Veterinary Services
Centers for Epidemiology and Animal Health

August 2014

Campylobacter on U.S. Sheep and Lamb Operations

Background

Campylobacter infections in sheep can be asymptomatic or cause enteritis, ileitis, infertility, and abortions. Campylobacter can be spread within the flock via feed contaminated with fecal matter and through environmental contamination from aborted fetuses, placentas, and uterine discharges. Sheep normally develop immunity after infection, although they can become persistently infected and continue to shed Campylobacter in the feces. The association between fecal shedding and abortion is unclear.

In newly infected pregnant ewes, *C. fetus* and *C. jejuni* will cause late-term abortions or stillborn or weak lambs. Since the 1980s, a shift has occurred in the relative prevalence of abortions caused by *Campylobacter* from predominantly *C. fetus* to *C. jejuni* (Sahin et al., 2008). One particular clone of *C. jejuni* predominates all others and has a high level of tetracycline resistance. This clone is called SA for sheep abortion and is identified through genomic sequencing.

Relatively few studies have examined the occurrence of Campylobacter in sheep; however, studies that have been done found Campylobacter to be somewhat common in sheep. One study in Ontario, Canada, found that 87.8 percent of 48 sheep flocks had at least one fecal sample test positive for Campylobacter, and 60.1 percent of pooled fecal samples were positive (Scott et al., 2012). Another study of slaughter sheep in Scotland found that 63.8 percent of fecal samples and 90.0 percent of carcass samples were Campylobacter positive (Garcia et al., 2010). Approximately one-third of sheep on pasture were positive for Campylobacter in a study from the United Kingdom (Jones et al., 1999). Another study in the United Kingdom in which raw meat at retail was tested over a period of two years found that 7.4 percent of lamb-meat samples were positive for Campylobacter (Little et al., 2008).

Campylobacteriosis, the disease caused by Campylobacter infections, is one of the most common causes of diarrheal illness in humans in the United States. Estimates indicate that campylobacteriosis affects more than 1.3 million people per year, with a case fatality ratio of 5.8 deaths per 100,000 infected people (CDC, 2010). In humans, Campylobacter infection can cause diarrhea, cramping, abdominal pain,

and fever. In rare cases, life-threatening bloodstream infections or Guillain-Barré syndrome can occur. Campylobacteriosis is commonly associated with eating undercooked poultry or other contaminated foodstuffs, including unpasteurized milk. Most human cases of campylobacteriosis are caused by the species *C. jejuni.* (CDC, 2010).

Human cases of campylobacteriosis typically resolve without treatment. Antibiotic therapy is used in cases of severe disease or for immunocompromised patients. Azithromycin or ciprofloxacin are commonly used for treatment when antibiotics are necessary (CDC, 2010).

Few treatment options are available for infected sheep. Tetracyclines are typically given to exposed ewes during an abortion storm to prevent them from aborting. Previous research, however, has found high levels of resistance to tetracycline in *C. jejuni* and *C. coli* isolates from sheep in Ontario, although no statistically significant relationship was found between antimicrobial use and antimicrobial resistance (Scott et al., 2012).

Campylobacter on U.S. sheep and lamb operations

For the Sheep 2011 study, the U.S. Department of Agriculture's National Animal Health Monitoring System (NAHMS) collected data on sheep health and management practices from a representative sample of operations in 22 of the Nation's major sheep-producing States.* Collectively, these operations represented 85.5 percent of the U.S. ewe inventory and 70.1 percent of U.S. farms with ewes. Although NAHMS has conducted two previous studies of the U.S. sheep industry, Sheep 2011 is the first NAHMS study that addresses the prevalence of *Campylobacter* in the U.S. sheep and lamb population.

For the Sheep 2011 study, 240 operations provided composite fecal samples for *Campylobacter* testing. Composite samples consisted of two pellets from each of up to six animals aged up to 2 years old. Up to five composite samples were collected on each operation. A total of 1,100 composite samples were collected from March 14 to June 30, 2011.

-

^{*} California, Colorado, Idaho, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Montana, New Mexico, New York, Ohio, Oregon, Pennsylvania, South Dakota, Texas, Utah, Virginia, Washington and Wyoming.

In addition to composite samples, 93 of the 240 operations provided fecal samples from individual animals aged up to 2 years old. Individual-animal samples consisted of up to four fecal pellets collected directly from the rectum of each animal tested. For the 93 operations that submitted individual-animal samples, up to 15 fecal samples from individual animals were submitted per operation. A total of 1,267 individualanimal samples were collected from March 14 to June 30, 2011.

A majority of operations (54.2 percent) tested positive for Campylobacter via composite or individual samples (table 1). Similar percentages of operations tested positive by composite samples and by individualanimal samples (50.0 and 47.3 percent, respectively); however, a higher percentage of composite samples than individual-animal samples tested positive for Campylobacter (26.8 and 13.4 percent, respectively).

Table 1. Percentage and number of operations positive for Campylobacter, and percentage and number of samples positive for Campylobacter, by sample type

	Percent/(Number)		
Sample type	Operations	Samples	
Composite	50.0 (120/240)	26.8 (295/1100)	
Individual	47.3 (44/93)	13.4 (170/1,267)	
Composite or individual	54.2 (130/240)	19.7 (465/2367)	

Of the 2,367 samples collected, 465 tested positive for Campylobacter. Pregnant ewes and other unspecified types of sheep was the age group with the lowest percentage of positive samples (table 2).

Table 2. Percentage and number of samples positive for Campylobacter, by sample type and by age group

	Pe	Percent/(Number)		
	Sample Type			
Age group	Composite	Individual	Any	
Ewes nursing lambs	35.0 (136/389)	18.5 (74/401)	26.6 (210/790)	
Unweaned lambs, market lambs, replacement ewes	37.4 (61/163)	16.9 (42/248)	25.1 (103/411)	
Pregnant ewes and others	17.9 (98/548)	8.7 (54/618)	13.0 (152/1,166)	
Total	26.8 (295/1100)	13.4 (170/1267)	19.7 (465/2,367)	

Of the 465 samples that tested positive for Campylobacter, 459 were typed by species (table 3). Six samples were not typed because of difficulty in regrowing isolates after initial testing. C. jejuni was the by far the most common species detected, making up 80.4 percent of the typed isolates.

Table 3. Percentage of Campylobacter species identified in positive samples, by sample type

	Percent		
	Sample Type		
Species	Composite (n=291)	Individual (n=168)	Any (n=459)
C. coli	19.5	15.5	17.9
C. jejuni	78.0	84.5	80.4
C. lari	2.8	0.0	1.9

Isolates were tested for resistance to common antimicrobial agents. Resistance to azithromycin, erythromycin and ciprofloxacin (as well as nalidixic acid because it is important in predicting ciprofloxacin resistance) are especially important because these drugs are used to treat humans infected with Campylobacter. Resistance to azithromycin and erythromycin was very low. Approximately 6 percent of isolates were resistant to ciprofloxacin and nalidixic acid (table 4). Tetracycline resistance was relatively common. Of the 113 operations on which C. jejuni was identified, 68.1 percent had at least one tetracycline-resistant C. jejuni isolate. In addition, 62.6 percent of isolates exhibited resistance to tetracycline.

Table 4. Percentage of resistant C. jejuni isolates and percentage of operations with at least one resistant C. jejuni isolate, by antimicrobial

	Percent Resistant		
Antimicrobial	Isolates (n=369)	Operations (n=113)	
Azithromycin	0.5	1.8	
Ciprofloxacin	6.0	10.6	
Clindamycin	0.0	0.0	
Erythromycin	0.5	1.8	
Florfenicol	0.0	0.0	
Gentamicin	0.0	0.0	
Nalidixic acid	6.2	11.5	
Telithromycin	0.0	0.0	
Tetracycline	62.6	68.1	

Conclusion

The prevalence of Campylobacter in the feces of individual sheep was relatively low, but slightly over half of the operations had at least one infected animal.

C. jejuni was the most commonly identified Campylobacter species found in the feces of the U.S. sheep population. Isolates in this study were not further examined to determine whether they were the C. jejuni SA clone previously shown to be almost always tetracycline resistant. However, the highest level of antibiotic resistance was observed for tetracycline.

Because of the potential for zoonotic infection, efforts should be taken on the farm to prevent human exposure to these pathogens through proper hygiene and production practices.

References

Centers for Disease Control and Prevention. 2010. Campylobacter.

http://www.cdc.gov/nczved/divisions/dfbmd/diseases/ca mpylobacter/ Accessed November 2, 2013.

Garcia AB, Steele WB, Taylor DJ. 2010. Prevalence and carcass contamination with Campylobacter in sheep sent for slaughter in Scotland. Journal of Food Safety 30:237-250.

Jones K, Howard S, Wallace JS. 1999. Intermittent shedding of thermophilic camplybacters by sheep at pasture. Journal of Applied Microbiology 86:531-536.

Little CL, Richardson JF, Owen RJ, de Pinna E, Threlfall EJ. 2008. Campylobacter and Salmonella in raw red meats in the United Kingdom: Prevalence, characterization and antimicrobial resistance pattern. 2003-2005. Food Microbiology 25:538-543.

Sahin O, Plummer PJ, Jordan DM, Sulaj K, Pereira S, Robbe-Austerman S, Wang L, Yaeger MJ, Hoffman LJ, Zhang Q. 2008. Emergence of a tetracycline-resistant Campylobacter jejuni clone associated with outbreaks of ovine abortion in the United States. Journal of Clinical Microbiology 46(5):1663-1671.

Scott L, Menzies P, Reid-Smith RJ, Avery BP, McEwen SA, Moon CS, Berke O. 2012. Antimicrobial resistance in Campylobacter spp. isolated from Ontario sheep flocks and associations between antimicrobial use and antimicrobial resistance. Zoonoses and Public Health 59:294-301.

Skirrow MB. 1994. Diseases due to Campylobacter, Helicobacter, and related bacteria. Journal of Comparative Pathology 111:113-149.

For more information, contact: USDA-APHIS-VS-CEAH-NAHMS NRRC Building B, M.S. 2E7 2150 Centre Avenue Fort Collins, CO 80526-8117 970.494.7000 http://nahms.aphis.usda.gov #689.0813

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Mention of companies or commercial products does not imply recommendation or endorsement by the U.S. Department of Agriculture over others not mentioned. USDA neither guarantees nor warrants the standard of any product mentioned. Product names are mentioned solely to report factually on available data and to provide specific information.