



Bacterial endoftalmitis caused by *Serratia* sp. in a bunny (*Oryctolagus cuniculus*)

<https://doi.org/10.56238/homeIIsevenhealth-147>

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1 INTRODUCTION

Bacterial endophthalmitis is a rare inflammation (TANAKA, 2019) that causes destruction and necrosis (TANAKA et al., 2011) of the structural components of the eyeball, through the penetration of infectious agents (JAIN et al., 2009; TIECCO et al., 2022) to the posterior segment of the eye, mainly after intraocular surgeries (CARVALHO et al., 2017; TRAD et al., 2022), 2022) to the posterior segment of the eye, mainly after intraocular surgeries (CARVALHO et al., 2021), trauma and systemic diseases (DURAND, 2017; TRAD et al., 2018; PUJARI et al., 2022), leading to vision loss (COELHO et al., 2015) and in more severe cases, enucleation (JACKSON, T. L. et al., 2014; JACKSON, TIMOTHY L. et al., 2014).

The main clinical signs are blepharospasm, blepharedema, conjunctival hyperemia, corneal edema, hypopyon and conjunctival discharge, and corneal ulcer may occur (NES, 2018; WINARTI et al., 2021; AGRAWAL, 2022; XIE et al., 2022). Culture (BARBOSA et al., 2017; CAIADO et al., 2020) and histopathological analysis (NEVES et al., 1990; GALERA et al., 2017) are diagnostic methods used for pathogen identification and confirmation of endophthalmitis (MEREDITH et al., 1990; SCHIRMBECK et al., 2000; GUERRA et al., 2012).

It is a disease of difficult treatment, which is usually performed through the association of broad-spectrum antimicrobials with topical and systemic corticosteroids, in addition to supportive treatment (CIULLA et al., 1999; TANAKA et al., 2019; PINTO et al., 2020; SINGH et al., 2022).

2 OBJECTIVE

To report a case of bacterial endophthalmitis caused by *Serratia* sp. in a domestic rabbit (*Oryctolagus cuniculus*) treated in a veterinary ophthalmology service.

3 METHODOLOGY

Literature Search Method

We searched for articles in the literature written in English and Portuguese, as well as English translations of articles in other languages with the combination of keywords, *Serratia*, rabbit, endophthalmitis and gatifloxacin, in Medline, Lilacs, OPAS and SciELO through Google Scholar and by direct search, without temporal clipping, with refinement to the last five years, when possible.

Individual case reports, case series and literature reviews on *Serratia* sp. induced endophthalmitis in all species were selected. Cross-references of those articles not highlighted in the cited research databases were also obtained and reviewed.

Case Report

This case report used information from the care records, history and medical records of a case attended by the veterinary ophthalmology mobile service. Animal models, experiments or any other intentional intervention in animals other than those described here were not used during the specialized clinical care. The person responsible for the animal authorized the disclosure of information and images for scientific dissemination purposes, respecting ethical criteria regarding personal information.

A domestic rabbit, *Oryctolagus cuniculus*, an uncastrated male, aged 3 years and 7 months, was treated at the mobile veterinary ophthalmology service in Brasília, Federal District, Brazil.

The patient had a history of possible perforating trauma to the left eye (LE) and at the time of consultation presented with blepharospasm, blepharedema, conjunctival hyperemia, corneal edema, serous secretion and hypopyon (figure 1).

Figure 1. Clinical photograph of the left eye of *Oryctolagus cuniculus* showing blepharospasm, blepharedema, conjunctival hyperemia, corneal edema, serous discharge and hypopyon.



During anamnesis, the guardian described the patient's history. According to him, the animal was already on previous systemic treatment with Enrofloxacin and Meloxicam. Unfortunately, the guardian could not inform the dosage or dosage of each drug.

In the ophthalmologic examination, the pupillary reflex, threat test and walking test were positive in both eyes (AO). The Schirmer tear test (SLT) (NASCIMENTO, 2019; DIAS et al., 2020; BORGES et al., 2021) was performed only in the right eye (RE) with a result of 3mm/min. The fluorescein test was positive and the Seidel test was negative for RE (DÍAZ BARRÓN et al., 2020; SEVILLANO et al., 2020; BASTOS et al., 2021).

Tonometry was performed with TonoVet® Plus (GLOE et al., 2019) to measure intraocular pressure (IOP), which resulted in 34mmHg for EW and 15mmHg for OD. CBC (Figure 2) revealed erythrocytosis, hyperproteinemia, relative monocytosis and presence of reactive lymphocytes (antigenic stimulation).

Figure 2 - CBC showing erythrocytosis, hyperproteinemia, relative monocytosis and presence of reactive lymphocytes.

Data Entrada...: 26/01/2021	Raça...: COELHO		
Nome: GUCCI	Idade...: 1 Ano(s)		
Especie....: COELHO	Mes(es)		
Sexo.....: MACHO	Dia(s)		
Prop.: RENATA			
	Médico Vet...: HANS REUTER		
	Clinica Vet.: EXOTIC LIFE		
<hr/>			
HEMOGRAMA COELHO			
<hr/>			
Eritrograma			
Hemácias	8,45	VALORES DE REFERÊNCIA	4,0 - 8,0 x10 ¹² /ul
Hemoglobina	17,23		8 - 17 g/dl
Volume Globular	54,00		30 - 50 %
VCM	63,90		38 - 65 fl
CHCM	31,90		28 - 37 %
PPT	8,8		6 - 8 g/dl
Metarrubrícitos	0		0
 Extracitose			
Hiperproteinemia			
 Leucograma			
Leucócitos Totais	8,600 /mm ³	VALORES DE REFERÊNCIA	
		Relativo	A absoluto
			5,200 - 12,500/uL
Mielócitos	0 0,000	0%	0/uL
Metamielócitos	0 0,000	0%	0/uL
Bastonetes	0 0,000	0%	0/uL
Heterófilos	67 5,762	20 - 75 %	1,040 - 9,375/uL
Linfócitos	28 2,408	30 - 85 %	1,550 - 10,625/uL
Eosinófilos	0 0,000	0 - 4%	0 - 500/uL
Monócitos	5 0,430	0 - 4%	0 - 500/uL
Basófilos	0 0,000	0 - 7%	0 - 875/uL
 Monocitose relativa			
Presença de linfócitos reativos (estimulação antígenica)			
 Plaquetas	512.000	250 a 650 mil/uL	
Presença de agregado plaquetário na amostra			
<hr/>			

Then, corneal material was collected with a swab (LEAL et al., 2021) in Stuart medium (STUART, 2020) for culture (LEBER, 2020) and antibiogram by the disk-diffusion method (BALOUIRI et al., 2016; CHIN et al., 2023). The clinical suspicion was intraocular abscess and the clinical diagnosis was uveitis and traumatic glaucoma. Treatment was initiated with Moxifloxacin eye drops (5.45mg/ml) every 4 hours for 7 days, and every 6 hours for another 10 days, EDTA 0.35% every 6 hours and Dorzolamide (20mg/ml), every 6 hours. After 15 days, the patient returned for reassessment, where it was seen that the EO showed intense neovascularization, negative fluorescein, cornea in keratoconus aspect, IOP 25mmHg and negative pupillary reflex (Figure 3).

Figure 3 Clinical photograph of the EO of *Oryctolagus cuniculus* showing intense neovascularization, keratoconus and negative pupillary reflex.



In view of the symptoms, an intrastromal abscess was suspected. To investigate this suspicion, ocular ultrasonography was requested, which was not authorized by the guardian. Culture and antibiogram (BELL; SMITH, 1975) of material collected from the cornea were performed. As a result, *Serratia* sp. was isolated with sensitivity to Ciprofloxacin, Chloramphenicol and Meropenem (Figure 4).

Figure 4 - Results of the culture of the material collected from the cornea of *Oryctolagus cuniculus* with isolation of *Serratia* sp. and antibiogram with sensitivity to Ciprofloxacin, Chloramphenicol and Meropenem.

Data Entrada..: 29/01/2021		
Nome	GUCCI	
Especie.....	COELHO	
Sexo.....	MACHO	
Prop.	RENATA	
Raça..:	COELHO	
Idade..: 3	Ano(s)	
	Mes(es)	
	Dia(s)	
Médico Vet.:	NÃO INFORMADO	
Clinica Vet.:	EXOTIC LIFE	
IDENTIFICAÇÃO BACTERIANA E ANTIBIOGRAMA		
Material analisado: Cornea		
Resultado		
Microorganismo isolado:	<i>Serratia</i> sp.	
Antibiograma - Teste de sensibilidade a antimicrobianos		
Meropenem: 26 mm	Sensivel
Ciprofloxacina: 25 mm	Sensivel
Cloramfenicol: 18 mm	Sensivel
Nemicina: 14 mm	Intermediário
Doxiciclina: 13 mm	Intermediário
Eurofloxacina: 13 mm	Resistente
Tobramicina: 9 mm	Resistente
Amoxicilina: 0 mm	Resistente
Amox + Clavulanato: 0 mm	Resistente
Cefalexina: 0 mm	Resistente

The therapeutic approach was adjusted, starting treatment with Gatifloxacin eye drops (3mg/ml) associated with Prednisolone (10mg/ml), every 6 hours, for 7 days, maintaining Dorzolamide (20mg/ml), every 6 hours. After 30 days of appropriate treatment, there were no significant changes in the blood count (Figure 5) and, therefore, the patient was submitted to the enucleation procedure.

Figure 5 - CBC taken 30 days after adjusted treatment showing erythrocytosis, hyperproteinemia and relative monocytosis.

Data Entrada..:	12/03/2021		
Nome	GUCCI	Raça..:	COELHO
Especie.....:	COELHO	Idade..:	3 Ano(s)
Sexo.....:	MACHO	Mes(es)	Dia(s)
Prop.	RENATA	Médico Vet..:	HANS REUTER
		Clinica Vet.:	EXOTIC LIFE

HEMOGRAMA COELHO

Eritrograma

		VALORES DE REFERÊNCIA
Hemácias	8,12	4,0 - 8,0 x10 ¹² /ul
Hemoglobina	17,40	8 - 17 g/dl
Volume Globular	51,00	30 - 50 %
VCM	62,80	58 - 65 fl
CHCM	34,11	28 - 37 %
PPT	9,2	6 - 8 g/dl
Metarrubrícitos	0	0

*Eritrocitose
Hiperoxteinemia*

Leucograma

Leucócitos Totais	8,900 /mm ³	VALORES DE REFERÊNCIA	
		Relativo	Absoluto
Mielócitos	0 0,000	0%	0/ul
Metamielócitos	0 0,000	0%	0/ul
Bastonetes	0 0,000	0%	0/ul
Heterófilos	57 5,073	20 - 75 %	1,040 - 9,375/ul
Linfócitos	35 3,115	30 - 85 %	1,560 - 10,625/ul
Eosinófilos	3 0,267	0 - 4%	0 - 300/ul
Monócitos	5 0,445	0 - 4%	0 - 300/ul
Basófilos	0 0,000	0 - 7%	0 - 875/ul

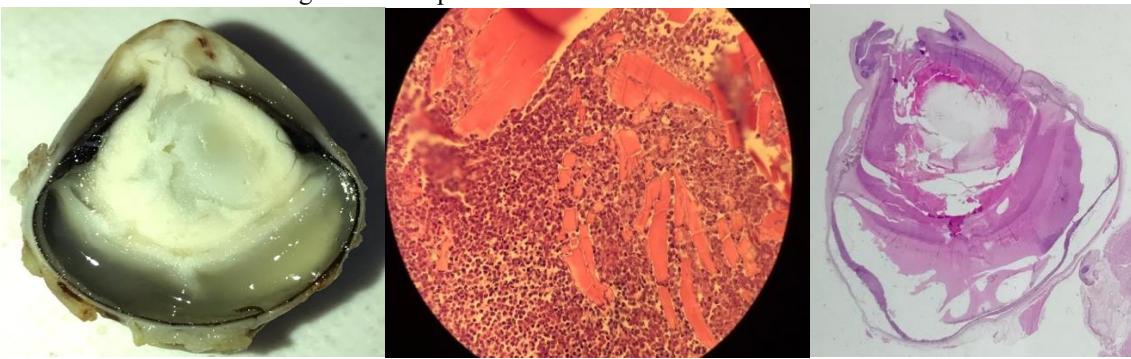
Monocitose relativa

Plaquetas **336.000** **250 a 650 mil/ul**

Presença de agregado plaquetário na amostra

Before surgery, during induction of anesthesia, the patient presented cardiorespiratory arrest due to probable sepsis. Resuscitation maneuvers were performed, but the patient did not respond and died shortly after. Enucleation was then performed to collect a corneal sample. The sample was sent for histopathologic diagnostic examination. The histopathology result was endophthalmitis with intralenticular abscess (Figure 6).

Figure 6: Endophthalmitis with intralenticular abscess.



4 DISCUSSION

The bacterium *Serratia* sp. is a rod (GRIMONT; GRIMONT, 1978; BIEDENBACH et al., 2004), Gram negative (SADER et al., 2014; SARALEGUI et al., 2020), from the Enterobactereaceae family (SOENENS; IMPERIAL, 2020; CASTRO-SAINES et al., 2022), saprophytic (HOFF, 1984; PAGANINI et al., 2021) opportunistic (NARENDRA KUMAR et al., 2023), described as causing nosocomial infections (FOX et al., 1981; MATSUSHITA et al., 2009), mainly in cases of pneumopathies (POOLE; CLARK, 2020; WALTERS et al., 2022), still little described in veterinary medicine (KECK et al., 2020).

Even so, there are already studies that point out the genus *Serratia* causing experimental infection and/or disease in an induced way, in nematodes (PRADEL et al., 2007), guinea pigs (LYERLY; KREGER, 1983; KAMATA et al., 1985; MOLLA et al., 1987), mice (CARLSON, 1983; LYERLY; KREGER, 1983; GONZÁLEZ-JUARBE et al., 2015), cats (PEDERSEN et al., 1998) and dogs (KUNSTYR; POSPISIL, 1962; MIYATA et al., 1980; OGILVIE et al., 1992).

In addition to these, there are also studies that point to natural infection and disease caused by the genus *Serratia* in other species, namely: birds (MÜLLER et al., 1986; POETA et al., 2016; KASHASH et al., 2022), cats (HOHENHAUS et al., 1997; KELLY et al., 2015; GUYONNET et al., 2019), dogs (FRANKE; RICHERT, 1944; WILKINS, 1973; PLAVEC et al., 2008; PEREZ et al., 2011; COALL et al., 2022; FRANCHINI et al., 2022), cattle (BARNUM et al., 1958; NICHOLLS et al., 1981; ISAKSSON; HOLMBERG, 1984; BOWMAN et al., 1986; WILSON et al. 1990; TODHUNTER et al., 1991; RUEGG et al., 1992; KAMARUDIN et al., 1996; DI GUARDO et al., 1997; SCHUKKEN et al., 2012; FRIMAN et al., 2019), molluscs (MÜLLER et al., 1995), turtles (HALL et al., 2022) and other reptiles, amphibians and fish (CLAUSEN; DURAN-REYNALS, 1937).

These studies report different types of diseases, which affect various structures of organs and systems, among which we can mention: ocular and pulmonary involvement; mastitis, transfusion reaction, abscess involving muscles and adjacent skin, among others.

Although experimental studies involving the genus *Serratia* in rabbits exist (BECKERDITE-QUAGLIATA et al., 1975; SIMBERKOFF et al., 1976; POINAR et al., 1979; LYERLY et al., 1981;

KREGER et al., 1986; BUGNON et al., 1996; HUME et al., 1999; PERRUCCI et al, 2005; MAH et al., 2007; ROMANOWSKI et al., 2021), no reports of infection and non-induced disease were found in *Oryctolagus cuniculus*, this being the first case reporting natural infection affecting the eye in this species.

As for cases of the genus *Serratia* as a cause of endophthalmitis in animals, there is still not much information other than the report of a cat presenting with panuveitis, increased IOP and unsatisfactory treatment (GUYONNET et al., 2019), similar to what happened in this study.

The main clinical signs of bacterial endophthalmitis are conjunctival hyperemia (SOSUAN; LEUENBERGER, 2020; WANG et al., 2020; BALASOIU et al., 2022), corneal edema (RELHAN; FLYNN, 2018; BHIKOO et al., 2022; KUMAR et al., 2022), blepharoedema (NIYADURUPOLA, 2018; NAKAI et al., 2019; KATOCH; DOGRA, 2020), conjunctival discharge (BAWANKAR et al., 2019; SINHA et al., 2021; AL-ABRI et al., 2022) and hypopyon (BRAZZANO et al., 2019; MAKUSHA et al., 2020; SASI et al., 2023), corroborating the signs presented by the patient described in this case.

The antibiogram provides an assertive treatment, as bacteria of the genus *Serratia* have intrinsic resistance (MAHLEN, 2011; MESSAOUDI et al., 2021; PICCIRILLI et al., 2022). In this report there was sensitivity to a drug from the fluoroquinolone group (CIOFU; TOLKER-NIELSEN, 2019; HARASSIM et al., 2021), Ciprofloxacin. However, it was decided to treat the patient with another fluoroquinolone, Gatifloxacin, which is specific for ocular bacterial infections and has proven activity against Gram-negative *enterobacteria* such as *Serratia* sp. (BISPO et al., 2008; GALVIS et al., 2019; MENDES et al., 2019; CASTILLO AVILA et al., 2020; SANTOS et al., 2021; SATOBA GARZÓN et al., 2021; ESPINOZA SÁNCHEZ, 2022; JULITZA, 2022).

5 FINAL CONSIDERATIONS

Bacterial endophthalmitis is a poorly described pathology in veterinary medicine, and *Serratia* sp. is an uncommon pathogen.

No studies were found describing natural infection by *Serratia* sp. in rabbits, and this is the first report in the literature of ocular infection in the species *Oryctolagus cuniculus*.

The clinical signs of this type of infection for this species were severe, the treatment proved unsatisfactory and enucleation becomes inevitable. Histopathological examination proved to be efficient as a definitive diagnostic method for the case presented.



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