia coli in the European farm to fork beef chain. Meat Science, v. 97, p. 375–383, 2014.
- 17. Fleckenstein, J. M.; Kuhlmann, F. M. Enterotoxigenic Escherichia coli Infections. Current Infectious Disease Reports, n. 9, 2019.
- Gomes, T. A. T.; Elias, W. P.; Scaletsky, I. C. A.; Guth, B. E. C.; Rodrigues, J. F.; Piazza, R. M. F.; Ferreira, L. C. S.; Martinez, M. B. Diarrheagenic *Escherichia coli*. Brazilian Journal of Microbiology, v. 47, n. 1, p. 3–30, 2016.
- Gomi, R., Matsuda, T., Fujimori, Y., Harada, H., Matsui, Y. and Yoneda, M. Characterization of pathogenic Escherichia coli in river water by simultaneous detection and sequencing of 14 virulence genes. Environmental Science Technologies, v. 49, p. 6800–6807, 2015.
- 20. Hall-Stoodley, L.; Costerton, J.W.; Stoodley, P. Bacterial biofilm: from the natural environment to infectious disease. **Nature Reviews Microbiology**. 2:2: 65-108; 2004.
- Hirata Jr, R.; Souza, S. M. S.; Rocha-de-Souza, C. M; Andrade, A. F. B.; Monteiro-Leal L. H.; Formiga, L. C. D.; Mattos-Guaraldi, A. L. Patterns of adherence to HEp-2 cells and actin polymerization by toxigenic *Corynebacterium diphtheriae* strains. Microbial Pathogenesis, v. 36, p. 125-130, 2004.
- 22. Kalita, A.; Hu, J.; Torres, A. G. Recent advances in adherence and invasion of pathogenic *Escherichia coli*. **Current Opinion in Infectious Diseases**, v. 27, n. 5, p. 459-464, 2014.
- Kittinger, C.; Lipp, M.; Folli, B.; Kirschner, A.; Baumert, R.; Galler, H.; Grisold, A. J.; Luxner, J.; Weissenbacher, M.; Farnleitner, A. H.; Zarfel, G.Enterobacteriaceae Isolated from the River Danube: Antibiotic Resistances, with a Focus on the Presence of ESBL and Carbapenemases. PLoSOne, v. 11, n. 11, 2016.
- Lascowski K. M. S.; Guth B. E. C.; Martins F. H.; Rocha S. P. D.; Irino K.; Pelayo J. S. Shiga toxinproducing *Escherichia coli* in drinking water supplies of North Paraná State, Brazil. Journal of Applied Microbiology, v. 114, p. 1230-1239, 2013
- 25. Leimbach, A.; Hacker, J.; Dobrindt, E. *E. coli* as na all-rounder: the thin line between commensalism and pathogenicity. **Current Topics in Microbiology and Immunology**, v. 358, p. 3-32, 2013.
- Lozer, D. M.; Souza, T. B.; Monfardini, M. V. Genotypic and phenotyoic analysis of diarrheagenic *Escherichia colis*trains isolated from Brazilian children living in low socioeconomic level communities. BMC Infectious Diseases, v. 13, 2013.
- Luck, S. N.; Bennett-Wood, V.; Poon, R.; Robins-Browne, R. M.; Hartland, E. L. Invasion of Epithelial Cells by Locus of Enterocyte Effacement-Negative Enterohemorrhagic *Escherichia coli*. Infection and Immunity, p. 3063-3071, 2015.
- Magiorakos, A.P.; Srinivasan, A.; Carey, R.B.; Carmeli, Y.; Falagas, M.E. Giske, C.G.; Harbarth, S.; Hindler, J.F.; Kahlmeter, G.; olsson-Liljequist, B.; Paterson, D.L.; Rice, L.B.; Stelling, J.; Struelens, M.J.; Vatopoulos, A.; Weber, J.T.; Monnet, D.L. Multidrug-resistant, extensively drug-resistant and pandrug-resistant bacteria: an international expert proposal for interim standard definitions for acquired resistance. Clinical Microbiology and Infection. 2011.
- 29. Majowicz, S. E., Scallan, E., Jones-Bitton, A., Sargeant, J. M., Stapleton, J., Angulo, F. J., et al. Global incidence of human Shiga toxin–producing Escherichia coli infections and deaths: A systematic review and knowledge synthesis. **Foodborne Pathogens and Disease**, v. 11, p. 447–455, 2014.
- Marier R.; Wells J. C.; Swanson R. C.; Callahan W.; Mehlman I. J. An outbreak of enteropathogenic *E. coli* foodborne disease traced to imported cheese. Lancet, v. 302, p. 13-76-1378, 1973.
- 31. Masters, N.; Wiegand, A.; Ahmed, W.; Katouli, M. Escherichia coli virulence genes profile of surface waters as an indicator of water quality. Water Research, v. 45, n. 19, p. 6321–6333, 2011.
- 32. Matheus-Guimarães C.; Gonçalves E.; Guth B.E.C. Interactions of O157 and non-O157 Shiga toxinproducing *Escherichia coli* (STEC) recovered from bovine hide and carcass with human cells and abiotic surfaces. **Foodborne Pathogens Diseases**, v. 3, p. 248-255, 2014.

- Mattos-Guaraldi, A. L.; Formiga, L. C. Relationship of biotype and source to the hemagglutination and adhesive properties of *Corynebacterium diphtheriae*. Brazilian Journal of Medical Biology Research, v. 24, p. 399-406, 1991
- 34. Maule, A. Survival of verocytotoxigenic *Escherichia coli* O157 in soil, water and on surfaces. Journal of Applied Microbiology, v. 88, p. 71S-78S, 2000.
- 35. Michelacci, V.; Tozzoli, R.; Arancia, S.; D'Angelo, A.; Boni, A.; Knijn, A.; Prosseda, G.; et al. Tracking back the evolutionary route of Enteroinvasive Escherichia coli (EIEC) and Shigella through the example of the example of the highly pathogenic O96:H19 EIEC clone. Frontiers in Cellular and Infection Microbiology, v. 10, n. 260, 2020.
- Moreno, A. C.; Fernandes-Filho, A.; Gomes, T. A. T. Etiology of childhood diarrhea in the northeast of Brazil: significant emergent diarrheal pathogens. Diagnostic of Microbiological Infectious Diseases, v. 66, p. 50-57, 2010.
- Nogueira, B. A.; Olivella, J. G. B., Gil, A. C.; Meirelles-Pereira, F.; Gonçalves, V. D.; Andrade, A. F. B.; Bello, A. R.; Pereira, J. A. A. Detection of bacterial samples on the aquatic ecosystems adjacent to Saquarema Lagoon – Rio de Janeiro. Revista de Ciências Médicas e Biológicas. 14:2: 147-152; 2015
- Oliveira, M. G.; Pessoa, G. V. A.; Nakahara, L. K. Enteropathogenic bactéria occurrence in diarrheic children living in Juiz de Fora municipality Minas Gerais Brazil. Revista do Instituto Adolfo Lutz, v. 49, p. 161-168, 1989.
- Pereira, A. C. M.; Britto-Filho, J. D.; Carvalho, J. J.; Luna, M. G.; Rosa, A. C. P. Enteroaggregative *Escherichia coli* (EAEC) strains enter and survive within cultured intestinal epithelial cells. Microbial Pathogenesis, v. 45, p. 310-314, 2008.
- 40. Rivas M.; Chinen I.; Guth B. E. C. Enterohemorrhagic (Shiga toxin-producing) *Escherichia coli*. In: Torres A.G., editor. *Escherichia coli in the Americas*. Springer International Publishing; p. 97–123, 2016.
- 41. Sahly, H.; Podschun, R.; Oelschlaeger, T. A.; et al. Capsule impedes adhesion to and invasion of epithelial cells by *Klebsiella pneumoniae*. **Infection and Immunity**, v. 68, n. 9, 2000.
- 42. Serapio-Palacios, A.; Finlay, B. B. Dynamics od expression, secretion and translocation of type III effectors during enteropathogenic Escherichia coli infection. Current Opinion in Microbiology, v. 54, 2020.
- 43. Toledo, M. R. F.; Trabulsi, L. R. Frequency of enteroinvasive *Escherichia coli* in cildren with diarrhea and healthy controls in São Paulo, SP, Brazil. **Revista de Microbiologia**, v. 21, 1990.
- 44. Tortora, G. J.; Funke, B. R.; Case, C. L. Microbiologia. 8 ed. Porto Alegre: Artmed, 2008.
- 45. Thong, K. L.; Hoe, S. L. L.; Puthucheary, S. D.; Yasin, R. M. D. Detection of virulence genes in Malaysian *Shigella* species by multiplex PCR assay. **BMC Infectious Diseases**, v. 5, n. 8, 2005.
- 46. Valentini S.R., Gomes T.A.T., Falcão D.P. Lack of virulence factors in *Escherichia coli* strains of enteropathogenic serougroups isolated from water. **Applied Environmental Microbiology**, v. 58, p. 412-414, 1992.
- Van Belkum, A.; Tassios, P. T.; Dijkshoorn, L.; Haeggman, S.; Cookson, B.; Fry, N. K.; Fussing, V.; Green, J.; Feil, E.; Gerner-Smidt, P.; Brisse, S.; Struelens, M. Guidelines for the validation and application of typing methods for use in bacterial epidemiology. Clinical Microbiology and Infectious Diseases, v. 13, suppl. 3, p. 1-46, 2007
- 48. Xiong, W.; Sun, Y.; Zhang, T.; Ding, X.; Li, Y.; Wang, M.; Zeng, Z. Antibiotics, antibiotic resistance genes and bacterial community composition in fresh water aquaculture environment in China. Environmental Microbiology. 2015.