

**Salmonella spp. in the global food trade****S8-1**

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**Abstrak**

Pencatatan epidemiologi nasional terus menunjukkan pentingnya *Salmonella spp* sebagai penyebab utama penyakit bakteri yang ditularkan melalui makanan pada manusia. Terdapat kecenderungan secara global peningkatan salmonellosis yang ditularkan melalui makanan. Selain daging mentah dan produk-produk susu yang merupakan jalur utama infeksi salmonellosis pada manusia, komoditi lain seperti buah, sayur dan produk akuakultur mengalami peningkatan sebagai sumber penularan *Salmonella*. Situasi yang mencemaskan ini semakin bertambah dengan penyalahgunaan antibiotika yang penting di bidang kedokteran untuk binatang dan peternakan akuakultur untuk meningkatkan hasil, profilaksis atau untuk terapi. Kebiasaan ini menyebabkan timbulnya *Salmonella* yang ditularkan melalui makanan, yang resisten terhadap berbagai antibiotika termasuk fluorokuinolon jenis baru.

**Abstract**

National epidemiological registries continue to underline the importance of *Salmonella spp* as the leading cause of foodborne bacterial disease in humans. Global trends of foodborne salmonellosis are generally on the increase. Although raw meats and milk products figure prominently as vehicles of human *Salmonella* infections, other commodities including fruits, vegetables, and aquacultural products have gained notoriety in recent years as potential reservoirs of human *Salmonella* infections. This disquieting situation is further compounded by the widespread use and abuse of medically important antibiotics in animal and aquacultural husbandry for the purpose of growth promotion, prophylaxis and therapy. Such practices have led to the emergence of foodborne *Salmonella spp* that are resistant to multiple antibiotics including the new fluoroquinolones.

The ubiquity of *Salmonella spp.* in the natural environment and in the global food chain continue to underline the importance of this infectious agent as the leading cause of foodborne bacterial infections in humans<sup>1,2,3</sup>. National registries on the reported prevalence of human salmonellosis from all causes vary widely (Table 1). This situation likely arises from the endemicity of salmonellae in individual countries and from the quality of epidemiological data and the timely identification and reporting of human infections. An explanation for the significantly higher rate of salmonellosis in the Czech Republic compared to that in other European countries remains elusive.

Two clinical forms of human salmonellosis can be distinguished. Enteric fever follows from an infection with typhoid and paratyphoid salmonellae and is a potentially fatal systemic infection that requires aggressive antimicrobial therapy. Clinical symptoms include prolonged and spiking fever, abdominal pain and diarrhea which usually appear 8-28 days following contact with the infectious agent. In contrast, the

clinical symptoms of enterocolitis associated with nontyphoid *Salmonella spp.* appears within a shorter (8-72h) period of incubation and typically consists of severe abdominal pains, watery diarrhea and low frequency of fever of short duration<sup>1,2</sup>. The clinical management of enterocolitis is based on fluid and electrolyte replacement. Treatment with antibiotics is contraindicated because it tends to prolong the convalescent carrier stage that follows the acute phase of the disease. Although the mainstay of therapy for enteric fever and systemic presentations of nontyphoid

**Table 1.** Reported incidence of human salmonellosis

Country	Year	Rate*	Reference
Canada	1993	29.7	4
Czech Republic	1992	422.0	5
England/Wales	1994	60.8	6
Germany	1993	175.5	5
Hong Kong	1993	40.0	7
Israel	1992	100.9	5
Italy	1992	41.3	5
Scotland	1993	58.0	8
Sweden	1991	69.0	9
United States	1995	17.7	10

\*Rate per 100,000 population.

**Table 2.** Temporal Changes in the Antibiotic Resistance of *Salmonella* spp.

Country	Year	Serovar	No. Strains Tested	Antibiotic resistance (%)				Reference
				A <sup>a</sup>	C <sup>a</sup>	Tp <sup>b</sup> /SXT <sup>c</sup>	Multiple <sup>d</sup>	
<b>HUMAN</b>								
Hong Kong	1985	multiple	89	6.7	13.5	1.1 <sup>c</sup>	NL <sup>e</sup>	11
	1988		299	27.1	34.4	8.4 <sup>c</sup>	NL	
Spain	1980-82	S. typhimurium	66	15.2	7.2	<1.0 <sup>c</sup>	10.6	12
	1992-94		30	73.3	46.7 <sup>c</sup>	6.0 <sup>c</sup>	60.0	
United Kingdom	1986-89	S. typhi	790	1.0	1.5	0.0 <sup>b</sup>	NL	13
	1993		194	25.0	25.0	25.0 <sup>b</sup>	NL	
United States	1979-80	multiple	378	9.5	1.1	0.0 <sup>c</sup>	17.0	14
	1989-90		484	14.5	2.9	0.4 <sup>c</sup>	31.0	
<b>NON HUMAN</b>								
England/Wales	1981	S. typhimurium	1,157 <sup>f</sup>	13.0	15.0	8.0 <sup>b</sup>	15.0	15
	1990		1,178 <sup>f</sup>	66.0	45.0	53.0 <sup>b</sup>	66.0	
	1981	S. typhimurium	49 <sup>g</sup>	22.0	22.0	35.0 <sup>b</sup>	22.0	
	1990		144 <sup>g</sup>	19.0	3.0	35.0 <sup>b</sup>	35.0	
	1981	S. typhimurium	117 <sup>h</sup>	<1.0	<1.0	0.0 <sup>b</sup>	1.0	
	1990		1,187 <sup>h</sup>	6.0	2.0	7.0 <sup>b</sup>	8.0	

<sup>a</sup>Ampicillin (A); chloramphenicol (C).<sup>b</sup>Trimethoprim.<sup>c</sup>Trimethoprim sulfamethoxazole.<sup>d</sup>Resistant to 2 antibiotics that may not be listed above.<sup>e</sup>Not listed.<sup>f</sup>Bovine.<sup>g</sup>Porcine.<sup>h</sup>Poultry.

salmonellosis in humans has relied on chloramphenicol, ampicillin and trimethoprim-sulfamethoxazole, the emergence and persistence in many countries of *Salmonella* strains that are resistant to one or more of these antibacterial agents (Table 2) has dramatically undermined their clinical efficacy in favor of newer cephalosporins and fluoroquinolones<sup>1-16</sup>.

**Table 3.** *Salmonella* in meat animals

Meat animal	No. samples tested	Percent positive	Reference
<b>On farm (herds, flocks)</b>			
<i>Beef/cattle</i>			
Indonesia (1986)	77	3.9	17
Malta (1993)	300	41.3	18
<i>Pork</i>			
Denmark (1995)	15,797	5.5	19
Indonesia (1989)	236	11.0	17
United States (ca 1995)	140	35.7	20
<i>Chicken (broilers)</i>			
Denmark (1995)	4,168	24.0	19
Japan (ca 1990)	286	24.1	21
Switzerland (1991)	92	16.6	22
<i>Buffaloes</i>			
Indonesia (1986)	14	35.7	17

**Post Slaughter***Beef*

Germany (1991)	18,242	5.1	23
Portugal (1987-88)	408	20.3	24
United States (1993)	2,112	2.7	20

*Pork*

Australia (ca 1995)	1,428	13.1	20
Canada (1985-86)	448	10.0	25
Japan (1992)	69	5.8	26
Romania (1989-90)	260	13.1	27

*Chicken*

Cuba (ca 1990)	200	62.5	28
Denmark (1995)	4,099	45.7	19
Japan (1992)	238	33.6	26
Portugal (1986-87)	300	55.0	24
Thailand (1991-92)	353	51.0	29
United States (1990-91)	200	34.9	30

The global problem of human foodborne salmonellosis stems mainly from the widespread occurrence of *Salmonella* spp. in the farm environment and in agricultural products. Although national data on the farm prevalence of salmonellae in meat animals appear to vary widely (Table 3), such differences may arise from variable sampling intensities applied to herds and flocks, from the nature of the test sample used to assess the bacteriological status of meat ani-

mals, and from the use of widely different analytical methods for the detection of the target microorganism. Fecal contamination of external surfaces such as animal hides, feathers and limbs at the farm level together with the stress-induced shedding of salmonellae during the pre-slaughter transportation and holding of animals contribute to the potential cross-contamination of meat carcasses in slaughtering operations. The marked increases in the prevalence of salmonellae in poultry from the farm to the processing facility (Table 3) delineates the importance of this transmission mechanism.

**Table 4.** Prevalence of *Salmonella* in Aquacultural Species

Product	Country	No. of Samples		Reference
		Tested	Positive (%)	
Tilapia	South Africa	22	12 (54.5)	31
Catfish	United States	412	13 ( 3.2)	32
Catfish	United States	52	11 (21.2)	33
Eel <sup>a</sup>	Japan	23	6 (26.1)	34
Prawns	Philippines	NS <sup>b</sup>	NS (16.0)	35
Shrimp	India	NS	NS (37.5)	36

<sup>a</sup> Includes samples of pond water and sludge.

<sup>b</sup> Not stated.

The rapid depletion of feral stocks and the growing international demand for fish and shellfish products have greatly favored the rapid development of the aquacultural industry. The prominence of this industry in Asiatic countries, notably the Republic of China which produces approximately half of the world's aquacultural output, is of concern because of the prevailing hygienic conditions and the propensity for product contamination in this and in other third world countries<sup>3</sup>. Although reports on the *Salmonella* status of aquacultural fish and shellfish are generally lacking, isolated studies indicate that the importance

**Table 5.** Growth and survival of *Salmonella* spp.<sup>a</sup>

Growth limits	Temperature	2.0 - 54.0 C	
	pH	3.99 - 9.50	
	a <sub>w</sub>	> 0.93	
Survival	Food	Storage	
		Temperature	Period
	Snails	-10 C	9 yr
	Chocolate	ambient	13 yr
	Pasta	ambient	10 yr
	Tea	ambient	4 yr

<sup>a</sup>Adapted from reference 2.

of these products as potential vehicles of human salmonellosis cannot be minimized (Table 4).

Salmonellae are highly resilient microorganisms that effectively cope with hostile microenvironments. Such adaptability arises partly from a capacity to grow at temperatures ranging from 2.0 to 54.0°C, at pH values of 3.99 to 9.5, and at water activities (a<sub>w</sub>) above 0.93 (Table 5). Other physiological attributes of *Salmonella* spp. such as the log and stationary phase-dependent acid tolerance responses<sup>2</sup>, increasing heat resistance with decreasing water activity of the external medium<sup>1</sup>, and ability to survive prolonged periods of storage at freezer and ambient temperatures (Table 5) contribute to the continued prominence of salmonellae as the leading cause of foodborne bacterial diseases in humans. It is noteworthy that the incidence of foodborne salmonellosis is generally on the increase worldwide<sup>2</sup>. The reported annual number of *Salmonella* incidents clearly dwarfs that reported for other bacterial etiological agents (Table 6). Several major outbreaks that occurred in recent years are noteworthy (Table 7). In 1984, Cana-

**Table 6.** Epidemiology of Foodborne Bacterial Pathogens

Country	Year	Annual number of incidents <sup>a</sup>						Reference
		Salmonella	S. aureus	Campylobacter	Bacillus	E. coli	Listeria	
Canada	1989	51.0	21.0	13.0	19.0	9.0	3.0	37
England/Wales	1989-91	922.0	8.3	5.0	24.7	1.0	0.0	5
Japan <sup>c</sup>	1991	159.0	95.0	24.0	9.0	30.0	NL <sup>b</sup>	38
Spain	1994	379.0	39.0	2.0	1.0	9.0	NL	39
United States	1992	81.0	6.0	6.0	3.0	3.0	0.0	40

<sup>a</sup>Mean annual number of incidents (outbreaks and single cases) where applicable.

<sup>b</sup>Not listed or possibly no reported incidents.

<sup>c</sup>A total 247 incidents of *Vibrio* spp. enteritis were reported.



**Table 7.** Major foodborne outbreaks of human salmonellosis

Year	Country <sup>a</sup>	Vehicle	Serovar	Number		Reference
				Cases <sup>b</sup>	Deaths	
1984	Canada	cheddar cheese	<i>S. typhimurium</i> PT 10	2,700	0	41
1985	United States	pasteurized milk	<i>S. typhimurium</i>	16,284	7	42
1987	Republic of China	beverage (egg)	<i>S. typhimurium</i>	1,113	NS <sup>c</sup>	43
1988	Japan	cooked eggs	<i>Salmonella</i> spp.	10,476	NS	38
1991	United States/Canada	cantaloupes	<i>S. poona</i>	>400	NS	44
1993	Germany	paprika potato chips	<i>S. saintpaul</i>	1000	0	45
			<i>S. javiana</i>			
			<i>S. rubislaw</i>			
1994	United States	ice cream	<i>S. enteritidis</i>	740	0	46

<sup>a</sup>Country where outbreak occurred; most episodes were due to domestic products.

<sup>b</sup>Confirmed cases.  
<sup>c</sup>Not specified.

**Table 8.** *Salmonella* outbreaks from imported foods<sup>a</sup>

Year	Country		Vehicle	Serovar	Number		Reference
	Exporting	Importing			Cases <sup>b</sup>	Deaths	
1973	Canada	United States	chocolate	<i>S. eastbourne</i>	122	0	47
1982	Italy	United Kingdom	chocolate	<i>S. napoli</i>	245	0	48
1982	Brazil	Norway	black pepper	<i>S. oranienburg</i>	126	1	49
1984	France	United Kingdom	pâté	<i>S. gold coast</i>	506	0	50
1984	United Kingdom	International	aspic glaze	<i>S. enteritidis</i> PT 4	766	2	51
1988	Australia	England	mungbean sprouts	<i>S. saintpaul</i>	143	0	52
1989-90	Mexico	United States	cantaloupe	<i>S. chester</i>	>245	2	53
1994	Australia	Finland/Sweden	alfalfa sprouts	<i>S. bovis</i> morbificans	492	0	54
1995	The Netherlands	United States	alfalfa sprouts	<i>S. stanley</i>	>230	0	55
1996	The Netherlands	Canada /United States	alfalfa sprouts	<i>S. newport</i>	>137	0	55
1996	France	United Kingdom	Infant milk formula	<i>S. anatum</i>	>12	0	56

<sup>a</sup>Adapted from reference 3.

<sup>b</sup>Confirmed cases.

dian cheddar cheese made from pasteurized and unpasteurized milk was identified as the cause of 2,700 confirmed human cases of *S. typhimurium* phage-type 10 infections. An investigation of the incriminated cheese plant determined that the manual override of a flow diversion valve had permitted entry of raw milk into vats of pasteurized milk destined for cheese production<sup>41</sup>. The largest outbreak of human foodborne salmonellosis ever recorded in the United States occurred in 1985 and was associated with pasteurized milk. The episode reportedly originated from cross-connections between raw and pasteurized milk lines in the fluid milk plant<sup>42</sup>. More recently, fresh cantaloupes produced in the United States led to an international outbreak of *S. poona*<sup>44</sup>. Seemingly the bacterial pathogen located on the surface of the fruit

was inoculated into the edible tissues during cutting of the fruit. In the German outbreak, paprika contaminated with multiple *Salmonella* serovars was sprinkled onto cooked potato chips prior to packaging<sup>45</sup>. In 1994, ice cream was implicated in a major outbreak of human *S. enteritidis* infections in the United States. The cause of this episode was ascribed to the cross-contamination of ice cream mix transported in a truck that had not been properly sanitized after an earlier delivery of raw liquid eggs<sup>46</sup>. A variety of internationally distributed foods have been implicated in episodes of human salmonellosis (Table 8). It is noteworthy that the incriminated foods were all ready-to-eat products and that fresh fruit and vegetables appear to be increasing in importance as vehicles of human infection.

**Table 9.** Ciprofloxacin-resistant *Salmonella* from humans: England and Wales<sup>a</sup>

Serovar	Number Tested (% resistant)	
	1991	1994
<i>S. enteritidis</i>	17,456 (0.1)	17,701 (0.4)
<i>S. typhimurium</i>	5,331 (0.3)	5,603 (1.4)
<i>S. virchow</i>	766 (2.5)	144 (5.1)
<i>S. newport</i>	331 (1.5)	294 (5.1)
<i>S. hadar</i>	294 (2.0)	298 (39.6)

<sup>a</sup>Adapted from reference 57.**Table 10.** Enrofloxacin-resistant *Salmonella* in Germany<sup>ab</sup>

Source	Year	No. isolates Tested	Percent Resistant <sup>c</sup>
Bovine	1987	1,739	0.0
	1988	2,055	1.8
	1989 <sup>d</sup>	2,720	4.4
	1990	2,160	15.9

<sup>a</sup>Adapted from reference 58.<sup>b</sup>Multiple serovars with predominance of *S. typhimurium*.<sup>c</sup>Most strains showed cross-resistance to nalidixic acid and to other fluoroquinolones.<sup>d</sup>Therapeutic veterinary use of enrofloxacin licenced in 1989.

The widespread use and abuse of antibiotics in human medicine and in various food producing sectors is of considerable concern because such practices have led to the emergence and persistence of *Salmonella* spp. and other bacterial pathogens that are resistant to medically important drugs. The phenomenon has diverted medical, veterinary and aquacultural interests towards the fluoroquinolones as replacements for traditional antimicrobials that are no longer effective. The growing preference for fluoroquinolones in human medicine has already triggered an increasing prevalence of ciprofloxacin-resistant *Salmonella* spp. in England and Wales (Table 9). Similarly, the recently approved therapeutic and/or prophylactic use of enrofloxacin (Europe) and sarafloxacin (United States) in animal husbandry is currently selecting for fluoroquinolone resistant salmonellae in the agricultural industry (Table 10). This alarming situation is further compounded by the use of fluoroquinolones in the vast aquacultural industry which flourishes in third world countries. Clearly, the prevalence of multiple antibiotic-resistant *Salmonella* spp. in the global food chain represents a major threat to public health and must now be factored into the food safety equation. Stringent control measures in the production,

harvesting and distribution of foods and food ingredients remain key determinants in effective food safety programs. Current information indicating that the ingestion of very low numbers of foodborne salmonellae can result in human illness (Table 11) should further strengthen the resolve of the food industry to market bacteriologically safe products.

**Table 11.** Human infectious doses of *Salmonella* spp.<sup>a</sup>

Food	Serovar	Infectious dose
Eggnog	<i>S. meleagridis</i>	10 <sup>6</sup> - 10 <sup>7</sup>
	<i>S. anatum</i>	10 <sup>5</sup> - 10 <sup>7</sup>
Goat cheese	<i>S. zanzibar</i>	10 <sup>5</sup> - 10 <sup>11</sup>
Imitation ice cream	<i>S. typhimurium</i>	10 <sup>4</sup>
Chocolate	<i>S. eastbourne</i>	10 <sup>2</sup>
Hamburger	<i>S. newport</i>	10 <sup>1</sup> - 10 <sup>2</sup>
Cheddar cheese	<i>S. heidelberg</i>	10 <sup>2</sup>
Chocolate	<i>S. napoli</i>	10 <sup>1</sup> - 10 <sup>2</sup>
Cheddar cheese	<i>S. typhimurium</i>	10 <sup>0</sup> - 10 <sup>1</sup>
Chocolate	<i>S. typhimurium</i>	≤ 10 <sup>1</sup>
Paprika potato chips	<i>S. saintpaul</i>	≤ 4.5 x 10 <sup>1</sup>
	<i>S. javiana</i>	
	<i>S. rubislaw</i>	

<sup>a</sup>Adapted from reference 3.

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