- McMinn, P., Stratov, I. and Dowse, G., Commun. Dis. Intell., 1999, 23, 199.
- 13. Lum, L. C. et al., J. Pediatr., 1998, 133, 795-798.
- 14. Chan, L. G. et al., Clin. Infect. Dis., 2000, 31, 678-683.
- Brown, B. A., Oberste, M. S., Alexander, J. P. Jr., Kennette, M. L. and Pallansch, M. A., *J. Virol.*, 1999, 73, 9969–9975.
- McMinn, P., Lindsay, K., Perera, D., Chan, H. M., Chan, K. P. and Cardosa, M. J., J. Virol., 2001, 75, 7732–7738.
- 17. Brown, B. A. and Pallansch, M. A., Virus Res., 1995, 39, 195-205.
- Banerjee, K., Hlady, W. G., Andrus, J. K., Sarkar, S., Fitzsimmons, J. and Abeykoon, P., *Bull. WHO*, 2000, 78, 321–329.
- Hull, B. P. and Dowdle, W. R., J. Infect. Dis., 1997, 175, S113– S116.
- Polio Laboratory Manual, Department of Vaccines and Biologicals, World Health Organization, Geneva, 2001.
- Oberste, M. S., Maher, K., Kilpatrick, D. R., Flemister, M. R., Brown, B. A. and Pallansch, M. A., *J. Clin. Microbiol.*, 1999, 37, 1288–1293.
- Strimmer, K. and von Haeseler, A., Mol. Biol. Evol., 1996, 13, 964–969.
- Ricco-Hesse, R., Pallansch, M. A., Nottay, B. K. and Kew, O. M., Virology, 1987, 160, 311–322.
- 24. Huang, C. C., Liu, C. C., Chang, Y. C., Chen, C. Y., Wang, S. T. and Yeh, T. F., *N. Engl. J. Med.*, 1999, **341**, 936–942.

ACKNOWLEDGEMENTS. We thank Soniya Kallara, Deepa Runkani and Swapna Sawant for technical help. We thank Dr M. A. Pallansch for providing primers used in this study. S.S.N. thanks Dr M. A. Pallansch and Dr M. S. Oberste for training her in sequence analysis of enteroviruses.

Received 3 December 2002; revised accepted 6 February 2003

Isolation and characterization of Yersinia enterocolitica from diarrhoeic human subjects and other sources

I. Singh[†], S. Bhatnagar[‡] and J. S. Virdi^{†,*}

[†]Department of Microbiology, University of Delhi South Campus, New Delhi 110 021, India

[‡]Department of Pediatrics, All India Institute of Medical Sciences, New Delhi 110 029, India

Yersinia enterocolitica, an important gastrointestinal pathogen, was isolated from 3% of the 1189 stool samples collected from pediatric diarrhoeic patients and 32.9% of the 492 throat swabs collected from swine in Delhi. Y. enterocolitica was also isolated from groundwater, waste water and river Yamuna. In addition, Y. intermedia and Y. frederiksenii were also isolated from human stool and swine throat samples. All the Y. enterocolitica strains belonged to biotype 1A. This study represents first isolation of Y. enterocolitica from swine throat swabs, groundwater and surface water in India.

YERSINIA enterocolitica, an emerging enteric pathogen, is associated with various clinical manifestations, ranging

*For correspondence. (e-mail: virdi_dusc@rediffmail.com)

from self-limited gastroenteritis to more invasive syndromes like terminal ileitis and mesenteric lymphadenitis¹. Y. enterocolitica is commonly transmitted to humans by contaminated food and water. Swine, being the major reservoir of Y. enterocolitica, represent the principal source of contamination². In swine, Y. enterocolitica is isolated most frequently from throat. Although prevalence of Y. enterocolitica in temperate areas of world is well documented, there is very little information from tropical and subtropical countries, including India². Isolation of Y. enterocolitica from India has been reported sporadically from stools of diarrhoeic patients³⁻⁷, milk⁸, swine intestinal contents⁴ and rectal swabs⁹, pork¹⁰ and sewage effluents¹¹. However, there is paucity of comprehensive studies on the isolation of Y. enterocolitica from India. The present study conducted over a period of three years reports isolation of Y. enterocolitica from pediatric diarrhoeic patients, swine throat samples, groundwater, waste water and surface water in Delhi.

A total of 1189 stool samples were collected from diarrhoeic children attending the All India Institute of Medical Sciences and Kasturba Gandhi Hospital, Delhi. In addition, 71 stool samples were also taken from nondiarrhoeic patients. Two millilitres of the stool sample was added to 18 ml of sterilized phosphate buffered saline and refrigerated at 4°C for 2 weeks. For swine, 492 samples of throat swabs were collected from four slaughterhouses located in different parts of Delhi. Each swab was transferred to 90 ml of cold enrichment broth (phosphate buffered saline with 1% sorbitol and 0.15% bile salts) and kept at 4°C for 3 weeks. A total of 179 groundwater samples were collected from handpumps, located primarily in slum areas, from all over the Delhi. Seventy-three waste water samples were taken from small and medium size waste water drains located in various parts of the city. A total of 44 surface water samples were collected from river Yamuna from the entire stretch of river running through Delhi (19 samples) and also from upstream Delhi (15 samples) and downstream Delhi (10 samples). Fifty millilitres of water sample was put in 450 ml of cold enrichment broth and kept at 4°C for 3 weeks.

After cold enrichment, samples were streaked onto CIN (Cefsulodin–Irgasan–Novobiocin) agar (Hi Media, Mumbai) plates and incubated at 25°C for 24 h (ref. 12). The presumptive *Yersinia* isolates, which showed bull's eye colony morphology on CIN agar, were subjected to four biochemical tests, viz. urease, Kligler's iron agar, differential motility and Voges-Proskauer. The isolates conforming to the above tests were subjected to detailed biochemical characterization using 46 biochemical tests¹³. Only one isolate from each positive sample was put to detailed tests. Since serotyping of *Yersinia* is a very complex process and its antisera are not available commercially, all the clinical isolates were sent to WHO *Yersinia* Reference Center, Pasteur Institute, Paris

(France) for serotyping. In addition, all the *Yersinia* isolates from various sources have been deposited at WHO *Yersinia* Reference Center.

Results of the isolation of Y. enterocolitica from diarrhoeic human subjects and other sources are summarized in Table 1. From a total of 1189 diarrhoeal stool samples studied, 36 (3%) samples were found to be positive for Y. enterocolitica. However, out of 71 non-diarrhoeal stool samples no Y. enterocolitica strain could be isolated. Of the 492 throat swab samples collected from swine, Y. enterocolitica was isolated from 32.9% samples. Y. enterocolitica was also isolated from groundwater, waste water and surface water. Other species namely Y. intermedia and Y. frederiksenii were isolated from 4 (0.3%) and 7 (0.5%) diarrhoeal stool samples respectively. In addition, Y. intermedia was isolated from 23 (4.6%) and Y. frederiksenii from 9 (1.8%) swine throat samples. Most Yersinia isolates showed characteristic biochemical reactions that were typical of the respective species. However, some Y. intermedia isolates of swine origin showed atypical reactions: six isolates utilized lactose, one failed to show lipase activity, while another one was positive for lactose and negative for lipase. Two of the swine Y. frederiksenii isolates failed to reduce nitrate. All Y. enterocolitica isolates from groundwater and waste water fermented rhamnose and utilized citrate. Also, four Y. enterocolitica isolates from swine oral swabs and one surface water isolate were positive for rhamnose and citrate. All the Y. enterocolitica isolates from human, swine and water were of biotype 1A. Of the 36 Y. enterocolitica strains isolated from diarrhoeic stools, 8 were of serotype O:6, 30-6, 31, 19 of serotype O:6, 30 and 9 were untypable (Table 2). Y. intermedia isolates from clinical samples were of biotype 1 (3 strains) and biotype 2 (1 strain). Among the swine Y. intermedia isolates, 18 belonged to biotype 1, 2 isolates to biotype 4, while 3 isolates were of rare biotype 8. Of the isolates from clinical samples, six Y. frederiksenii belonged to serotype O:35, one Y. intermedia to serotype 0:7, 8-8, whereas the rest were non-agglutinable.

The isolation rate of *Y. enterocolitica* from human diarrhoeal stools (3%) and swine oral swabs (32.9%) is quite

Table 1. Summary of *Y. enterocolitica* isolated from human, swine and water samples

| Sample | No. of samples processed | No. of samples positive for <i>Y. enterocolitica</i> (%) |
|-----------------------|--------------------------|--|
| Diarrhoeal stools | 1189 | 36 (3) |
| Non-diarrhoeal stools | 71 | 0 |
| Swine throat swabs | 492 | 162 (32.9) |
| Groundwater | 179 | 5 (2.8) |
| Waste water | 73 | 9 (12.3) |
| River Yamuna | 44 | 4 (9) |

comparable to that reported from other parts of the world where Y. enterocolitica is considered a major gastrointestinal pathogen¹. Isolation of Y. enterocolitica from groundwater is significant in view of the fact that in several slum areas of Delhi, handpumps are the major source of drinking water. Slightly higher frequency of isolation of Y. enterocolitica from part of Yamuna transversing Delhi and downstream (3 isolates from 29 samples) than from upstream region (1 isolate from 15 samples) may be attributed to discharge of sewage and sewage effluents from Delhi into Yamuna. In an earlier study from our laboratory, we reported isolation of Y. enterocolitica from sewage effluents collected from several sewage treatment plant in the city¹¹. All the isolates of Y. enterocolitica belonged to biotype 1A, the pathogenicity of which is currently a matter of controversy. These strains generally lack the classical phenotypic and genotypic

Table 2. Details of Y. enterocolitica isolates from diarrhoeic patients

| | | WHO Reference |
|---------|-------------|---------------|
| Isolate | Serotype | Center No. |
| C16 | 6, 30-6, 31 | IP27359 |
| C17 | 6, 30-6, 31 | IP27360 |
| C20 | 6, 30-6, 31 | IP27361 |
| C27 | 6, 30-6, 31 | IP27362 |
| C51 | 6, 30-6, 31 | IP27363 |
| C64 | 6, 30-6, 31 | IP27364 |
| C92 | 6, 30-6, 31 | IP27365 |
| C93 | 6, 30-6, 31 | IP27366 |
| C94 | NAG* | IP27381 |
| C112 | NAG | IP27382 |
| C114 | NAG | IP27383 |
| C130 | NAG | IP27385 |
| C161 | NAG | IP27386 |
| C167 | NAG | IP27387 |
| C192 | NAG | IP27388 |
| C760 | 6, 30 | IP27403 |
| C764 | 6, 30 | IP27404 |
| C770 | 6, 30 | IP27405 |
| C772 | 6, 30 | IP27406 |
| C777 | 6, 30 | IP27407 |
| C782 | 6, 30 | IP27408 |
| C791 | 6, 30 | IP27425 |
| C792 | 6, 30 | IP27426 |
| C801 | 6, 30 | IP27427 |
| C842 | 6, 30 | IP27428 |
| C845 | 6, 30 | IP27429 |
| C855 | 6, 30 | IP27430 |
| C871 | 6, 30 | IP27431 |
| C876 | 6, 30 | IP27432 |
| C927 | 6, 30 | IP27433 |
| C931 | 6, 30 | IP27434 |
| C945 | 6, 30 | IP27481 |
| C963 | NAG | IP27482 |
| C975 | 6, 30 | IP27483 |
| C998 | 6, 30 | IP27484 |
| C1021 | NAG | IP27485 |

^{*}NAG, Non-agglutinable.

markers of *Y. enterocolitica* pathogenicity¹⁴. However, recent studies have shown that biotype 1A strains produce heat stable enterotoxin¹⁵, invade cultured epithelial cells¹⁶ and resist killing by macrophages¹⁷. *Y. enterocolitica* serotype O:6,30 belonging to biotype 1A, observed in this study, has been implicated in nosocomial and milk-borne outbreaks in certain parts of the world¹⁸. This serotype has also been isolated from extraintestinal infections in human beings¹⁹. All these observations point to its pathogenic potential. This serotype has not been reported earlier from India.

The present study provides a report of isolation of *Y. enterocolitica* from swine oral swab, groundwater and surface water in India. The isolation of *Y. intermedia* and *Y. frederiksenii* from human diarrhoeic stools, and *Y. intermedia* from swine also represents their first isolation from these sources in India. The clinical significance of *Y. intermedia* and *Y. frederiksenii* is controversial²⁰ and further studies are awaited in this aspect. Some of the atypical biochemical characteristics especially lactose positivity of *Y. intermedia* and nitrate negativity of *Y. frederiksenii* isolates were noteworthy. It would be worthwhile to work on the prevalence of *Y. enterocolitica* in human, animals and environment in this part of the continent.

- 1. Ostroff, S., Contrib. Microbiol. Immunol., 1995, 13, 5-10.
- 2. Bottone, E. J., Microbes Infect., 1999, 1, 323-333.
- Abraham, M., Pai, M., Kang, G., Asokan, G. V., Magesh, S. R., Bhattacharji, S. and Ramakrishna, B. S., *Indian J. Med. Res.*, 1997, 106, 465–468.
- Pramanik, A. K., Bhattacharyya, H. M., Chatterjee, A. and Sengupta, D. N., Indian J. Anim. Health, 1980, 19, 79–81.
- Singh, G., Arora, N. K., Bhan, M. K., Ghai, O. P., Dhar, S. and Shriniwas, *Indian J. Pediatr.*, 1983, 50, 39–42.
- Varghese, A., Ramachandran, V. G. and Agarwal, D. S., *Indian J. Med. Res.*, 1984, 79, 35–40.
- Ram, S., Khurana, S., Singh, R., Sharma, S. and Vadehra, D. V., Indian J. Med. Res., 1987, 86, 9-13.
- Toora, S., Bala, A. S., Tiwari, R. P. and Singh, G., Folia Microbiol., 1989, 34, 151–156.
- Verma, N. K. and Misra, D. S., Indian J. Anim. Sci., 1984, 54, 659-662.
- 10. Singh, I. and Virdi, J. S., Curr. Sci., 1999, 77, 1019-1021.
- Sinha, I., Choudhary, I. and Virdi, J. S., Curr. Sci., 2000, 79, 510–513.
- 12. Schiemann, D. A., Can. J. Microbiol., 1979, 25, 1298-1304.
- Barrow, G. I. and Feltham, R. K. A. (eds), Cowan and Steel's Manual for Identification of Medical Bacteria, Cambridge University Press, Cambridge, 1993, 3rd edn, pp. 94–164.
- Burnens, A. P., Frey, A. and Nicolet, J., *Epidemiol. Infect.*, 1996, 116, 27–34.
- Robins-Browne, R. M. et al., Infect. Immun., 1993, 61, 764

 767.
- Grant, T., Bennett-Wood, V. and Robins-Browne, R. M., Infect. Immun., 1998, 66, 1113–1120.
- Grant, T., Bennett-Wood, V. and Robins-Browne, R. M., Infect. Immun., 1999, 67, 4367–4375.
- Greenwood, M. H. and Hooper, W. L., *Epidemiol. Infect.*, 1990, 104, 345–350.

- Bissett, M. L., Powers, C., Abbott, S. L. and Janda, J. M., J. Clin. Microbiol., 1990, 28, 910–912.
- 20. Sulakvelidze, A., Microbes Infect., 2000, 2, 497-513.

ACKNOWLEDGEMENTS. We thank Dr M. K. Bhan and members of ORU and DTU unit for their help in collection of clinical samples. We thank Dr Elisabeth Carniel, Director, WHO *Yersinia* Reference Center, Pasteur Institute, Paris for serotyping of clinical isolates. The study was supported by ICMR-SRF to I.S. and by a research project of DST to J.S.V.

Received 4 October 2002; revised accepted 7 January 2003

Microstructural and fluid inclusion constraints on the evolution of Jakhri Thrust Zone in the Satluj valley of NW Himalaya

A. K. Pandey* and N. S. Virdi

Wadia Institute of Himalayan Geology, Dehra Dun 248 001, India

The regional structures, microstructure and fluid inclusion trail pattern have been employed to work out the evolution of the Jakhri Thrust Zone (JTZ) exposed in the Satluj valley of NW Himalaya. It is a NEdipping, SW-propagating out-of-sequence thrust cutting across the folded Lesser Himalayan crystalline nappe and lies in the seismically active inner Lesser Himalayan zone. The recrystallization microstructure in the footwall quartzite suggests deformation in the lower green schist facies condition with a progressively decreasing finite strain away from the thrust. The microstructures and fluid inclusion trails (secondary) show analogous pattern and have formed during the same deformation event in the footwall. The CO2-H2O and H2O-NaCl fluid inclusions have been identified. The former has been re-equilibrated during the peak deformation whereas the latter has evolved and been re-equilibrated during exhumation. The isochores of CO₂-H₂O and H₂O-NaCl inclusions suggest an isothermal exhumation path from a depth of ~15-17 km, considering a lithostatic condition. These results suggest that the JTZ is a deep-seated thrust, probably a steep imbrication on the main decollement fault.

THE Jakhri Thrust Zone (JTZ) lies in the Satluj valley of NW-Himalaya (Figure 1). The tectonic status of the JTZ is debated and recent fission track data on zircon-apatite cogenetic pairs from the hanging wall of the JTZ suggest it to be active during past < 4.5 Ma (ref. 1), which is younger than the age MBT, i.e. ca. 10 Ma (ref. 2). The

^{*}For correspondence. (e-mail: anandkumarpandey@rediffmail.com)