

## Chicken Salmonellosis Prevalence and Its associated risk factors : The case of Asossa town, Benishangul Gumuz Regional State, Western Ethiopia

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**SUMMARY:** Cross - sectional study on Chicken Salmonella prevalence, and associated risk factors in Asossa town, Benishangul Gumuz Regional State was carried out from September 2024 to February 2025 with the objectives to determine the prevalence of Salmonellosis from small householder farmstead/ local poultry farm, and assessment of the risk factors associated with salmonella infection. For this purpose, a total of 384 cloacal swab samples were collected and were subjected to various cultural and biochemical examinations, 87(22.65%) of the positive isolates were identified. In this study, previous treatment history, body conditions and salmonella species were potential risk factors, which were statistically significant for salmonella infection ( $p < 0.05$ ) whereas origin/sites/ and sex groups were not significant ( $p > 0.05$ ). The antimicrobial susceptibility profile of all isolates were assessed against six antimicrobials by disk diffusion technique; almost all isolates were resistant to one or more of the tested antimicrobials. 73.07%, 65.38%, 30.76 %, 26.92%, 15.38%, and 11.53% of the isolates were resistant to Tetracycline, Streptomycin, Trimethoprim, Chloramphenicol, Gentamycin, and Ciprofloxacin respectively. However, the majority of the isolates were susceptible to Ciprofloxacin and Gentamycin, Chloramphenicol, followed by Trimethoprim. This is a significant threat to public health particularly to those who have direct or indirect contact to poultry and poultry products so that hygienic management of poultry and its products in order to reduce the risk and selection of antimicrobials by antimicrobial sensitivity test were also suggested.

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**Key words:** Asossa; Chicken; Cloacal swab; drug resistant; Isolates; Chicken

### 1. INTRODUCTION

Salmonellosis is an important zoonotic disease caused by the genus *Salmonella* which constitutes a major public health burden and represents a significant cost in many countries. The prevalence of *Salmonella* in animals is a continuous threat to human health (Murugkar *et al.*, 2005). Salmonellae are widely distributed in nature and cause a spectrum of diseases in man, animal and birds. Poultry eggs, meat and their products are the commonest vehicles of *Salmonella* to humans (Nagappa *et al.*, 2007). Every year millions of human cases are reported worldwide and the disease results in thousands of deaths (Herikstad *et al.*, 2002).

Members of the genus *Salmonella* are Gram-negative, motile, facultatively anaerobic organisms belonging to the family *Enterobacteraceae* (Ellermeier and Schlauch, 2006). The genus *Salmonella* contains two species, *Salmonella enterica*, which consists of six subspecies, and *Salmonella bongori*. Currently the genus includes a total of more than 2,500 serotypes (Popoff *et al.*, 2004). *Salmonella* nomenclature is complex, and is based on names for serotypes in subspecies I. For example, *Salmonella enterica* subsp. *enterica* serotype Enteritidis, is shortened to *S. Enteritidis* (Brenner *et al.*; 2000). *Salmonella enterica* subspecies *enterica* (subspecies I) is responsible for 99.5 % of infection in man and animal (Martin *et al.*, 2006). Most of the infections are zoonotic in origin but some serotypes like *S. Typhi* and *S. Paratyphi* infect only humans (Yan *et al.*, 2003). The infectious dose, incubation period, symptoms and mode of transmission of salmonellosis caused by different serotypes are similar. Symptoms include diarrhea, fever and abdominal cramps with incubation periods ranging from 12 to 72 hours. The illness usually lasts from 4 to 7 days and most people recover without treatment. The elderly, infants and those with impaired immune systems are more likely to have a severe illness (Hans and Dean, 2006).

Egg contents may be contaminated with salmonellae by two routes: vertical transmission (transovarian) or horizontal (trans-shell) transmission (FAO/WHO, 2002). In transovarian transmission, *Salmonella* are introduced from infected reproductive tissues to eggs prior to shell formation. *Salmonella* serotypes associated with poultry

reproductive tissues and that are of public health concern include *S. Enteritidis*, *S. Typhimurium* and *S. Heidelberg* (ICMSF, 1996; ACMSF, 2001). *S. Enteritidis* may be better able to achieve invasion (ACMSF, 2001).

Horizontal transmission is usually derived from fecal contamination on the egg shell with penetration after the egg is laid. It also includes contamination through environmental vectors, such as farmers, pets and rodents. Many different serotypes of the genus *Salmonella* may be able to contaminate egg contents by migration through the egg shell and membranes. Such a route is facilitated by moist egg shells, storage at ambient temperature and shell damage (ACMSF, 2001).

Food Standards Agency (FSA, 2003) of the United Kingdom has drawn attention to the risk associated with eating raw and lightly cooked eggs and issued public health advice on the safe handling and use of eggs. It is estimated that, in the United States, *Salmonella* transmission through contaminated shell eggs or egg products results in 700,000 cases of salmonellosis and costs 1.1 billion United States dollar annually (Rodriguez and Yousef, 2005). In many countries, *Salmonella* spp. is controlled in egg production chain. In addition, storing eggs in a cool area (below 15°C) and keeping eggs separate from other foods is important to avoid possible *Salmonella* cross contamination and keep eggs safe (Hans and Dean, 2006). One study in Ethiopia showed from the total 400 chicken eggs examined for *Salmonella* prevalence, 46 (11.5 %) were positive, from which 25 (6.3 %) and 27 (6.8 %) were found from egg shell and egg content, respectively (Minte *et al.*, 2011).

The use of antibiotics in food animals selects bacteria which are resistant to antibiotics used in humans. These might be spread via the food to humans and cause human infection (Phillips, 2004). Amongst *Salmonella* spp., antimicrobial resistance is a well confirmed phenomenon and antimicrobial-resistant *Salmonella* are increasingly associated with the use of antimicrobial agents. Antimicrobials are substances that have significantly contributed to the prevention and treatment of infectious diseases in humans, as well as to many animal species (CDC, 2008). However, the excess or overuse of antimicrobials can generate genomic selective pressures to enable microbes to adapt and acquire resistance (Witte, 2001).

Ultimately, increases in bacterial antimicrobial resistance pose a considerable threat to public health, especially for vulnerable populations including young children (Shea, 2003), the elderly and immune compromised individuals (Hitti and Wolff, 2005). Concentrated animal feeding operations (CAFOs) in agricultural practices have evolved to accommodate food consumption rates with increased agricultural output at the risk of introducing antimicrobial resistant pathogens into the environment. In addition, several studies have suggested that characteristics of agricultural environmental settings, including animal crowding, CAFO hygiene, temperature, ventilation control and stress, can influence antimicrobial resistance and pathogen risk (Silbergeld *et al.*, 2008).

There are reports of high prevalence of resistance in *Salmonella* isolates from countries such as Taiwan (Lauderdale *et al.*, 2006), India (Mandal *et al.*, 2004, 2006), the Netherlands (Duijkeren *et al.*, 2003), France (Weill *et al.*, 2006), Canada (Poppe *et al.*, 2006) and Ethiopia (Mache, 2002; Molla *et al.*, 2003, 2006; Ayalu *et al.*, 2011; Beyene *et al.*, 2011; Sibhat *et al.*, 2011). The presence of resistant organisms in the poultry and poultry products for consumption is a safety concern to the population (Schlundt *et al.*, 2004) and therapeutic concern for the physicians which might pose prolonged treatment in cases of outbreaks, delayed recovery or treatment failure (Silbergeld, 2008). There is a scarcity of knowledge concerning poultry farm development associated with antimicrobial resistance and foodborne bacteria. Information on the antimicrobial resistance pattern of the *Salmonella* isolates from chicken table eggs could be useful for successful treatment, as well as planning strategic use of drugs to minimize resistance in the future.

In Ethiopia as in other developing countries, it is difficult to evaluate the burden of salmonellosis because of the limited scope of studies and lack of coordinated epidemiological surveillance systems. In addition, under-reporting of cases and presence of other diseases considered to be of high priority may have overshadowed the problem of salmonellosis (Beyene *et al.*, 2011). Salmonellosis is endemic in the country and there is a desire to strengthen the monitoring and surveillance of salmonellosis using suitable diagnostic tools so as to prevent and control its occurrence. Besides this, the extent of *Salmonella* contamination of cloacal swab, egg shell surface swab and antimicrobial profile of the *Salmonella* isolates has not been adequately studied and limited information exists in the Asossa District. Therefore, the present study focusing with the objectives of determining the prevalence of *Salmonella* isolated from cloacal swab, to identify risk factors associated with salmonellosis and to determine the antimicrobial susceptibility profile of the salmonella in the study area.

## 2. MATERIALS AND METHODS

### 2.1 Study Area

The study was conducted in Assosa town, BenishangulGumuz Regional State, west Ethiopia. According to CSA (2007), before a year, Assosa town (the capital city/town of BenishangulGumuz Regional State) had four kebeles but currently, the town has changed its administrative structure to two districts (district-1 and district-2). Each district has five “ketenas”. According to BGRSMSC (2020), the town is located at 10° 00’ and 10° 03’ north latitude and 34° 35’ and 34° 39’ east longitude. The total population of the town is 62,632 of which 32,100 are male and 30,532 are female (projection made for the CSA, 2020). The total area of the town is 2361.34 hectares with an altitudinal difference that ranges between 1461- 1641 meters above sea level (BGRSEIB, 2020). The mean annual temperature of Assosa town ranges from a minimum of 14-33°C. However, there is a slight variation of temperature by month. February to May is the hottest months while November to December is the cold months). The total amount of rain fall recorded at Assosa town during the last nine months of (2020) is 1,119 mm (BGRSMSC, 2020). The rainy season starts in March and extends to November with the highest concentration in June, July, and August. The population size of different livestock species in Assosa town are cattle 569, goat 1545, sheep 739, poultry 17676 donkeys 122, and pig 8 total 20,659 livestock populations are found in the town (ATAOA, 2020).



Figure 1: Administrative map of Assosa town (ATAO, 2021)

### 2.2 Study population

The study animals was apparently health chickens kept under intensive farming system. The farms were categorized as small (1000 chickens), medium (1001-2000 chickens) and large scale (>2000 chickens) farms according to flock size (Edge *et al.*, 2023). Chickens included in this study was Saso and Bovans brown breeds and grouped into young (<24 weeks) and adult (>24 weeks) (Sarba *et al.*, 2020).

### 2.3 Study Design

Across- sectional design was conducted from September 2024 to February, 2025 in Assosa town to determine prevalence, associated risk factors from cloacal swabs of chickens kept under intensive farming system.

### 2.4 Sample size Determination

The sample size was estimated using Thrusfield, (2018) formula with an expected prevalence of 23.2% as studied by Asmamaw Aki (2018) in Asossa and Bambasi districts with 0.05 precision and the sample size at a 95% confidence interval. Therefore, the total sample size for the study was calculated using the following formula for each sampling units.

$$n = \frac{(1.96)^2 \times P_{exp} (1-P_{exp})}{d^2}$$

Where: n = the total sample size, P = expected prevalence (50%), d = desired absolute precision (5%), (0.05) at 95% CI

$$n = (1.96) \times (1.96) \times (0.232) \times (1-0.232) / ((0.05) \times (0.05)) = 274 \text{ samples .}$$

## 2.5 Sampling methods

Simple random sampling technique was used, to select the farm included in the study and collect swab samples from chickens kept under intensive farming system in Assosa town. A total of 274 samples from cloacal swab and egg shell swab was collected from chicken of different categories of the poultry farms. Non proportional sampling was used to collect each sample due to availability of limited layers chicken farms. A total of 274 respondents from poultry farms was interviewed by using semi structured questionnaire which covers demographic data, biosecurity measures, feeding, housing and overall managements of the farm. Additionally, information including, flock size, age, sex, farm type, breed type, sanitary/management status and other related information was recorded from each farms.

## 2.6 Questionnaire survey

Semi structured questionnaires was prepared in English language and translated to local language and interviewed to obtain information. Data on each sampled chicken swabs was collected using a properly designed questionnaire format for determining the associated risk factors. This includes demographic data, feeding and watering, environmental contamination, management factors, housing/ventilation, health status, vaccination status, disease conditions, handling practices/ egg storage, egg/ chicken transportation, breed, previous history of treatment, bio security measures, hygienic/sanitary condition and other relevant information related to salmonellosis was gathered .

## 2.7 Sample collection , Transportation and Processing

A total of 274 samples was collected from every local poultry farmstead. Purposive sampling technique was used based on the availability of chickens in the study area/ kebeles. Simple random sampling techniques may be used for selection of each chickens in small holder poultry farmstead of Asossa local poultry farmstead. Aseptic procedure was followed when collecting faecal samples. The sterile plastic bags was used for containing selected cloacal faeces. The cloaca/ vulva/ surface was sterilized by swabbing in 70 % alcohol for 2 min. The cloacal swab/ faecal/ samples was collected in sterile ice box, Therefore, samples was properly transported immediately in an ice box to Regional Veterinary Laboratory of Benishangul Gumuz, Asossa, for microbiological examination. The isolation was conducted utilizing the conventional methods for the detection of *Salmonella* following the standard guidelines from ISO 6579 (ISO, 2002).

## 2.8 Laboratory Analyses

### 2.8.1 Isolation and Identification of *Salmonella*

The isolation and identification of salmonella was performed at the Asossa regional animal health diagnostic microbiology laboratory by using techniques recommended by international organizations for standardization (ISO-6579, 2017). It involves four steps: pre enrichment in pre-enrichment broth media, enrichment in selective media, plating on selective media and biochemical confirmation of suspected colonies from selective media.

**Primary enrichment in non- selective liquid medium (pre-enrichment):** All samples will be pre enriched separately with an appropriate amount of buffered peptone water (Himedia M021, India) (1:9) and will be homogenized using a rotary shaker at 50-350 revolutions per minute for 2min and then enriched by incubating aerobically at 37oc for 18 to 24 hrs (ISO-6579, 2017).

**Secondary enrichment in selective liquid media :** Following non selective pre enrichment, 0.1ml (100µ) of cultured broth was inoculated aseptically into tubes containing 10ml of Rappaport vassiliadis soy broth after mixing by using vortex. Inoculated Rappaport vassiliadis soy broth (Himedia, M880) was mixed well and incubated at 42 oc for 18-24 hrs (ISO-6579,2017).

**Plating out and identification** : Xylose- lysine deoxycholate (XLD) agar plate was used for plating and identification purpose. A loop-full of inoculum from each cloacal swab/ faeces/ sample was transferred and streaked separately onto the surface of XLD agar. The plates were incubated at  $37 \text{ }^{\circ}\text{C} \pm 1 \text{ }^{\circ}\text{C}$  for  $24 \pm 3$  hours. After proper incubation, the plates were examined for the presence of suspected *Salmonella* colonies, which on XLD agar were pink with a darker center and a lightly transparent zone of reddish color due to the color change of the indicator whereas lactose positive salmonellae are yellow with or without blackening. Five *Salmonella* presumptive colonies were transferred to nonselective solid media for further confirmatory tests. Confirmation was done by using biochemical test according to ISO 6579 (ISO, 2002).

### 2.8.2 Biochemical Characterization

**Triple sugar Iron Agar** : The Triple sugar iron agar slants were prepared with a thick butt. A loopful culture of pure growth from nutrient agar will be stabbed into the butt and streaked on the slant and was incubated for 24 hours at  $37^{\circ}\text{C}$ . Typical *Salmonella* cultures show alkaline (red) slants and acid (yellow) butts with gas production (bubbles) and formation of hydrogen sulfide (blackening of the agar) (ISO 6579:2002(E); Quinn *et al.*, 2002).

**Urease test** : The hydrolysis of urea releases ammonia and production of ammonia increases the pH of the medium that changes color of phenol red (pH indicator) to rose pink, and later to moderate red. The basal medium will be sterilized by autoclaving at  $121 \text{ }^{\circ}\text{C}$  for 15 minutes. When it has cooled to about  $50 \text{ }^{\circ}\text{C}$ , 100 ml of a 20 percent solution of pure urea previously sterilized by filtration will be added and poured into test tubes. The isolates will be inoculated into the urea to determine urease production. The inoculated tubes can be incubated at  $37 \text{ }^{\circ}\text{C}$  for up to 96 hours. The observations may be made at an interval of 4, 24, 48 and 96 hours. Urease positive cultures changed the color of the indicator to red (ISO 6579:2002(E); Quinn *et al.*, 1999).

**Simmon's citrate Utilization test** : Simmon's citrate agar was sterilized by autoclaving at  $121 \text{ }^{\circ}\text{C}$  for 15 minutes at 15 lb pressure and cooled for slant formation. The strains were cultured on the prepared Simmon's citrate agar medium, incubated at  $37 \text{ }^{\circ}\text{C}$  for 48 hours and observations will be recorded. Opacity and change in color of bromothymol from green to blue indicated a positive reaction (Quinn *et al.*, 2002).

**Indole test** : Indole is a nitrogen-containing compound that can be formed from the degradation of the amino acid tryptophan by certain bacteria. Tryptone was used as a substrate because it contains much tryptophan. The indole reacts with aldehyde compound of Kovac's reagent and forms red colored compound that is more soluble in alcohol. For indole test peptone water was prepared and the ingredients were dissolved in distilled water, dispensed in test tubes and sterilized by autoclaving at  $121 \text{ }^{\circ}\text{C}$  for 15 minutes. The tubes of the medium were inoculated with test isolates using sterile platinum loop and incubated at  $37 \text{ }^{\circ}\text{C}$  aerobically for up to 96 hours. Finally, 0.5 ml of Kovac's reagent was added to each of the inoculated and uninoculated controls. The tubes were shaken gently and the results were recorded. Positive results were indicated by the development of red color in the alcoholic layer of the reagent and no color in the control tube (Quinn *et al.*, 2002).

## 2.9 Antimicrobial Susceptibility Testing

The agar disc diffusion method, as published by the Clinical and Laboratory Standards Institute, will be used to determine antimicrobial susceptibility patterns (CLSI, 2015). A digital caliper was used to determine the zone of inhibition. Spectinomycin (10  $\mu\text{g}$ ) Vancomycin (30 $\mu\text{g}$ ) Norfloxacin (50 $\mu\text{g}$ ) Kanamycin (30 $\mu\text{g}$ ) Chloramphenicol (50  $\mu\text{g}$ ) Tetracycline (10 g), Erythromycin (15 g), and Penicillin (10 g) are used to test the antibiotic susceptibility of *Escherichia coli* isolates. In a nutshell, the bacteria were suspended in a 0.85 percent sterile normal saline solution in a 0.5 McFarland standardized suspension. A sterile cotton swab was dipped in the standardized bacteria suspension and then streaked uniformly across the Mueller-Hinton agar (Oxoid Ltd., Basingstoke, Hampshire, England) surface. The paper discs impregnated with a set concentration of antibiotics are then placed on the agar surface and inverted for 24 hours at  $37 \text{ }^{\circ}\text{C}$ . The bacterial growth and diffusion of the antibiotics are going to produce obvious zones of inhibition after 24 hours of incubation and are measured in millimeters using a caliper and characterized as susceptible, intermediate, and resistant (CLSI, 2015). The media were checked for free of contamination by incubating 5% of the batch at  $37 \text{ }^{\circ}\text{C}$  for 18-24 hrs, and ice box was used during sample collection, and transportation and the performance of the media were checked using *E. coli* (ATCC, 25922).

Table 1: Antimicrobial susceptibility test interpretive criteria for Enterobacteriaceae

Antibiotics Disc	Disc code	Potency	Zone of diameters		
			Susceptibility (mm)	Intermediate (mm)	Resistance (mm)
Erythromycin	E	15 µg	≥17	12-16	≤14
Vancomycin	VA	30 µg	12	10-11	≤9
Kanamycin	KF	30 µg	≥18	13-17	≤13
Tetracycline	T	10 µg	≥15	12-14	≤11
Chloramphenicol C	C	50 µg	≥18	13-17	≤12
Penicillin G	P	10 µg	29	-	28

### 3. DATA ANALYSIS

Processing of data was done by computer software. Data was coded and entered to MS Excel spreadsheet and checked for accuracy. After validation, it was transferred and processed using computer software STATA version 12 for analysis. Pearson's chi-square tests will be used when appropriate to analyze the proportions of categorical data. Odd ratio and 95% CI will be computed, the 95% confidence level was used, and results was considered significant at ( $P < 0.05$ ).

### 4. Ethical Considerations

This protocol was presented for initial and continuing review and approval by JUCAVM institutional ethical review board. Any changes to the protocol or consent form were approved by all ethics committees. Since the study involves domestic animals subject, the ethical approval for the study were obtained from Ethical Research Board (ERB) of the JUCAVM for domestic animal.

### 5. RESULTS

#### 5.1 Prevalence of Salmonella in poultry

A total of 274 Sasu and Bovans poultry samples were randomly collected at Assosa district 01 and 02 during the study period. Samples were processed microbiologically for isolation and identification of *Salmonella*. Based on the bacteriological culture and biochemical test, 26/ 274 (9.48%) *Salmonella spp* were isolated and it was found to be statistically significant ( $P > 0.08$ ,  $\chi^2 = 3.06$ ). The highest salmonella distribution were observed in district 02 (12.41%) while the lowest prevalence was reported in district 01 (6.20%) as shown in (Table 2).

Table 2: Origin based prevalence of salmonella by culture and biochemical test

Factors	Asossa town	No examined	Prevalence(%)	Chi2	p-value
Study areas	District 1	129	8(6.20)	3.06	0.08
	District 2	145	18(12.41)		
Sample type	Cloacal swab	212	21(9.90)	0.18	0.66
	Egg shell swab	62	5(8.06)		

(274 Chicken swab were examined, overall salmonella prevalence at different study site level were ( $n=274$ , 9.48%), by bacteriological method. The prevalence of salmonella amongst study sites has significant difference ( $X^2=3.06$ ,  $Pr=0.08$ ) (Table 2).

#### 5.2. Risk Factors Associated with salmonella Prevalence

Prevalence of salmonella related to the specific risk factors were determined as the proportion of affected chickens out of the total examined. As indicated in (Table 3), the questionnaire survey and observation data result shows disease history, management/ sanitary status, breed, floor system, previous treatment history and vaccination history were amongst the potential risk factors, which are associated with salmonella disease in poultry/chicken farmstead. Accordingly, salmonella prevalence showed significant variation among different disease history groups ( $p = 0.000$ ), floor system ( $p=0.000$ ), breed( $p=0.02$ ),vaccination status ( $p=0.006$ ), sanitary and management status ( $p=0.000$ ) and

previous treatment history and vaccination history( $p=0.000$ ). However, flock size, age, district and sample type have no significant difference with salmonella ( $p>0.05$ ) as indicated in Table 3.

**Table 3: Association of potential risk factors with *Salmonella* prevalence in poultry population in Assosa “woreda”**

Factor	Level	No examined	Prevalence (%)	X <sup>2</sup>	P-value
Age	Young(<24wks)	187 (	15(8.02)	1.47	0.22
	Adult (>24wks)	87	11(12.64)		
Sanitary	Poor	69	14(20.28)	12.52	0.000
	Good	205	12(5.85)		
Housing system	Floor bedding	202	11(5.44)	14.63	0.000
	Cemented and cages	72	15(20.83)		
Previous treatment history	Yes	38	10(26.31)	14.54	0.000
	No	236	16(6.77)		
Disease history	Yes	28	24(85.71)	210.98	0.000
	No	246	2(0.81)		
Management status	poor	58	12(20.68)	10.74	0.001
	Good	216	14(6.48)		
Breed	sasu	146	8(5.47)	5.85	0.02
	Bovans brown	128	18(14.06)		
Flock size	small	91	6(5.59)	5.37	0.06
	Medium	51	2(3.92)		
	large	132	18(13.63)		
Sample type	Cloacal swab	212	21(9.90)	0.18	0.66
	Egg shell swab	62	5(8.06)		
District	District 01	129	8(6.20)	3.06	0.08
	District 02	145	18(12.41)		
Vaccination status	Yes	141	20(14.18)	7.45	0.006
	No	133	6(4.51)		

### 5.3. In vitro antimicrobial Susceptibility Test

Antimicrobial susceptibility tests were performed on 26 isolates and were tested for antimicrobial sensitivity for six types of antibiotics. The present study has demonstrated the existence of the levels of resistance of *Salmonella* to commonly used antimicrobial agents in the study area. The antimicrobial susceptibility profile of all isolates were assessed against six antimicrobials by disk diffusion technique; almost all isolates were resistant to one or more of the tested antimicrobials. 73.07%, 65.38%, 30.76 %, 26.92%, 15.38%, and 11.53% of the isolates were resistant to Tetracycline, Streptomycin, Trimethoprim, Chloramphenicol, gentamycine, and ciprofloxacin respectively (Table-4). However, the majority of the isolates were susceptible to ciprofloxacin and gentamycin, chloramphenicol, followed by Trimethoprim(Table-4).

**Table 4:** Antimicrobial susceptibility test result for *Salmonella* isolates (n = 46).

Antimicrobial agents	Disc content (µg)	No of isolates	Resistance	Intermediate	Susceptible
			No (%)	No (%)	No (%)
Tetracycline(TE)	30	26	19 (73.07)	3 (11.53)	4 (15.38)
Gentamycin(CN)	10	26	4 (15.38)	6 (23.07)	16 (61.53)
Streptomycin(S)	10	26	17(65.38)	3(11.53)	6 (23.07)
Chloramphenicol(C)	30	26	7(26.92)	3(11.53)	16(61.53)
Trimethoprim(w)	2	26	8(30.76)	3(11.53)	15(57.69)
Ciprofloxacin(CIP)	5	26	3(11.53)	-	23(88.46)

**Key:** S- Susceptible, I- Intermediate, R- Resistant profile of *Salmonella* isolated from cloacal swab of chicken.

## 6. DISCUSSION

In the present study, the overall prevalence of salmonella was 9.48 % in chickens/ poultry, which was statistically significant and associated with the infection ( $p>0.08$ ). This finding is inline with the previous findings of Solomon T *et al.*, (2016) in Alage, Ziway and Shashemene area, Endrias ZG (2004) in Addis Ababa supermarkets, Liyuwork T *et al.* (2013) in Addis Ababa and F. Abunna *et al.* (2016) in and around Modjo, Central Oromia, (Aseffa *et al.*, 2011) from chicken table eggs by bacteriological methods in Ethiopia, (Hassanain *et al.*, 2012) in Egypt, and (Urji *et al.*, 2005) in Nigeria by bacteriological methods, 13.3%, 14%, 1.6%, 15.2%, 11.5%, 11.4%, and 12.5% salmonella infection in poultry farm respectively. The difference might be difference in farming system, poor hygienic practice in semi-intensive farm might contribute the major problem for high prevalence rate of salmonellosis

This result was in lower as compared with the previous studies made by Kasech M. (2015) in DAZARC poultry farm, at Bishoftu, Central Oromia, by Beshatu F. (2014) in Dire Dawa municipal abattoir, Ashwani *et al.* (2014) by serology method in Ethiopia and Asmamaw A(2018) in Asossa and bambasi in BG, 30.4% , 18% , 20%, and 23.2% salmonella infection respectively. Besides this, the prevalence of *Salmonella* in chicken samples was concord with the results of earlier studies made by Molla *et al.* (1999a) who reported 28.6%, 22.6%, and 15.4% in chicken gizzard, liver, and heart, respectively, Molla and Mesfin (2003) who detected (21.1%) *Salmonella* in chicken carcass and giblets samples in central Ethiopia, Tibaijuka *et al.* (2003) who indicated 18 % prevalence (54/301) in chicken meat and edible offals and Hang'ombe (1999) who published 20.5% frequency of isolation for *Salmonella* from dressed chicken carcass in Lusaka, Zambia. This variability in prevalence of salmonellosis between different reports could be attributed to differences in farms management practice. As poultry salmonellosis is a complex disease involving interactions of various factors such sanitary problems, environmental conditions, animal risk factors, and causative agents, contamination in the farm during collection, transportation and poor hygiene of workers as well as farms and different in different farming system. Different authors reported that the presence of chickens of different ages in the farm, the presence of arthropod pests, wet and soiled litter in the farm (Smeltzer T *et al.*, 1979) and the housing system and flock size could be important reasons for egg contamination with various micro-organisms. Chicken feeds and hatcheries also possible sources of *Salmonella* infections in the farm.

Higher prevalence than present finding was also reported in Ethiopia and in other counties as 41.9% (Kindu and Addis, 2013) from fecal sample by bacteriological method, 35.7% (Endris *et al.*, 2013) of *S. Gallinarum* and *S. pullorum* from cloacal swab by serology and culture, 55% (Kagambega *et al.*, 2013) in Burkina Faso, 56.5% (Khan *et al.*, 2014) in Pakistan, 45% v 60% (Jahan *et al.*, 2012) in Bangladesh in cloacal poultry swab samples, 66% (Jerngklinchan *et al.* 1994) from Thailand, 29.7% by Plummer *et al.* (1995) from whole bird in UK, 38.3% ( Rusal *et al.*, 1996) in Malaysia from poultry carcass arising from wet markets and processing plants, and Arumugaswamy *et al.*, (1995) from Malaysia also reported a much higher *Salmonella* isolation rate from chicken portions (39%), liver (35%) and gizzard (44%).

Likewise, lower prevalence than the present finding was also reported in Ethiopia and other countries. Few examples include 0.8% (Kassaye *et al.*, 2010) of *Gallinarum* and *S. pullorum* from cloacal swabs by culture technique, 10.9% (Agada *et al.*, 2014) in Nigeria, 9.2% (Al-Abadi and Al-Mayah, 2012) in Iraq in culture techniques in cloacal swab samples and 32(16%) of the 198 skin samples (Whyte *et al.* (2000) in Ireland, using the culture methods. These differences above (higher or lower prevalence) from present finding might be resulted from the difference in isolation technique, and difference in geographical location, difference in bio security measure like cross – contamination and poor housing system.

Occurrence of salmonella was significantly associated with hygienic practice. Poultry at farms with poor hygiene/ sanitary/poor management / standard are severely affected than those with good hygiene/ sanitary/ management practices. (20.28%) higher prevalence of salmonella infection was recorded in poor housing system whereas (5.85%) lower infection was investigated in good housing system which was significantly associated with infection ( $p=0.000$ ). This might be due to absence of good sanitary / bedding of poultry house and feed, water contamination infected ones faceas and egg as well. This result was consistent with Deen *et al.*( 2001) who indicated, stresses due to transport, improper feeding and poor hygiene, etc. might happen to these animals considering the prevailing socioeconomic conditions, knowledge and awareness of the people, particularly those from rural areas. Different

authors (Deen *et al.*, 2001; Wray and Davies, 2000) have attributed various stress factors to be in favor of increased *Salmonella* prevalence. Besides this, the present finding supports the report of Davies and Hinton (2000) “Even though feed, sanitary is widely accepted as a source of possible contamination, the incidence of outbreaks being attributed to feed is very low”. The detection were more or less in harmony with AL-Iedani *et al.* (2014) finding that 14% from cloacal swab, 37% from litter, 10% from water and 20% from ration of *Salmonella* isolate had identified. And also the level of contamination of dressed chicken meat was found to be slightly higher than the 11.5% prevalence report by Živkovic *et al.* (1997) on market ready dressed chicken meat, in Zagreb, Croatia and 4.2% by Zhao *et al.* (2001) from Greater Washington D.C. area. Variation in the frequency of isolation of *salmonella* between the present and earlier studies in Ethiopia might stem from either actual difference in prevalence of *Salmonella* in carrier chicken in the flock of origin or the fact that, unlike our studies, giblets were included in previous studies, which contributed substantially for the difference in prevalence.

Similarly, according to D’Aoust (1989) high prevalence of *Salmonella* in chicken carcass is attributable to problems associated with poultry husbandry, processing, and cross-contamination of carcasses in slaughtering plant through common scalding, de-feathering, and chilling processes. The same author also showed that cross-contamination from the hands of workers, equipment and utensils can spread the bacterium to uncontaminated carcass and parts. The relatively high prevalence of *Salmonella* in dressed chicken carcass might have emerged, in part, from their feeding habits i.e., their daily ration comprises of animal proteins, as source of essential amino acids and minerals, that might have been contaminated with *Salmonella* (D’Aoust, 1989; Pegram, 1981). Similar result was reported by Netsanet *et al.* (2012), who indicated, the low prevalence in the intensive farms might be due to a relatively good management practice including ventilation, proper spacing and relatively trained workers whereas high prevalence of infection in semi-intensive system due to economic reason to accommodate good housing with trained personnel.

The findings of (5.44%) prevalence of salmonella in farms with floors bedding was diagnosed whereas (20.83%) infection was recorded in cemented and cages types, which influence the occurrence of salmonella, and was statistically significant ( $p < 0.000$ ), this result was concord with finding of Al-Abadi and Al-Mayah (2012) 19.1 % salmonella isolated from fecal samples. Comparably low result was reported by Tessema K. *et al.*, (2017) in Haramaya poultry farm, 2.3% and 3.3% salmonella positive egg samples were recorded from cage and floor house system respectively; however, there was no statistically significant difference ( $P > 0.05$ ) in the prevalence of *Salmonella* among the two house systems. The slight increase of prevalence might be due to poor housing system which have access to entrance of carriers of salmonella like rodents, birds and pests to poultry farm and cross contamination also associated with farm workers, hygienic status, air quality, confinement of birds and dust originated from feed and faeces may contain large number of microorganisms and this poor system favor the proliferation and transmission of salmonella pathogens. It could also be due to contamination from equipment, floor and hands of personnel, as has been reported by various authors (Baird-Parker, 1990; Smeltzer *et al.*, 1980b; Smeltzer *et al.*, 1980a; Smeltzer *et al.*, 1979; Watson, 1975). Comparably, Baird-Parker (1990) reported that, the main sources of infection are infected chickens transferred via environment contamination.

The prevalence of salmonella in sasu chicken was (5.47%) whereas infection in bovans breed was (14.06%) which was significantly associated with the occurrence of salmonellosis ( $p < 0.02$ ). This finding was lower when compared with the reports made by by Zhao *et al.* (2001) from Greater Washington D.C. area, it is of interest to note that 69.2% of dressed chicken carcass sampled, originated from indigenous backyard local chicken with different management from commercial farms. Unlike the previous studies made on chicken in Ethiopia, it is of interest to note that 144 (69.2%) of dressed chicken carcass sampled in this research work originated from indigenous backyard local chicken with different management from commercial farms. Comparably lower research was reported by Tessema K. *et al.*, (2017) in Haramaya poultry farm, who indicated, the prevalence of *Salmonella* in eggs on the bases of chicken breed sources was 2.9%, 3.8% and 2% for Bovans, Fayoumi and White leg horn, respectively; the prevalence difference was not show statistical significance ( $P > 0.05$ ) between the rate of detecting *Salmonella* spp., and non-significant analytical situation was observed in eggs sampled from different chicken breeds. This is presumably due to unequal exposure to the risk factors as the breeds were housed in different house system. This difference might be due to Fayoumi breed was kept in the floor house system in which there is lower hygienic and high cross contamination between the flock eggs at laying than the cage house system. Other study also reported that one day- old chicks orally infected with *S. pullorum* produced contaminated eggs frequently during the period of sexual maturity as a consequence of reproductive tract colonization (Wigley p. *et al.*, 2001)

The effect of different risk factors such as disease history, age categories, study sites, previous treatment history and vaccination history on prevalence of chicken salmonellosis was studied and, statistically significant associations were observed in disease history, previous treatment and vaccination history ( $p < 0.05$ ) while age groups, study districts, flock size, sample type were not found to be statistically significant ( $P > 0.05$ ). This result is in agreement with previous reports of (Wigley *et al.*, 2001). The fact that salmonellosis do not depend on gender could possibly be hypothesised that both male and female animals have virtually equal chance of being in contact with infection and ultimately developing the disease.

Many reports on treatment trials of *Salmonella* infection do not contain detailed descriptions of host factors of the treated animals, or of the strains causing the infections that are treated (Barkema *et al.*, 2006). In the previously infected animals, the *Salmonella* isolates which were responsible to the previous infection were not eliminated by the effect of various antibiotics which was related to the development of drug resistance by *Salmonella* organisms. But mainly, salmonellosis is a complex disease involving interactions of several factors, mainly of management, environment, and factors relating to animal and causative organisms (Tessema K. *et al.*, (2017). Previous treatment history of poultry had a significant influence on the occurrence of salmonella infection, 22.2 % of salmonella was reported in previously treated poultry where as 23.87% infection was registered in not previously treated case of salmonella, which were higher. This result was not significant ( $\text{Chi}=0.14$ ,  $\text{pr}>0.05$ ). Similarly, 24.06% salmonella infection was recorded in treated poultry whereas 22.7% infection was recorded in not treated case of salmonella, which were not statistically significant difference ( $\text{Chi}=0.08$ ,  $\text{pr}>0.05$ ). The possible fair judgment for this could be that inappropriate implementation of antibiotics to treat salmonella case in some part of the study area leading to occurrence of an isolate which had a potential of drug resistance.

Of all 26 *Salmonella* isolates screened for antimicrobial susceptibility test against six antimicrobials. All the isolates were susceptible to Ciprofloxacin, Gentamycin and Chloramphenicol and Trimethoprim. The reason why these antimicrobials were less resistant/susceptible/ might be that they are not used in the study area in veterinary clinics or services and even not frequently used (infrequent use of therapeutics) perhaps in human medicine. This finding is similar with finding of Begum *et al.* (2010) on *Salmonella* isolates from chicken eggs, intestines and environmental samples. For the rest 7 different drugs, 43 (97.82%) were resistant to one or more of antimicrobials. This finding was in agreement with a numbers finding on *Salmonella* antibiogram tests, for isolates from poultry and poultry products samples like Maria (2010) from America, Jahan *et al.* (2012) in Bangladesh, Tabo *et al.* (2013) in Chad, Carraminana *et al.* (2004) from Spain. However, the current finding is not in agreement with results of Singh *et al.* (2013) from India, and Antunes *et al.* (2003) from Portugal, but different with resistant patterns. Disagreement may be due to different strains of isolates and/or difference in levels of strains' resistivity.

Accordingly, 73.07%, 65.38%, 30.76 %, 26.92%, 15.38%, and 11.53% of the isolates were resistant to Tetracycline, Streptomycin, Trimethoprim, Chloramphenicol, Gentamycin, and ciprofloxacin respectively.

A High resistant to Tetracycline and Streptomycin were in agreement with what Maria, (2010) and Jahan *et al.* (2012) found on poultry related resistant isolates. And also this finding goes with what Davies (1996) found that most of the *Enterobacteriaceae* family including *Salmonella* is resistant to the drugs including Aminoglycosides, Beta lactams, Trimethoprim and Chloramphenicol. Comparable result was reported by Beshatu F. (2014) in Dire Dawa municipal abattoir, who showed, highest level of resistance for tetracycline (100%), nitrofurans (100%), streptomycin (81.8%) and kanamycin (79.5%).

Of 26 resistant isolates to anyone of the six drugs, 19 isolates were only resistant to Tetracycline while the rest isolates were resistant to at least for two of the 5 different drugs. Thus, Tetracycline was the most common single resistance (73.07%). These may be due to wider use of Tetracycline and its affordable nature from local pharmacy and most frequently utilized and exposed antimicrobials from among all veterinary drugs in Ethiopia. Similarly, a possible development of resistance from prolonged and indiscriminate usage of some antimicrobials. Hence, tetracycline are the only most commonly used antimicrobials for the treatment of other infections as well as salmonellosis in veterinary practice in Ethiopia, as the result, there was spread of drug resistance reported by many researchers which was in line with the recent findings.

## 7. CONCLUSION AND RECOMMENDATIONS

9.48% of salmonella prevalence was investigated in the study area of the poultry species. 5.47% of salmonella in Sasu breed and 14.06% of the Bovans breed salmonella were reported. *Study origin*, age categories, flock size, and sample types were non-significant whereas the breed, management, previous treatment history, vaccination status, disease history, housing system, body condition, and sanitary/management condition were potential risk factors and which were statistically significant value for salmonella infection ( $p < 0.05$ ). 73.07%, 65.38%, 30.76%, 26.92%, 15.38%, and 11.53% of the isolates were resistant to Tetracycline, Streptomycin, Trimthoprim, Chloramphenicol, Gentamycin, and Ciprofloxacin respectively. However, the majority of the isolates were susceptible to Ciprofloxacin, Gentamycin, Chloramphenicol followed by Trimthoprim.

Based on the above conclusion, the following recommendations are forwarded:-

- Poultry farms are a potential source of *Salmonella* infection with antimicrobial resistance, and significant threat to public health particularly to those who have direct or indirect contact to poultry and poultry products so, hygienic management of poultry products,
- Identified potential risk factors should be managed properly in order to minimize the transmission of salmonella species,
- Biosecurity measures should be strictly applied in poultry farms where cross contamination was high,
- Chickens should be checked for healthiness and adaptation of the environment for that particular area before rearing was planned to design and precondition, predisposing factors should be assessed before production was conducted in farms so as to reduce or eradicate salmonellosis which was carrier once infect the chickens.
- Attention should be taken in selecting antimicrobials in treating *Salmonella* infection both in animals and human being based on antimicrobial sensitivity test.

## 8. REFERENCES

1. Acha, P. N. and Szyfres, B. 2001. Zoonoses and Communicable Diseases Common to Man and Animals; 3rd Ed, Volume I. Bacteriosis and Mycosis. Pan American Health Organization, Washington DC: 233–246.
2. Addis Zelalem, Nigatu Kebede, Zufan Worku, Haile Gezahegn, Alehegne Yirsaw and Tesfu Kassa. 2011. Prevalence and antimicrobial resistance of *Salmonella* isolated from lactating cows and in contact humans in dairy farms of Addis Ababa: a cross sectional study. *BMC Infectious Diseases* 11: 222- 228.
3. Adesiyun, A., N. Offiah, N. Seepersadsingh, S. Rodrigo, V. Lashley, L. Musai and K. Georges. 2005. Microbial health risk posed by table eggs in Trinidad. *Epidemiology and Infection*, 133: 1049-1056.
4. Advisory Committee on the Microbiological Safety of Food (ACMSF). 2001. Second Report on *Salmonella* in Eggs. London: The Stationery Office.
5. Akhtar F. I. Hussain A. Khan I and S. U. Rahman. 2009. Prevalence and Antibioqram Studies of *Salmonella* Enteritidis Isolated from Human and Poultry Sources. *Pakistan Veterinary Journal*. Pakistan, Vet J, 30(1): 25-28. ISSN: 0253-8318 (PRINT), 2074-7764: Accessible at: [www.pvj.com.pk](http://www.pvj.com.pk). Accessed on 28 March 2013.
6. Alemayehu, D., Molla, B. and Muckle, A. 2004. Prevalence and antimicrobial resistance pattern of *Salmonella* isolates from apparently healthy slaughtered cattle in Ethiopia. *Trop. Anim. Hlth Prod.* 35: 309 – 319.
7. Alphons, J.A., Asten van M., Jaap, E. and Dijk, V. 2005. Mini review: Distribution of “classic” virulence factors among *Salmonella* spp. *FEMS Immunology and Medical Microbiology* 44: 251-259.
8. Alexander, K. A., Warnick, D. L. and Wiedmann. M. 2009. Antimicrobial resistant *Salmonella* in dairy cattle in the United States; *Veterinary Research and Communication* 33: 191–209.
9. Anonymous, 2004. *Salmonella* Enteritidis outbreak in central London linked to Spanish eggs. *CDR Weekly* 14 (42).
10. Anonymous, 2001. Advisory Committee on the Microbiological Safety of Food: Second Report on *Salmonella* in Eggs. The Stationery Office. London: 44
11. Aragaw, K., Molla, B., Muckle, A., Cole, L., Wilkie, E., Poppe, C., Kleer, J. and Hilderbrandt, G. 2007. The characterization of *Salmonella* serovars isolated from apparently healthy slaughtered pigs at Addis Ababa abattoir, Ethiopia. *Preventive Veterinary Medicine* 82: 252–261
12. Ashenafi M. and Gedebo M. 1985. *Salmonella* and *Shigella* in adult diarrhoea in Addis Ababa - prevalence and antibiograms. *Trans R Soc. Trop. Med. Hyg.* 79(5): 719-721.

13. Ayalu A. Reda, Berhanu Seyoum, Jemal Yimam, Gizachew Andualem, Sisay Fiseha and Jean-Michel Vandeweerdt. 2011. Antibiotic susceptibility patterns of *Salmonella* and *Shigella* isolates in Harar, Eastern Ethiopia. *Journal of Infectious Diseases and Immunity* 3(8): 134-139, Available at (<http://www.academicjournals.org/JIDI>).
14. Barbara, M.L., Baird-Parker, T.C. and Grahame, W.G. 2000. The microbiological safety and quality of food (II): Aspen Publishers Inc. Gaithersburg, Maryland: p.1234.
15. Behailu Bekele and Mogessie Ashenafi. 2009. Distribution of drug resistance among enterococci and *Salmonella* from poultry and cattle in Ethiopia. *Trop Anim Health Prod.* 42: 857–864.
16. Beyene, G., Nair, S., Asrat, D., Mengistu, Y., Engers, H. and Wain, J. 2011. Multidrug resistant *Salmonella* Concord is a major cause of salmonellosis in children in Ethiopia, *Journal of Infect Dev Ctries*, 5: 023–033.
17. Brenner, F.W., Villar, R.G., Angulo, F.J., Tauxe, R. and Swaminathan, B. 2000. *Salmonella* nomenclature. *Journal of Clinical Microbiology* 38: 2465-2467.
18. Brown, N.F., Vallance, B.A., Coombes, B.K., Valdez, Y., Coburn, B.A. and Finlay, B.B. 2005. *Salmonella* pathogenicity island 2 is expressed prior to penetrating the intestine. *PLoS Pathogens* 1 (3), e32.
19. Centers for Disease Control and Prevention (CDC). 2005. *Salmonella* surveillance: annual summary, 2004. U.S. Department of Health and Human Services. Atlanta, Georgia.
20. Centers for Disease Control and Prevention (CDC). 2007. *Salmonella* surveillance: annual summary, 2005. U.S. Department of Health and Human Services. Atlanta, Georgia.
21. Centers for Disease Control (CDC). 2008. Get Smart: Know When Antibiotics Work: Glossary. (<http://www.cdc.gov/drugresistance/community/glossary.htm>) Accessed on August 14, 2012.
22. Centre for Infectious Disease Research and Policy (CIDRAP). 2006. Academic Health Centre, University of Minnesota. (<http://www.cidrap.umn.edu/cidrap/contents/fs/fooddisease/causes/salmoview.html>) Accessed on July 14, 2012.
23. Chen, S., Zhao S., White, D. G., Schroeder, CM, Lu R, Yang, H, McDermott, PF, Ayers, S, Meng, J. 2004. Characterization of multiple-antimicrobial resistant *Salmonella* serovars isolated from retail meat sample. *Applied and Environmental Microbiology* 70(1): 1-7.
24. Chiu, C.H., Su, L.H. and Chu, C. 2004. *Salmonella enterica* serotype Choleraesuis: epidemiology, pathogenesis, clinical disease, and treatment. *Clinical Microbiology Reviews* 17: 311-322.
25. Coleman, M.E., Sandberg, S. and Anderson, S.A. 2003. Impact of Microbial ecology of meat and poultry products on predictions from exposure assessment scenarios for refrigerated storage. *Risk Analysis* 23: 215-228.
26. Crum, N. F. 2003. Current trends in typhoid fever. *Curr.Gastroenterol.Rep.*, 5,279-286.
27. Cui, S., Ge, B., Zheng, J. and Meng, J. 2005. Prevalence and antimicrobial resistance of *Campylobacter* spp. and *Salmonella* serovars in organic chickens from Maryland retail stores. *Applied and environmental microbiology* 71: 4108-4111.
28. Deb, M. and Kapoor, L. 2005. *Salmonella* nomenclature seen in the literature. *Indian Journal of Medical Microbiology* 23: 204-205.
29. de Louvois, J. 1993. *Salmonella* contamination of eggs. *Lancet* 342: 366–7. De Reu, K., Heyndrickx, M., Grlispeerdt, K., Rodenburg, T. R., Tuytens, F., Uyttendaele, M. Debevere, J. and Herman, L. 2006. Assessment of the vertical and horizontal aerobic bacterial infection of shell eggs. *World's Poultry Science Journal* 62: 564.
30. De Reu, K., Messems W., Heyndrickx M., Rodenburg T. R., Uyttendaele M. and Herman L. 2008. Bacterial contamination of table eggs and the influence of housing systems. *World Poultry Science Journal* 64: 5-19.
31. Diagnostic Services of Manitoba (DSM). 2009. *Salmonella* Nomenclature and the Reporting of Results on *Salmonella* Species: Memorandum.
32. Duguid, J. P. and North, R. A. E. 1991. Eggs and *Salmonella* food-poisoning : an evaluation. The Pathological Society of Great Britain and Ireland. *J. Med. Microbiol.* 34: 65-72.46
33. Duijkeren, E.V., Wannet, W.J.B., Houwers, D.J. and Pelt, W.V.2003. Antimicrobial susceptibilities of *Salmonella* strains isolated from humans, cattle, pigs and chickens in The Netherlands from 1984 to 2001. *Journal of Clinical Microbiology* 41: 3574-3578.
34. Economic Research Service, United States Department of Agriculture (ERS-USDA). 2003. (<http://www.ers.usda.gov/Briefing/FoodborneDisease/Salmonella.htm>) Accessed on August 17, 2012.
35. Ellermeier, C.D and Schlauch, J.M. 2006. Genus *Salmonella*. In: Dworki M.D.(ed.). *The Prokaryotes: A Handbook on the Biology of Bacteria*. SpringerPress. New York.

36. Environmental Science and Research Limited (ESR). 2004. Risk profile: *Salmonella* (no typhoidal) in and on eggs. Available at: ([www.nzfsa.govt.nz/science/datasheets/salmonella-eggs.pdf](http://www.nzfsa.govt.nz/science/datasheets/salmonella-eggs.pdf)). (Last accessed on 29 March 2013).
37. European Commission (EC). 2004. Trends and sources of zoonotic agents in animals, feeding stuffs, food and man in the European Union and Norway in 2002. SANCO.
38. European Commission (EC). 2006. Commission Regulation (EC) No 1177/2006 of 1 August 2006 implementing Regulation (EC) No 2160/2003 of the European Parliament and of the Council as regards requirements for the use of specific control methods in the framework of the national programmes for the control of *Salmonella* in poultry. *Official J European Union* 212: 3-5.
39. European Food Safety Authority (EFSA). 2004. Opinion of the scientific panel on biological hazards on a request from the commission related to the use of vaccines for the control of *Salmonella* in poultry. *The EFSA Journal* 114: 1-74.
40. European Food Safety Authority (EFSA). 2005. Opinion of the scientific panel on biological hazards on the request from the commission related to the microbiological risks on washing of table eggs. *The EFSA Journal* 269: 1-39
41. Fluit, A.C. 2005. Mini review: Towards more virulent and antibiotic-resistant *Salmonella*? *FEMS Immunology and Medical Microbiology* 43: 1-11.
42. Food and Agriculture Organization of the United Nations/World Health Organization (FAO/WHO). 2002. Microbiological Risk Assessment Series No.1 Risk Assessments of *Salmonella* in Eggs and Broiler Chickens. Interpretative Summary.b ([http://www.who.int/entity/foodsafety/publications/micro/en/salm\\_summary.pdf](http://www.who.int/entity/foodsafety/publications/micro/en/salm_summary.pdf)).47
43. Food and Agriculture Organization of the United Nations/World Health Organization. 2004. FAO/WHO Regional conference on food safety for Asia and Pacific. The national surveillance system for food-borne disease in China. Seremban, Malaysia, 24-27.
44. Food and Drug Administration/Center for Food Safety and Applied Nutrition (FDA/CFSAN). 2008. Food Safety A to Z Reference Guide *Salmonella*. Available at: (<http://www.cfsan.fda.gov/~dms/a2z-s.html>) Accessed on July 26, 2012.
45. Food Research International (FRI). 2010. *Salmonella* in Foods. Evaluation, Strategies and Challenges 43: 1557-1558.
46. Food Standards Agency (FSA). 2004. Report of the survey of *Salmonella* contamination of UK produced shell eggs on retail sale. London: Available at: (<http://www.food.gov.uk/multimedia/pdfs/fsis5004report.pdf>). Accessed on Oct 05, 2012.
47. Food Standards Agency. 2006. Survey of *Salmonella* contamination of non-UK produced shell eggs on retail sale in the North West of England and London. Available at: ([www.food.gov.uk/news/newsarchive/2006/nov/eggs](http://www.food.gov.uk/news/newsarchive/2006/nov/eggs)). Last accessed on 29 March 2013.
48. Galanis, E., Wong D. and Patrick M., *et al.* 2006. Web-based surveillance and global *Salmonella* distribution, 2000–2002. *Emerging Infectious Diseases* 12: 381-388.
49. Gedebo, M and Tassew A. 1981. Antimicrobial resistance and R factor of *Salmonella* isolates from Addis Ababa, *Ethiop Med J.* 19: 77-85.
50. Grimont, P., & Weill, F. 2007. Antigenic Formulae of the *Salmonella* serovars. WHO Collaborating Center for Reference and Research on *Salmonella*. 9th ed. Paris. Available at: (<http://www.scacm.org/divc/Antigenic/Formulae/Salmonella2007.pdf>).
51. Hafez, H.M. 2005. Government regulation and control of some important poultry diseases. *World's Poult. Sci. J.* 61: 574-575.
52. Hans, P. R. and Dean, O. C. 2006. *Salmonella* Infection In: *Foodborne Infections and Intoxications 3rd Edition*. Food Science and Technology International Series: 57-136. Hensel, M. 2004. Review; Evolution of pathogenicity islands of *Salmonella enterica*. *International Journal of Medical Microbiology* 294: 95-102.
53. Henson, S. 2003. The Economics of Food Safety in Developing Countries. ESA Working Paper No. 03-19, December 2003. ([www.fao.org/es/esa](http://www.fao.org/es/esa)) Accessed on July 24, 2012. 48
54. Herikstad, H., Motarjemi Y. and Tauxe R.V. 2002. *Salmonella* surveillance: a global survey of public health serotyping. *Epidemiology Infection* 129: 1–8.
55. Hitti, W. & Wolff, M. 2005. Two cases of multidrug-resistant *Nocardia farcinica* infection in Immune suppressed patients and implications for empiric therapy. *European Journal of Clinical Microbiology and Infectious Diseases* 24: 142-144.
56. Humphrey, T. J. 1994. Contamination of egg shell and contents with *Salmonella* Enteritidis: a review. *Int J Food Microbiol*, 21: 31–40.

57. International Committee on the Microbiological Safety of Food (ICMSF). 1996. Eggs and Egg Products. In: Micro-organisms in Foods 6: *Microbial Ecology of Food Commodities*. Chapman and Hall: London: P.475-520.
58. International Organization for Standardization (ISO), 2002. Microbiology of Food and Animal Feeding Stuff- Horizontal Method for the Detection of *Salmonella*. 4th ed. ISO 6579, Geneva.
59. Ishihara, K., Takahashi, T., Morioka, A., Kojima, A., Kijima, M., Asai, T. and Tamura, Y.2009. National surveillance of *Salmonella enterica* in food producing animals in Japan. *Acta Veterinaria Scandinavica* 51: 35.
60. Jones, B.D. 2005. *Salmonella* gene invasion regulation: A story of environmental awareness. *The Journal of Microbiology* 43: 110-117.
61. Jong, B.D. and Ekdahl, K. 2006. The comparative burden of salmonellosis in the European Union member states, associated and candidate countries. *BioMed Central Public Health* 6 (4): 1471-2458.
62. NMSA (National Meteorological Services Agency), (2014): Monthly report on temperature and Rainfall. Distribution for Asossa Zone, Regional Metrological Office, Asossa, Ethiopia.
63. Kang, H.Y., Srinivasan, J. and Curtiss, R. 2002. Immune response to recombinant pneumococcal PspA antigen delivered by live attenuated *Salmonella enteric* serovar Typhimurium vaccine. *Infection and Immunity* 4: 1739-1749.
64. Khachatourians, G. G. 1998. Agricultural use of antibiotics and the evolution and transfer of antibiotic-resistant bacteria. *CMAJ*. 159: 1129-1136.
65. Kohinur, B., Tanvir A. R., Margia H., Akil H., Kabirul H., Shaik Nahid H., Nargis A., Aliza A. and Utpal B. 2010. Isolation, identification and antimicrobial resistance pattern of *Salmonella* spp. from chicken eggs, intestines and environmental samples. *Bangladesh Pharmaceutical Journal*. 13(1): 0301-4606.49
66. Kramer, M.N., Coto, D. and Weidner, J. D. 2005. Review: The science of recalls. *Meat Science* 71: 158-163.
67. Lailier, R. Gromint F., Jones Y., Sanders P. and Brisabois A. 2002. Subtyping of *Salmonella* Typhimurium pulsed-field gel electrophoresis and comparisons with phage types and resistance types. *Pathol. Biol.* 50: 361-368.
68. Lauderdale, T.L., Aarestrup, F.M., Chen, P.C., Lai, J.F., Wang, H.Y., Shiau, Y.R., Huang, I.W. and Hung, C.L. 2006. Multidrug resistance among different serotypes of clinical *Salmonella* isolates in Taiwan. *Diagnostic Microbiology and Infectious Diseases* 55: 149-155.
69. Levy, S. B. and Marshall, B. 2004. Antibacterial resistance worldwide: causes, challenges and responses. *Nat Med*. Little, C.L., Walsh, S., Hucklesby, L., Surman-Lee, S., Pathak, K., Hall, Y., De Pinna, E.
70. Threlfall, E.J., Maund, A. and Chan, C.H. 2006. *Salmonella* contamination in non- UK produced shell eggs on retail sale in some regions of England. *Eurosurveillance* 11 (11): 47.
71. Little, C., Surman-Lee, S., Greenwood, M., et al. 2007. Public health investigations of *Salmonella* Enteritidis in catering raw shell eggs. *Letters in Applied Microbiolog* 44 (6): 595-601.
72. Mache, A., Mengistu, Y. and Cowley, S. 1997. *Salmonella* serogroups identified from adult diarrhoeal outpatients in Addis Ababa, Ethiopia: Antibiotic resistance and plasmid profile analysis. *East Afr. Med. J.* 74 (3): 183 – 186.
73. Mache, A. 2002. *Salmonella* serogroups and their antimicrobials resistance patterns isolated from diarrheal stools of pediatric outpatient in Jimma Hospital and Jimma Health Center, South West Ethiopia, *Ethiopian Journal of Health Sciences* 12: 37–46.
74. Mandal, S., Mandal, M.D. and Pal, N.K. 2004. Reduced minimum inhibitory concentration of chloramphenicol for *Salmonella enterica* serovar Typhi. *Indian Journal of Medical Sciences* 58: 16-23.
75. Mandal, S., Mandal, M.D. and Pal, N.K. 2006. Antibiotic resistance of *Salmonella enterica* serovar Paratyphi A in India; Emerging and reemerging problem. *Indian Journal of Medical Sciences* 52: 163-166.50
76. Martin, D., Stanley F., Eugene R., Karl-Heinz S. and Erko S. 2006. The genus *Salmonella*, in: *The Prokaryotes 3rd Edition*. A Handbook on the Biology of Bacteria. Springer Science+Business Media, Inc, Singapore 6: 123-158.
77. Martinez, A., Navarrete J., Corpus M., et al. 2005. Identification of *Salmonella* Enteritidis in table eggs in Mexico city. *Tecnica Pecuaria En Mexico*. 43: 229-237.
78. Mastroeni, P. and Menager, N. 2003. Development of acquired immunity to *Salmonella*. *Journal of Medical Microbiology* 52: 453-459.
79. Maskalyk, J. 2003. Typhoid fever. *CMAJ*. 169: 132.
80. Mead, P. S., Slutsker, L., Dietz, V., McCaig, L. F., Bresee, J. S., Shapiro, C. et al. 2000. Food-Related Illness and Death in the United States. *Journal of Environmental Health* 62:9-15.
81. Mellon, M, Benbrook, C. and Benbrook, K.L. 2001. *Hogging It! Estimates of Antimicrobial Abuse in Livestock*. Union of Concerned Scientists: Washington, DC.

82. Miko, A, Pries K, Schroeter, A. and Helmuth, R. 2005. Molecular mechanisms of resistance in multidrug-resistant serovars of *Salmonella enterica* isolated from foods in Germany. *The Journal of Antimicrobial Chemotherapy* 56(6): 1025-1033.
83. Miller, S., Hohmann, E., and Pegues, D. 2000. *Salmonella* species, including *Salmonella typhi*. In G. Mandell, B. JE, and R. Dolin (Eds): *principles and Practice of infectious disease*, Chirchil Livingstone, New York. pp. 2013-2033.
84. Minte, A., Akafete, T. and Haileleul, N. 2011. The Prevalence and Public Health Importance of *Salmonella* From Chicken Table Eggs, Ethiopia. *American-Eurasian J. Agric. & Environ. Sci.* 11 (4): 512-518.
85. Molla, B. and Mesfin, A. 2003. A survey of *Salmonella* contamination in chicken carcass and giblets in central Ethiopia. *Revue Méd Vét* 154 (4): 267-270
86. Molla, B., Mesfin, A. and Alemayehu, D. 2003. Multiple antimicrobial-resistant *Salmonella* serotypes isolated from chicken carcass and giblets in Debre Zeit and Adis Ababa, Ethiopia. *Ethiopian Journal of Health Development* 17 (2): 131-149.
87. Molla, B., Salah, W., Alemayehu, D. and Mohammed, A. 2004. Antimicrobial resistance pattern of *Salmonella* serovars isolated from apparently healthy slaughtered camels (*Camelus dromedarius*) in eastern Ethiopia. *Berl. Munch. Tierarztl. Wochenschr* 117: 39-45.51
88. Molla, B., Berhanu, A., Muckle, A., Cole, L., Wilkie, E., Kleer, J. and Hildebrandt, G. 2006. Multidrug Resistance and Distribution of *Salmonella* Serovars in Slaughtered Pigs. *J. Vet. Med.* 53: 28-33.
89. Molla, W., Molla, B., Alemayehu, D., Muckle, A., Cole, L. and Wilkie, E. 2006. Occurrence and antimicrobial resistance of *Salmonella* serovars in apparently healthy slaughtered sheep and goats of central Ethiopia, *Tropical Animal health and production*, 38: 455-462.
90. Morita, M., Mori, K., Tominaga, K., Terajima, J., Hirose, K., Watanabe, H. and Izumiya, H. 2006. Characterization of lysine decarboxylase-negative strains of *Salmonella enterica* serovar Enteritidis disseminated in Japan. *FEMS Immunology and Medical Microbiology* 46: 381-385.
91. Murchie, L., Whyte, P., Xia, B., Horrigan, S., Kelly, L. and Madden, R. H. 2007. Prevalence of *Salmonella* in Grade A whole shell eggs in the island of Ireland. *J. Food Protection* 70: 238-1240.
92. Murugkar, H. V., Rahman, H., and Kumar, A. 2005. Isolation, phage typing and antibiogram of *Salmonella* from man and animals in northern India. *Indian Journal of Medical Research* 122: 237-242.
93. Nagappa, K., Shantanu, T., Brajmadhur, Saxena, M. K. and Singh, S. P. 2007. Isolation of *Salmonella* Typhimurium from poultry eggs and meat of Tarai regio of Uttaranchal. *Indian Journal of Biotechnology* 6: 407-409.
94. National Committee for Clinical Laboratory Standards (NCCLS). 2005. Performance standards for antimicrobial susceptibility testing; 15th informational supplement. NCCLS document M100-S10., Wayne, Pa.
95. Ohl, M. E. and Miller, S. I. 2001. *SALMONELLA: A Model for Bacterial Pathogenesis. Annual Review of Medicine* 52: 259.
96. Okeke, I.N., Laxminarayan, R., Bhutta, Z.A., Duse, A.G., Jenkins, P., O'Brien, T.F. and Pablos-Mendez, A. 2005. Antimicrobial resistance in developing countries. Part I: recent trends and current status. *Lancet* 5: 481-493.
97. Old, D.C and Threfall, E.J. 1998. *Salmonella*. Topley and Wilson's microbiology and microbial infections, 9th Edition. Systemic bacteriology 2. London: pp. 969--991.52
98. Oosterom, J. 1991. Epidemiological studies and proposed preventive measures in the fight against human salmonellosis. *Int J Food Microbiology* 12: 41-51.
99. Panisello, P., Rooney R., Quantick P., et al. 2000. Application of foodborne disease outbreak data in the development and maintenance of HACCP systems. *International Journal of Food Microbiology* 59: 221-234.
100. Papagrigrakis, M.J., Synodinos, P.N. and Yapijakis, C. 2007. Short communication. Ancient typhoid reveals possible ancestral strain of *Salmonella enterica* serovar Typhi. *Infection, Genetics and Evolution* 7: 126-127.
101. Perales, I. and Audicana, A. 1989. The role of hens' eggs in outbreaks of salmonellosis in north Spain. *Int J Food Microbiol* 8: 175-180.
102. Perreten, V., Vorlet-Fawer, L., Slickers, P., Ehricht, R., Kuhnert, P. and Frey, J. 2005. Microarray-Based Detection of 90 Antibiotic Resistance Genes of Gram-Positive Bacteria. *Journal of Clinical Microbiology* 43: 2291-2302.
103. Phillips, I., Casewell, M., Cox, T., Groot, B., Friis, C., Jones, R., Nightingale, C., Preston, R. and Waddell, J. 2004. Does the use of antibiotics in food animals pose a risk to human health? A critical review of published data. *Journal of Antimicrobia Chemotherapy* 53: 28-52.

104. Popoff, M., Bockemuhl J., Brenner., *et al.* 2001. Supplement 2000 (no. 44) to the Kauffmann-White scheme. *Research in Microbiology*152: 907–909.
105. Popoff, M., Bockemuhl, J. and Gheesling, L. 2003. Supplement 2001 (no. 45) to the Kauffmann-White scheme. *Research in Microbiology*154: 173–174.
106. Popoff, M., Bockemuhl J. and Gheesling L. 2004. Supplement 2002 (no.46) to the Kauffmann-White scheme. *Research in Microbiology*155: 568–570.
107. Poppe, C., Martin, L., Muckle, A., Archambault, M., McEwen, S. and Weir, E. 2006. Characterization of antimicrobial resistance of *Salmonella* Newport isolated from animals, the environment, and animal food products in Canada. *The Canadian Journal of Veterinary Research* 70: 105-114.
108. Porwollik, S., Santiviago, C.A., Cheng, P., Florea, L., Jackson, S. and McClelland, M. 2005. Differences in gene content between *Salmonella enterica* serovar Enteritidis isolates and comparison to closely related serovars Gallinarum and Dublin. *Journal of Bacteriology* 187: 6545-6555.
109. Radkowski, M. 2001. Occurrence of *Salmonella* spp. in consumption eggs in Poland. *International Journal of Food Microbiology* 64: 189–191.
110. Radostitis, O.M., Gay, C.C., Hinchliff, K.W. and constable, P.D. 2007. *Veterinary Medicine: A text book of the disease of cattle, horses, sheep, pigs, and goats. 10th ed.* Elsevier Ltd. Singapore. 325-326.
111. Samuel Sahle. 2008. The epidemiology and management options of chocolate spot disease (*Botrytis fabae sard*) on Faba bean (*Vicia faba L.*) in Northern Ethiopia. PhD Dissertation, Haramaya University, Ethiopia.175p.
112. Santos, R.L., Zhang, S., Tsolis, R.M., Kingsley, R.A., Adams, L.G. and Baumler, A.J. 2001. Animal models of *Salmonella* infections: enteritis versus typhoid fever. *Microbes and Infection* 3: 1335-1344.
113. Schlundt, J., Toyofuku, H. and Herbst, S. A. 2004. Emerging food-borne *Salmonella enteritidis* zoonosis. *Rev. Sci. Tech. Off. Epiz.* 23: 513-519.
114. Scott, S. 2010. The most probable number method and its use in Enumeration, Qualification and Validation. *J of Validation Technology* 16: 35-38.
115. Shea, K. M. 2003. Antibiotic Resistance: What Is the Impact of Agricultural Uses of Antibiotics on Children's Health? *Pediatrics* 112: 253-258.
116. Shere, K.D., Goldberg M.B. and Rubin R.H. 1998. *Salmonella* infections. In: *Infectious Diseases* eds S.L. Gorbach, J.G. Bartlett & N.R. Blacklow, pp. 699–712. W.B. Saunders, Philadelphia
117. Sibhat B., Molla B. Zewde, Zerihun A., Muckle A., Cole L., Boerlin P., Wilkie E., Perets A., Mistry K. and Gebreyes W. A. 2011. *Salmonella* Serovars and Antimicrobial Resistance Profiles in Beef Cattle, Slaughterhouse Personnel and Slaughterhouse Environment in Ethiopia. *Zoonoses public health* 58: 102–109.
118. Silbergeld, E. K., Graham, J. and Price, L. B. 2008. Industrial Food Animal Production, Antimicrobial Resistance and Human Health. *Annual Review of Public Health* 29: 151-169.
119. Sinell, H.J. 1995. Review paper: Control of food-borne infections and intoxications. *International Journal of Food Microbiology* 25: 209-217.
120. Smith, D. L., Dushoff, J. and Morris, J. G. 2005. Agricultural Antibiotics and Human Health. *PLoS.Medicine* 2(8): 232-239.
121. Suresh, T., A.A.M. Hatha, D. Sreenivasan, N. Sangeetha and P. Lashmanaperumalsamy. 2006. Prevalence and antimicrobial resistance of *S. Eenteritidis* and other *Salmonella* in the eggs and egg storing trays from retail markets of Coimbatore, South India. *Food Microbiol.* 23: 294-299.
122. Telo, A., Bijo, B. and Sulaj, K. 1999. Occurrence of *Salmonella* spp. in imported eggs into Albania. *International Journal of Food Microbiology* 49:169–171.
123. Thrusfield, M. 2005. *Veterinary Epidemiology. 3 ed.*, Blackwell science Ltd., London, pp: 228-246.
124. Tibaijuka, B., Molla, B., Hildebrandt, G. and Kleer, J. 2002. Occurrence of salmonellae in retail raw chicken products in Ethiopia. *Berl. Münch. Tierärztl. Wschr.*116: 55-58.
125. Tindall, B., Grimont P., Garrity G., *et al.* 2005. Nomenclature and taxonomy of the genus *Salmonella*. *International Journal of Systematic and Evolutionary Microbiology* 55:521–524.
126. Tizazu Zenebe, Subbaram Kannan, Daniel Yilma, Getenet Beyene. 2011. Invasive bacterial pathogens and their antibiotic susceptibility patterns in Jimma University specialized hospital, Jimma, South west Ethiopia. *Ethiop. J. Health Sci.* 21(1): 1-8.
127. UK Zoonoses Report. 2000. Department for environment, food and rural affairs. ([http://www.defra.gov.uk/animalh/diseases/zoonoses/zoonoses\\_reports/zoonoses\\_2000.pdf](http://www.defra.gov.uk/animalh/diseases/zoonoses/zoonoses_reports/zoonoses_2000.pdf)) Accessed on July 24, 2012.

128. Valdezate, S, Arroyo, M, González-Sanz, R, Ramíro, R, Herrera-León, S, Usera, MA, De laFuente, M, Echeita, A. 2007. Antimicrobial resistance and phage and molecular typing of *Salmonella* strains isolated from food for human consumption in Spain. *Journal of Food Protection* 70(12): 2741-2748.
129. Van den Bogaard, A. E. and Stobberingh, E. E. 2000. Epidemiology of resistance to antibiotics: Links between animals and humans. *International Journal of Antimicrobial Agents* 14: 327-335.
130. Velge, P., Cloeckart, A. and Barrow, P. 2005. Emergence of *Salmonella* epidemics: The problem related to *Salmonella enterica* serotype Enteritidis and multiple antibiotic resistance in other major serotypes. *Veterinary Research* 36: 267-288.
131. Walsh, C. and Fanning, S. 2008. Antimicrobial resistance in foodborne pathogens--a cause for concern?. *Current Drug Targets* 9(9): 808-815.
132. Wegener, H. C. 2003. Antibiotics in animal feed and their role in resistance development. *Current Opinion in Microbiology* 6: 439-445.
133. Weill, F.X., Guesnier, F., Guibert, V., Timinouni, M., Demartin, M., Polomack, L. and Grimont, P.A.D. 2006. Multidrug resistance in *Salmonella enterica* serotype Typhimurium from human in France (1993-2003). *Journal of Clinical Microbiology* 44: 700-708.
134. White, D.G., Zhao, S., Sudler, R. 2001. In: The road to resistance: Antibiotics as growth promoters for animals: The isolation of antibiotic resistant *Salmonella* from retail ground meats. *New England Journal of Medicine* 345: 1147-1154.
135. Wiriya Loongyai, Kiattisak Promphet, Nilubol Kangsukul and Ratchawat Noppa. 2010. Detection of *Salmonella* in Egg Shell and Egg Content from Different Housing Systems for Laying Hens. *World Academy of Science, Engineering and Technology* 65: 121-123.
136. Witte, W. 2001. Selective pressure by antibiotic use in livestock. *International Journal of Antimicrobial Agent* 16: 19-24.
137. Wray, C. and Wray, A. 2001. *Salmonella* in domestic animals, book review. *Veterinary Microbiology* 81: 281-282.
138. Yan, S.S., Pandrak, M.L., Abela-Rider, B., Punderson, J.W., Fedorko, D.P. and Foley, S.L. 2003. An overview of *Salmonella* typing public health perspectives. *Clinical and Applied Immunology Reviews* 4: 189-204.
139. Yeung, R.M.W. 2001. Consumer perception of food risk in chicken meat. *Nutrition and food science* 6: 270-279.
140. Zewdu Endrias. 2008. Prevalence, distribution and antimicrobial resistance profile of *Salmonella* isolated from food items and personnel in Addis Ababa, Ethiopia. *Trop Anim Health Prod* 41: 241-249.
141. Zewdu, E, and Cornelius, P. 2009. Antimicrobial resistance pattern of *Salmonella* serotypes isolated from food items and personnel in Addis Ababa, Ethiopia. *Tropical Animal Health and Production* 41(2)::241-24
142. Quinn O. K., Carter M.E., Markey B. and Carter G.R. (1999): *Clinical Veterinary Microbiology*. USA, Elsevier Limited, pp 35-65.
143. Quinn P.J., Carter ME., Markey B. and Carter GR. (2002): *Veterinary Microbiology Microbial Diseases- Bacterial causes of Bovine Mastitis*, 8th edition. Mosby international Limited, London, pp 465-475.