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Staphylococcus aureus carriage among food handlers in a pasta company: Pattern of virulence and resistance to linezolid

Daniela Bencardino, Luca Agostino Vitali



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1 **Title**

2 *Staphylococcus aureus* carriage among food handlers in a pasta company: pattern of virulence
3 and resistance to linezolid.

4 **Author names and affiliations**

5 Daniela Bencardino^{a,b}, Luca Agostino Vitali^b

6 ^aSchool of Biosciences and Veterinary Medicine, University of Camerino, Via Gentile III da
7 Varano, 62032 Camerino, Italy

8 ^bMicrobiology Unit, School of Pharmacy, University of Camerino, Via Gentile III da Varano,
9 62032 Camerino, Italy.

10 **E-mail addresses:** daniela.bencardino@unicam.it (D. Bencardino), luca.vitali@unicam.it (L.A.
11 Vitali)

12
13 **Corresponding author:**

14 Daniela Bencardino
15 School of Biosciences and Veterinary Medicine
16 University of Camerino
17 Via Gentile III da Varano
18 62032 Camerino (MC) – Italy
19 tel: 0039-0737-403286
20 Fax: 0039-0737-403290
21 E-mail: daniela.bencardino@unicam.it

Abstract

This study aimed at monitoring and characterize the *Staphylococcus aureus* carriage status of employees in a pasta company in order to evaluate the associated risk factors. Food handlers (n=21) were sampled between 2013 and 2015 through nasal and hand swabs to determine the colonization status. Seven out of 21 employees (33%) were contaminated with *S. aureus* and the prevalence decreased to 9.5% over the last year. Only two persistent carriers were identified. Twenty-eight strains were isolated from both hand and nasal samples. Each of them was resistant to at least one class of antibiotics and the multidrug resistance strains were isolated from the nose. The highest resistance rate was observed towards penicillin G (79%) and to linezolid (64%) confirming the rapid spread of linezolid resistant strains recently described in Italy. The dominant toxin gene was *sem* (93%), which is usually not among the most prevalent, whereas the primary *agr* group was the *agrIII* (43%) and the most frequent *spa* type was t030 (39%). These results combined with the genomic macrorestriction analysis revealed high genetic diversity. The increased virulence, antibiotic resistance and molecular variability of isolates highlighted the importance of monitoring activity in food company to assess the potential associated risk of foodborne diseases.

Keywords

Staphylococcus aureus; Food handlers; Carriage monitoring; Molecular typing; Food safety; Contamination

41

42 **1. Introduction**

43 *Staphylococcus aureus* (*S. aureus*) is an opportunistic human pathogen causing a variety of self-
44 limiting to life-threatening diseases. The preferred colonization sites are the anterior part of the
45 nares and hand surfaces and the 12 to 30% of healthy population is persistently colonized by
46 this pathogen (Zanger, Nurjadi, Vath, & Kremsner, 2011). Because *S. aureus* is a common
47 human commensal of the hand and mucosal membranes, the colonized and asymptomatic
48 carrier handlers can contaminate food through manual contact or respiratory secretions. In
49 fact, food contamination is largely associated with improper product manipulation and poor
50 hygiene conditions (Argudín, Mendoza, & Rodicio, 2010). Thus, The spread of staphylococcal
51 food poisoning (SFP) via food handlers is an important problem worldwide and it is caused by
52 the ingestion of food contaminated by enterotoxigenic strains (Johler, Giannini, Jermini,
53 Hummerjohann, Baumgartner, & Stephan, 2015). The 95% of SFP are caused by the classical
54 staphylococcal enterotoxins (SEs) named as SEA, SEB, SEC, SED and SEE whereas the rest is
55 caused by the newly identified (SEG-SEI-SEM-SEN and SEO). These virulence factors are highly
56 stable to heat, to low pH and to proteolytic enzymes reducing the efficacy of thermic and
57 acidification industrial procedures, usually applied to minimize the microbial hazard in the final
58 product (Kadariya, Smith, & Thapaliya, 2014). Hence, the successful persistence of the
59 pathogen in various food matrices increases the associated risk. The SFP symptoms, including
60 nausea, vomiting and diarrhoea, can appear rapidly (from 2 to 8 hours). Typically, the disease
61 resolves within 24–48 hours, but severe cases require hospitalization and the death occurs in
62 the most susceptible people (Argudín et al., 2010). Many investigations have reported cases of
63 *S. aureus* carriers among food handlers as potential source of food contamination (Hatakka,
64 Björkroth, Asplund, Mäki-Petäys & Korkeala, 2000; Leibler, Jordan, Brownstein, Lander, Price &
65 Perry, 2016; Castro, Santos, Meireles, Silva, & Teixeira, 2015). Furthermore, the food handlers
66 have been recognized as an important reservoir of antimicrobial resistant strains and the
67 contaminated foods can act as vehicles of transmission, especially those that are not heat-
68 treated (Argudín, Mendoza, González-Hevia, Bances, Guerra, & Rodicio, 2012). The
69 extraordinary capability and the mechanisms of *S. aureus* to develop antibiotic resistance are
70 known (Foster, 2017). The emergence of virulent and multidrug resistant strains highlights the
71 necessity to monitor the healthy status of food handlers to prevent the risk of SFP. The present
72 study aimed at determining the occurrence of *S. aureus* healthy carriers among the handlers
73 working in a pasta company. In order to evaluate the risk associated to the contamination of
74 food products, the genotypic and phenotypic characterization of isolates was carried out.
75 Besides the analysis of resistance and virulence profiles also the clonality of strains was
76 investigated.

77 **2. Materials and methods**

78 **2.1 Bacterial isolates**

79 This investigation was carried out in a pasta company of Marche Region, Italy. The overall
80 purpose was to identify the source of contamination found during the process resulting in a

81 final product positive to *S. aureus*. The monitoring of food carrier-handler status was a part of
82 an implemented microbiological surveillance programme. The hand and the nasal swabs from
83 21 food handlers were collected between February 2013 and September 2015. Sampling was
84 done every 4 months during the first year and every 6 months during the last two years. It was
85 performed during the working hours and in the same day for all members of the staff. Each
86 handler was indicated with a number from 1 to 21. Their job functions were related to the
87 manual packaging of the final product and all worked in the same area. All the food handlers
88 gave their informed consent for sampling as per the agreement to the company safety
89 procedures. All workers approved the protocol. Nasal and hand samples were collected using
90 sterile cotton swab as described by Hu, Umeda, Kondo, & Amako (1995) and by Tan, Lee, Abu
91 Bakar, Abdul Karim, Rukayadi, & Mahyudin (2013), respectively. The collected swabs were
92 streaked onto Baird-Parker plates and aerobically incubated at 37°C for 24 hours. The GenElute
93 Bacterial Genomic DNA Kit (Sigma-Aldrich) was used for the extraction of the genomic DNA and
94 the presumptive assignments to the species *S. aureus* were confirmed by PCR detection of the
95 thermonuclease gene *nuc* (Brakstad, Aasbakk, & Maeland, 1992). The primers and the
96 annealing temperature are reported in the supplementary material (table S1). The carrier-
97 handlers were subjected to a treatment with the antibiotic mupirocin as described by the
98 HACCP plan of the company.

99

100 **2.2 Antibiotic susceptibility**

101 The antibiotic susceptibility of all isolates was determined in accordance with the guidelines of
102 the European committee on antimicrobial susceptibility testing (<http://www.eucast.org>; last
103 date accessed: 27 June, 2018). The antibiotics tested by means of the disc diffusion method
104 were (absolute amount of the respective molecule is indicated in parenthesis): penicillin (1 µg),
105 oxacillin (1 µg), vancomycin (5 µg), ceftiofur (30 µg), tetracycline (30 µg), thrimethoprim-
106 sulfamethoxazole (25 µg), fusidic acid (10 µg), clindamycin (2 µg), erythromycin (15 µg),
107 levofloxacin (5 µg), linezolid (10 µg). The E-test was applied to assess susceptibility to
108 daptomycin as per the same EUCAST guidelines (E-test strips were from Oxoid).

109 **2.3 PCR screening of resistance genes**

110 All resistant strains were investigated by PCR amplification to detect the associated resistance
111 genes. The list of genes, primer pairs used and annealing temperatures applied are provided in
112 table S1. Erythromycin-resistant isolates were screened for the presence of *ermA*, *ermB*, *ermC*
113 and *msrA* genes. The *blaZ* gene was explored in penicillin resistant isolates, (Gómez-Sanz,
114 Torres, Lozano, Fernández-Pérez, Aspiroz, Ruiz-Larrea, & Zarazaga, 2010). The *linA* gene was
115 detected for the strains resistant to clindamycin but negative for the *ermA/B/C* genes that
116 confer the resistance to macrolide, lincosamide, and streptogramin (MLS) antibiotics of type B
117 (Lina, Quaglia, Reverdy, Leclercq, Vandenesch, & Etienne, 1999). The presence of acquired
118 fusidic acid resistance determinants (*fusA*, *fusB*, *fusC*, *fusD*) was assessed by PCR and then
119 sequencing of the obtained amplicons, as described by Chen et al., (2010). In the case of

120 linezolid resistant strains negative for the *cfr* gene, the presence of mutations in 23S rDNA
121 genes and those in *rpIC* and *rpID* genes were analysed as described by Bongiorno et al., (2010).

122 **2.4 Detection of toxin genes**

123 The selected toxin genes (*sea*, *sec*, *sei*, *sem*, *seo*, *tst*) were amplified by PCR using the primer
124 sequences reported in Table S1. The reaction mix (25 µl/tube) contained 1 µg of chromosomal
125 DNA, 10 mM Tris-HCl (pH 8.3), 50 mM KCl, 1.5 mM MgCl₂, 200 µM deoxynucleotide
126 triphosphates (dNTPs), 1 µM oligonucleotide primer, and 0.5 U Taq polymerase (AmpliTaq
127 Gold; Applied Biosystems). The thermal cycling conditions were 30 cycles at 94°C for 30 sec, 40
128 sec at primer specific annealing temperature (table S1), 72°C for 30 sec and one cycle at 72°C
129 for 7 min. The PCR products were separated by electrophoresis on a 1.5% (w/v)
130 agarose/ethidium bromide gel (Sigma-Aldrich) finally recorded using UV transillumination. A 1
131 kb DNA ladder was included in all fingerprinting gels as a molecular weight standard. The PCR
132 products were of the expected lengths.

133 **2.5 Molecular typing**

134 The strain relatedness was analysed by pulsed-field gel electrophoresis (PFGE) of the SmaI
135 macro-restricted genomic DNA according to the procedure described by Chung, De Lencastre,
136 Matthews, & Tomasz (2000). Additionally, all isolates were typed to determine the *agr* group
137 and the variants of the gene expressing the protein A. The *agr* group was determined by PCR
138 amplification according to Jarraud et al., (2002). The staphylococcal protein A typing (*spa*
139 typing) was carried out using primers *spa*-1113f and *spa*-1514r as described by Shopsis et al.
140 (1999). Specific primers and annealing temperatures are reported in table S1. The PCR products
141 were purified using the PCR Clean up kit (Sigma-Aldrich, St. Louis, MO) and sequenced. The
142 sequences were analysed using Ridom SpaServer website (<http://www.spaserver.ridom.de>; last
143 date accessed: 27 June, 2018) to determine the *spa* type.

144 **3. Results**

145 **3.1 Carriage status**

146 Of the 21 employees analysed, 7 (33%) were contaminated with *S. aureus*. Most of them were
147 nasal carriers (78%). Different strains were isolated from the same worker. The prevalence of
148 carriers was 33%, 19%, and 9.5% in 2013, 2014, and 2015, respectively. Only two handlers were
149 persistent carriers (table 1). The persistent carriers, indicated as number 2 and 5, were
150 colonized by three or more strains during the first and the second year. Similar strains were
151 found in both nose and hand of handlers, but no hand colonization was recorded during the last
152 year. Three handlers out of seven were positive for *S. aureus* both in the nares and the hand
153 showing, in some cases, the same strain (table 2). None of them underwent an antibiotic
154 treatment in the trimester preceding our sampling. The percentage of carriers decreased over
155 the three years of the surveillance as a consequence of the antibiotic decolonization strategy.

156 **3.2 Antibiotic resistance**

157 A total of 28 *S. aureus* were collected from hand and anterior nares but no MRSA were present.
158 Each isolate was resistant to at least one antimicrobial agent. Only five strains (18%) from the
159 anterior nares were multidrug resistant (resistance to more than two antibiotics). The highest
160 prevalence in resistance was that towards penicillin G (22 strains, 79%) always associated with
161 the presence of *blaZ*. The fractions of strains resistant to linezolid and erythromycin were 68%
162 and 32%, respectively. Only one strain was resistant to clindamycin and another one to fusidic
163 acid. The strains resistant to erythromycin carried the *msrA* gene, while resistance to
164 clindamycin was associated with the presence of *linA*. The single fusidic acid non-susceptible
165 strains was positive to *fusB*. *cfp* was absent in linezolid resistant strains, which were further
166 investigated for mutations in the genes coding for 23S rRNA and L3, L4 ribosomal proteins.
167 Sequence analysis showed that no mutation associated to linezolid resistance were evident in
168 L3 and L4, whereas there was a point mutation (G-to-T at position 2,576) in the 23S rDNA gene.

169 3.3 Distribution of toxin genes

170 The most prevalent toxin gene was *sem*, found in 26 (93%) strains. The two strains negative for
171 *sem* were the only ones collected during 2015 and isolated from the nose of persistent carriers.
172 Fifteen isolates (54%) were positive for *sec*, 14 (50%) for *tst*, 8 (29%) for *seo* and only one
173 isolate carried the *sei* gene. One of the nasal strains isolated during 2013 was positive for 5
174 toxin genes. Overall, 11 different genotypes were discriminated according to the pattern of
175 toxin genes (table 2). The most prevalent genotype (8 isolates-29%) was the *sem*⁺ without
176 marked incidence in nasal or hand samples. The *sea*⁺*tst*⁺*sem*⁺*sec*⁺ was characteristic of 7 isolates
177 (25%) that were collected from the anterior nares of three handlers between 2013 and 2014
178 and were resistant to penicillin and linezolid.

179 3.4 *agr* and *spa* typing

180 Polymorphisms in the *agr* locus allow the classification of *S. aureus* strains into four different
181 groups (Simpson's Index of Diversity: 0.675; C.I.95%: 0.619-0.730). The dominant *agr* group
182 detected was the *agrIII* (43%), followed by the *agrII* (32%) and *agrI* (25%). No *agrIV* was
183 recorded and the *agrIII* was frequently observed among the toxin genotypes with three or more
184 genes. Sequence analysis of region X of the *spa* gene sorted 7 distinct *spa* types (t002, t012,
185 t026, t030, t10307, t209, t1192). Its discriminatory power was very strong (Simpson's Index of
186 Diversity: 0.751; C.I.95%: 0.647-0.856). The most frequent *spa* type was t030 (39%) and it was
187 detected among all of the four PFGE types (table 2). The remaining *spa* types, with the
188 exception of t026, were all associated with a single PFGE type. The *spa* types t030, t012 and
189 t10307 shared similar repeats (table 3). Considering the limited number of collected strains
190 (some clusters count less than five strains) and the high genetic variability detected, we are not
191 able to describe statistical correlation between *spa* types and other molecular features.
192 However, some considerations can originate from the general analysis of virulence and
193 antibiotic patterns of the two prevalent *spa* types. Most nasal strains of t030 resulted related to
194 *sea*⁺*tst*⁺*sem*⁺*sec*⁺ pattern and resistant to penicillin and linezolid. This pattern was observed in
195 strains isolated from two different handlers in the same year (2013). A large number of strains

196 typed as t026 were characterized by the presence of *sem*⁺, *sec*⁺, *tst*⁺ toxin gene and resistant to
197 linezolid. No particular differences in terms of *spa*, virulence and antibiotic patterns were
198 detected during the three years.

199 3.5 PFGE typing

200 PFGE distinguished 4 different patterns among 28 strains. The patterns were arbitrarily
201 indicated as A, B, C and D and differed one from each other for three or more bands. This high
202 variability showed that the strains were not closely related (Simpson's Index of Diversity: 0.712;
203 C.I.95%: 0.605-0.819). The pattern A included 13 strains: 8 (62%) were from the nose and 5
204 (38%) from the hand. The degree of antibiotic and virulence profile diversification within this
205 PFGE cluster was very high with 9 different toxin genotypes. The most prevalent *spa* type was
206 t026 whereas the *agr* group 3 was dominant. This pattern was characteristic of 2 among the
207 multidrug-resistant strains and 8 among those resistant to linezolid. The strains resistant to
208 three antibiotics were isolated from the nares and one of them (2D) also carried four toxin
209 genes. The pattern B grouped 5 nasal strains with the same genotypic profile in terms of toxin
210 genes (*sea-tst-sem-sec*), antibiotic resistance determinants (PEN-LZD) and *spa* type (t030). Four
211 strains showed the macrorestriction pattern C. Among them, one was isolated from the hand
212 and was erythromycin resistant. Two strains with the same genotypic profile were isolated from
213 the same handler but in different years. One strain was classified as multidrug-resistant with a
214 different toxin profile. All 6 strains associated to the PFGE type D were isolated from the nose
215 and 5 different toxin and antibiotic resistance genotypes were found. Strains included in this
216 pattern showed a high number of toxin genes and low antibiotic resistance. All of these data
217 are showed in table 2.

218 4. Discussion

219 The prevalence of carriers (33%) corresponded to previously reported studies (Alhashimi
220 Ahmed, & Mustafa, 2017; Jordà, Marucci, Guida, Pires, & Manfredi, 2012; Hatakka et al., 2000).
221 Two handlers were again found positive to *S. aureus* after treatment with mupirocin and were
222 therefore classified as persistent carriers. A single strain reporting the same antibiotic and toxin
223 profile was isolated from the nose of each persistent carrier during the 2015. The occurrence of
224 the same strain, colonising both nasal and hands among different handlers, suggested a
225 possible *S. aureus* transmission and was an indication of a potential risk for product
226 contamination during manufacturing and packaging.

227 The identification of four different macrorestriction patterns among seven handlers indicated
228 the large variety of circulating *S. aureus*. The enterotoxigenic strains were widely distributed
229 among the PFGE types and the high prevalence of strains carrying enterotoxin genes was in
230 accordance with other studies (Bergdoll, Crass, Reiser, Robbins, & Davis, 1981; Hatakka et al.,
231 2000). In this study, the toxin gene *sem* was the most frequent, which is usually not the case.
232 van Belkum et al. (2006) have previously reported a similar occurrence. Generally, the majority
233 of staphylococcal food contaminations are associated to SEA toxin (Wieneke, Roberts, &
234 Gilbert, 1993; Cha et al., 2006) largely described in invasive infections. Conversely, SEM toxin,

235 belonging to the locus *egc* (enterotoxin gene cluster) highly present in *S. aureus* isolates, is not
236 associated with severe infections (van Belkum et al., 2006). However, the even presence of the
237 *sem* and *egc* toxin genes in samples from nasal carriers may be explained by the lower
238 immunogenicity of the respective gene products that would therefore be more tolerated. The
239 high variability in the distribution of *sem*, alone or with other toxin genes, allowed the
240 identification of a potential relation between one virulence profile (*sea⁺tst⁺sem⁺sec⁺*) with one
241 antibiotic resistance pattern (PEN-LZD). However, this possible association needs to be
242 supported with more cases. Currently, little information is available for food poisoning by
243 strains with unfrequent gene toxins and harbouring the *egc* cluster (Ikeda, Tamate, Yamaguchi,
244 & Makino, 2005; van Belkum et al., 2006). The correlation between high number of toxin genes
245 and multidrug resistance is frequently reported (Karimi et al., 2017; Moshtagheian et al., 2018).
246 However, the different origins of strains undermine a valid reconstruction of the evolutionary
247 process hence affecting our understanding of this association (Luo et al., 2018). Moreover, the
248 frequency of each and every SE gene among *S. aureus* strains from different countries is
249 extremely variable and the majority of them are located on mobile genetic elements (Grumann,
250 Nübel, & Bröker, 2014). In light of this, no association between virulence traits and antibiotic
251 resistance is conclusive.

252 A notable level of antimicrobial resistance rate was found in this work and many strains
253 exhibited multiple drug resistance. No methicillin-resistant *S. aureus* (MRSA) strains were
254 detected reducing the potential risk associated to the consumption of the products. On the
255 other hand, the findings from the present work are in agreement with the high penicillin and
256 erythromycin resistance rates recorded in staphylococci worldwide (Lowy, 2003; Schlegelova et
257 al., 2008). These antibiotics are largely used in human medicine and the growing resistance rate
258 poses big concerns to the therapy of *S. aureus* infections. In our study, erythromycin resistance
259 was associated to *ermC* and *msrA*, which is consistent with the findings of Spiliopoulou,
260 Petinaki, Papandreou, & Dimitracopoulos (2004) who reported these genes as predominant
261 among erythromycin-resistant MSSA. High rate of linezolid resistance found among carrier
262 handlers is noteworthy. Linezolid-resistant *S. aureus* was reported by many and different
263 surveillance programmes. In Italy, linezolid resistance is higher within the coagulase-negative
264 group of staphylococci (Gu, Kelesidis, Tsiodras, & Hindler, 2012), even if its rapid spread among
265 *S. aureus* has been recently described (Bongiorno et al., 2010). The linezolid resistant isolates
266 from this work exhibited low level resistance by the disk diffusion test. As a confirmation,
267 molecular analysis showed that the mechanism of resistance was associated to the commonest
268 point mutation mapping in the 23S rDNA sequence. Conversely, high-level resistance to
269 linezolid is commonly due to the expression of the *cfz* gene (Long and Vester, 2012).

270 Among our isolates we have identified *agrI*, *agrII* and *agrIII* types. Generally, the lack of *agrIV*
271 was associated to the MRSA strains (Azimian, Najar-pirayeh, Mirab-Samiee, & Naderi, 2012;
272 Manago et al., 2006), but this study demonstrated that it might be well associated to MSSA.
273 The most prevalent group was *agrIII*, followed by the *agrI*, and this is in agreement with the
274 results of other studies (Ben Ayed, Boutiba-Ben, Boubaker, Samir, & Ben Redjeb, 2006). In facts,
275 the occurrence of *agrIII* and *agrI* among MRSA strains has been also well documented (Azimian
276 et al., 2012) suggesting that there is no definite correlation between the status of methicillin

277 susceptibility and *agr* typing. The *agr* locus was recognised as the regulator of *S. aureus*
278 virulence factors and its association with specific infection has been reported by several
279 studies. Infective endocarditis has been frequently associated to *agrII* and the Toxic Shock
280 Syndrome 1 (TSST-1) to the *agrIII* (Jarraud et al., 2002). Invasive infections, such as
281 bacteraemia, were associated to the *agrI* (Ben Ayed et al., 2006), while strains responsible for
282 the Staphylococcal Scalded Hand Syndrome (SSSS) were often positive to *agrIV* (Jarraud et al.,
283 2000). In this study, a correlation between *agr* groups and toxin genes' profiles was not
284 identified.

285 In order to assess the clonal relationship between strains at a greater resolution, all isolates
286 were typed by means of the *spa*-typing scheme. It is known that *spa* types distribution is
287 geographically and temporally distinct and, given that distinct *spa* types share similar repeats,
288 strains are considered as genetically related (Taeksoo, Jongyoun, Ki Ho, Jeong-Su, & Eui-Chong,
289 2011). Interestingly, 7 different known *spa* types were found, confirming the high
290 discriminatory power of this method. The most common was t030 that is frequently detected
291 among MRSA strains of human origin (Grundmann et al., 2010). Importantly, the fact that
292 strains sharing other genotypic features were identified in different *spa* types suggests that
293 evolution of the *spa* short sequence repeats was not following the evolution of the complete
294 genome (Ruppitsch et al., 2006). This study confirmed the high discriminatory power of *spa*
295 typing, compared to that of PFGE, to portray strains genetic fingerprints, which is associated
296 with the high level of polymorphism within the protein A gene X region. Moreover this method
297 is fast and data output easily comparable on a worldwide basis.

298

299 **5. Conclusions**

300 In conclusion, the high prevalence of carriers among the food handlers could be a potential
301 source of product contamination. The occurrence of strains with the potential of producing
302 virulence factors and showing multidrug resistance may greatly contribute to the increase in
303 the incidence of serious foodborne diseases. The isolation of the same strain from different
304 handlers highlights the importance of the hygiene education as an efficient preventive
305 measures. Finally, the results showed that the application of carriage status monitoring
306 programme among food handlers could be a very important tool to preserve the safety of the
307 product.

308

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316

ACCEPTED MANUSCRIPT

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Table 1. Carriage state of the positive food handlers during the three years period.

Food handler No.	Carriage status per year						
	2013			2014		2015	
	I ^a	II ^b	III ^c	I ^a	II ^b	I ^a	II ^b
1	+	+	+	+	-	-	-
2	+	+	+	+	+	+	-
3	+	-	-	-	-	-	-
4	+	+	-	-	-	-	-
5	+	+	+	+	+	+	-
6	-	-	+	+	-	-	-
7	+	+	-	-	-	-	-

^aI^bII^cIII: first, second and third collection of the year

Table 2. Typing profiles of *S. aureus* strains isolated from anterior nares and hand of food handlers

Strains ^a	Isolation	Year	Toxin gene profile	atb resistance profile ^b	<i>agr</i> group	<i>spa</i> type	PFGE type
1A	nose	2013	<i>tst-sem</i>	PEN-ERY	3	t10307	
1AA	hand	2013	<i>sea-sem-sec</i>	FC-LZD	3	t026	
2A	hand	2013	<i>sem</i>	LZD	1	t026	
1B	nose	2013	<i>tst-sem-sec</i>	PEN-LZD-ERY	3	t10307	
2AA	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	3	t026	
3A	nose	2013	<i>sem</i>	LZD	1	t026	
4A	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	1	t030	A
3AA	hand	2013	<i>sem</i>	PEN-ERY	1	t026	
1BB	hand	2013	<i>sem-seo</i>	LZD-ERY	1	t030	
1D	nose	2013	<i>sem</i>	PEN-ERY	3	t012	
1E	hand	2014	<i>sem</i>	PEN-ERY	3	t1192	
2D	nose	2014	<i>tst-sem-sec-seo</i>	PEN-LZD-DA	3	t026	
5F	nose	2015	<i>sea-tst-sec-seo</i>	PEN	3	t026	
5A	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	3	t030	
4B	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	3	t030	
5B	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	3	t030	B
5C	nose	2013	<i>sea-tst-sem-sec</i>	PEN-LZD	2	t030	
5D	nose	2014	<i>sea-tst-sem-sec</i>	PEN-LZD	1	t030	
1DD	hand	2013	<i>sem</i>	ERY	1	t030	
6A	nose	2013	<i>sem-seo</i>	PEN-LZD	2	t209	
6B	nose	2014	<i>sem-seo</i>	PEN-LZD	2	t209	C
2E	nose	2014	<i>sea-sem</i>	PEN-LZD-ERY	2	t030	
2B	nose	2013	<i>sea-tst-sem-sec-sei</i>	PEN-LZD	2	t026	
7A	nose	2013	<i>sem</i>	PEN-LZD	2	t002	
7B	nose	2013	<i>sem</i>	PEN-LZD	2	t002	
2C	nose	2013	<i>tst-sem-sec-seo</i>	PEN	2	t026	D
5E	nose	2014	<i>sem-sec-seo</i>	PEN-ERY	3	t030	
2F	nose	2015	<i>sea-tst-sec-seo</i>	PEN	2	t030	

^aStrains names consist of the number of handlers followed by letters differentiating the isolation source (example: 1A was the nasal strain isolated from the handler 1 and the strain 1AA was isolated from the hand of handler 1);

^bPEN=penicillin; LZD=linezolid; ERY=erythromycin; FC=fusidic acid; DA=clindamycin;

Table 3. Repeat successions and frequencies detected in this study

<i>spa</i> type	Repeat Succession	No of isolates (n=28)
t030	r15-r12-r16-r02-r24-r24	11
t012	r15-r12-r16-r02-r16-r02-r25- r17- r24-r24	1
t10307	r15-r12-r16-r02-r16-r435-r25-r17-r24-r24	2
t002	r26-r23-r17-r34-r17-r20-r17-r12-r17-r16	2
t209	r07-r16-r12-r23-r34	2
t026	r08-r16-r34	9
t1192	r15	1

Highlights

Staphylococcus aureus is a commensal human pathogen colonizing the nose and the skin.

Asymptomatic carriers among handlers can be a potential source of food contamination.

Monitoring the carriage status of food handlers can increase the food safety.

Evaluation of the risk for the consumer through the strains molecular typing.

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