



Studies on Diarrhea in Equine Associated with *Clostridium Difficile* and *Clostridium Perfringens* Infection

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ABSTRACT:

Clostridium difficile and *Clostridium perfringens* play a significant role in diarrhea affecting equine. This study was designed to determine the role of *Clostridium difficile* and *Clostridium perfringens* in equine diarrhea, 380 animals were examined clinically, where 65 were suffering from diarrhea. Fecal samples were collected from diarrheic animals, and 10 samples from apparently healthy animals.

Clostridium difficile and *Clostridium perfringens* were isolated from 19 and 11 samples respectively, while the two bacteria were isolated from 5 samples simultaneously. Moreover 4 samples from apparent clinical healthy animals had *Clostridium difficile* infection, indicating the high prevalence of these organisms in equine.

Toxins of *Clostridium difficile* wasn't detected in diarrheic samples or culture of *Clostridium difficile* isolates by ELISA and PCR-technique, while α and β toxins of *Clostridium perfringens* were detected in culture of *Clostridium*.

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1. INTRODUCTION

Diarrhea is an important cause of mortality of adult horses and understanding of this syndrome is limited by the complex and dynamic nature of the gastrointestinal flora. Equine colitis has been associated with a variety of pathogens. Recently, *Clostridium difficile* and *perfringens* have been associated with enterocolitis in adult horses and foals (Donaldson and Palmer 1999). Many reports have implicated *Clostridium difficile* in cases of sporadic, antibiotic – induced and nosocomial colitis in adult horses and foals (Ed Kane, 2012)., although the full extent of its role in equine disease is still unclear. *Clostridium difficile* produces at least 5 toxins (Borriello 1998), although the effect of only toxin A and B were well understood. Isolation of *Clostridium difficile* was designated as toxigenic or non- toxigenic based on the production of these 2 toxins.

Toxin A is a potent enterotoxin with slight cytotoxic activity (Henry, 2012). Which unlike toxin B which cause fluid accumulation in animal intestinal models (Borriello, 1998). Toxin B is a potent cytotoxic with up to 1000 times the cytotoxicity of toxin A (Henry, 2012) but no demonstrable effect on intestinal permeability, migration of neutrophils in the intestinal lumen or intestinal morphology (Lima et al., 1988). Clinical signs of *Clostridium difficile*-

associated disease (CDAD) can be variable and range from mild enteritis to fulminant necrotizing hemorrhagic enteritis. Diagnosis of CDAD has been hampered in the gut due to the fastidious nature of the organism and requirement for complicated laboratory procedures to detect toxins. The ready availability of selective culture media and ELISAs for the detection of toxins has led to an increased understanding of the role of the organism in equine colitis. (Diab, et al., 2013).

The role of *Clostridium perfringens* in equine colitis is less clear. Equine enterocolitis has been associated with *C. perfringens* Types A (Bueschel et al., 1998) and Types C (East et al., 1998). The production of *Clostridium perfringens* enterotoxin (CPE) is most commonly associated with Type A strains, but can occur with other types (Songer, 1996). CPE production is co-regulated with sporulation and is released upon lysis of vegetative cells (Songer, 1996). *Clostridium perfringens* was significantly associated with diarrhoea in foals (Netherwood et al., 1996), while isolation of *Clostridium perfringens* was not associated with diarrhoea in foals (Browning et al., 1991). This study was designed to determine the role of *Clostridium difficile* and *Clostridium perfringens* as etiologic agents of diarrhea in foals and adult horses.

2. MATERIAL AND METHODS

Animals:

This study was done on 380 animals from different localities at alexandria gavernorate, animals were clinically examined for diarrhea according to Kelly, (2000).

Collection and preparation of samples

A total of 75 fecal samples were collected from foals and adult horses. 65 samples were from animals suffering from diarrhea, while the remained 10 samples were from apparent clinically healthy horses. Samples were collected directly from the rectum then loaded in plastic bags and transported directly to the laboratory. Samples were stored at – 20° c (Ba° verud et al., 2003).

Isolation and identification of *Clostridium difficile*

Under complete aseptic conditions the fecal samples were transferred into cooked meat broth supplemented with D-cycloserine to inhibit the growth of microorganisms other than *Clostridium* species then incubated anaerobically for 5-7 days at 37 °c in anaerobic condition. The enriched samples were treated with heat shock in water bath at 80 °c for 10 minutes then streaked on blood agar and incubated anaerobically for 48 hrs at 37 °c in macintosh jar (ArulkumarThangamani and Saravanan Subramanian, 2012). Typical colonies on blood agar were picked up and purified on cooked meat broth then incubated anaerobically for 48 hrs at 37 °c and further used for biochemical confirmation tests (Johnson et al, 2007).

Isolation and identification of *Clostridium perfringens*:

The enriched samples streaked on *Clostridium perfringens* agar base supplemented with egg yolk emulsion (50 ml / litre) and D-cycloserine (2 vials / litre) (DespinaKotsanas et al., 2010) and also streaked on blood agar medium (Johnson et al, 2007) then incubated anaerobically at 37 °c for 48 hr. Typical colonies from the cultivated *Clostridium*

perfringens agar medium and from blood agar medium were picked up and purified on cooked meat broth for further biochemical confirmation tests. (Rhodehamel. et al, 1995) .

PCR-techniques :

- identification of *Clostridium difficile*
PCR identification of *Clostridium difficile* strain from the isolated colonies by amplification of *tpi* gene by using specific primer (5'AAGAAGCTACTAAGGGTACAAA-3'), and (5'CATAATATTGGGTCTATTCCTAC-3') according to (LudovicLemee, et al. 2004).
- Detection of *Clostridium difficile* toxins
Examination of feces and colonies for *Clostridium difficile* toxin A and B was done using primers (5'-GATGCTAATAATGAATCTAAAATGGTAAC-3'), (5'-ACCACCAGCTGCAGCCATA-3') and (5'GATGCTAATAATGAATCTAAAATGGTAA C-3'), (5'ACCACCAGCTGCAGCCATA-3'), respectively according to (Charles Darkoh, et al. 2011), by using Multiplex -PCR technique .
- Detection of *Clostridium perfringens* toxins
Two primers were used for detection of *Clostridium perfringens* α toxin and β 2-toxin by multiplex PCR technique using specific primers (5AAGAAGCTAGTAGCTTACATATCAACTAGT GGTG-3). (5-TTTCCTGGGTTGTCCATTTCC-3) and (5'GATGCTAATAATGAATCTAAAATGGTAA C-3'). (5'-ACCACCAGCTGCAGCCATA-3') respectively, (Albini, et al. 2008) .

ELISA for *Clostridium difficile* A and B Toxins identification:

ELISA kits used for qualitative determination of toxin A and B from *Clostridium difficile* in stool samples (RIDASCREEN, 2011).

Table (1) Prevalence of diarrhea among examined equine

| Area | Total no.of animals | No.of diarrheic animals | % |
|------------------|---------------------|-------------------------|--------|
| El- giad club | 100 | 6 | 6% |
| Smoha club | 80 | 5 | 6.25% |
| Max-marine farm | 60 | 16 | 26.6% |
| El-hadara stable | 20 | 1 | 5% |
| Carmoze stable | 40 | 12 | 30% |
| Abo-keer stable | 80 | 25 | 31.25% |
| Total | 380 | 65 | 17.1 % |

Table 2. Prevalence of *Clostridium Dificile* and *Clostridium perfringens* isolation from diarrheic cases

| Total | Samples No. | <i>Clostridium difficile</i> | | <i>Clostridium perfringens</i> | | <i>Mixed infection</i> | |
|----------------------|----------------|----------------------------------|-------------|------------------------------------|-------------|----------------------------|------------|
| | | No. | % | No. | % | N | % |
| Diarrheic cases | 65 | 15 | 23 | 11 | 16.9 | 5 | 7.6 |
| Apparently normal | 10 | 4 | 40 | 0 | 0 | 0 | 0 |
| Total | 75 | 19 | 25.3 | 11 | 16.9 | 5 | 7.6 |

3. RESULTS

As showed in table (1). From 380 animals examined, diarrhea was observed in 65 equine (17.1 %) . the highest prevalence was in Abo-keer stable and lowest was in El-hadara stable ,10 control samples were taken from apparently healthy animals

Clinical signs observed on diarrheic cases:

Clinical signs not differ greatly between equine age groups that ranged from normal temperature to 39 °c. consistency of diarrhea range from watery, soft to semiformal diarrhea. Some diarrheic horses were treated with anthelmintic drugs (banminth, duramectine) or antibiotics (panstrep, tetracycline, erythromycin), before incidence of diarrhea

Prevalance of *Clostridium difficile* and *Clostridium perfringens*:

75 samples were streaked on blood agar, 19 samples were found to be *Clostridium difficile* (15 samples from diarrheic animals and 4 samples from apparently halthy animals). 11 samples were found to be *Clostridium perfringens* (TSC), 5 have mixed infection with both clostridium difficile and clostridium infection(table 2).

Results of PCR applied on *Clostridium difficile* isolates: 19 clostridium difficile isolates were examined by conveintal PCR technique using specific primers for universal gene of *Clostridium difficile* species,19 samples were confirmed as *Clostridium difficile* by PCR, figure (1)

Detection of *Clostridium difficile* toxins by ELISA
ELISA examination for toxins A and B of *Clostridium dificile* directly from fecal samples, or bacterial culture was negative

Detection of *Clostridium difficile* toxins by PCR
19 positive fecal samples for *Clostridium difficile* culture were examined by PCR technique for detection of toxin DNA and no toxin DNA was detected, figure (2)

***Clostridium perfringens* toxin detection:** 11 positive isolates of *Clostridium perfringens* detected by bacterial culture were tested by multiplex- PCR for detection of toxins by using specific primers and results revealed that 11 sample were positive for α and/or β 2 toxins, figure (3)

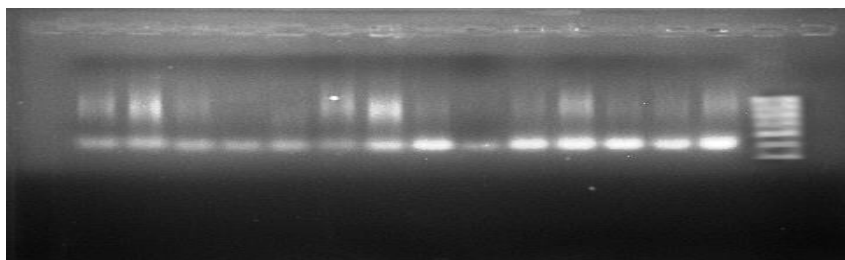


Figure (1): electrophoretic analysis of the conveintal PCR products obtained from DNA extracts of *Clostridium difficile* colonies , by amplification of *tpi*gene (230 bp)

- Lane 1 marker
- Lane 2- 14(14 positive representative sample for *tpi* gene 320bp)

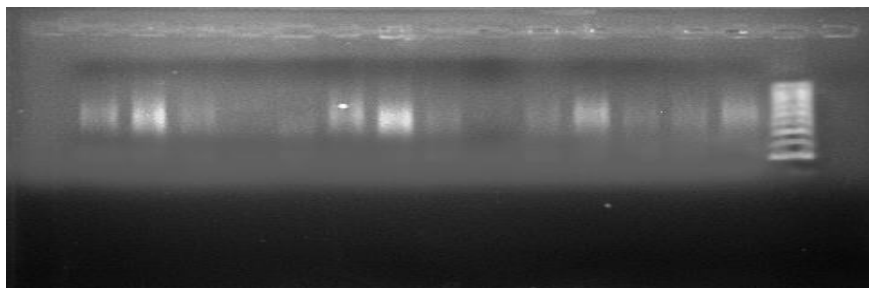


Figure (2): electrophoretic analysis of multiplex- PCR products obtained from DNA extracts of *Clostridium difficile* colonies , by amplification of *toxin A* and *B* gene (- ve results)

- Lane 1 marker
- Lane 2- 14 (14 negative samples for toxin A and B)

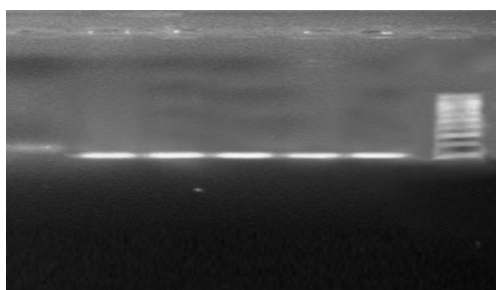


Figure (3): electrophoretic analysis of multiplex- PCR products obtained from DNA extracts of *Clostridium perfringens* colonies , by amplification of α , and β 2 toxin genes which revealed positive for α -toxin (124bp) and β 2 toxin (127bp)

- Lane 1 marker
- Lane 2-6 5 positive representative samples for α - toxin (124), β 2 (127)

4- DISCUSSION

Diarrhea is a common problem in equines and causes significant losses in foals and adult horses. (Lyerly et al., 1998), it has been associated with a variety of pathogens, including *Salmonella* (Stewart et al. 1995; Cohen and Divers 1998) *Ehrlichia risticii* (Stewart et al. 1995; Cohen and Divers 1998) *Aeromonas* spp., (Browning et al. 1991, Hathcock et al., 1999) *Lawsonia intercellularis* (Brees et al., 1999) and *larval schistosomiasis* (Cohen and Diver 1998). More recently, *Clostridium difficile* and *perfringens* have been associated with enterocolitis in adult horses and foals (Jones et al. 1987; Traub-Dargatz and Jones 1993) Madewell et al. 1995; Baverud et al., 1998; Donaldson and Palmer 1999).

This study was designed to throw light on the role of *Clostridium difficile* and *Clostridium perfringens* in diarrhea in equine

In this study, 65 out of 380 horses from different localities of Alexandria governorate were diarrheic (table 1), mostly affected animals were from Abo-keer stable (25 out of 70) and lowest prevalence were from El-hadara stable (1 out of 20).

As shown in table 2, *Clostridium difficile* was isolated from 15 diarrheic animals (23%). In similar previous studies (Thean et al., 2011) isolated *Clostridium difficile* from 23% of diarrheal animals, and high isolation rate reported by (Ba^overud et al., 2003) isolated *clostridium difficile* from 42% diarrheic horses, while low isolation rate was reported by (Weese, et al., 2001) which was 12% of horses with colitis was positive for *Clostridium difficile*.

Clostridium difficile was isolated from 4 of 10 non diarrheic horses (40%) (table 2).. This supports the results of (Ba^o verud, et al., 2003), who isolated *Clostridium difficile* from normal non diarrheic horses, while (Weese, et al., 2001) suggested that

Clostridium difficile is uncommonly isolated from healthy foals (13%). On the other hand (Gustafsson et al., 2004) reported that *Clostridium difficile* is not considered part of the normal flora of the equine adult gastrointestinal tract and is uncommonly isolated from normal mature horses. The isolation rate may increase in asymptomatic horses being treated with antimicrobials. However, up to 42% of horses that develop acute colitis during treatment with antimicrobials can have *clostridium difficile* isolated, and this confirmed by what reported by (Butterworth et al., 1998). As clostridial diarrhea mainly induced due to disturbance of number of normal inhabitant microflora due to administration of antimicrobials

Conventional PCR-technique was used to confirm *Clostridium difficile* isolation by targeting species-specific internal fragment of the *tpi* (figure 1), as PCR-technique used for identification more specific than bacteriological cultivation for confirming the strain isolated (LudovicLemee et al., 2004). These results indicate that PCR may be used to overcome the cumbersome and time-consuming of biochemical tests. Also PCR allows the direct detection of infectious agents in stool samples when PCR was used (Gouvea, et al., 1990). Also these results may be in accordance with some reports revealed that PCR –technique is rapid, sensitive and requires minimum specimen preparation. Results could be obtained within 3 h of primary isolation and PCR was successful even in mixed culture with *Clostridium sporogenes* (Donaldson and Palmer, 1999 and Henry, 2012)

Clostridium difficile induce diarrhea through the production of toxins. The bacteria produce 2 toxins (A and B), Toxin A is potent enterotoxin with slight cytotoxic activity (Henry, 2012). Which unlike toxin B which cause fluid accumulation in animal intestinal models (Borroello 1998). Toxin B is a potent cytotoxic with up to 1000 times the cytotoxicity of toxin A (Henry, 2012) .Isolation of *Clostridium difficile* was designated as toxigenic or non- toxigenic based on the production of these 2 toxins.

In this study we could not detect toxin A or B from feces of diarrheic equines or from isolated *Clostridium difficile* by ELISA or PCR. These results may indicate that the isolated *Clostridium difficile* was not toxigenic strains and that there are other causes of diarrhea and this is supported also by our results of isolation of *Clostridium difficile* from normal non diarrheic horses. However the carrier rate of *Clostridium difficile* is nil or low in asymptomatic foals and adult horses. The rate of isolation from clinically normal adults is between 0

and 4.3%, whereas normal foals are generally reported to be culture negative (Baverud et al., 1997; Jones et al., 1987; Madewell et al., 1995; Weese et al., 2001). Therefore, isolation of this microorganism from the intestinal tract of horses with gastrointestinal disease is considered by some authors as highly suggestive of *Clostridium difficile* -associated disease.

Clostridium perfringens was first implicated as a cause of antibiotic-associated diarrhea (AAD) in 1984 and may be diagnosed by detection of enterotoxin (CPEnt) in feces. *Clostridium perfringens* affecting foals less than 7 days of age and especially day old foals , they colonize the gut some produce toxin that cause gut damage that allow toxin or even bacteria to enter to blood stream leading to foal septicemia, the diarrhea is bloody and can be diagnosed by detecting toxins in feces, the most common types are type A and type C , type A elaborate an enterotoxin (CPE) which is released during sporulation and stimulate intestinal epithelial cell to secret excess fluid into the lumen. Type A has been isolated in >90 % of feces of healthy neonatal foals, so the number of bacteria and phase of growth predispose to this type of diarrhea, while type C infection (*Clostridium* associated enterocolitis) this type may associated with *Clostridium perfringens* type A (Tillotson et al., 2002).

Type C is rarely found in the feces of normal foals and horses and results in more severe diarrhea than type A. Toxins produced by *Clostridium perfringens* are type α and β and β_2 toxins (Hickey et al., 2008 , Bryant et al., 2003)

In this study *Clostridium perfringens* was isolated from horses in a frequency of (16.9%) from diarrheic horses as showed in table (2) which nearly similar to that reported by (Herholz et al., 1999). However, it differs greatly from (Tillotson et al., 2002), who reported that *Clostridium perfringens* considered a part of normal flora that has high incidence rate in young age and decreased prevalence with advanced age.

The toxins secreted by *Clostridium perfringens* were identified by multiplex-PCR technique by using specific primers for α and β_2 toxins that revealed positive results showed in figure (3) which indicates that *Clostridium perfringens* toxins were the cause of diarrhea in horses affected with this organism as showed at table (2), this agree with that reported by(Alec and Louise, 2001). Also agree with (Wilcox, 2000) who reported that Although *Clostridium difficile* is the most commonly identified pathogen in horses who acquired diarrhea through hospitalization , the

cause(s) of the majority of the cases, in some series up to 80%, currently remain undiagnosed. *Staphylococcus aureus* and *Clostridium perfringens* are the most frequently cited alternative causes of AAD.

Mixed infection by *Clostridium difficile* and *Clostridium perfringens* was observed in 5 diarrheic cases (table 2) which indicate that the causative agent of diarrhea was *Clostridium perfringens* not *Clostridium difficile* as *Clostridium difficile* was non-toxigenic strain, while *clostridium perfringens* toxins was confirmed by multiplex-PCR technique . Mixed infection by both clostridia was reported in diarrheic horses by (Uzal et al., 2012) suggests a possible synergism of *Clostridium perfringens* type C and *Clostridium difficile* in foal enterocolitis. Because none of the foals had received antibiotic therapy, the predisposing factor, if any, for the *Clostridium difficile* infection remains undetermined; it is possible that the *Clostridium perfringens* infection acted as a predisposing factor for *Clostridium difficile* and/or vice versa. The presence of mixed infection cases in this study stresses the need to perform a complete diagnostic workup in all cases of horses with diarrhea.

5- CONCLUSION

Toxigenic *Clostridium prfringens* play a significant rol as a causative agent of diarrhea in horses. Mixed infection in both *Clostridium perfringrns* and *clostridium difficile* may indicate synergestic action of them or that *Clostridium perfringens* predispose for *Clostridium difficile* action

Isolation of *Clostridium difficile* from diarrheic horses not enough for confirming its role in diarrhea

6-REFERENCES

- Albini, S., brodard, I., Jaussi, A., wollschlaeger, N., frey, J., miserez, R., Abril, C. 2008. Real-time multiplex PCR assays for reliable detection of *Clostridium perfringens* toxin genes in animal isolates. *Vet. Microbiol.* 127: 179-185.
- Alec P. and Louise H. 2001. Infectious Diarrhea in Foals.Courtelis Equine Teaching Hospital, College of Vet. Med., University of Florida, Gainesville, FL. 32610-01367
- Arulkumar, Th. and Saravanan S. 2012. Prevalence of *Clostridium perfringens* in the Chicken Meat Rendered at Retail Outlets of Namakkal, J. advanced Vet. Res. 157-159.
- Barbut, F., Mastrantonio, P., Delmée, M., Brazier, J., Kuijper, E. and Poxton, I. 2007. European Study Group on *Clostridium difficile* (ESGCD). Prospectivestudy of *Clostridium difficile*infections in Europe with phenotypic and genotypic characterisation of the isolates.*Clin Microbiol. Infect.* 13:1048–1057.
- Baverud, V., Franclin, A., Gunnarsson, A., and Hellander- Edman, A. 1998. *Clostridium difficile* associated with acute colitis in mares when foals treated with erythromycin and rifampicin for *Rhodococcus equi* pneumonia. *Equine vet. J.* 30: 482-488.
- Ba' verud, V., Gustafsson, A., Franklin, A., Aspa'n, A., Gunnarsson, A. 2003. *Clostridium difficile* prevalence in horses, in environment and antimicrobial susceptibility. *Equine Vet. J.* 35(5): 465–471.
- Baverud, V., Gustafsson, A., Franklin, A., Lindholm, A. and Gunnarsson, A. 1997. *Clostridium difficile* associated with acute colitis in mature horses treated with antibiotics. *Equine Vet. J.* 29: 279-284.
- Borriello, S.P. 1998. pathogenesis of *clostridium difficile* infection. *J. Antimicrob. Chemo.*41: 13-19.
- Brees, D.J., Sondhoff, A.H., Kluge, J.P., Andreasen, C.B., and Brown, C.M. 1999. *Lawsonia intercellularis*-like organism infection in a minature foal. *J.Am. Med.Assoc.* 215: 511-514
- Browning, F., Chalmer, R.M., Snodgrass, D.R., Batt, R.M., Hart, C.A., Ormarod, S.E., Leadon, D., Stoneham, S.J. and Rossdale, P.D. 1991. The prevalence of enteric pathgen in diarrheic thoroughberd foals in britain and iredland. *EquineVet. J.* 23: 405-409.
- Bueschel, D., Walker, R., Woods, L., Kokai-Kun, J., McClane, B. and Songer, J. G. 1998. Enterotoxigenic *Clostridium perfringens* typeA necrotic enteritis in a foal. *J. Am. Vet. Med. Assoc.* 213: 1305-1307, 1280.
- Butterworth, SA., Koppert, E., Clarke, A., et al. 1998. Recent trends in diagnosis and treatment of *Clostridium difficile*in atertiary care facility. *Am. J. Surg.* 175: 403–407.
- Bryant, AE., Bayer, CR., Hayes-Schroer, SM., Stevens, D. 2003. Activation of platelet gpIIIa by phospholipase C from *Clostridium perfringens* involves store-operated calcium entry. *J. Infect. Dis.* 187: 408.
- Charles, D., Herbert, L., DuPont and Heidi B. Kaplan. 2011. Novel One-Step Method for Detection and Isolation of Active-Toxin-Producing *Clostridium difficile* Strains Directly from Stool Samples, *J. of clin. microbial.* 54 (8): 5760–5769.
- Cohen, N.D. and Divers, T.J. 1998. Acute colitis in horses. Part 1. Assessment.*Compend.Contin. Educ. Pract. Vet.* 20: 92-98
- David Humes, H., Herbert, L. DuPont , Laurence, B. Gardner, John, W. Griffin , and 7more. 2000. Kelley's Textbook of Internal Medicine Hardcover – August 15, ,Edition: Fourth
- Despina, K., Jolene, A., Carson, M.M., Awad, Dena L., Julian, I. Rood, Grant, A., Jenkin, Rh.L. Stuart, and Tony M. K. 2010. Novel Use of Tryptose Sulfito Cycloserine Egg Yolk Agar for Isolation of *Clostridium perfringens* during an Outbreak of Necrotizing Enterocolitis in a Neonatal Unit, *J. Clin.Microbiol.* Nov. 48(11): 4263–4265.
- Diab, SS., Songer, G., and Uzal, FA. 2013. *Clostridium difficile* infection in horses, *Vet. Microbiol. P* (13): 378-1135.

- Donaldson, M.T. and Palmer, J.E. 1999. prevalence of *clostridium perfringens* enterotoxin and *clostridium difficile* toxin A in feces of jorses with diarrhea and colic . J. Am. Vet. Med. Assoc. 215: 358-361.
- East, L.M., Savage, C.J., Traub-Dargatz, J.L., Dickinson, C.E. and Ellis, R.P. 1998. Enterocolitis associated with *Clostridium perfringens* infection in neonatal foals: 54 cases (1988-1997). J. Am. Vet.Med. Assoc. 212: 1751-1756.
- Ed Kane, 2012. Equine colitis Causes, consequences and management challenges for veterinarians, Strategies on fighting this all-too-common and life-threatening condition in horses, DVM360 magazine.
- Gouvea, V., Glass, R.I., Woods, P., Taniguchi, K., Clark, H.F., Forrester, B. and Fang, Z.Y. 1990. Polymerase chain reaction amplification and typing of rotavirus nucleic acid from stoolspecimens. J. Clin. Microbiol. 28:276-282.
- Gustafsson. A., Ba° verud. V., Gunnarsson. A., et al. 2004. Study of faecal shedding of *Clostridium difficile* in horses treated with penicillin. Equine Vet J. 36: 180–2.
- Hathcock, T.L., Schumacher, J., Wright, J.C., and Stringfellow, J. 1999. The prevelance of *Aeromonase* species in feces of horses with diarrhea. J.Vet. Int. Med. 13: 357-360
- Henry R. Stämpfli, 2012. Generalized conditions clostridial diseases *clostridium difficile* and *c.perfringens* infection, merck vererinary manual,
- Herholz, C., Miserez, R., Nicolet, J., Popoff, M., Gibert, M., Gerber, H. and Straub, R., 1999. Prevalence of b2-toxigenic *Clostridium perfringens* in horses with intestinal disorders. J. Clin. Microbiol. 37: 358-361.
- Hickey, MJ., Kwan, RY., Awad, MM. et al., 2008. Molecular and cellular basis of microvascular perfusion deficits induced by *Clostridium perfringens* and *Clostridium septicum*. PLoS Pathog. 4: e1000045.
- Jones, R.L., Adney, W.S., Shideler, R.K. 1987. Isolation of *Clostridium difficile* and detection of cytotoxin in the feces of diarrheic foalsin the absence of antimicrobial treatment.J. Clin. Microbiol. 25:1225–1227.
- Johnson, E.A., Summanen, P., and Finegold, S. M. 2007. *Clostridium*. In P. R. Murray (8thEd.), *Manual of Clinical Microbiology* (9th ed., pp. 889-910). Washington, D.C. ASM Press.
- Lyerly, D.M., Neville, L.M., Evans, D.T., et al.,1998. Multicenter evaluation of the *Clostridium difficile*TOX A/B TEST. J. Clin.Microbiol. 36: 184–190
- Lima, A.A.M., Lerly, D.M., Wlkins, T.D., Innes, D.J., and Guerrant, R.L. 1988 Effects of *clostridium difficile* toxins A and B n rabbit small and large intestine in vivo and on cultured cells in vitro. Infect. Mmun. 56: 582-588.
- Ludovic, L., Anne, D., Sabrina, T., Marie, A.M., Karine, M., Jean, F.,Ois, L. and Jean, L.P. 2004. Multiplex PCR Targeting *tpi* (Triose Phosphate Isomerase), *tcdA*(Toxin A), and *tcdB*(Toxin B) Genes for Toxigenic Culture of *Clostridium difficile*.Journal of clinical microbiology, Dec. p: 5710–5714.
- Madwell, B.R., Tang, Y.J., Jang, S., Magdigan, J.E., Hirsh, D.C., Gumerlock, P.H., and Silva, J.J. 1995. Apparent outbreak of *clostridium difficile*-associated diarrhea in horses a veterinary teaching .J. Vet. Diagn. Invest. 7: 343-346.
- Modi, N. and Wilcox, M.H. 2001. Evidence for antibiotic induced *Clostridium perfringens* diarrhoea. J. Clin. Pathol. 54: 748–751.
- Netherwood, T., Wood, J.L.N., Townsend, H.G.G., Mumford, J.A., and Chanter, N. 1996. Foal diarrhea between 1991 and 1994 in the United Kingdom associated with *clostridium perfringens*, *rotavirus*, *strongyloides westeri* and *cryptosporidium ssp*. Epidemiol. Infect. 117: 375-383
- Peláez, T., Alcalá, L., Alonso, R., Rodríguez-Créixems, M., García-Lechuz, J.M., Bouza, E. 2002. Reassessment of *Clostridium difficile*susceptibility to metronidazole and vancomycin. Antimicrob Agents Chemother. 46:1647–50
- Stewart, M.C., Hodgson, J.L. kim, H., Hutchins, D.R., and Hodgson , D.R.1995. Acute febrile diarrhea in horses: 86 cases (1986-1991). Agust.Vet. J. 72: 41-44
- R-biopharm, Ridascreen® *Clostridiumdifficile* Toxin A/B, Art.No.C0801, 2011-08-03.
- Rhodehamel, E.J. and Harmon, S.M. 1995. Bacteriological Analytical Manual 8th ed. 16.01-16.06 AOAC International, Gaithersberg,MD.
- Songer, J.G. 1996. *Clostridium* enteric disease of domestic animals.Clin.Micro. Rev. 9: 216-234.
- Thean, S., Elliott, B., Riley, T.V. 2011. *Clostridium difficile* in horses in Australia--a preliminary study. Division of Microbiology and Infectious Diseases, J Med Microbiol. Aug; 60 (Pt 8):1188-92
- Tillotson, K., Traub-Dargatz, J.L., Dickinson, C.E., Ellis, R.P., Morleym, P.S., Hyatt, D.R., Magnuson, R.J., Riddle, W.T., Bolte, D. and Salman, M.D. 2002. Population-based study of fecal shedding of *Clostridium perfringens* in broodmares and foals. J. Am. Vet. Med. Assoc. 220: 342-3487.
- Traub-Dragatz, J.L. and Jones, R.L. (1993) *Clostridia*-associated enterocolitis in adult horses and foals. Vet. Clin. North Amer: Equine pract. 9, 411-421.
- Uzal, F.A., Diab, S.S., Blanchard, P., Moore, J., Anthenill, L., Shahriar, F., Garcia, J.P., Songer, J.G. 2012. *Clostridium perfringens* type C and *Clostridium difficile* co-infection in foals,California Animal Health and Food Safety Laboratory, Vet. Microbiol. May 4: 156(3-4):395-402. doi: 10.1016/ j.vet. mic.2011.11.023.
- Weese, J.S., Kaese, H.J., Baird, J.D., Kenney, D.G. and Staempfli, H.R.2002. Suspected ciprofloxacin-induced colitis in four horses. *Equine Vet. Educ.* 14: 182-189.
- Weese, J.S., Staempfli, H.R. and Prescott, J.F.2001. Clostridial colitis in adult horses and foals: a prospective study. Proc. Am. Ass. Equine Practnrs. 27: 400-402.
- Wilcox, M.H. 2000. Infective antibiotic-associated diarrhoea. In:Wilcox M.H (ed) *Infection highlights 1999_2000*. Oxford, Health Press. 57–64.