



Molecular and serological detection of animal and human vector-borne pathogens in the blood of dogs from Côte d'Ivoire

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5 **Molecular and serological detection of animal and human vector-borne pathogens in the**
6 **blood of dogs from Côte d'Ivoire**

7

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Abstract

In Côte d'Ivoire, limited information are available on vector-borne pathogens, their prevalence and distribution. Here, we assess the occurrence and diversity of canine vector-borne diseases (CVBDs) in Abidjan and Yamoussoukro cities. Blood from a total of 123 dogs were tested for *Leishmania infantum* and *Ehrlichia canis* antibodies and screened for *Leishmania* and *Trypanosoma* spp., Piroplasmida, Filariidae and Anaplasmatidae by PCR and sequencing. Among dogs, 39% were positive for at least one pathogen. Seroprevalences were: 15.4% and 12.2% for *L. infantum* and *E. canis*, respectively. DNA of *L. infantum* and *T. congolense* (4.1%), *Babesia vogeli* (1.6%), Filariidae (*Dirofilaria immitis*, *D. repens* and *Acanthocheilonema reconditum*) (10.6%) has been detected. Anaplasmatidae were detected in (17.1%) and *E. canis* was the only identified specie. Co-infections were observed in 13.8 % of dogs: *E. canis*-*L. infantum* co-infection was the most prevalent (4.9%). Age, breed and sex of dogs do not seem to influence infections. Village dogs were more susceptible to CVBDs than kennel dogs (PV= 0.0000008). This study reports for the first time the presence of *L. infantum*, *B. vogeli*, *A. reconditum*, *D. immitis* and *D. repens* in dogs from Côte d'Ivoire and determines the prevalence and diversity of CVBD pathogens. The results indicate that human and animal pathogens are abundant in Ivoirian dogs which requires attention of veterinarians, physicians and authorities against these diseases, especially against major zoonosis such as visceral leishmaniasis (*L. infantum*).

Keywords: Vector-borne pathogens, Côte d'Ivoire, Dog, PCR, *Leishmania infantum*, *Trypanosoma congolense*, *Babesia vogeli*, Filariidae, *Ehrlichia canis*

1. Introduction

Canine vector-borne diseases (CVBD) are a group of rapidly spreading, globally distributed diseases caused by a range of arthropod-borne pathogens, including ticks, fleas, mosquitoes and phlebotomine sandflies which are the vectors of a range of bacteria, viruses, protozoa and helminths. In addition to their veterinary importance, some CVBD-causing pathogens are of major zoonotic concern [1]. Dogs are sentinels and reservoirs of diseases that are a risk for human population, therefore, the interest to follow CVBD in dog populations remains of greater importance. *Ehrlichia canis*, *Hepatozoon* spp., *Anaplasma* spp., *Leishmania infantum*, *Trypanosoma* spp., *Babesia* spp. and filariae are the most vector-borne pathogens detected in dogs in multiple countries [2- 6].

Bacteria from the Anaplasmataceae family include numerous dog-associated pathogens vectored by ticks [4]. Canine monocytic ehrlichiosis (CME) caused by *E. canis* and transmitted by the tick *Rhipicephalus sanguineus*, is the most recognized, and is responsible for severe clinical signs and a high mortality rate in infected dogs. The infection is common in Sub-Saharan Africa, such as Côte d'Ivoire and Gabon [5]. Native African dogs are often asymptomatic (immunotolerance). Warm climates seem to be favorable for the infectious agents propagation [6].

Canine leishmaniosis, caused by *L. infantum* and transmitted by a phlebotomine sand fly vector, is the most serious CVBD considering its large distribution (in Central and South America, Asia and several countries of the Mediterranean Basin) and high pathogenicity [7- 8]. In Sub-Saharan Africa, data on CanL are rare, except some reports in Senegal [9], Burkina-Faso [10]. Anecdotal *L. infantum* infections in human were also reported in Côte d'Ivoire [11] and Gambia [12].

Canine trypanosomosis is a disease caused by haemoprotozoan parasites *Trypanosoma brucei* *brucei* and *T. congolense* in Africa [13]. This disease can also be caused by *T. cruzi*, the agent of American trypanosomosis known as the Chagas disease in humans. Dogs are also infected by *T. b. rhodesiense* and *T. b. gambiense* pathogens for humans [14].

Babesiosis is a potentially serious illness caused by intraerythrocytic protozoan parasites of the genus *Babesia*. *B. vogeli*, *B. gibsoni* and *B. rossi* are the main causative agents of the canine babesiosis vectored by ticks. They may also be transmitted vertically [15] or by blood exchange in fighting dogs [16]. *Babesia* species have a global distribution and have been identified in African dogs [17].

Among the vector-borne pathogenic helminths belonging to the order Spiruridae, the suborder *Spirurina* and the families Filariidae and Onchocercidae: *Dirofilaria immitis* and *D. repens* are probably the best known to cause infestations in dogs and humans [1, 18], followed by *Acanthocheilonema reconditum* (Spirurida, Onchocercidae) often infects dogs [19]. Differently from other filarioids transmitted by mosquitoes (e.g., *D. immitis* and *D. repens*) or ticks (e.g., *Cercopithifilaria* spp.) to dogs, *A. reconditum* is vectored by fleas (i.e., *Ctenocephalides canis*, *C. felis*, *Pulex irritans*, *P. simulans*, *Echidnophaga gallinae*) or lice (i.e., *Heterodoxus spiniger*, *Linognathus setosus*) with a rate of infestation in fleas of about 5% [19]. Globally, vector-borne diseases account for about 17% of the burden of all infectious diseases and cause millions of dollars in losses to the livestock industry each year, with implications for human and animal health and the global economy [20]. Information on filarial infections in dogs in sub-Saharan Africa is scarce. From a review of available literature by Schwan (2009) it appeared that all the above mentioned species have been reported from various places on the continent [21]. survey for filariae in dogs in northern Kenya and in Zambia have later been documented [22][23].

94 In Côte d'Ivoire, few information is available on the prevalence and the distribution of
95 CVBD. The purpose of this study was to evaluate the occurrence of these pathogens of
96 veterinary and public (for some of them) health importance and their diversity in dogs from
97 the city of Abidjan (kennel dogs) and in a city near Yamoussoukro (village dogs) by using
98 serological and molecular tools including new PCR assays.

2. Methods

2.1. Study Sample collection and preparation

In April 2018, blood samples were collected from 123 dogs, living in three kennels in Abidjan (N=95) and Kongouanou town (N=28), (7°00'42.0"N 5°22'04.0"W) localized 24 km from Yamoussoukro and 241 km from Abidjan. The largest kennel is located (5°16'54.9"N 3°56'46.0"W) in Koumassi, district of Abidjan and the other two are between five (Cocody) and six (Treichville) kilometers away. Kennel dogs are working dogs used for protection, security and defense. They belong to adapted breeds (ridgeback, Belgian shepherds, etc.). They receive veterinary care and sometimes external pest control. The village dogs from Kongouanou are medium-sized dogs mostly used for hunting. They live outdoors freely in the village and its surroundings. They do not benefit from preventive veterinary care (32% carried ticks). Data about sanitary status or possible prophylaxis for kennels dogs were collected. A volume of 4 to 5 mL of blood was collected from the radial vein of each dog, into dry and EDTA tubes; serum was recovered after centrifugation (10 min, 3000g) and frozen at -20 °C. EDTA tubes were directly frozen at -20 °C. Each animal sampled was examined and information about gender, breed and age were collected.

The animals were examined and sampled after obtaining the verbal consent of the persons (owners) responsible for the dogs. The blood samples were taken from radial vein by veterinarians (French and Ivorian) with the ethical responsibility to ensure the animal care in accordance with Articles 433-434; Chapter 2 of the Ivorian Penal Code.

2.2. Serological assay to detect *E. canis* and *L. infantum* specific antibodies

The presence of anti-*E. canis* and anti-*L. infantum* promastigote specific antibodies was revealed by indirect fluorescent antibody test (IFAT). Plate wells were sensitized by 10 µL and 20 µL of the commercial antigens of *E. canis* and *L. infantum* (Zoetis, France)

respectively and assays were assessed following manufacturer's instructions. Both anti-*Ehrlichia* and anti-*Leishmania* antibodies were detected by secondary antibodies against rabbits, anti-dog immunoglobulins G conjugated with fluorescein isothiocyanate (Sigma-Aldrich, St Louis, MO, USA). Sera were considered positive when antibodies titers were higher than 1:100 and 1:80 dilutions for *Ehrlichia* and *Leishmania* respectively.

2.3. Morphological identification of filariae species

Blood samples were examined for the presence of microfilaria after concentration by a modified Knott test (Knott, 1939) which is the gold standard [24]. Microfilariae were quantified and identified when existed. When co-infections were found, we performed a serial dilution until we obtained 1 microfilariae/ 200 mL of blood which was used to extract the DNA. The objective was to concentrate only one species of microfilariae and extract its DNA for a possible future molecular identification.

2.4. Molecular assays

2.4.1. DNA extraction

DNA was extracted from 200 µL of blood after digestion with proteinase K at +56°C overnight using a commercial DNA extraction kit (QIAamp DNA Mini Kit®, [Qiagen, Courtaboeuf, France]) and performed on BIOROBOT EZ1 (Qiagen, Qiagen, Courtaboeuf, France) per the manufacturer's instructions. In order to achieve maximum yield, digestion was performed overnight with proteinase K in Qiagen lysis buffer before the QIAamp DNA Mini Kit® was used. DNA was eluted in 200 µl of distilled water and stored at -20°C.

2.4.2. PCR tools design for *Leishmania* spp. and *Trypanosoma* spp. screening

We designed primers and probe using the conserved region of encoding ribosomal RNA genes 18S to detect DNA from *Leishmania* species: a first, qPCR for the screening of all *Leishmania* targeting a conserved region of the 18S gene; a second, conventional PCR targeting the same gene that produce the 550-bp amplicon for the following confirmation and species identification. In order to detect DNA from trypanosomes, we designed a qPCR system targeting the ribosomal RNA genes 5.8S. To design the group-specific primers and probes, the corresponding genetic sequences of all *Leishmania*/*Trypanosoma* species available in the GenBank were multiple aligned. All conserved motifs were visualized using BioEdit software version 7.0.5.3 (<http://www.mbio.ncsu.edu/BioEdit/bioedit.html>). The free web-based Primer3 software, version 4.0 (<http://frodo.wi.mit.edu/primer3/>) was used to design the primers and probes based on chosen conserved motifs (Table 1).

The specificity and sensitivity of all PCR assays were tested *in silico* using primer-BLAST (<https://blast.ncbi.nlm.nih.gov/Blast.cgi>) and validated *in vitro* using a DNA panel of cultivated *Leishmania* species: *L. infantum*, *L. donovani*, *L. major* and DNA of *L. guyanensis* for *Leishmania* PCR systems, a DNA panel of cultivated *Trypanosoma* species: *T. congolense* IL 3000, *T. evansi*, *T. vivax*, *T. brucei brucei*, *T. brucei gambiense* and *T. brucei gambiense* *biyamina* groupe II for *Trypanosoma* qPCR system, and several arthropods of laboratory-maintained colonies as well as human, monkey, donkey, horse, cattle, mouse and dog DNAs for all the PCR systems (Table S1).

2.4.3. Molecular screening for the presence of pathogens DNA

All the DNA samples were screened for *Leishmania* spp. using two qPCR assays: i) the 18S-based qPCR was used for the initial screening and the detection of DNA *Leishmania* spp., ii) the specific *L. infantum* qPCR assay based on the amplification of kinetoplast minicircle DNA (kDNA), recognized for its high sensitivity which allows the quantification of the parasite

load [25]. qPCR assays were performed to screen DNA samples using primers and probes for Anaplasmataceae, *Trypanosoma* spp. and *Piroplasmida* (Table 1). Sequences of primers and probes and their respective sources used in this study are presented in Table 1. Concerning Filariidae, we used a triplex qPCR to detect *D. immitis*, *D. repens* and *A. reconditum* targeting the *Cox1* gene. In order to detect the occult filariosis due to *D. immitis* we screened the samples using a qPCR targeting *ftsZ* gene specific to *Wolbachia* endosymbiont of *D. immitis* (Laidoudi et al. unpublished).

Reaction mix for qPCR assays contained 5 µl of the DNA template, 10 µl of Eurogentec Master Mix Roche, 0.5 µl of each reverse and forward primers and UDG, 0.5 µl of the FAM-labeled probe (Table 1) and 3 µl of distilled water DNase and RNase free, for a final volume of 20 µl. The qPCR amplification was performed in a CFX96 Real-Time system (Bio-rad Laboratories, Foster City, CA, USA) with the following thermal profile: The first step is an incubation at 50°C for two minutes and an initial denaturation step at 95°C for five minutes, followed by 40 cycles of denaturation at 95°C for 5 seconds and annealing-extension at 60°C for 30 seconds. We included the DNA of the target parasites or bacteria as positive controls and master mixtures as a negative control for each test. Samples were considered positive when the cycle threshold (Ct) was lower than 35 Ct for all qPCR assays and lower than 38 Ct for *Leishmania* 18S-based qPCR.

2.4.4. PCR amplification, sequencing and phylogenetic analysis

Positive samples by qPCR for vector borne pathogens were confirmed by standard PCR assays and sequencing for the fragments of the genes 23S for Anaplasmataceae, kinetoplast DNA, ITS II and 18S for *Leishmania* spp., ITS I for *Trypanosoma* spp. and 18S for *Piroplasmida*. Primer pairs are listed in the (Table 1). Positive samples by the triplex qPCR

for Filariidae were also confirmed by standard PCR amplifying a 1230 bp from 18S gene of Filariidae species (Laidoudi et al. unpublished).

The standard PCR assays consisted of a volume of 25 µl, including 12.5 µl of Amplitaq Gold Master Mix, 0.75 µl of each primer, 5 µl of DNA model and water. The thermal cycling conditions were: incubation step at 95°C for 15 minutes, 40 cycles of 1 minute at 95°C, 30 annealing at a different hybridization temperature for each PCR assays and one minute at 72°C followed by a final extension for five minutes at 72°C (Table 1). PCR amplification was performed in a Peltier PTC-200 model thermal cycler (MJ Research Inc., Watertown, MA, USA). The results of amplification were visualized by electrophoresis on 2% agarose gel. The purification of PCR products was performed using NucleoFast 96 PCR plates (Macherey Nagel EURL, Hoerd, France) according to the manufacturer's instructions. The amplicons were sequenced using the Big Dye Terminator Cycle Sequencing Kit (Perkin Elmer Applied Biosystems, Foster City, CA, USA) with an ABI automated sequencer (Applied Biosystems). The obtained electropherograms were assembled and edited using ChromasPro software (ChromasPro 1.7, Technelysium Pty Ltd., Tewantin, Australia) and compared with those available in the GenBank database by NCBI BLAST (<https://blast.ncbi.nlm.nih.gov/Blast.cgi>). The DNA sequences obtained for each gene, for each pathogen, from positive samples were aligned with those available in the GenBank database for the same gene. A maximum-likelihood method was used to infer the phylogenetic analyses and tree reconstruction was performed using MEGA software version 7 (<https://www.megasoftware.net/>). Bootstrap analyses were conducted using 100 replicates.

2.5. Statistical analysis

215 Statistical analysis was conducted using IBM SPSS statistics version 23. After the databases
216 were established, the association between infections and age, sex, breeds and origin (Kennels
217 vs village) of dogs was assessed using the X^2 test. The Fischer's exact test was used when the
218 percentages were low. Statistically significant was consider at P-value <0.05.

3. Results

3.1. Sensitivity and specificity of PCR assays

Designed PCR assays listed in Table 1 were tested. First, we tested the *Leishmania* genus-specific 18S rRNA-based qPCR system by screening of positive controls (Table S1). As expected *in silico*, we amplified all available positive controls: *L. infantum*, *L. donovani*, *L. major* and *L. guyanensis*. These controls were also amplified by the *Leishmania* 18S rRNA-based standard PCR system. In order to validate these new PCR systems and to reproduce the results, *Leishmania*-positive samples were tested simultaneously by *Leishmania* genus-specific 18S, *L. infantum*-specific kDNA qPCR assays and 18S, ITS1, ITS2 standard PCR tools. All of them gave the same result. Secondly, we tested the *Trypanosoma* 5.8S rRNA-based qPCR system by screening the controls. As tested *in silico*, it amplified all positive controls (Table S1). The same results were obtained by using *Trypanosoma* ITS1- based standard PCR. None of the DNA negative controls were amplified by any of the PCR tools.

3.2. Serological and molecular results

A total of 123 dogs were sampled: 91 males and 32 females. Ages were available for all dogs. The average age was three years old [4 month–10 years] with 49 juveniles [4 month -2 years], 33 young dogs [2-4 years], 26 adults [4-6 years] and 15 oldies (>6years) dogs. Prevalence of the vector-borne pathogens detected by serology or PCR is presented in the Table 2. Results showed that 39% (48/123) of dogs were positive for at least one of the pathogens by either PCR or serology (Table 3). Screening using qPCR assays showed a prevalence of 17.1% (21/123) for Anaplasmataceae infections (*E. canis* was the only species identified), followed by Filariidae infections 10.6% (13/123) with at least one filaria species, *L. infantum* in 4.1% (5/123) with 28.9 *Leishmania*/mL of blood (Min: 2.1; Max: 117.8) as an average of the

parasite load found by the kDNA qPCR, *Trypanosoma* spp. in 4.1% (5/123) and finally *Babesia* spp. with 1.6% (2/123). Prevalence by IFAT was of 15.4% (19/123) for *L. infantum* and 12.2% (15/123) for *E. canis* (Table 2).

Regarding mono-infections, *E. canis* infection was the most prevalent with 9.7% (12/123). We found a prevalence 8.9% (11/123) for *L. infantum*, *A. reconditum* 4.1% (5/123). *Trypanosoma* spp. 1.6% (2/123) and finally *Babesia* spp. with 0.8% (1/123).

Mixed infections 13.8% (17/123) were also found in this study (Fig. 2). Mixed infection of *E. canis*-*L. infantum* 4.9% (6/123) was more frequent than *E. canis*-*A. reconditum* with 3.3% (4/123), *L. infantum*-*Trypanosoma* spp. and *L. infantum*-*A. reconditum* with 1.6% (2/123) for each of them and finally, co-infection with *E. canis* and *B. vogeli* with only one case (0.8%). Triple infection with *A. reconditum*-*D. immitis*-*D. repens* were observed in two dogs. One of them was positive by modified Knott's test and the triplex qPCR for the three species. The other one was positive for *A. reconditum* and *D. repens* but negative for *D. immitis* for both tests. By contrast, it was positive by qPCR *ftsZ* for *Wolbachia* endosymbiont of *D. immitis*, suggesting an occult infection by *D. immitis*.

There was no significant association between sex, age, breed and the presence of vector-borne dog infections in this study ($PV > 0.05$), except for filariasis for which mongrel dogs were more susceptible ($PV = 0.02$). By contrast, dogs from Kongouanou (village dogs) were found to be more infected 60.7% (17/28) than dogs from Abidjan (kennel dogs) 32.6% (31/95) for at least one pathogen ($PV = 0.003$). Also, Filariidae infections were more frequent in the village dogs 35.7% (10/28) than the kennel dogs 3.2% (3/95) ($PV = 0.0000008$) (Table 3).

3.3. Phylogenetic analysis results

Positive samples for vector-borne pathogens were sequenced. DNA sequences of all positive PCR products were ≥ 99 –100 % homologous to those available in the GenBank database for

all CVB pathogens identified, except the obtained sequences for *Leishmania* kDNA. For Anaplasmataceae, after sequencing the 485 bp-long amplicons of the 23S rRNA gene portion, BLAST analysis was conclusive for *E. canis* for all sequences obtained with 99-100% identity with *E. canis* (KM021429) from Algeria and (NR 076375) from the USA. *L. infantum* ITS 2 obtained sequences (420 bp) were 100% identical to published sequences (KU680956, KU680957, KU680958, KU680959 and KU680960). *Leishmania* kDNA sequence (126-128 bp) exhibited 96-97% identity with *L. infantum* isolate MHOM/CN/80/D2 from China (Z35292). In addition, *T. congolense* ITS1 sequences (620-630 bp) exhibited 99% identity with published sequence MG283145. *B. vogeli* 18S rRNA obtained sequences (865 bp), in this study, were 99% identical to published sequence (LC331058, MG586234). For Filariidae, 18S sequences for *A. reconditum* is not available in the GenBank database. By contrast, the sequences found for *D. repens* had 100% of identity with (AB973229) published sequence. We could not sequence the positive sample for *D. immitis* because it was co-infected with other species. Phylogenetic trees are built on the basis of these genes and show the position of the identified species (Fig. 3).

Sequences were submitted in the GenBank database under accession numbers: MK494932- MK494941 for *E. canis*, MK481041- MK481044 for *L. infantum* ITS2 sequences, MK770156- MK770158 for *L. infantum* kDNA sequences, MK495745- MK495747 for *T. congolense*, MK495836-MK495837 for *Babesia vogeli*, MK495727-MK495733 for *A. reconditum*, MK495734 and MK495735 for *D. repens*.

4. Discussion

This study describes canine vector-borne infections in dogs from Côte d'Ivoire. Our results showed that pathogens such as *E. canis*, *L. infantum*, *T. congolense*, *B. canis vogeli*, *A. reconditum*, *D. repens* and *D. immitis* are endemic in this area.

The Anaplasmataceae family includes several pathogens associated with dogs; they are reported worldwide and transmitted by *Ixodidae* ticks. [1]. In this study, we found a prevalence of 17.1% (21/123) by qPCR 23S. This is not new, as this region is known to be endemic [5]. Sequencing analysis reported the presence of one species, *E. canis*, the causative agent of monocytic ehrlichiosis. We also noted a seroprevalence of 12.2% (15/123) for *E. canis* by IFAT. It was not possible to obtain sequences for all qPCR-positive samples. qPCR-positive samples not sequenced and not positive by IFAT for *E. canis* could be another Anaplasmataceae sp. not *E. canis*. In 2003, about 74% of the 76 dogs in Abidjan and 84% (93/111) of the dogs in Gabon were seropositive [26]. Also, 27% of *R. sanguineus* s.l. ticks collected (16/60) from dogs in Abidjan, were positive for *E. canis* using quantitative real-time PCR [27]. Since then, we believe that there is a decreasing in the prevalence due to the awareness of veterinarians and dog owners in the. But the area remains endemic because the dog's state of life promotes transmission and persistence of infection (presence of ticks) and not all dog owners are able to treat and protect their dogs. We did not find *Anaplasma platys*, the agent of canine cyclic thrombocytopenia. However, prevalence of 8.5 and 56.2% has already been reported in Ivorian dogs and ticks collected on these dogs, respectively [28].

Data about canine leishmaniosis in Côte d'Ivoire are absent. To the best of our knowledge, our study is the first to report *L. infantum* in dogs from this area. The prevalence observed is 15.4% (19/123) by IFAT. We have developed a qPCR test with a wide specificity (*Leishmania* spp.) capable of detecting the main known pathogens of *Leishmania* species such

312 as *L. donovani*, *L. infantum*, *L. major*, *L. guyanensis* as well as probable new species. Only
313 4% (5/123) were positive for PCR, which differs significantly ($PV=0.0026$) with serological
314 results. This is not surprising since PCR assays on blood samples often provide less positive
315 results for leishmaniosis than for other sites (bone marrow and lymph node) [27, 28], hence
316 the choice of IFAT as gold standard in this study. We achieved species identification by the
317 amplification from the qPCR-positive samples ITS2 gene (Table1) and kinetoplast gene. This
318 was conclusive for *L. infantum*. All positive dogs were apparently healthy. The level of
319 parasite load found is not important (amount 29 parasite/ mL blood), which may explain an
320 asymptomatic carriage stage. Cases of human visceral leishmaniasis were reported in sub-
321 Saharan countries such as Côte d'Ivoire and Gambia [29, 30], but these reports remain
322 anecdotal with no evidence of an autochthonous transmission cycle. Three human cases of
323 visceral leishmaniasis were observed in a cohort of 528 patients in Abidjan (2001–2002)
324 [11]. The detection of *L. infantum* in local dogs (15.4%) provides evidence that this region is
325 endemic for CanL and indicates the possible involvement of domestic dogs in the human
326 infection. Classically, sand flies involved in the *Leishmania* transmission belong either to the
327 *Phlebotomus* genus (Old World) or to the *Lutzomyia* genus (New World). The sand fly
328 species involved in *L. infantum* transmission cycle in Côte d'Ivoire are still unknown and
329 need further investigations. The results obtained in Senegal, with the molecular confirmation
330 of *L. infantum* species, high seropositivity in 160 dogs (46.3%) and 133 humans (33.3%) [9],
331 the high rate of *L. infantum* on female sand fly species (5.4% of *Sergentomyia dubia*, 4.2% of
332 *S. schwetzi* and 3.6% of *S. magna*) [31] strongly suggests that the *L. infantum* life cycle is
333 well established in this area. In addition, this raises further questions about vectors in sub-
334 Saharan regions and challenges once again the dogma that leishmaniasis is exclusively
335 transmitted by the genus *Phlebotomus* in the Old World. In Burkina-Faso, CanL prevalence is
336 about 5.9% (5/85) [10]. The disease has mainly been described in the north of the African

continent, range of results reported for some countries in the Mediterranean Basin using IFAT: Algeria: 27-45% [32], Tunisia 18-53% [35, 36], Morocco 9-19% [37, 38].

To perform molecular screening of *Trypanosoma* spp. we have developed a new qPCR system to detect all *Trypanosoma* species. This molecular tool seems to be sensitive and specific and allowed us to found a prevalence of 5.3% (5/95) in dogs from Abidjan. In 2003, Keck et al. reported a prevalence of 30 % in 123 dogs from kennels of Abidjan by using PCR specific primers for *T. congolense* “forest type” with no difference between age, class, breed and sex [13]. The fact that we found fewer infected dogs may be due to the sensitization of local veterinarians against this disease. *T. congolense* "forest type" has been found in other host animals (sheep, goats, cattle, pigs) in Côte d'Ivoire and other forest areas [37]. However, we did not detect this trypanosome. ITS 1 gene sequencing showed 99% of identity with *T. congolense* isolate 237-51-00095-1-60-10 (GenBank: MG283145) identified in *Glossina palpalis palpalis* in Cameroon (Fig. 2). In Nigeria, nineteen dogs presenting with canine African trypanosomosis were infected with trypanosomes of the *T. brucei* group [38]. *T. congolense* is cyclically transmitted by tsetse flies (*Diptera: Glossinidae*). Trypanosomosis caused by *T. congolense* is a major threat to livestock production in Sub-Saharan Africa. Infected dogs can revealed pale mucous membranes, weak pulse, enlarged lymph nodes, rough hair coat and loss of skin elasticity [39].

We found a prevalence of 1.6% (2/123) infected by *B. canis vogeli*. To our knowledge, this is the first detection of this pathogen in Côte d'Ivoire. This species has a global distribution [40] and has been identified in Africa [17][41]. The presence of ticks *Rhipicephalus sanguineus* s.l., the main vector of *B. canis vogeli* [42] on dogs in Côte d'Ivoire [27] may explain our results.

Concerning Filariidae, 10.6% (13/123) of dogs were infected by at least one species. *A. reconditum* was the most detected by modified Knott's test and the triplex qPCR (13/123). Obtained sequences for 18S rRNA gene showed 99% identity with *Acanthocheilonema viteae* and *Loa loa* (DQ094171, XR_002251421). No sequence for the 18S rRNA gene of *A. reconditum* is available in GenBank. *A. reconditum* has a worldwide distribution [19][21]. In Liberia, 56 of 137 dogs (40.9%) and about 9.2% of Nigerian dogs were found positive for microfilaria of *A. reconditum* from morphological identification, 8.8% in South Africa and Maputo province, Mozambique [21]. *A. reconditum* is generally considered non-pathogenic for dogs, it lives in the peritoneal cavity and adipose tissue [43]. Recently, it has been reported to induce skin lesions with atopic allergy in a dog [44]. This parasite is transmitted by fleas and chewing lice [22].

We found 13.8% (17/123) of dogs with two or three pathogens and *E. canis*-*L. infantum* association was the most observed 4.9% (6/123) co-infection. Co-infections in dogs is common. It is known that infection of the dog with more than one pathogen is associated with high pathogenicity [45]. The main cases observed are co-infections of dogs with tick-borne pathogens, including *E. canis*, *B. vogeli*, *A. platys* and *Hepatozoon canis*, that increase anemia for example, more than mono-infections [46]. Co-infection *L. infantum*-*A. reconditum* has been found in two dogs (1.6%). Co-infections *L. infantum* with filariidae are known. In Portugal, 8.3 % of 230 dogs were infected with both *L. infantum* and *D. immitis* [47]. This co-infection has also been observed in dogs from Greece [48]. This is relatively observed in dogs living in areas where vectors competent for different pathogens coexist, which can complicate the diagnosis, treatment and prognosis of CVBD [47].

In addition to these classical co-infections, we also noted co-infections of *E. canis*-*A. reconditum* in 3.3% (4/123) and *L. infantum*-*T. congolense* in two dogs. Two dogs had triple infection, one of them was positive for the three filaroid species by modified Knott's test and

the triplex Cox1-based qPCR, the other was positive for *A. reconditum* and *D. repens* by these same tools and negative for *D. immitis*, but it was positive on qPCR targeting *ftsZ* gene for *Wolbachia* endosymbiont for *D. immitis*, thus suggesting an occult infection. *D. immitis* has a severe impact on veterinary medicine, because of the heartworm disease threatening dogs and cats, whereas *D. repens*, causing subcutaneous infestation in dogs, is the main agent of the human dirofilariosis [49]. *D. immitis* has been reported from Guinea-Bissau, Nigeria, Senegal, Sierra-Leone and in Central Africa (Angola, Cameroon and Gabon). In addition, it has been reported that *D. repens* is the most common filarial worm in Nigerian dogs and cats. This species is also endemic in Central and Eastern Africa [21]. All these co-infections can lead to overlaps or atypical clinical signs. They should be expected in dogs living in areas that are highly endemic for several vector-borne pathogens, mainly in dogs kept predominantly outdoors and not regularly treated with ectoparasitides [50]. The prevalence of CVBD varied according to the dog's origin and Kongouanou dogs were more infected than those in Abidjan. They also had more filaroid infections. These dogs live freely in the open air in the village and its surroundings. They do not receive preventive veterinary care and most of them were tick carriers, compared to kennel dogs, which receive veterinary care and sometimes external pest control.

5. Conclusion

To the best of our knowledge, this study is the first to report the prevalence and diversity of vector-borne pathogens of humans and animals in dogs from Côte d'Ivoire. Co-infections with more than one pathogen were found to be common. For the first time, we highlighted the presence of *L. infantum*, *B. vogeli*, *A. reconditum*, *D. immitis* and *D. repens* in this region. This last remains endemic for *E. canis* and *T. congolense*. Ivorian veterinarians should be informed of these results in order to be able to detect clinical cases of canine leishmaniasis and make diagnoses using laboratory tests. This epidemiological situation also requires the implementation of a national program to control vector-borne diseases, especially for zoonotic agent such *Leishmania infantum*, the agent of human visceral leishmaniasis.

Abbreviations

Bp: Base pair; CanL: Canine leishmaniosis; CME: Canine monocytic ehrlichiosis; Ct: Cycle threshold; CVBD: Canine vector-borne diseases; EDTA: Ethylenediaminetetraacetic acid; IFAT: Immunofluorescence antibody test; PCR: Polymerase chain reaction; PV: P-value; qPCR: Quantitative PCR.

Supporting Information

Table S1. Positive and negative control DNA used for sensitivity and specificity determination of designed oligonucleotides.

Conflict interests

The authors declare that they have no competing interests.

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Legends:

Fig 1. Location of the study: down Abidjan kennel dogs, up dogs from Kongouanou village

(A. Côte d'Ivoire map,

https://commons.wikimedia.org/wiki/Atlas_of_C%C3%B4te_d'Ivoire#/media/File:C%C3

[B4te_d'Ivoire_Map.jpg](https://commons.wikimedia.org/wiki/Atlas_of_C%C3%B4te_d'Ivoire#/media/File:C%C3%B4te_d'Ivoire_Map.jpg); B. Copyright pictures: B. Davoust)

Fig. 2 Mixed infections found in dogs surveyed in the present study. The legends represent:

Coinfection and its prevalence; number of dogs presented this coinfection; frequency of the

coinfection according to the sum of coinfections (N= 17).

Fig. 3 Phylogenetic trees highlighting the position of *Ehrlichia* spp. (A), *Leishmania* spp. (B

and C), *Trypanosoma* spp. (D) and *Babesia* spp. (E) and filaroid species (F) identified in the

present study compared to other sequences available on GenBank. The sequences for 23S (A),

ITSII and kDNA (B and C), ITS1 (D) and 18S (E) and 18S (F) genes, for each of the six trees,

were aligned using CLUSTALW, and phylogenetic inferences was conducted in MEGA 7

using the maximum likelihood method based on the Tamura-Nei model for nucleotide

sequences. . Initial tree(s) for the heuristic search were obtained automatically by applying

Neighbor-Join and BioNJ algorithms to a matrix of pairwise distances estimated using the

Maximum Composite Likelihood (MCL) approach, and then selecting the topology with

superior log likelihood value. The tree is drawn to scale, with branch lengths measured in the

number of substitutions per site. All positions containing gaps and missing data were

eliminated. The GenBank accession numbers are indicated at the beginning. Statistical

support for the internal branches of the trees was evaluated by bootstrapping with 1,00

iterations. Bootstrapping under 40 were removed.

620 **Table 1** Sequences of primers used for species detection and identification in this study

Targeted microorganisms	Target gene	Name	Primers (5'-3') and probe	Tm	References	
<i>Anaplasmataceae</i>	23S	TtAna-F	TGACAGCGTACCTTTTGCAT	-	[4]	
		TtAna-R	GTAACAGGTTCGGTCCTCCA			
		TtAna-S*	FAM-CTTGGTTTCGGGTCTAATCC-TAMRA			
		Ana23S-212f	GTTGAAAARACTGATGGTATGCA	55°C		
		Ana23S-753	TGCAAAAGGTACGCTGTCAC			
<i>Leishmania</i> spp.	18S	Leish. F	GGTTTAGTGCCTCCGGTG	-	This study	
		Leish. R	CGGCCATAAGATCC CCAA			
		Leish. P*	FAM-CGGCCGTAACGCCTTTTCAACTCA -TAMRA			
		Leish. F1	CTGTGACTAAAGAAGCGTGAC	52°C		This study
		Leish. R1	AGGCCGAATAGAAAAGATACGT			
	kDNA	RV1	CTTTTCTGGTCCTCCGGGTAGG	-	[25]	
		RV2	CCACCCGGCCCTATTTTACACCAA			
		Probe. Leish*	FAM-TTTTCGCAGAACGCCCTACCCGC-TAMRA			
	ITS II	LGITSF2	GCATGCCATATTCTCAGTGTC	60°C	[52]	
		LGITSR2	GGCCAACGCGAAGTTGAATTC			
	kDNA	RV1	CTTTTCTGGTCCTCCGGGTAGG	59°C	[54]	
		RV2	CCACCCGGCCCTATTTTACACCAA			
	<i>Trypanosoma</i> spp.	5.8S	Tryp 5.8SF	CAACGTGTCGCGATGGATGA	-	This study
Tryp 5.8SR			ATTCTGCAATTGATACCACTTATC			
Tryp 5.8S P*			FAM-GTTGAAGAACGCAGCAAAGGCGAT-TAMRA			
ITS I		ITS1-CF	CCGGAAGTTCACCGATATTG	58°C	[51]	
		ITS1-BR	TTGCTGCGTTCTTCAACGAA			
<i>Piroplasmida</i>	5.8S	5.8S-F5	AYYKTYAGCGRTGGATGTC		[53]	
		5.8S-R	TCGCAGRAGTCTKCAAGTC			
		5.8S-S*	FAM-TTYGCTGCGTCCTTCATCGTTGT-MGB			
	18S	piro18S-F1	GCGAATGGCTCATTAAIACA	58°C		
		piro18S-R4	TTTCAGMCTTGCGACCATACT			

621 Abbreviations: Tm: Annealing temperature; *: Probe.

622 **Table 2** Prevalence of the vector-borne pathogens detected by serology or PCR and risk factors

Risk Factor		No.	<i>Anaplasmataceae</i>					<i>Leishmania</i> spp.					<i>Trypanosoma</i> spp.			<i>Piroplasma</i>		<i>Filariidae</i>				
			IFAT <i>Ehrlichia</i>		<i>PV</i>	qPCR 23S		<i>PV</i>	IFAT		<i>PV</i>	qPCR 18S and kDNA		qPCR 5.8S		<i>PV</i>	qPCR 5.8S		<i>PV</i>	qPCR Cox1		<i>PV</i>
Region	Abidjan	95	14	14.7	*0.18	18	18.9	*0.4	15	15.8	*1.00	4	4.2	5	5.3	*0.58	1	1.0	*0.4	3	3.2	* 0.0000008
	Kongouanou	28	1	3.6		3	10.7		4	14.3		1	3.6	0	0		1	3.6		10	35.7	
	Total	123	15	12.2		21	17.1		19	15.4		5	4.1	5	4.1		2	1.6		13	10.6	
Age (year)	[0-2]	49	4	8.2	0.47	9	18.4	0.58	7	14.3	0.36	2	4.1	0	0	0.12	2	4.1	0.38	6	12.2	0.72
	[2-4]	33	6	18.2		7	21.2		8	24.2		2	6.1	2	6.1		0	0		3	9.1	
	[4-6]	26	4	15.4		7	26.9		3	11.5		0	0	1	3.8		0	0		3	11.5	
	>6	15	1	6.7		1	6.7		1	6.7		2	13.3	0	0		1	6.7				
Gender	Female	32	2	6.2	*0.35	9	28.1	0.16	8	25	0.08	0	0	0	0	*0.32	1	3.1	*0.45	4	12.5	* 0.45
	Male	91	13	14.3		15	16.5		11	12.1		5	5.5	5	5.5		1	1.1		9	9.9	
Breed	Berger	33	3	9.1	0.36	4	12.1	0.9	5	15.1	0.86	2	6.1	3	9.1	0.34	0	0	0.82	0	0	0.02
	Beauceron	9	2	22.2		2	22.2		1	11.1		1	11.1	0	0		0	0		0	0	
	Ridgeback	11	2	18.2		2	18.2		1	9.1		1	9.1	2	18.2		0	0		1	9.1	
	Rot	9	3	33.3		2	22.2		3	33.3		0	0	0	0		0	0		0	0	
	Labrador	4	0	0		1	25		1	25		0	0	0	0		0	0		0	0	
	Boer Bull	8	0	0		2	25		1	12.5		0	0	0	0		0	0		0	0	
	Dogue	5	1	20		1	20		1	20		0	0	0	0		0	0		0	0	
	Mongrel	44	4	9.1		10	22.7		6	13.6		1	2.3	0	0		2	4.5		12	27.3	

623 **Abbreviations**

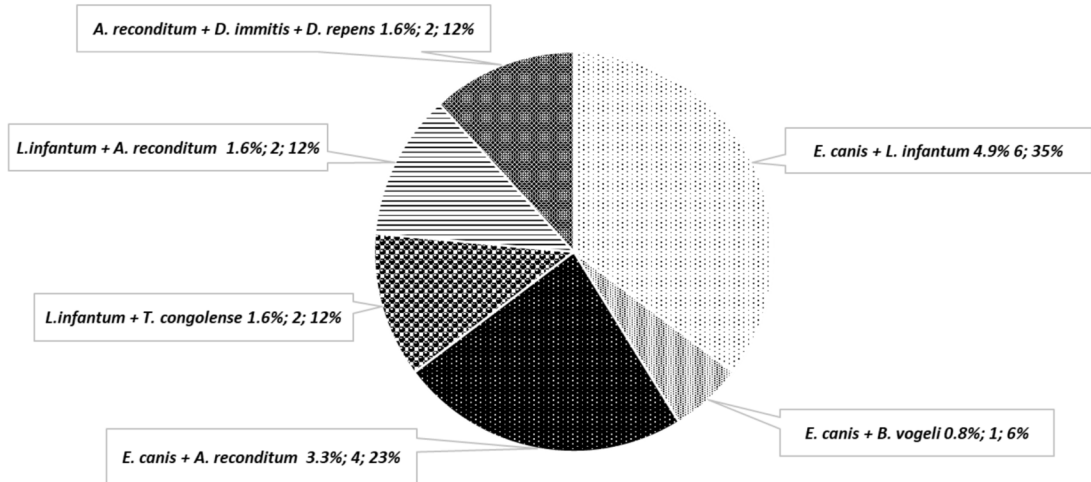
624 IFAT: immunofluorescence antibody test; *PV*: P-value, *PV*> 0.05 means that the observed differences between prevalence is not statically
625 significant; *: Fisher's exact test.

626 **Table 3** Single and mixed infection of canine vector-borne pathogens

Infection	Kennel dogs n=95 (Abidjan)		Village dogs n=28 (Kongouanou)		Total N=123	
	No. positive	%	No. positive	%	No. positive	%
Single infection	20	21.1	11	39.3	31	25.2
<i>Ehrlichia canis</i>	10	10.5	2	7.1	12	9.8
<i>Leishmania infantum</i>	7	7.4	4	14.3	11	8.9
<i>Trypanosoma congolense</i>	2	2.1	0	0.0	2	1.6
<i>Acanthocheilonema reconditum</i>	1	10.5	4	14.3	5	4.1
<i>Babesia vogeli</i>	0	0.0	1	3.6	1	0.8
Mixed infection	11	11.6	6	21.4	17	13.8
<i>E. canis</i> + <i>L. infantum</i>	6	6.3	0	0.0	6	4.9
<i>E. canis</i> + <i>B. vogeli</i>	1	1.1	0	0.0	1	0.8
<i>E. canis</i> + <i>A. reconditum</i>	0	0.0	4	14.3	4	3.3
<i>L. infantum</i> + <i>T. congolense</i>	2	2.1	0	0.0	2	1.6
<i>L. infantum</i> + <i>A. reconditum</i>	0	0.0	2	7.1	2	1.6
<i>A. reconditum</i> + <i>D. immitis</i> + <i>D. repens</i>	2	2.10	0	0.0	2	1.6
Total positive	31	32.6	17	60.7	48	39
Total negative	64	67.4	11	39.3	75	61

627

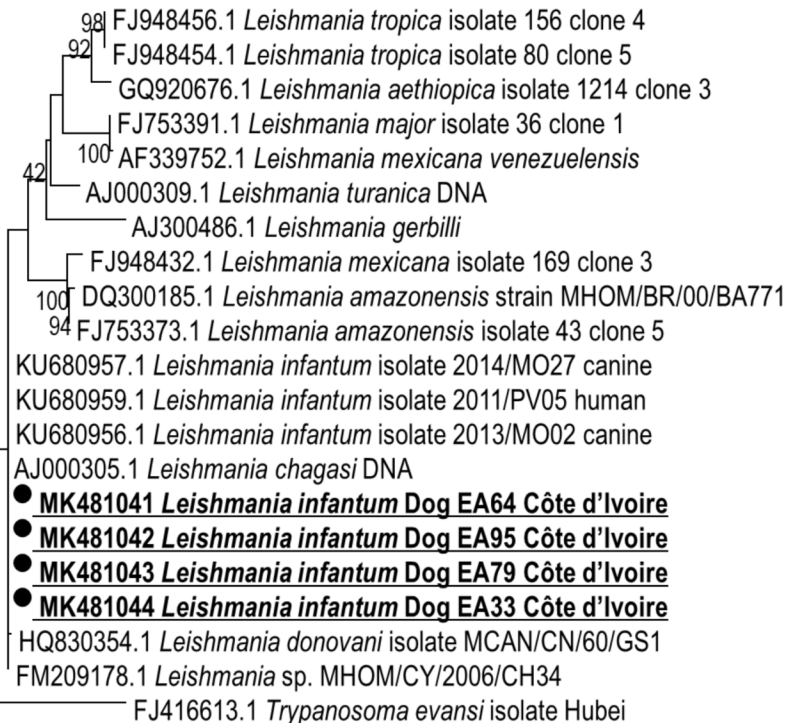
Mixed infection



(A)

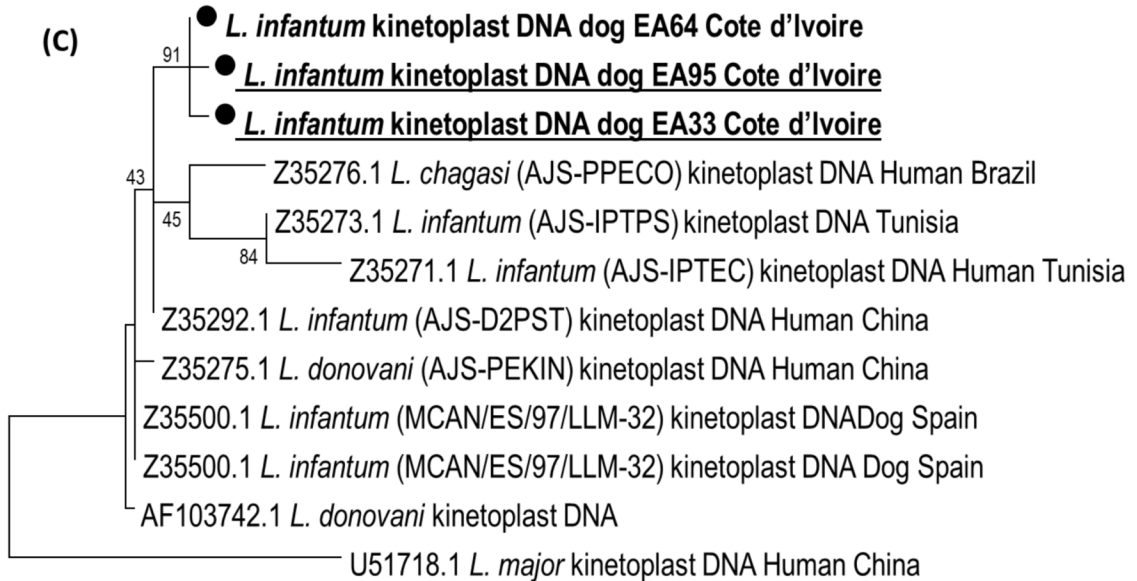


(B)



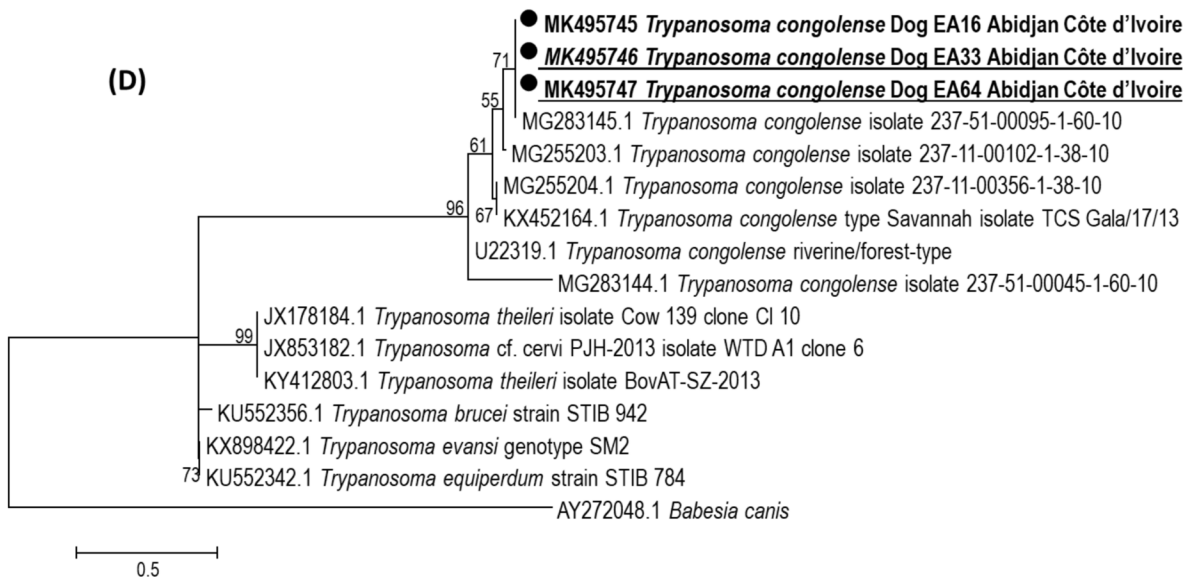
0.1

(c)

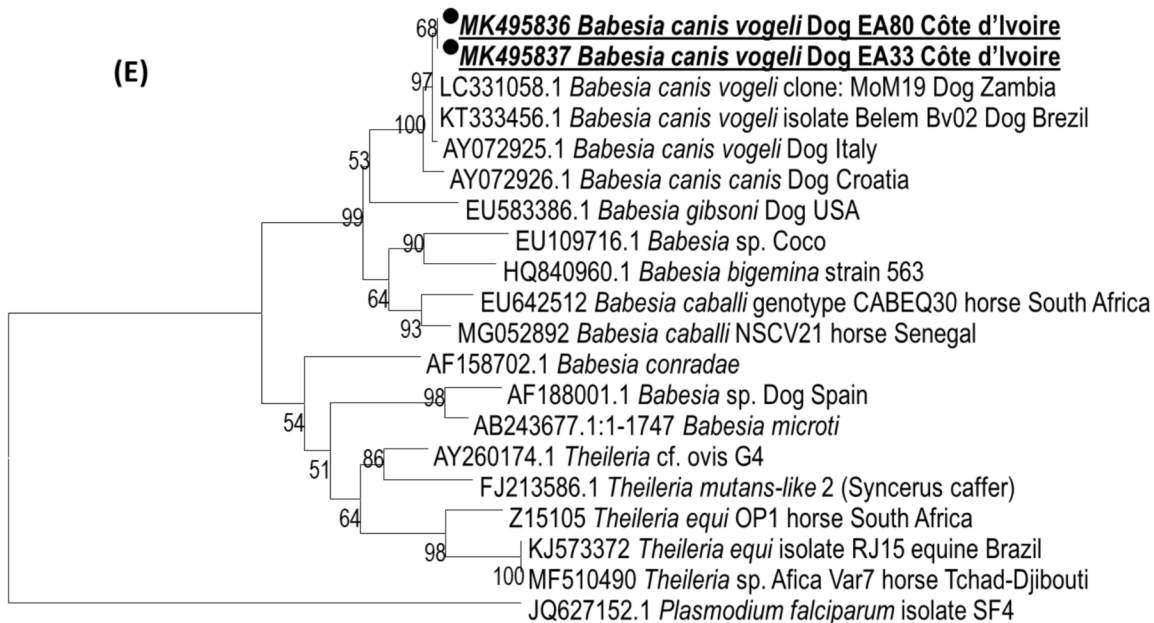


0.02

(D)

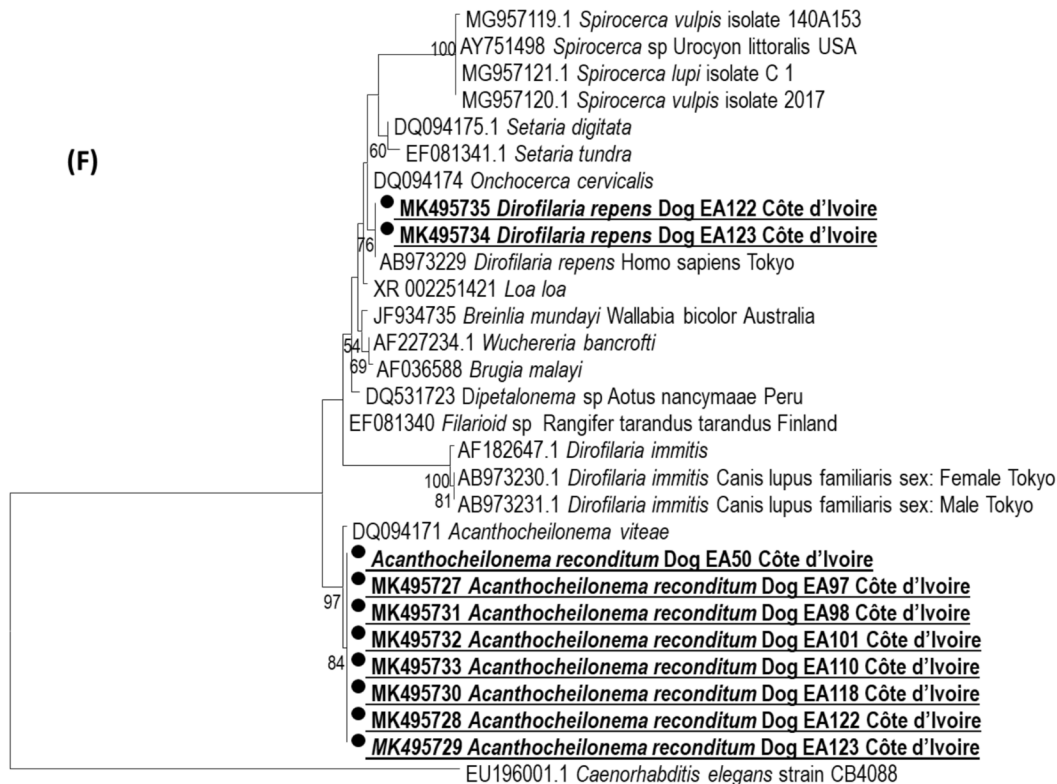


(E)



0.02

(F)



0.02