



Research Article

ISSN : 2277-3657  
CODEN(USA) : IJPRPM

## ***Isolation and identification of free living amoebae from water sources with respect to Acanthamoeba, Naegleria in Jeddah city, Saudi Arabia***

**Fawzia H. Toula<sup>1\*</sup>, Saedia A. Sayed Elah<sup>2</sup>**

<sup>1</sup>Department of Biology, College of Science for Girls, King Abdul-Azize University, KSA

\*Corresponding authors: Fawzia H. Toula

Department of Biology, College of Science for Girls, King Abdul-Azize University, KSA

Email:ftoula@kau.edu.sa

<sup>2</sup> Medical Parasitology Department Faculty of Medicine for Girls, Al-Azhar University, Egypt

---

### ABSTRACT

Free-living amoeba (FLA) are ubiquitous protozoa that have been isolated from a wide range of environments particularly water and soil. Only *Acanthamoeba*, *Naegleria*, *Balamuthia* and *Sappinia* genera are responsible for opportunistic and non-opportunistic infections in humans and other animals. Also, FLA serve as reservoirs for several bacteria, virus and protozoa. The present study has been conducted to characterize the distribution of both *Acanthamoeba* and *Naegleria* species in water sources and swimming pools in Jeddah city, in addition to determination of the potential risk of human health through bacterial acquisition by these amoebae.

A total of 64 water samples; houses (32), mosques (16) and swimming pools (16) were collected. Water samples were prepared and sterile cotton swabs were cultured on plate of non-nutrient agar supplemented with *E. coli* for up to 14 days, in addition, negative controls were carried out, each inoculated with sterile distilled water. And respectively, the total positive samples were 32.8%; houses were 31.25%, mosques were 31.25% and swimming pool achieved 37.5%. *Acanthamoeba* accounted for 80.95% from the total positives while *Naegleria* was 19.05%. On examining some positive samples of FLA with electron microscope there were many specimens which showed intracellular micro-organisms which are needed to be further identified by polymerase chain reaction or through specific probes.

**Keywords:** Isolation and identification of free living amoebae *Acanthamoeba*, *Naegleria*

---

### INTRODUCTION

Free-living amoeba (FLA) are ubiquitous protozoa that have been isolated from a wide range of environments, such as water sources, soil, dust, air conditioning vents, sewage, contact lenses, and dialysis units, but they are particularly abundant in water and soil [1,2,3,4].

Out of the many FLA that are found in nature, only four genera, namely *Acanthamoeba*, *Naegleria*, *Balamuthia* and *Sappinia* are responsible for opportunistic and non-opportunistic infections in humans and other animals [5,2,6].

The genus *Acanthamoeba* has been currently classified into 20 genotypes [7,8,9]. Only a few species of *Acanthamoeba* are human pathogens, with the potential to cause granulomatous amoebic encephalitis (GAE) in immunosuppressed patients [10,11]. *Acanthamoeba* keratitis has been investigated in several countries. Human infection with *Acanthamoeba*, causing keratitis, occurs through contamination when contact lenses are rinsed in nonsterile water or when lenses are worn while bathing or swimming in a no disinfected aquatic environment

[1,12,11]. In addition, skin lesions and systemic infections of *Acanthamoeba* were reported among patients with immunodeficiency as well as healthy individuals [13]. Amoeba-associated bacteria as agent of ventilator-associated pneumonia were isolated from intensive care units [14,15].

More than 40 species of the genus *Naegleria* (N.) have been classified by molecular techniques, among them, only *N. fowleri* infections is the most virulent FLA [16,17].

*N. fowleri* is the causative agent of primary amoebic meningo-encephalitis (PAM) [2,18]. The infection begins when contaminated water passes through the nose, usually during swimming or diving, where amoebae reach the brain along the olfactory nerve fibers, and through the perforated plate. PAM is almost always fatal and the victims die within 3-7 days after the onset of symptoms and was most frequently reported in healthy young persons with a recent history of aquatic activities [19].

In addition to their pathogenicity, FLA serve as reservoirs for several bacteria such as *Pseudomonas aeruginosa*, *Legionella pneumophila*, *Helicobacter pylori*, *Mycobacterium avium*, *Chlamydia* and *Vibrio cholera*, *Klebsiella* spp. and *Aspergillus* spp. [20,21,22,23] and for viruses such as *Mimivirus* [14], enterovirus [24], and Adenoviruses [25].

Furthermore, it has been shown that the growth of bacteria in FLA increases bacterial virulence, consequently representing an important reservoir of human pathogens [26].

The aim of this work is (I) to characterize the distribution and genera richness of free-living amoebae especially *Naegleria* and *Acanthamoeba* through the morphological identification (II) to determine bacterial endosymbiosis in the recovered *Acanthamoeba* isolates as a potential risk to human health in Jeddah city, Saudi Arabia.

## MATERIAL AND METHODS

### Sampling sites

Tap water samples (as all water tanks were underground) taken from houses (H) (6), mosques (M) (6) and 6 swimming pools (SP) from the following districts: Alnahdhah, Alnaem, Alsalamah and Alrawdahah of the region of Jeddah city, western margin Saudi Arabia.

### Sampling collection

From each site, 2000 ml of tap water of each house and mosques, while 1000 ml from the area within the middle of each swimming pool (SP) wall and (6) samples were collected by scrapping with sterile cotton wool of the SP margin.

### Preparation of samples for cultivation and isolation

Cotton wool scrapped samples were directly streaked in the middle of the (NNA-E. coli) plates and labeled accordingly. For the water samples, they were processed prior to cultivation. The bottle containing the water sample was shaken vigorously to mix the contents, then filtered through a 1.2 um pore size cellulose nitrate membrane (Millipore) by mild suction. Filtration was stopped when 3-5 ml of the water sample was left above the membrane and the trapped debris was carefully flushed in situ with 6.0 mL of sterile distilled water followed by spreading 1.0 mL evenly onto each of 6 NNA-E coli plates. The culture plates were sealed with parafilm and were incubated at room temperature (28±2°C), 37 and 45°C respectively, for up to 14 days. A group of 2 plates from each of the sampling and sub-sampling sites were then incubated at room temperature (28±2°C), 37°C and 45°C respectively. Three sets of 2 types of negative controls were carried out, each inoculated with sterile distilled water and sterile cotton wool respectively, onto NNA-E. coli plates and incubated as for the test samples [27].

### Detection of FLA

All the cultured plates were examined daily for up to 14 days by inverted and light microscopes before being discarded. The presence of FLA could be seen by the clear tracks on the *E. coli* lawn, produced by the feeding

trophozoites of *Acanthamoeba* and *Naegleria*, which were readily apparent after 48-72 hours (h) of incubation. The specific morphological appearances of the trophozoites, cysts and flagellates were identified accordingly based on the reports by several workers [28], the images of the selected organisms were photographed using light microscope (Olympus BX51) which was attached to a photo adapter and a computer installed with imaging software.

#### Enflagellation test for *Naegleria* species

Culture plates that were seen to contain *Naegleria* trophozoites were added with 3ml of PAS solution or sterile distilled water and placed onto a shaker at 50rpm observations for the highly motile flagellates were carried out every 30 minutes for up to 6h with light microscope followed by photography.

#### Sub-cultivation and isolation of FLA

Subculture was carried out for all the positive plates with growth of *Acanthamoeba* or *Naegleria* or both.

#### Ultrastructure study

The ultrastructure and the intracellular niche of the bacterial symbionts within their amoeba host cells were further investigated by transmission electron microscopy (TEM). For this analysis one representative of each was selected. Amoebae were harvested from axenic cultures and directly fixed with 2% glutaraldehyde in 1ml paged amoebic saline (PAS) for 1h at room temperature, followed by fixation with 2% osmium tetroxide for 1h at room temperature and dehydration in an ascending series of acetone. Subsequently, samples were embedded in spur resin (Sigma-Aldrich) with polymerization at 60 c for 8 to 12 h . Ultrathin sections were stained with 1% uranyl acetate for 4 min and 0.3% lead citrate for 2 min and examined with a Zeiss CEM 902 transmission electron microscope.

## RESULTS

#### Isolation of FLA

All culture plates were examined daily up to 14 days using a light microscope before being discarded, detection was done depending on the specific morphological appearance of trophozoite, cysts of *Acanthamoeba* and trophozoite, flagellates and cysts of *Naegleria* were identified based on the reports by several documents (Figure 1).

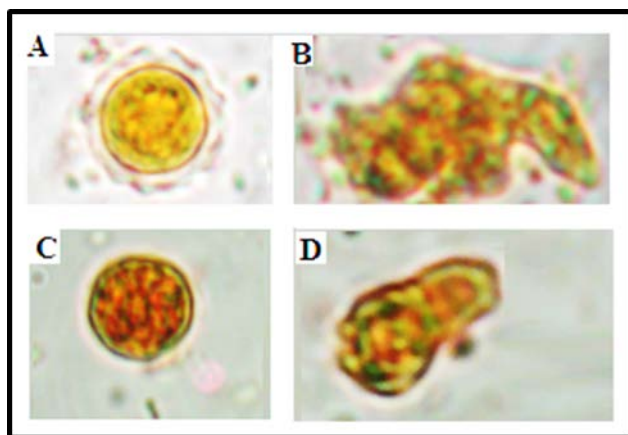


Figure (1): Cultured free living amoebae from different sources and stained with iodine. A) *Acanthameoba* cyst; B) *Acanthameobatrophozoite*; C) *Naegleria* cyst and D) *Naegleriatrophozoites*.

#### Growth capability of both *Acanthameoba* and *Naegleria* species

All these isolates showed growth rates 91.8%, 87.2% at room temperature  $28\pm 2^{\circ}\text{C}$  and  $37^{\circ}\text{C}$  and 6.4, 0% at  $45^{\circ}\text{C}$  respectively.

Acanthamoeba and Naegleria occurrence (Table 1 and 2)

Table (1): Prevalence of Acanthamoeba and Naegleria species at the selected sites

Sample site	No. of samples	No. of +Ve sites	% of +Ve
Houses (H)	32	10	31.25%
Mosques (M)	16	5	31.25%
Swimming pool (SP)	16	6*	37.5%
Total examined	64	21	32.8%

\* +Ve SP, samples were mainly of those cotton wool scrapped (86.4%).

Table (2). Occurrence of Acanthamoeba/ Naegleria genera in the selected studied samples.

Protozoan/ site	H		M		SP		total	%
	No	%	No	%	No	%		
Acanthamoebaspp	9	52.5	4	23.5	4	66.6	17	80.95
Naegleriaspp	1	25	1	1.25	2	33.3	4	19.05
Total	10		5		6		21	100

### Transmission Electron Microscopy (TEM)

Through ultrastructural study, micro-organisms were observed inside both trophozoites and cysts (Figure 2).

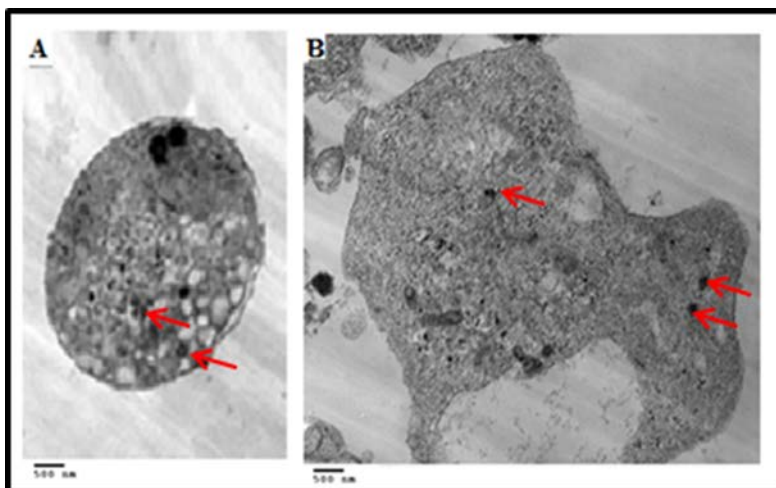


Figure (2) Transmission electron microscopy. A) Acanthameoba cyst; B) Acanthameobatrophozoite. Red arrows point to bacteria which are endosymbiosis.

### DISCUSSION

Free living amoebae are ubiquitous protozoa including many phylogenetically diverse genera as Acanthamoeba and Naegleria. Several species within these genera are recognized as potential human pathogens which are responsible for opportunistic and non-opportunistic infections in humans and other animals [5,6,11] .

They can infect the central nervous system resulting in granulomatous amoebic encephalitis (GAE), primary amoebic meningoencephalitis (PAM). PAM due to *Naegleria* [19] could be found in healthy people, while GAE is usually found in immunosuppressive patients [27]. In addition, FLA can also act as vectors and reservoirs for several viruses [14,25], and for pathogenic bacteria [20,21].

FLA have been isolated from freshwater lakes, thermally polluted waters, sediment, hot springs, swimming pools, soil, dust, air conditioning vents, sewage, the hospital water supply, contact lenses, and dialysis units [1,3,4,29].

The present study has been conducted to characterize the distribution of both *Acanthamoeba* and *Naegleria* species in water sources and swimming pools in Jeddah city, in addition to determination of the potential risk of human health through bacterial acquisition by these amoebae.

Out of 64 water samples from four different districts of Jeddah city, 21 positive samples for *Acanthamoeba*, *Naegleria* or both were detected with 32.8%. The genus *Acanthamoeba* has reported as the most common FLA in the study (80.95%), while *Naegleria* (19.05%), this in accordance with [30,31], authors attributed these findings to that *Acanthamoeba* is often associated with contaminated, bacteria- rich water and that *Naegleria* are more sensitive to environmental conditions such as dry, PH and extremes of temperature.

Dealing with the occurrence of both *Acanthamoeba* and *Naegleria* in tap water and swimming pools in Saudi Arabia, to our knowledge, few studies have been conducted [32,33,34].

The current study recorded the prevalence of *Acanthamoeba* spp, among the positive cases were 52.5, 23.5 and 23.5% in tap water of houses, mosques and swimming pools water respectively. These findings are higher than that recorded by [33] and lower than those recorded by [34] in Saudi Arabia and in accordance with [35] from households of UK and [12] in Spain. These results demonstrate that domestic tap water is an important source of potentially pathogen protozoan runs in direct contact with human activities.

The difference in the prevalence of *Acanthamoeba* contamination in tap water in different countries might be due to the difference in the tap water hygiene in each country. FLA were more frequently isolated in community dwelling house types than in independent ones, community dwelling type houses and most independent ones in this survey area have water storage tanks, which are not often tightly covered. Therefore, environmental organisms can easily contaminate them [36].

These two genera showed better growth capability 91.8 and 87.2% at  $28 \pm 2$  and  $37\text{ C}^\circ$  respectively, while it was 6.4, 0% at  $45\text{ C}^\circ$ . For the growth capability test, both of the FLA were found to be suitable and best grown at room temperature ( $28 \pm 2\text{ C}^\circ$ ), followed by  $37\text{ C}^\circ$  incubation. The growth rate was slower at  $37\text{ C}^\circ$  which might be due to the overgrowth of *E. coli*, which sometimes made the detection of FLA difficult. At  $45\text{ C}^\circ$  incubation, none of the *Naegleria* was able to grow. All of the *Naegleria* detected were from the non-pathogenic species due to its inability to survive at high tens temperature ( $45\text{ C}^\circ$ ). On the contrary, (64%) of the culture plates showed positive growth of *Acanthamoeba* at  $45\text{ C}^\circ$ . [27,37] recorded that these genera grow better at higher water temperature specially those pathogenic species.

Out of the 16 sampled SP, *Acanthamoeba* were detected in 4 and *Naegleria* in 2 of them with 37.5% of all, *Acanthamoeba* was detected in higher number of positive culture plates. This could be explained by the fact that the thick double-walled cyst of *Acanthamoeba* resists chlorine disinfection at levels up to 50 parts per million (ppm) and this concentration is far in excess of those used in swimming pools (<40 ppm). Only 5 chlorine concentration higher than 1.5 mg/ml affectively destroys spore from of free-living amebae in swimming pools, but are being introduced over and over again with soil by people [24].

In Saudi Arabia, *Acanthamoeba* spp. was detected in 50% and 78% of swimming pools [33,34], in Egypt [38] recorded 49.2% and in Malaysia both *Acanthamoeba* and *Naegleria* were detected in the walls of the SP (76.2%). The current study recorded that the positive samples were mainly of those sterile cotton swaps scrapped walls of SP, this could be explained by the fact that the surface of the wall was always covered with algae which might enhance the growth of other organisms such as bacteria, other microbes, organisms, etc, thus providing sufficient requirement

for the FLA to attach and obtain food. The presence of the detritus, filamentous cyanobacteria and eubacteria may also provide food sources for the FLA [39].

Herein, many micro-organisms were detected by electron microscope in many isolated FLA. Free living amoebae have been reported to feed mainly on bacteria, fungi, and algae by phagocytosis. With digestion occurring within phagolysosomes some bacteria have evolved to become resistant to protists. They are thus able to survive, grow, and exit free living amoebae after internalization. Among the amoeba resistant bacteria, some are obligate intracellular bacteria, and others are considered endosymbionts, because a stable host-parasite ratio is maintained [40].

The study of parasites and symbionts of FLA is interesting. [24] summarized the role of FLA in transmission of amoeba-resistant micro-organisms through acting as a vehicle known as "Trojan horses" [41] or may vesicles filled with these micro-organisms [24].

The found intracellular bacteria and organisms are needed to be further identified by PCR chain reaction or specific probes. In the future, the study of free-living amoebae and their intracellular microbes will contribute to the growing field of study of emerging pathogens and will shed some light on the virulence mechanisms of environmental micro-organisms.

### CONCLUSION

This study indicated that tap water is an important source of FLA and further studies are recommended to investigate the mode of spread of this micro-organisms and factors affecting their pathogenesis, in addition to proper identification of the micro-organisms that FLA harbor.

### ACKNOWLEDGMENTS

The authors acknowledge with thanks the Deanship of Scientific Research (DSR), King Abdulaziz University, Jeddah, for technical and financial support under Grant no. D 1435/363/129.

### REFERENCES

1. Marciano-Cabral, F and Cabral, 2003. Acanthamoeba spp. as agents of disease in humans. ClinMicrobiol Rev., 16: 273-307.
2. Visvesvara, GS, Moura, H and Schuster, FL, 2007. Pathogenic and opportunistic free-living amoebae: Acanthamoeba spp., Balamuthia mandrillaris, Naegleria fowleri and Sappinia diploidea. FEMS Immunol. Med Microbiol., 50: 1-26.
3. Corsaro D, Pages GS, Catalan V, Loret, JF and Greub G, 2010. Biodiversity of amoeba-associated bacteria in water treatment plants. Int J Hyg Environ Health, 213: 158-166.
4. Trabelsi, H, Dendana, F., Sellami, A, Cheikhrouhou, F, Hegi, S, Makni, F. and Ayadi, A., 2012. Pathogenic Free-living amoebae: epidemiology and clinical review. Pathol Biol., 60: 399-405.
5. Khan. NA, 2005. Acanthamoeba: biology and increasing importance in human health. FEMS Microbiol. Rev., 30: 564-595.
6. Qvarnstrom. Y, da Silva, AJ., Schuster, FL, Gelman, BB and Visvesvara, GS, 2009. Molecular confirmation of Sappinia pedata as a causative agent of amoebic encephalitis. J Inf Dis., 199 (8): 1139-1142.
7. Qvarnstrom Y, Nerad TA and Visvesvara GS, 2013. Characterization of a new pathogenic Acanthamoeba species, A. byersi n. sp., isolated from a human with fatal amoebic encephalitis. J Eukar Micro., 60: 626-633.
8. Magnet A, Peralta RHS, Gomes TS, Izquierdo F, Fernandez-Vadillo C, Galvan AL, Pozuelo MJ, Pelaz C, Fenoy S and Del Águila C. 2015. Vectorial role of Acanthamoeba in Legionella propagation in water for human use. Sci Total Environ., 505:889-895.
9. Corsaro D, Walochnik J, Kohsler M and Rott MB, 2015. Acanthamoeba misidentification and multiple labels: redefining genotypes T16, T19, and T20 and proposal for Acanthamoeba micheli. sp. nov.(Genotype T19). Parasitol Res., 114:2481-2490.

10. Tsvetkova N, Schild M, Panaiotov S, Kurdova-Mintcheva R, Gottstein B, Walochnik J, Aspöck H, Lucas MS and Müller N., 2004. The identification of free-living environmental isolates of amoebae from Bulgaria. *Parasitol Res.*, 92(5):405-413.
11. Visvesvara GS, 2013. Infections with free-living amoebae. *Hand Clinical Neurol.*, 114:153-168.
12. Lorenzo-Morales J, Lindo JF, Martinez E, Calder D, Figueruelo E, Valladares B, et al. 2005. Pathogenic Acanthamoeba strains from water sources in Jamaica, West Indies. *Ann Trop Med Parasitol.*, 99(8):751-758.
13. Bagheri HR, Shafiei R, Shafiei F and Sajjadi SA, 2010. Isolation of Acanthamoeba Spp. from Drinking Waters in Several Hospitals of Iran. *Iranian J Parasitol.*, 5 (2): 19-25.
14. La Scola B and Raoult D. 2001. Survival of *Coxiellaburnetii* within free-living amoeba *Acanthamoebacastellanii*. *ClinMicrobiol Infect.*, 7:75-79.
15. Berger P, Papazian L, Drancourt M, La Scola B, Auffray J, and Raoult, D, 2006. Comments to Author Ameba-associated Microorganisms and Diagnosis of Nosocomial Pneumonia. *EmInf Dis.*, 12(2):248-55.
16. Martinez, JA and Visvesvara, GS, 1997. Free-living, amphizoic and opportunistic amebas. *Brain Pathol.*, 7: 583-598.
17. Linam W M, Ahmed M, Cope JR, Chu C, Visvesvara GS, da Silva AJ, Qvarnstrom Y, and Green J, 2015. Successful treatment of an adolescent with *Naegleriafowleri* primary amebic meningoencephalitis. *Pediatrics.*, 135(3): e744–e748.
18. Kemble SK, Lynfield R, DeVries AS, et al. 2012. Fatal *Naegleriafowleri* infection acquired in Minnesota: possible expanded range of a deadly thermophilic organism. *Clin Infect Dis.*, 54(6):805-809.
19. Wiwanitkit, V (2004). Review of clinical presentations in Thai patients with primary amoebic meningoencephalitis. *Med G Medi.*, 6(1): 2.
20. Mardano-Cabral, F, 2004. Introductory remarks: bacterial endosymbionts or pathogens of free-living amebae. *J EukaryotMicrobiol.*, 51 (5): 497-501.
21. Thomas, V, McDonnell, G., Denyer, SP and Maillard, JI, 2010. Free-living amoebae and their intracellular pathogenic microorganisms: risks for water quality. *FEMS Microbiol Rev.*, 34 (23): 231-259.
22. Cateau E, Delafont V, Hechard Y and Rodier MH, 2014. Free-living amoebae: what part do they play in healthcare-associated infections? *JHos Infect.*, 87:131-140.
23. Fukumoto T, 2016. Acanthamoeba containing endosymbiotic chlamydia isolated from hospital environments and its potential role in inflammatory exacerbation. *BMC Micro.*, 16:292.
24. Greub G and Raoult D, 2004. Microorganisms resistant to free-living amoebae. *ClinMicrobiol Rev.*, 17(2):413-433.
25. Scheld, P and Schwarzenberger, R, 2012. Acanthamoeba spp. As vehicle and reservoir of adenoviruses. *Parasitol Res.*, 111: 479-485.
26. Bonilla-Lemusa P, Adán S, Villegasa C, Carmona J et al., 2014. Occurrence of free-living amoebae in streams of the Mexico Basin. *ExpParasitol.*, 145: S28-S33.
27. Init I, Lau YL, Arin Fadzlun A, Foad A, Neilson RS and Nissapatorn, V., 2010. Detection of free living amoebae, Acanthamoeba and Naegleria, in swimming pools, Malaysia *Tropical Biomedicine* 27(3): 566–577.
28. Page. FC, 1988. A New Key to Freshwater and Soil Gymnamoebae Freshwater Biological Association. Cumbria, UK, Pp. 122.
29. Muchesa P, Leifels M, Jurzik L, Hoorzook KB, Barnard TG, and Bartie C, 2016. Coexistence of free-living amoebae and bacteria in selected South African hospital water distribution systems. *Parasitol Res.*, 116(1):155-165.
30. Bonilla P, VilaciaraG, Merino M, Carmona J, Gaytan M, Castillo S, Ramirez-Zierold J, Ramirez E and Ibarra MR, 2009. Free-living amoebae in high-altitude streams from Valle de Bravo-Amanalco basin, central Mexico. In: *Proceedings of Xillth international Meeting on the Biology and Pathogenicity of Free-Living Amoebae (FLAM 2009)*. University of La Laguna, Tenerife, Espana.
31. Bonilla P, Caballero villegas As, Carmona Jimenz J and Lugo Vazquez A, (2014). Occurrence of free-living amoeba in streams of the Mexico basin *ExpParasitol.*, 145: 528-533.
32. Wagoner MD and Nemon SE, 1999. Concomitant Acanthamoeba and *Streptococcus viridans* keratitis. *Middle East J Ophthalmol.*, 2:152-156.

33. Issa RM, 2007. Acanthamoeba: Epidemiology, pathogenicity and evaluation of effectiveness of recent drugs. *RMJ.*, 32: 56-59.
34. Hikal, 2015. Detection of Acanthamoeba species from water tanks in Saudi Arabia. *AARJMD*, 1 (30).
35. Kilvington S, Gray T, Dart J, Morlet N, Beeching JR, Frazer DG, et al. 2004. Acanthamoeba keratitis: the role of domestic tap water contamination in the United Kingdom. *Invest Ophthalmol Vis Sci.*, 45(1):165-169.
36. Jeong HJ and Yu HS, 2005. The role of domestic tap water in Acanthamoeba contamination in contact lens storage cases in Korea. *Korean J Parasitol.*, 43:47-50.
37. De Jonckheere, J. E. 2012. The impact of man on the occurrence of the pathogenic free diving amoeboid flagellate *Nuegleria fowleri*. *Future Microbiol.*, 7 (1): 5-7.
38. Al-Herrawy A, Bahgat M, Mohammed A, Ashour A and Hikal W, 2014. Acanthamoeba species in Swimming Pools of Cairo, Egypt. *Iranian J Parasitol.*, 9 (2) 194-201.
39. Kyle DE and Noblet GP, 1985. Vertical distribution of potentially pathogenic free-living amoebae in freshwater lakes. *J Protozool.*, 32(1):99-105.
40. Lorenzo-Morales J, Coronado-Alvarez N, Martínez-Carretero E, Maciver SK and Valladares B 2007. Detection of four adenovirus serotypes within water-isolated strains of Acanthamoeba in the Canary Islands, Spain. *Am J Trop Med Hyg.*, 77(4):753-756.
41. Barker J and Brown MR, 1994. Trojan horses of the microbial world: protozoa and the survival of bacterial pathogens in the environment. *Micro.*, 140 (Pt 6):1253-1259.