Campylobacter species occurrence within internal organs and tissues of commercial caged Leghorn laying hens

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ABSTRACT Campylobacter spp. are frequently present in the intestinal tract and internal tissues of broiler breeder and broiler chickens. Campylobacter spp. ecology in commercial Leghorn laying hens has not been extensively studied. The objectives of the current study were to determine 1) Campylobacter spp. presence in the reproductive tract, lymphoid organs, liver-gallbladder, and ceca of commercial Leghorn laying hens; 2) species of Campylobacter present; and 3) antimicrobial resistance pattern of Campylobacter isolates. In study 1, three flocks ranging from 94 to 105 wk of age were sampled from a commercial laying complex. In study 2, two flocks, 82 and 84 wk of age, were sampled from a separate complex. Hens were killed, defeathered, aseptically necropsied, and the spleen, liver-gallbladder, ovarian follicles, and upper (infundibulum, magnum, and isthmus) and lower (shell gland and vagina) reproductive tracts were aseptically removed before the ceca. Samples were packed on ice and transported to the laboratory for evaluation. For speciation, a standard BAX real-time PCR method was used while susceptibility testing was performed using US National Antimicrobial Resistance Monitoring System (NARMS) standards and recommended quality control organisms. Isolates were examined for susceptibility using a semi-automated testing system (Sensititer) to the following 9 antimicrobials: azithromycin, clindamycin, ciprofloxacin, erythromycin, florfenicol, gentamicin, nalidixic acid, telithromycin, and tetracycline. In study 1, the isolation rate was 13, 67, 53, 3, 13, and 57% from the ovarian follicles, lower reproductive tract, upper reproductive tract, spleen, liver-gallbladder, and ceca, respectively. In study 2, the isolation rate was 17, 43, 33, 20, 17, and 73% from the ovarian follicles, lower reproductive tract, upper reproductive tract, spleen, liver-gallbladder, and ceca, respectively. Overall, 50% of isolates were Campylobacter jejuni, 40% Campylobacter coli, and 1% Campylobacter lari. In study 1, all of the isolates were pan-susceptible. In study 2, thirty-seven percent of the isolates were resistant to tetracycline. Commercial table egg laying hens housed in colony cages on wire floors had diverse Campylobacter spp. recovered from different tissues and these isolates were not resistant to a broad range of antimicrobials.

Key words: Campylobacter, antimicrobial resistance, caged laying hen, internalization, ceca

INTRODUCTION

For approximately 4 decades, the genus Campylobacter has had increased focus as a threat to food safety because of the rise in gastroenteritis in humans caused by consumption or handling of foods contaminated with the organism. Approximately 70% of human illnesses due to Campylobacter spp. are caused by the consumption or handling of raw or undercooked poultry or poultry products (Mead et al., 1999; Friedman et al., 2000). In an analysis of foodborne outbreak data from 1988 to 2007 in which Campylobacter spp. were the etiological agent, 36% of outbreaks were linked to poultry products (Greig and Ravel, 2009). The infectious dose for campylobacters can be a few hundred cells (Black et al., 1988). Even though Campylobacter spp. are sensitive to drying, high oxygen concentration, and low pH (≤4.7), they are still a major cause of human bacterial gastroenteritis. In the United States, approximately 2.5 million people are infected each year due to consumption of foods containing campylobacters (Mead et al., 1999). In 2008, the number of human infections with Campylobacter spp. was estimated at 12.68 per 100,000 people in the United States (Anonymous, 2009). Four species (Campylobacter jejuni, Campylobacter coli, Campylobacter lari, and Campylobacter upsaliensis) are known as thermotolerant campylobacters and are clinically significant due to their association as dominant...
causative agents of human campylobacteriosis (Blaser et al., 1982; Jacobs-Reitsma, 2000; Keener et al., 2004). *Campylobacter jejuni* is the predominant species that causes bacterial gastroenteritis in the United States and in many other developed countries, with *C. coli* being second (Lastovica, 2006).

The number of contaminated broilers accounts for the high *Campylobacter* spp. prevalence in poultry processing plants and on processed carcasses (Jacobs-Reitsma, 2000; Allen et al., 2007). In 2002, 35 US broiler flocks were evaluated and *Campylobacter* was recovered from 32 out of 35 of the flocks (Cox et al., 2002a). The average prevalence rate of infected flocks in a separate survey comparing multiple studies was 44 to 59% (Humphrey et al., 2007; Nauta and Havelaar, 2008). In 2007, 8 US poultry processing plants were evaluated and the overall prevalence rate of broiler carcasses contaminated with *Campylobacter* spp. before entering the chiller was 99% and 84% of carcasses were positive postchill (Richardson et al., 2009). The average *Campylobacter* spp. prevalence rate on raw chicken comparing multiple studies was 57% at retail with a range of 23 to 100% (Humphrey et al., 2007). In a separate study, comparing information from 7 different studies and evaluation of 1,167 samples, *Campylobacter* prevalence on retail poultry was determined to be 71.5% in the United States (Suzuki and Yamamoto, 2009). The high colonization of poultry, presence on retail poultry, and the resultant clinical infection in humans have prompted several investigations focused upon identifying and subsequently eliminating sources of *Campylobacter* spp. contamination in poultry flocks (Solomon and Hoover, 1999).

In chickens, the main colonization site of *Campylobacter* spp. is the mucous layer within the lower intestinal tract overlying the epithelial cells in the ceca and cloacal crypts (Meinersmann et al., 1991). *Campylobacter* spp. once colonized within the intestines can be found in levels up to $10^9$ cfu/g of fecal content (Altekruse et al., 1999). Current studies have found that *Campylobacter* spp. are present in various organs and tissues within commercial broilers and broiler breeders. In commercial broiler breeder hens, *C. jejuni* and *C. coli* were isolated from mature and immature ovarian follicles and from all segments of the reproductive tract (Jacobs-Reitsma, 1997; Carmarda et al., 2000; Buhr et al., 2002; Cox et al., 2005). *Campylobacter* spp. have been recovered from primary (thymus) and secondary (spleen) lymphoid organs as well as from the liver-gall-bladder of commercial broilers and broiler breeder laying hens (Cox et al., 2006a, 2007).

Antibiotics have been used to treat animals and humans since their discovery. Erythromycin is a drug used to treat humans for gastrointestinal campylobacteriosis but fluoroquinolone and ciprofloxacin are also effective (Blaser, 1995). The increased resistance of this organism to these drugs could become a threat to public health (Randall et al., 2003). Therefore, it is important to evaluate *Campylobacter* spp. in different poultry operations to determine differences in antimicrobial resistance patterns (Ge et al., 2003; Randall et al., 2003; Price et al., 2005). Randall et al. (2003) found that out of 443 poultry isolates, 3.8% of *C. coli* and 3.3% of *C. jejuni* had resistance to 3 or more antibiotics. In a study by Price et al. (2005), they found that 84% of the chicken products tested were *Campylobacter*-positive and fluoroquinolone-resistant strains were detected in 40% of the isolates. In a comparison study, the prevalence of ciprofloxacin-resistant *Campylobacter* was 13% in 1997 and 19% in 2001 and erythromycin-resistant *Campylobacter* was unchanged during that same period at 2% (Gupta et al., 2004).

Based on surveys by public health authorities in industrialized countries and available epidemiological information, table eggs are not regarded as a significant vehicle of foodborne *Campylobacter* infection for consumers (Shane and Stern, 2003). Greig and Ravel (2009) analyzed foodborne outbreak data from 1988 to 2007 reported internationally for source attribution and 1.6% of *Campylobacter* outbreaks originated from eggs. In regard to total egg outbreaks, *Campylobacter* contributed to 0.6% of the 584 outbreaks and 97.4% were attributed to Salmonella (Greig and Ravel, 2009). The ecology of *Campylobacter* spp. within commercial caged laying hens has not been completely investigated due to the low rate of *Campylobacter* outbreaks associated with eggs. In addition, the presence of *Campylobacter* spp. within internal organs and tissues has not been investigated. A few studies have evaluated the natural presence of *Campylobacter* spp. in commercial caged laying hens and table eggs (Doyle, 1984; Papadopoulos, 1997; Adesiyun et al., 2005; Jones and Musgrove, 2007). *Campylobacter jejuni* can colonize and persist in the ceca of caged Leghorn hens for at least 42 wk (Doyle, 1984). Surveying pooled commercial egg samples from 23 poultry layer farms located in Trinidad, *Campylobacter* spp. were isolated from 1% of samples (Adesiyun et al., 2005). *Campylobacter* spp. were recovered from 0.5% of commercial table eggs tested in the United States (Jones and Musgrove, 2007).

*Campylobacter* spp. prevalence within commercial table eggs is low, whereas the prevalence and ecology within commercial laying flocks has not been fully elucidated. Susceptibility of *Campylobacter* isolates originating from commercial laying hen operations to certain antimicrobials is also unknown. The objectives of the study were to determine *Campylobacter* spp. prevalence in reproductive tracts, lymphoid organs, liver-gallbladder and ceca of commercial caged Leghorn laying hens, *Campylobacter* species present, and antimicrobial resistance profile of the isolates.

**MATERIALS AND METHODS**

**Experimental Design**

To evaluate the presence of *Campylobacter* spp. in commercial in-line caged laying hens (n = 60), 2 studies
were conducted at 2 separate commercial complexes. In study 1, three flocks (10 birds/flock), 98, 102, and 104 wk of age, were sampled from 1 laying complex. Flocks 1, 2, and 3 were sampled in May, June, and July, respectively. In study 2, two flocks (15 birds/flock), 82 and 84 wk of age, were sampled from a separate laying complex. Flock 4 was sampled in September, whereas flock 5 was sampled in October. Hens were killed, defleshed, necropsied, and the spleen, liver-gallbladder, ovarian follicles (mature and immature) and upper (infundibulum, magnum, and isthmus) and lower (shell gland and vagina) reproductive tracts were aseptically removed in sequential order before the ceca using aseptic techniques described previously (Cox et al., 2006a). Samples were packed on ice and transported to the laboratory for evaluation.

**Laboratory Procedure**

The spleen, live-gallbladder, ovarian follicles, upper and lower reproductive tracts, and ceca were individually weighed. The samples within plastic bags were then macerated with a rubber mallet to ensure that the contents of the samples were exposed. Bolton’s enrichment broth (Acumedia Manufacturers Inc., Baltimore, MD, containing 5% lysed horse blood) was added to the sample bags at a ratio of 3 times the weight of the sample and then stomached (Technar Company, Cincinnati, OH) for 1 min. A 0.1-mL solution of each sample was then direct-plated by streaking in duplicate onto campy-cefex agar plates (Acumedia Manufacturers, Inc.) incubated in a microaerobic atmosphere (5% O2, 10% CO2, 85% N; Airgas, Athens, GA) at 42°C for 48 h. The enrichment samples were also incubated in a microaerobic atmosphere at 42°C for 48 h. A 0.1-mL solution from the enrichment broth of samples negative by direct plating was streaked in duplicate onto campy-cefex agar plates (Acumedia Manufacturers Inc.) and incubated microaerobically at 42°C for 48 h. From plates, suspect colonies (1 to 3) were picked and for presumptive identification, microscopic observation of characteristic spiral cells and tumbling motility in wet mount preparations was performed. The colonies were confirmed *Campylobacter* through latex agglutination (Panbio Inc., Columbia, MD). Isolated colony-forming units were then picked and streaked for isolation onto blood agar (Remel, Lenexa, KS) and incubated microaerobically at 42°C for 48 h. Pure cultures were then placed onto bacterial preservers (treated beads in a cryopreservative fluid) and stored in an ultralow freezer until no growth was visible. The antimicrobials tested and the resistance breakpoints (minimum inhibitory concentrations) are shown in Table 1.

**Campylobacter Speciation**

Isolates were obtained from the −80°C freezer, placed onto campy-cefex agar, and incubated for 48 h at 42°C in a microaerobic condition. The isolates were then picked and placed onto blood agar plates and incubated at 42°C for 24 h. Template DNA was prepared by picking 3 to 4 colonies from a plate using a sterile disposable plastic loop and suspending these cells in 200 μL of Qualisciences lysis buffer in 1.1-mL plastic tubes (Simport BiTubes, Simport Plastics, Beloeil, Quebec, Canada). A proteinase solution (Qualicon) was added (12.5 μL/mL) to the lysis buffer just before use. The cell suspensions were vortexed briefly and then heated for 20 min at 37°C in a digitally controlled heat block (TruTemp DNA Microheating System, Robbins Scientific, Sunnyvale, CA) to lyse the cells. The tubes were then transferred to a 95°C heat block for a 10-min incubation to inactivate the proteinase. After heat treatment, the lysates were cooled in a 4°C block and either used directly in the BAX system (Dupont Qualicon, Wilmington, DE) or stored frozen at −20°C until needed.

For real-time PCR assay, the reactions were assembled by adding 30 μL of the prepared lysate solutions to 200-μL strip tubes (Dupont Qualicon) held in a 4°C cold block. Each tube held a reagent tablet containing Tag DNA polymerase, deoxyribonucleoside triphosphate, and 2 forward and reverse primer sets (proprietary to Dupont Qualicon), one specific for *C. jejuni*, one specific for *C. coli*, and one specific for *C. lari*. The sealed PCR tubes were then placed in the BAX system Q7 instrument for speciation.

**Antimicrobial Susceptibility Testing**

Susceptibility testing of *Campylobacter* isolates was achieved using the protocol established for the US National Antimicrobial Resistance Monitoring System for Enteric Bacteria. The *Campylobacter* panel, providing serial dilutions of each antimicrobial and a Sensititer semiautomated system (Trek Diagnostic Systems Inc., Cleveland, OH), was used according to directions of the manufacturer. The *Campylobacter* isolates were obtained from −80°C storage and subcultured on blood agar plates (Remel) then incubated microaerobically at 42°C for 48 h. *Campylobacter* colonies were suspended in Mueller-Hinton broth (Trek Diagnostic Systems Inc.) until suspension turbidity was adjusted to match a 0.5 McFarland standard. From a 0.5 McFarland suspension, 100 μL was transferred into 11 mL of Mueller-Hinton broth containing lysed horse blood (Trek Diagnostic Systems Inc.) and used to inoculate the 96-well panel to give a final concentration of 105 cfu/mL. *Campylobacter* panels included a control well with no antimicrobial drug. All panels were incubated in a microaerobic environment using anaerobe jars at 37°C for 48 h. Quality control ATCC strain *C. jejuni* 33560 was tested to confirm susceptibility to all of the antimicrobials at each testing. The minimum inhibitory concentration for each antimicrobial was read as the first panel well in which no growth was visible. The antimicrobials tested and the resistance breakpoints (minimum inhibitory concentrations) are shown in Table 1.
Table 1. Minimum inhibitory concentrations for antimicrobial susceptibility testing of the Campylobacter isolates recovered from Leghorn laying hens

<table>
<thead>
<tr>
<th>Antimicrobial</th>
<th>Resistant breakpoint (µg/mL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Azithromycin</td>
<td>≥8</td>
</tr>
<tr>
<td>Ciprofloxacin</td>
<td>≥4</td>
</tr>
<tr>
<td>Clindamycin</td>
<td>≥8</td>
</tr>
<tr>
<td>Erythromycin</td>
<td>≥32</td>
</tr>
<tr>
<td>Florfenicol</td>
<td>≥4</td>
</tr>
<tr>
<td>Gentamicin</td>
<td>≥8</td>
</tr>
<tr>
<td>Nalidixic acid</td>
<td>≥64</td>
</tr>
<tr>
<td>Gentamicin</td>
<td>≥8</td>
</tr>
<tr>
<td>Telithromycin</td>
<td>≥16</td>
</tr>
<tr>
<td>Tetracycline</td>
<td>≥16</td>
</tr>
</tbody>
</table>

1Minimum inhibitory concentrations determined via broth microdilution methods according to National Committee on Clinical Laboratory Standards standards or by breakpoint interpretations used in the National Antimicrobial Resistance Monitoring System.

Table 2. Campylobacter spp. prevalence in the internal organs and tissues of Leghorn laying hens from 2 commercial laying operations

<table>
<thead>
<tr>
<th>Flock¹</th>
<th>Age²</th>
<th>Month³</th>
<th>Sample site⁴</th>
<th>L/G⁵</th>
<th>Follicle⁶</th>
<th>UR⁷</th>
<th>LR⁸</th>
<th>Ceca</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>98</td>
<td>May</td>
<td>Spleen</td>
<td>0/10</td>
<td>0/10</td>
<td>5/10</td>
<td>6/10</td>
<td>2/10</td>
</tr>
<tr>
<td>2</td>
<td>102</td>
<td>June</td>
<td>Spleen</td>
<td>0/10</td>
<td>0/10</td>
<td>5/10</td>
<td>6/10</td>
<td>7/10</td>
</tr>
<tr>
<td>3</td>
<td>104</td>
<td>July</td>
<td>Spleen</td>
<td>2/10</td>
<td>3/10</td>
<td>7/10</td>
<td>8/10</td>
<td>7/10</td>
</tr>
<tr>
<td>4</td>
<td>82</td>
<td>September</td>
<td>Spleen</td>
<td>1/15</td>
<td>1/15</td>
<td>4/15</td>
<td>7/15</td>
<td>8/15</td>
</tr>
<tr>
<td>5</td>
<td>84</td>
<td>October</td>
<td>Spleen</td>
<td>3/15</td>
<td>4/15</td>
<td>3/15</td>
<td>8/15</td>
<td>8/15</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td>6/60</td>
<td>11/60</td>
<td>9/60</td>
<td>28/60</td>
<td>30/60</td>
</tr>
</tbody>
</table>

1²Within a row, means with different letters are significantly different (P < 0.05, χ² test for independence).
1³Flocks 1 to 3 originated from 1 commercial in-line egg operation and flocks 4 and 5 originated from a separate commercial in-line operation.
1⁴Age represented in weeks of age.
1⁵Month sampled for each flock.
1⁶Prevalence represented as the number of Campylobacter-positive samples over total number of samples taken.
1⁷Liver and gallbladder composite sample.
1⁸Immature and mature ovarian follicle composite sample.
1⁹Upper reproductive tract consisting of the infundibulum, magnum, and isthmus.
20Lower reproductive tract consisting of the shell gland and vagina.

RESULTS

The isolation rate of Campylobacter spp. from the ovarian follicles, lower reproductive tract, upper reproductive tract, spleen, liver-gallbladder, and ceca from laying hens from the 2 commercial laying complexes is shown in Table 2. No significant (P > 0.05) difference was observed between the 2 commercial laying operations in the total number of Campylobacter isolates recovered. From the 30 birds sampled from 1 commercial laying operation, 63 out of 180 samples were positive for Campylobacter spp. From the 30 birds from the second operation, 53 out of 180 samples were positive for Campylobacter spp. Significantly (P < 0.05) more Campylobacter isolates were recovered from the upper and lower reproductive tract along with the ceca compared with the spleen, liver-gallbladder, and ovarian follicles. Table 3 shows the proportion of hens that had Campylobacter spp. in multiple sample sites. Significant (P < 0.05) difference was observed in the number of sample sites within a hen where Campylobacter spp. were recovered. In most of the Campylobacter-positive hens, Campylobacter spp. were present in only 1 to 3 sample sites. In a few birds, Campylobacter spp. were present in 4 to all 6 sample sites.

The proportion of Campylobacter spp. recovered within the internal tissue and organs of the laying hens is shown in Table 4. All 3 species evaluated using the BAX system (C. jejuni, C. coli, and C. lari) were isolated and no other species were present. Significantly (P < 0.05) more C. jejuni and C. coli were recovered from the sample sites compared with C. lari. No significant (P > 0.05) difference was observed between C. jejuni and C. coli isolation. Also, no significant (P > 0.05) differences were observed in the type of species recovered between commercial complexes. The most observed Campylobacter species was C. jejuni, then C. coli and only 1 C. lari isolate. Sixty-three out of 125 isolates were C. jejuni and 61 out of 125 were C. coli. Multiple Campylobacter species were observed in certain sampling sites. Co-colonization of C. jejuni and C. coli was observed 5 times in the lower reproductive tract and 2 times in the upper reproductive tract and ceca from a single hen. Thirteen of the hens were colonized with multiple Campylobacter species and C. jejuni and C. coli were isolated from 12 of the hens and 1 hen with C. jejuni and C. lari.

Statistical Analysis

Data are represented as the number of positive samples over the total number of samples taken. The χ² test for independence (InStat 3.0, GraphPad Software Inc., San Diego, CA) was used to evaluate differences in Campylobacter spp. prevalence by flock, sample site, and complex. Fisher's exact test (InStat 3.0, GraphPad Software Inc.) was used whenever the expected frequencies fell below 5%. Significance of data was set at P ≤ 0.05.
The number of Campylobacter isolates that exhibited resistance to each of the 9 antimicrobials is shown in Table 5. Campylobacter isolates recovered from the 2 commercial laying operations did not have a broad range of resistance to the tested antimicrobials. From flocks 1, 2, and 3 originating from 1 commercial table egg complex, all isolates were pan-susceptible to the 9 tested antimicrobials. In flock 2, a C. jejuni isolate had intermediate resistance to tetracycline and from flock 3, a C. lari isolate had intermediate resistance to nalidixic acid. Both of these isolates originated from the upper reproductive tract. From flocks 4 and 5 originating from a different commercial table egg complex, most of the isolates were pan-susceptible to all of the antimicrobials tested except for tetracycline. In flock 4, two C. jejuni isolates were resistant to tetracycline and one originated from the ceca and the other from the upper reproductive tract of different hens. The majority of resistant isolates to tetracycline was observed in flock 5 with 52% of isolates recovered within birds exhibiting resistance. Fourteen C. jejuni isolates were resistant to tetracycline with 1, 2, 2, 2, 3, and 4 originating from the lower reproductive tract, upper reproductive tract, spleen, liver-gallbladder, ovarian follicles, and ceca, respectively. Two C. coli exhibited resistance to tetracycline and one was from the upper reproductive tract and the other from the lower reproductive tract within different hens.

### DISCUSSION

It is apparent that *Campylobacter* spp. can be found within primary and secondary lymphoid organs along with the reproductive and digestive tract at a high prevalence rate in Leghorn laying hens originating from commercial facilities. The prevalence rate between the 2 commercial egg laying operations was similar along with the types of *Campylobacter* species recovered. Interestingly, even though there are considerable differences in the management and husbandry practices of Leghorn laying hens compared with broilers and broiler breeder hens (i.e., caged vs. litter vs. slat-litter), the isolation rate was similar between these operation types. In the broiler, *C. jejuni* and *C. coli* are naturally recovered from 20% of the spleen, 17% of the liver-gallbladder, and up to 32% of the unabsorbed yolks of commercial broilers at market age (Cox et al., 2006b, 2007). Naturally occurring *Campylobacter* spp. were recovered from 26% of the thymuses, 19% of the spleens, and 9% of the liver-gallbladders in commercial broiler breeder hens (Cox et al., 2006a). Cox et al. (2005) isolated *Campylobacter* spp. naturally from 26% of the mature and 12% of the immature ovarian follicles of commercial broiler breeder hens. Buhr et al. (2002) found that an increased number of positive samples was observed as sampling moved down the different segments of the reproductive tract toward the vagina and concluded that...
fetal retrograde contamination could be playing an important role in this trend. In a 2002 study, over 9% of semen samples from commercial breeder roosters were found to naturally be contaminated with *Campylobacter* spp. as high as 3 log10 CFU/mL (Cox et al., 2002b). These data suggested that rooster semen may serve as a vehicle for transmitting *Campylobacter* spp. to the reproductive tract of the broiler breeder hen. However, in this present study, there was no rooster to hen interactions.

In 1992, approximately 99% of the clinical cases in the United States were found to be *C. jejuni*, whereas *C. coli* comprised the other 1% of clinical cases (Tauxe, 1992). In a more recent study, 95% of human isolates were found to be *C. jejuni*, 4% *C. coli*, and 1% were other *Campylobacter* species (Gupta et al., 2004). From the National Antimicrobial Resistance Monitoring System surveillance data from 1999 to 2004, it was discovered that out of 2,037 isolates obtained from chicken rinse samples, 66% of the isolates were *C. jejuni* and 34% of the isolates were *C. coli*. From breeder hen isolates, 53% of the isolates recovered were *C. jejuni* and the other 47% of isolates were *C. coli* (Cox et al., 2006a). *Campylobacter jejuni*, *C. coli*, and *C. lari* were isolated from the Leghorn laying hens and the isolation rate was similar to that found in the above studies. However, it was not determined in any of the studies if certain laboratory methodology procedures (i.e., gas mixture during incubation) may have preferentially selected for recovery of *C. jejuni* and *C. coli* while excluding the chances of recovering other species (Lastovica, 2006). *Campylobacter jejuni* and *C. coli* were not found exclusively in a Leghorn laying hen sample site and colonization of internal organs does not appear to be species related.

In Leghorn laying hens, a wide range of resistance to antimicrobials was not observed. Antimicrobial-resistant strains were not limited to 1 sampling site and were found throughout different tissues within a bird. Tetracycline-resistant *C. jejuni* and *C. coli* were present in 2 flocks originating from 1 commercial laying complex with the majority of the isolates coming from one of the flocks. An increase in tetracycline resistance in *C. jejuni* and *C. coli* strains has been observed in recent years (Luangtongkum et al., 2008). Ge et al. (2003) found that out of 378 *Campylobacter* isolates, resistance to tetracycline was most common at 82%, then doxycycline (77%), erythromycin (54%), nalidixic acid (41%), and ciprofloxacin at 35%. Tetracycline is a broad-spectrum antibiotic that is widely used in human and veterinary medicine (Avrain et al., 2004). The main mechanisms of tetracycline resistance in *Campylobacter* species is a ribosomal protection protein Tet(O) (Taylor and Courvalin, 1988). Tetracycline-resistant *Campylobacter* have been recovered from organic and other production systems in which no antibiotics have been used, which indicates that prior or current use may not be a defining attribution to resistance (Piddock et al., 2000; Luangtongkum et al., 2006). Even though broad-range resistance was not observed with Leghorn laying hen isolates, *Campylobacter* resistance to multiple antibiotics has been observed in broiler operations (Fallon et al., 2003; Son et al., 2007; Gyles, 2008). To better elucidate *Campylobacter* antimicrobial resistance in poultry, the majority of information acquired has been from broiler or turkey carcasses. Further evaluation of the antimicrobial resistance patterns of *Campylobacter* isolates from several different types of poultry rearing and processing environments could help better define the epidemiology and ecology of antimicrobial resistance in poultry.

Strain diversity within *Campylobacter* spp. has been well documented (Meinersmann et al., 1997; Rivoal et al., 2005; Hiett et al., 2007). Genetic characterization of the isolates was not performed, but when completed, this may provide useful knowledge on the epidemiology and ecology of these *Campylobacter* isolates. *Campylobacter* spp. can adhere to and invade chicken intestinal epithelial cells (Hanel et al., 2004; Byrne et al., 2007). *Campylobacter* strains that were more invasive were recovered from the liver of the chickens (Byrne et al., 2007). In vitro methods using epithelial cells have been beneficial in evaluating host-bacterial interactions and bacterial virulence (Elsinghorst, 1994; McCormick, 2003; Fris et al., 2005). Invasion into chicken epithelial cells by *Campylobacter* strains has been shown to be highly variable (Biswas et al., 2000; Carvalho et al., 2001; Hanel et al., 2004; Byrne et al., 2007). The
findings from the current study further suggest that *Campylobacter* invasion or dissemination, or both, into the tissues and organs does occur.

In summary, this study reveals the dynamic nature of *Campylobacter* spp. A high prevalence rate of *C. jejuni* and *C. coli* was observed in the 5 flocks evaluated from the 2 commercial laying operations. Presence in organs and tissues within Leghorn hens was similar to that found in other poultry even after several months in a caged environment. Tetracycline-resistant *Campylobacter* was most often observed. Surveys by public health authorities have led to table eggs not being regarded as a vehicle of foodborne *Campylobacter* infection, but it is still important to have an understanding of the ecology of these organisms in laying operations and the potential threat it may pose.

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