



PREVALENCE OF SUB-CLINICAL MASTITIS DOMINATED BY COAGULASE NEGATIVE *Staphylococci sp.* IN BOVINES

Balendra Singh*¹ and Ramesh Kumar²

¹Bundelkhand University, Department of Biotechnology, Kanpur Road, Jhansi, India-284128.

²Bundelkhand University, Department of Biochemistry, Kanpur Road, Jhansi, India-284128.

*Corresponding Author Email: risingsun.balendra@mail.com

ABSTRACT

In many cases of mastitis, an udder inflammation disease, *Staphylococci sp.* is reported as major pathogen along with *Acinetobacter* and *Corynebacterium*. Lack of awareness, unavailability of practical knowledge and ignorance, contributes in development of subclinical mastitis; ultimately a major cause behind preponderance of clinical mastitis. Present study was designed to understand disease prevalence and causative agents. Total number of 125 animals, out of which 45 cows and 80 buffaloes, from 3 representative sectors, in and around Jhansi, District of Bundelkhand division in India were examined for mastitis detection. Preliminary screening test used to study prevalence was CMT followed by microbial enrichment, isolation and characterization. Bacterial isolation and pure culture were done in accordance with Collee et al, 2008. Overall prevalence of 56.80% was reported. Out of 500 quarters, 25 blind teats were left, a total of 205 (43.16%) quarters were found positive for subclinical mastitis. 21 (46.66%) cows and 50 (62.50%) buffaloes were found positive for subclinical mastitis with CMT. Teat wise prevalence was found higher in cows as compare to buffalo. It was observed as 52.38 and 47.83 % respectively. Prevalence of different bacterial sp., isolated was found 14.63, 51.22, 13.41, 10.98, 3.66, and 6.10 % for *S.aureus*, *CNS*, *Bacillus*, *Streptococci*, *E.coli*, and Others, respectively. Among 51.22% isolates of *Staphylococci sp.* non-*aureus*; *S. epidermidis* emerged as major *CNS sp.* with isolation frequency of 61% followed by 20, 10, 4, 2, 2, 1% frequency of isolation for *S. chromogenes*, *S. intermedius*, *S. simulans*, *S. hyicus* and *S. haemolyticus*, respectively. Study concludes the emergence of Coagulase negative *Staphylococci sp.*, specially *S. epidermidis* as major contributors to subclinical mastitis.

KEY WORDS

Subclinical Mastitis, Prevalence, Coagulase negative *Staphylococci*, Bundelkhand, Bovines

INTRODUCTION

Mastitis is an udder inflammation disease, which not only affects milk production but also the quality. Control of mastitis should be an integral part of clean milk production. Mastitis affects both cattle and buffalo and considered as major cause behind huge economic loss in developing and developed countries (Korhonen and Kaartinen, 1995; Bradley, 2002) and in India (Joshi and

Gokhle, 2006). India is the largest producer of milk, the export of milk and milk products depends on quality, which is degraded by mastitis in very high percentage and is of value for export oriented country.. Mastitis is an infectious disease causing great economic loss due to reduction in milk yield (Oliver and Calvino, 1995). Sub-clinical mastitis is 30-40 times more prevalent than clinical mastitis. Mastitis, one of the most prevalent

diseases in dairy animals, an endemic that happens to be the most frequent and most costly disease affecting dairy herd's worldwide (Halasa *et al.* 2007; Miller *et al.* 1993). It affects the quality of the milk through changes in milk composition and in return, affects the economy of dairy industry.

Mastitis is an infectious disease occurs in response to bacterial infection (Zhao and Laccase, 2008) and continually causing great economic loss due to reduction in milk yield. Sub-clinical mastitis is 30-40 times more prevalent than clinical mastitis. It is important to establish the major pathogens, their prevalence and correlation with disease outbreak in particular area so that proper treatment and control measures can be taken into consideration (Damien *et al.* 2005), it will also be helpful in risk calculation for severity of disease and forecasting, probability and occurrence of clinical mastitis at herd level or in region. *Staphylococci* and *Streptococci* are the most common bacterial genera isolated from subclinical mastitis cases in previous studies. (Personn *et al.*, 2011, Botrel *et al.*, 2010, Gianeechini *et al.* 2002). *Staphylococcus aureus* has been reported commonly in different studies on SCM, for example, in Zambia by Pandey *et al.*, 1996, in Uruguay by Gianeechini *et al.* 2002, in Sweden by Personn *et al.*, 2011 and in India by Bhanot *et al.* 2012. *Staphylococcus sp.* is considered as dominant mastitis pathogen in both clinical and subclinical mastitis cases by Krishnamurthy *et al.* 2017 after meta-analysis of subclinical and clinical mastitis prevalence. Pyorala and Taponen, 2009 proved the common occurrence of coagulase negative *Staphylococci* in mastitis cases. Schukken *et al.* 2011 reported the occurrence of *E. coli* and *Klebsiella sp.*, as cause behind mastitis infection. Frequency of *E.coli* and *Klebsiella sp.* may vary, depending on country or on herd also Persson *et al.* 2011.

Bundelkhand is one of the most backward regions of India which is having agrarian economy. The income disparity in rural areas is a major challenging issue which is unresolved till date. Animal husbandry is the major source of income to the farmers of this region. Most of the work done here by the state & central government is to provide the basic amenities to farmers. Due to these policies farmers are more engaged now a day in animal husbandry. Cattle and Buffalo farming is the major part of farmer's economy in this region. But due to lack of awareness animal diseases like, Mastitis is

prevalent in this area and continually affecting the quality and quantity of milk and milk products produced in this region. No more recent data is available on the prevalence of subclinical mastitis in Bundelkhand region. But in India It is not easy to handle the management of milk from quantitative and qualitative point of view without having a relevant data on mastitis. So the study on prevalence of mastitis pathogens is demand of time to stimulate and protect the dairy farming in a developing country like India and particularly in Bundelkhand region by to generate real time data. It will be highly beneficial in disease forecasting and its control ultimately leads towards improvement of farmer's economy in this region. In view of the above facts, the present study was designed to study the prevalence of mastitis and associated pathogens in and around Jhansi region simultaneously, to generate primary data on prevalence of subclinical mastitis (SCM), distribution and dominance of pathogens, that can assist in management of disease in proper way with respect to this particular climatic zone.

MATERIAL AND METHODS

Sample Size, Duration & Collection area

By taking strict aseptic measures, 125 cattle milk samples were collected over a period of 3 months (August to November, 2017) from 8 unorganized sectors from various geographic locations in Jhansi and surrounding areas of Bundelkhand division of Uttar Pradesh. Jhansi is located at Latitude: 25°27'31" N Longitude: 78°34'47" E with an average elevation of 248 m = 813 ft above sea level. Average annual temperature in Jhansi is recorded between 18.4 degree centigrade to 32.9 degree centigrade, with May, June as hottest, while January as coldest month on average. Jhansi also receives an annual precipitation of 891.3 with a total of 44.20 numbers of rainy days.

Milk sample collection, handling and transportation

In accordance to the procedure described by Ayano *et al.* (2013), Aseptic procedures were followed for collecting a composite of all quarter milk samples as described by Harmon *et al.* (1990). Sample collection was done before milking. Udders and especially teats were cleaned with 70% alcohol and dried up, just before sample collection. The first 3 milking streams were discarded and thereafter approximately 10 ml of milk collected in to a sterile collecting tube. After collection, the sample was placed in an icebox and transported to

the laboratory, stored at refrigerated temperature of 4°C for 24 Hours till the inoculation on a standard bacteriological media.

California mastitis test (CMT)

The California Mastitis Test (CMT) in accordance with National Mastitis Council, 1999 guidelines. About 2 ml of each sample collected per quarter in a plastic paddle having four shallow cups. Equal amount of CMT reagent was added to milk, and then paddle was rotated to allow proper mixing of milk and reagent. Score was noted down as 0, +1, +2 and +3 for for nrgative/trace, weak positive, distinct positive and +3 for strong positive respectively. Cows or buffaloes found positive for minimum of one quarter were declared CMT positive.

Isolation and characterization of bacterial isolates

All bacteriological tests were performed on media and reagents purchased from commercial sources (HiMedia Laboratories, Mumbai) . 100 ml of each milk sample enriched in peptone water was transfred and spreaded thourghly, on nutrient agar and another 100 microlitre was used for pour plate for examination of bacteriological status of milk. Further on the basis of colony morphology, and gram staing bacterial cultures were differentiated into Gram +Ve and Gram negative rods or cocci. For isolation of *Staphylococci*, initially, milk samples were enriched in brain heart infusion broth , with incubation for 6 h at 37 °C and then again incubated for additional 24 hour at 37°C on streaked on mannitol salt agar. Colonies were re-streaked onto BHI agar for further identification procedures after recording colony morphology.

Blood agar plate incubation for 6 hours with 5% CO₂ was done for isolation of Streptococci by streak plate. After recording the pattern of haemolysis and the colony morphology, the colonies were re-streaked onto blood agar plates and incubated further at 37 °C for 48 h in 5 % CO₂ to obtain pure cultures. Streaking of pure cultures was again repeated for further identification procedure. Enrichment was done on tryptone phosphate broth for 18 h at 37 °C for isolation of *E.coli*, followed by MacConkey agar streaking and incubation at 37 °C for 24 h. The colonies fermenting lactose were further streaked onto Eosin Methylene Blue agar and incubated for 24 h at 37 °C. Pure cultures were subjected for various biochemical tests including Coagulase, Catalase, oxidase and carbohydrate fermentation test for trahalose, glucose, sucrose, arabinose, xylose, raffinose, lactose, malotose and mannitol, as per standard

procedures (Collee *et al.*, 2008). Results were analysed with one way ANOVA.

RESULTS AND DISCUSSION

Prevalence of mastitis:

Mastitis is the major cause of loss to milk yield in selected area of Bundelkhand, directly responsible for losses to farmers. Subclinical mastitis was observed as neglected fact at both farmers and veterinarian level as it was not managed seriously, and generally not diagnose which is continously predispoing the serious mastitis problems in the region. Lack of primary data of mastitis prevalnce in open sources, particularly for this study area is observed as serious issue in mastitis management. Total number of 125 animals, out of which 45 cows and 80 buffaloes, from 3 representative sectors, in and around Jhansi, District of Bundelkhand division in Uttar Pradesh were examined for mastitis detection to determine the prevalence of disease and bacterial isolates. On the basis of California mastitis test, total numbers of 71 (56.80%) animals were found positive for subclinical mastitis. Except this 2 animals with blind teats were not considered for further investigation. Out of 500 quarters, 25 blind teats were left, a total of 205 (43.16%) quarters were found positive for subclinical mastitis. Overall prevalence reported falls in range of subclinical mastitis between 19.20 and 83%, as previously established by Sharma and Maiti (2010), Kumar *et al.* (2010) and Tuteja *et al.* (1993). However it is significantly higher than overall mean prevalence of 44.7% for bovine mastitis as calculated by Nilesh *et al.* (2012) after compiling results from more than 100 studies in India but in agreement with Ravindra *et al.* (2013).

Dua *et al.* (2003) reported higher susceptibility of cows (48.7%) against buffalo (23.935) for subclinical mastitis which is also supported by Hussain *et al.*(1984) and Sharma (2003). In our study fact was found true in case of teatwise prevalence but at animal level results reported were against these studies in case of Jhansi. In present study, 21 (46.66%) cows and 50 (62.50%) buffaloes were found positive for subclinical mastitis with CMT. Teat wise prevalence was found higher in cows as compare to buffalo. It was observed as 52.38 and 47.83 % respectively. But the fact observed is in agreement with Sharma *et al.* (2007), who has reported 68.60 % prevalence in case of buffalo as compared to 32.40% subclinical mastitis prevalence in cows.

Total viable count:

Total viable count of milk samples was done nutrient agar, CLED Agar, Mckonkey agar and MS media to obtain the initial information for further processing and confirmation of bacterial agents. Bacteria load, obtained in samples from different source is presented in **table-01**. Our results revealed that total viable count in milk samples from animals tested positive for subclinical mastitis ranged from 6×10^3 to 2.14×10^5 cfu/ml on different media which was found significantly higher than counts ranged from 1.9×10^3 to 8.22×10^4 in non mastitic milk samples ($p < 0.05$) which is in agreement with **Hassan et al. (2015)**. Higher bacterial load in mastitis milk samples is also observed by **Joao et al. (2012)**. who find total viable count from 1.3×10^6 to 7.4×10^5 . Significantly higher bacterial count was

observed in buffalo milk than cow milk in both mastitic and non mastitic milk samples ($p < 0.05$) indicating the higher susceptibility of buffalo in comparison to cow. Range of bacterial count obtained in our study is also in agreement with **Devi and Sowmy, (2012)** and **Perku, (2011)**. Highest bacterial count obtained on nutrient agar plates while lowest on mckonkey agar plates which indicate the lower rate but contamination with environmental *Enterobacteriaceae* members of 3 samples but with no significant difference between mastitic and non mastitic milk samples from both buffalo and cow. No significant difference was observed in bacterial count on MS agar from normal and mastitic milk samples from buffalo milk, may indicating the higher prevalence of non mastitis causing Coagulase negative *Staphylococci*.

Table-01: Total Bacterial count on different media in cfu/ml.

Disease Status	Source	Nutrient agar	CLED Agra	McKonkey Agar	MS Agar
SCM +Ve	Buffalo	2.14×10^5	9.55×10^4	8.4×10^3	1.65×10^4
	Cow	1.24×10^5	7.57×10^4	6.0×10^3	1.14×10^4
SCM -Ve	Buffalo	7.4×10^4	8.22×10^4	8.6×10^3	1.65×10^4
	Cow	6.5×10^4	5.25×10^4	1.9×10^3	4.8×10^3

Prevalence of mastitis pathogens: Milk samples found positive for Subclinical mastitis ($n=71$) were further used to isolate bacterial pathogens. Results for species wise distribution with respect to animals and prevalence with respect to total isolates (82) is represented in **Table-02**. Among *Staphylococci* sp. other than *aureus*; *S. epidermidis* (20%) was most prevalent followed by *S.*

chromogenes, *S. intermedius*, *S. simulans*, *S. hycus* and *S. haemolyticus*, with isolation rate of 10, 4, 2, 2, 1% respectively. Higher prevalence of *S. epidermidis* and *S. chromogenes* among CNS sp. is in agreement with **Kudinnaha and Simango (2002)**, **Waller et al. (2011)** later proved by **Sandra et al. (2014)**.

Table-02: Prevalence of bacterial agents isolated from CMT subclinical mastitis positive milk samples. (n=71)

S.No.	Bacterial isolates	No. of sample positive	Prevalence (%)
1.	<i>S.aureus</i>	12	14.63
2.	CNS*	42	51.22
3.	<i>Bacillus</i>	11	13.41
4.	<i>Streptococci</i>	09	10.98
5.	<i>E.coli</i>	03	3.66
6.	Others	05	6.10

*CNS=Coagulase Negative *Staphylococci*; *CNS=Coagulase Negative *Staphylococci* *Percentage given out of total isolates=82

Coagulase negative *Staphylococci* was observed as most prevalent bacteria isolated with rate of 51.02% followed by *Staphylococcus aureus*, *Streptococci* sp., *E. Coli* and other *Enterococci*. Prevalence of coagulase negative *Staphylococci* sp. is in agreement with **D. Cervikova et al. (2013)** who had been reported higher prevalence (53.5%) in samples from asymptomatic cows. Dominance of Coagulase negative *Staphylococci*

followed by *S. aureus* is also established by **S.A. Makonenn et al. (2017)**. Frequency of isolation for *S. epidermidis* was found to be 61% followed by 20, 10, 4, 2, 2, 1% frequency of isolation for *S. chromogenes*, *S. intermedius*, *S. simulans*, *S. hycus* and *S. haemolyticus*, respectively, which proved its dominance over other *Staphylococci*, which is also reported by **Sandra et al. (2014)**. CNS sp. as a whole were also reported as

dominant mastitis pathogens by in studies from Uganda by **Byarugaba et al. (2008)** and **Abrahmsen et al. (2014)**. **Bochniarz et al. (2013)** reported higher prevalence of *S.chromogenes* simultaneously with *S.epidermidis* while **Trinidad et al. (1990)** and **Mathews et al. (1992)** reported *S. chromogenes* and *S. simulans* as common mastitis pathogens among CNS sp. These findings also support our finding if considered in combination.

Prevalence of *Streptococci* is in agreement with **Schawrz et al. (2010)** and **Botrel et al. (2010)** who get its prevalence between 10-20% but more close to **Pitkala et al. (2004)**. *Bacillus sp.* isolated from samples with prevalence rate of 13.41% indicating the unhygienic practices in management of milking animals. *Corynebacterium sp.* and *Klebsiella sp.* were found dominant bacteria among others with overall prevalence rate of 2.6% and 1.4 % respectively, which is supported by the study done by **Sarvanan et al. (2000)**. Presence of *Corynebacterium sp.* may indicate the latent infections in animals as evidenced by **Mir et al. (2014)**, can be correlated with latent mastitis pathogens in study population. Low prevalence of *E. Coli* (3.66%) is in agreement with **Kivarua et al. (2007)** who reported 4.1% isolates of *Coliforms* in Tanzania and may be correlated with temperature and dry climatic conditions during most of the months in this zone, as indicated by **Hogan and Smith (2003)**. *Staphylococci sp.* and *Corynebacterium sp.* were also considered as abundant in milk samples from asymptomatic cows by **Erica et al. (2017)**.

CONCLUSION

Animals, positive for CNS sp. were found more prevalent towards development of mastitis in comparison to animals infected with other nonpathogenic bacterial sp. Study recommends the development of managerial and clinical practices based on regular monitoring of subclinical mastitis to prevent the bigger loss in live stocks. Higher frequency of CNS sp. like *S. epidermidis* as reported in higher frequency among all may also create a public health problem, if not controlled. Study recommends further observations and preparation of detailed report on association of specific pathogens responsible for subclinical mastitis in this climatic zone.

Acknowledgments:

Research is supported by internal research facilities of Bundelkhand university and output of PhD work, Biotechnology Department and central facilities at Innovation centre of same university. Assistance provided by laboratory staff during this work cannot be neglected.

REFERENCES

1. Abrahmsén M, Persson Y, Kanyima BM, Båge R (2014). Prevalence of subclinical mastitis in dairy farms in urban and peri-urban areas of Kampala, Uganda. *Trop Anim Health Prod.*, 46(1), 99-105.
2. Ayano, A. A., Hiriko, F., Simyalew, A. M, and Yohannes. A., (2013). Prevalence of subclinical mastitis in lactating cows in selected commercial dairy farms of Holeta District. *Journal of Veterinary Medicine and Animal Health*, 5 (3), 6772.
3. Bhanot, V., Chaudhri, S.S., Bisla, R.S. and Singh, H. 2012. Retrospective study on prevalence and antibiogram of mastitis in cows and buffaloes of eastern Haryana. *Indian J. Anim. Res.*, 46: 160– 163.
4. Bochniarz M, Wawron W, Szczubiał M. (2013). Coagulase-negative staphylococci (CNS) as an aetiological factor of mastitis in cows. *Pol J Vet Sci.*, 16(3), 487-92.
5. Botrel, M.A., Haenni, M., Morignat, E., Sulpice, P., Madec, J.Y. & Calavas, D. (2010). Distribution and antimicrobial resistance of clinical and subclinical mastitis pathogens in dairy cows in RhôneAlpes, France. *Journal of Dairy Research*, 65,139–142.
6. Bradley A. J. (2002) . Bovine mastitis: an evolving disease. *Veterinary Journal*. 164(2), 116–128. doi: 10.1053/tvj.2002.0724
7. Byarugaba DK, Nakavuma JL, Vaarst M, Laker C. (2008). Mastitis occurrence and constraints to mastitis control in smallholder dairy farming systems in Uganda. *Livest Res Rural Dev.*, 20(1)
8. Collee, J.G., Miles, R.S., Watt, B., (2008). Tests for identification of bacteria. In: Collee JG, Fraser AG, Marmion BP, Simmons A, editors. *Mackie and McCartney, Practical Medical Microbiology*. London: Churchill Livingstone.
9. D. Cervinkova, H. Vlkova, I. Borodacova (2013). Prevalence of mastitis pathogens in milk from clinically healthy cows. *Veterinarni Medicina*, 58(11), 567–575.
10. Damien J Barrett, Anne M Healy, Finola C Leonard, Michael L Doherty (2005). Prevalence of pathogens causing subclinical mastitis in 15 dairy herds in the Republic of Ireland. *Ir Vet J.*, 58(6), 333–337. doi: 10.1186/2046-0481-58-6-333

11. Devi, N.P. and Sowmya, D. (2012). Microbial count of Raw cow milk in Chennai. *International Journal of Research in Pharmaceutical and Biomedical Sciences*. 3(2), 856-860.
12. Erika C. R. Bonsaglia, Marilia S. Gomes, Igor F. Canisso, Ziyao Zhou, Svetlana F. Lima, Vera L. M. Rall, Georgios Oikonomou, Rodrigo C. Bicalho & Fabio S. Lima Milk (2017). Microbiome and bacterial load following dry cow therapy without antibiotics in dairy cows with healthy mammary gland; *Scientific Reports*, 7.
13. F. M. Kivaria, J. P. T. M. Noordhuizen, and M. Nielen (2007). Interpretation of California mastitis test scores using *Staphylococcus aureus* culture results for screening of subclinical mastitis in low yielding smallholder dairy cows in the Dar es Salaam region of Tanzania. *Preventive Veterinary Medicine*. 78 (3-4), 274–285.
14. Giannechini, R., Concha, C., Rivero, R., Delucci, I. & Moreno López, J. (2002). Occurrence of clinical and sub-clinical mastitis in dairy herds in the West Littoral region in Uruguay, *Acta Veterinaria Scandinavica*, 43, 221-230.
15. Halasa, T., Huijps, K., Osteras, O. and Hogeveen, H. (2007). Economic effects of bovine mastitis and mastitis management: A review, *Veterinary Quarterly*, 29: 18-31.
16. Harmon, R.J. (1990). *Bacteriological procedures for diagnosis of bovine udder infection*. Arlington: National Mastitis Council, 1990. 34p.
17. Hussain, M., N. Khalid and I. Naeem, (1984). Subclinical mastitis in cows and buffaloes, identification and drug sensitivity of causative organisms. *Pak. Vet. J.*, 4, 161-164.
18. J. Hogan and K. L. Smith (2003). Coliform mastitis. *Veterinary Research*, 34(5), 507–519.
19. João Emídio Ferreira Lopes Júnior, Carla Cristine Lange, Maria Aparecida Vasconcelos Paiva Brito, Fabiana Ribeiro Santos, Marco Aurélio Souto Silva, Luciano Castro Dutra de Moraes, Guilherme Nunes de Souza (2012). Relationship between total bacteria counts and somatic cell counts from mammary quarters infected by mastitis pathogens. *Cienc. Rural*, 42, 4 <http://dx.doi.org/10.1590/S0103-84782012000400019>
20. Joshi S, Gokhale S. (2006). Status of mastitis as an emerging disease in improved and periurban dairy farms in India. *Ann N Y Acad Sci.*, 10(81), 74-83.
21. K. Dua (2003). Comparative Disease susceptibility of Cattle and Buffalo in Punjab (India). Proceedings of the 10th International Symposium on Veterinary Epidemiology and Economics, 2003 Available at www.sciquest.org.nz
22. Korhonen H., Kaartinen L. (1995) Changes in the composition of milk induced by mastitis. In: Sandholm M., Honkanen T., Buzalski L., Kaartinen, Pyörälä S., editors. *The Bovine Udder and Mastitis*. Helsinki, Finland: *University of Helsinki*; 1995. pp. 76–82.
23. Kudinha T, Simango C. (2002). Prevalence of coagulase-negative staphylococci in bovine mastitis in Zimbabwe. *J S Afr Vet Assoc.*, 73(2), 62–65.
24. Kumar, G.S.N., M.M. Appannavar, M.D. Suranagi and A.M. Kotresh (2010). Study on incidence and economics of clinical mastitis. *Karnataka J. Agric. Sci.*, 23, 407-408.
25. Matthews, K.R., R.J. Harmon and B.E. Langlois, (1992). Prevalence of *Staphylococcus* species during the periparturient period in primiparous and multiparous cows. *J. Dairy Sci.*, 75, 1835-1839.
26. Md. Amirul Hasan, Md. Aminul Islam, Mohammad Showkat Mahmud, A.S.M. Ashab Uddin and Shamim Ahmed (2015). Microbial analysis of raw and pasteurized milk from selected areas of Dinajpur, Bangladesh. *Asian J. Med. Biol. Res.*, 1 (2), 292-296; doi: 10.3329/ajmbr.v1i2.25624
27. Miller, G.Y., Bartlett, P.C., Lance, S.E., Anderson, J. and Heider, L.E. (1993). Costs of clinical mastitis and mastitis prevention in dairy herds. *Journal of the American Veterinary Medical Association* 202, 1230-1236.
28. Mir AQ, Bansal BK and Gupta DK (2014). Subclinical mastitis in machine milked dairy farms in Punjab: prevalence, distribution of bacteria and current antibiogram. *Veterinary World*, 7(5), 291-294
29. Neelesh Sharma, Gyu Jin Rho, Yeong Ho Hong, Tae Young Kang, Hak Kyo Lee, Tai-Young Hur and Dong Kee Jeong (2012). Bovine Mastitis: An Asian Perspective. *Asian Journal of Animal and Veterinary Advances*, 7, 454-476.
30. Oliver SP, Calvino LF. Influence of inflammation on mammary gland metabolism and milk composition. *J Anim Sci*. 1995;73:18–33.
31. Perku Bogdan. (2011). Effect of prolonged storage on microbiological quality of raw milk. Microbiological quality of raw milk Mljekarstvo. *American Journal of Nutrition*. 61(2), 114-124
32. Persson, Y., Nyman, A. K. J. & Grönlund-Andersson, U. (2011). Etiology and antimicrobial susceptibility of udder pathogens from cases of subclinical mastitis in dairy cows in Sweden. *Acta Veterinaria Scandinavica*, 53, 36.
33. Pitkälä, A., Haveri, M., Pyörälä, S., Mylly, V. & Honkanen-Buzalski, T. (2004). Bovine mastitis in Finland 2001 – prevalence, distribution of bacteria and antimicrobial resistance. *Journal of Dairy Science*, 87, 2433-2441.
34. Pyörälä, S. & Taponen, S. (2009). Coagulase-negative staphylococci – Emerging mastitis pathogens, *Veterinary Microbiology*, 134, 3-8.
35. Raveendra Hegde, Shrikrishna Isloor, K. Nithin Prabhu, B. R. Shome, D. Rathnamma, V. V. S. Suryanarayana, S. Yatiraj, C. Renuka Prasad, N. Krishnaveni, S. Sundareshan, D. S. Akhila, A. R. Gomes, Nagendra R. Hegde (2012). Incidence of Subclinical Mastitis and Prevalence of Major Mastitis Pathogens in Organized

- Farms and Unorganized Sectors. *Indian J Microbiol*, 53(3), 315–320. doi: 10.1007/s12088-012-0336-1
36. S.A.Mekonnen,G.Koop,S.T.Melkie,C.D.Getahun,H.Hogevan,T.J.G.M.Lam,(2017). Prevalence of subclinical mastitis and associated risk factors at cow and herd level in dairy farms in North-West Ethiopia. *Preventive Veterinary Medicine* ,145, 23-31
 37. Sandra Björk, Renee Båge, Benon M Kanyima, Susanne André, Maria G Nassuna-Musoke, David O Owiny, Ylva Persson (2014). Characterization of coagulase negative staphylococci from cases of subclinical mastitis in dairy cattle in Kampala, Uganda. *Ir Vet J.*, 67(1), 12. doi: 10.1186/2046-0481-67-12
 38. Saravanan P, B Nagaranjan, R Ramprabhu, K Vasu and PA Dhanapalan, (2000). Study on the etiology, incidence and physical characters of milk in subclinical mastitis. *Indian J Vet Med*, 20, 74-76.
 39. Sharma, H., S.K. Maiti and K.K. Sharma, (2007). Prevalence, etiology and antibiogram of microorganisms associated with sub-clinical mastitis in buffaloes in durg, Chhattisgarh state (India). *Int. J. Dairy Sci.*, 2, 145-151.
 40. Sharma, N. and S.K. Maiti, (2010). Incidence, etiology and antibiogram of sub clinical mastitis in cows in durg, Chhattisgarh. *Indian J. Vet. Res.*, 19, 45-54.
 41. Sharma, N., (2003). Epidemiological investigation on subclinical mastitis in dairy animals: Role of vitamin E and selenium supplementation on its control. MVSc. Thesis, IGKV, Raipur, India.
 42. Schukken, Y. H., Günther, J., Fitzpatrick, J., Fontaine, M. C., Goetze, L., Holst, O., Leigh, J., Petzl, W., Schubert, H-J, Spika, A., Smith, D.G.E., Quesnell, R., Watts, J., Yancey, R., Zerbe, H., Gurjar, A., Zadoks, R.N. & Seyfert, H.-M. (2011). Host-response patterns of intramammary infections in dairy cows, *Veterinary Immunology and Immunopathology*, 144, 270-289.
 43. Schwarz, D., Diesterbeck, U.S., Failing, K., König, S., Brügemann, K., Zschöck, M., Wolter, W. & Czerny, C.-P. (2010). Somatic cell counts and bacteriological status in quarter foremilk samples of cows in Hesse, Germany – A longitudinal study. *Journal of Dairy Science*, 93, 5716-5728.
 44. Trinidad, P., S.C. Nickerson and T.K. Alley, (1990). Prevalence of intramammary infection and teat canal colonization in unbred and primigravid dairy heifers. *J. Dairy Sci.*, 73, 107-114.
 45. Tuteja, F.C., M.P. Kapur, A. Sharma and A.K. Vinayak, (1993). Studies on bovine sub clinical mastitis: Prevalence and microflora. *Indian Vet. J.*, 70, 787-791.
 46. Waller KP, Aspan A, Nyman A, Persson Y, Andersson UG (2011). CNS species and antimicrobial resistance in clinical and subclinical bovine mastitis. *Vet Microbiol.* , 152(1–2), 112–116.
 47. Zhao, X. and P. Lacasse. (2008). Mammary tissue damage during bovine mastitis: Causes and control. *J. Anim. Sci.*, 86(1), 57-65

***Corresponding Author:**

Balendra Singh*

Email: risingsun.balendra@mail.com