

Genotype and subtype analyses of *Cryptosporidium* isolate from humans by gp60 PCR-RFLP in Zabol, Southeast of Iran**Habibeh Mohammadian¹, Hakim Azizi¹, Mahdi Khoshsiman
Shahreki¹, Mansour Dabirzadeh^{1*}***1. Department of parasitology, Zabol University of Medical Science, Zabol, Iran.***KEYWORDS**Cryptosporidium;
Human;
Subtype;
Genotype**ABSTRACT**

Cryptosporidium parasite is a cause of diarrhea in humans and other cold and endotherm animals that have been widely distributed throughout the world. This study aimed to determine the genetic diversity of *Cryptosporidium* in children with diarrhea using the GP60 gene by Polymerase Chain Reaction Restriction Fragment Length Polymorphism (PCR-RFLP) method. In this study, stool specimens were collected from 182 children with diarrhea referring to Zabol hospitals. By direct observing the direct wet smear, Sheather's Sugar Flotation Solution, and Ziehl-Neelsen staining, examinations were conducted to identify the parasite, eventually, on DNA Extracted from isolates, PCR-RFLP was performed. From the total of samples of 182 stool specimens, 27 isolates were diagnosed infected with *Cryptosporidium* using the Ziehl-Neelsen staining method, of which 17 isolates were from *Cryptosporidium parvum* and 10 isolates from *Cryptosporidium hominis* using molecular examinations. Both human and cattle genotypes of *Cryptosporidium* can be seen in children with diarrhea. However, given that the dominant species are *Cryptosporidium parvum*, the zoonotic transmission is more common than human transmission, and contact with livestock is considered as the most important source of human contamination.

Article Info

Received 2021/03/28;

Accepted 2021/05/29;

Published Online 2021

**Corresponding Information:** Mansour Dabirzadeh, Department of parasitology, Zabol University of Medical Science, Zabol, Iran,

E-mail: mdabirzadeh20002000@yahoo.com

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Abbreviations

PCR, Polymerase Chain Reaction; PCR-RFLP, Polymerase Chain Reaction Restriction Fragment Length Polymorphism; AIDS, Acquired Immune Deficiency Syndrome; qPCR, quantitative Polymerase Chain Reaction; SSU, Small Subunit

Introduction

Cryptosporidium parvum is an intracellular protozoan of the Apicomplexa branch that causes diarrhea in humans and animals (1). This parasite is transmitted through water and food contaminated with Oocyst can complete the cycle with a single host (Monoxen) (2). In epithelial cells of the small intestine of humans and animals are replaced leading to clinical signs (3).

Cryptosporidium is a serious problem in public health that causes persistent diarrhea in immunocompromised patients and causes self-limiting diarrhea in immunocompetent individuals, as well as in gastrointestinal tract infections have been introduced in recent years as one of the major causes of acute diarrhea, especially in pediatric and immunocompromised patients (4, 5).

Although infection with *Cryptosporidium parvum* has been reported of all ages, from a few months, babies to 90-year-old, several reports indicate that infections with this parasite are more common in children under five years of age: so that it is considered as the third or fourth cause of diarrhea in children under-five by some societies(6, 7). The spread of this disease has not been limited by geographical boundaries and has been widely scattered throughout the world (8). With the advent of the AIDS phenomenon in the 1980s, the importance of single-cell protozoan was significant (9). The prevalence of *Cryptosporidium* is estimated to be between 1-3% in European and North American countries, 5% in Asia, and 10% in Africa (10). Also, the rate of infection in children, patients with gastroenteritis infected with AIDS in Iran varied from 1 to 13.1%, so that in gastroenteritis patients in Eastern of Mazandaran reported by Purdin was 1%, Ghorbannia in Babolsar city 12% and Fouladvand, et al. (1391) as 13.1% in Borazjan city (10, 11). In another study, the small ratio of gastroenteritis had cryptosporidiosis (12).

The use of molecular tools for the epidemiology of cryptosporidiosis, classification, biology, and host specificity of each species, as well as the study of the genetic diversity between *Cryptosporidium* species, helps to determine the sources of infection and transmission, important human pathogens, and their pathogenicity. Identifying genotypes on opportunistic pathogens in immune-compromised and childhood patients leads to an increase in our information on epidemiology, patient care, management, and rescue (13).

The genes used in the PCR-RFLP technique should show polymorphism among the genotypes of a species, and so we used the GP60 gene. The GP60 gene encodes an initial protein, derived from its proteolytic cleavage, two surface glycoproteins called GP45 and GP15 that are involved in binding and invasion of host cell enterocytes (14).Gp60 has heterogeneity and relevance to biology. It is one of the polymorphic markers seen in the *Cryptosporidium* genome so far. Considering that no study has been done in this area, this study was conducted to determine the genetic diversity of *Cryptosporidium* in children with diarrhea in Zabol using the GP60 gene and PCR-RFLP method.

Methods

Zabol is in the North of Sistan & Blugestan with a hot and dry desert climate. Zabol lies on the border along with Afghanistan. The latitude and longitude GPS coordinates of Zabol (Iran) is: Lat: 31.0385, long: 61.4962 (15).

Human samples were taken from diarrheal children who were referred to Imam Khomeini hospital's Lab. Amir el Momenian hospital's Lab and Zabol Laboratory Center. After transferring samples to the University's Lab with direct methods, a thin extension of the specimens was prepared on a slide and stained with the Ziehl-Neelsen staining method and the presence of *Cryptosporidium* oocysts was examined and positive samples were purified using the sugar sheather method and was placed in the freezer at 20°C until DNA extraction. Ethical issues; Informed consents were taken. All patients participated in this study voluntarily. This study has an ethical code zbm.1.REC.1395.45 issued by the ethics committee of Zabol University of Medical science. This study is a continuation of our work on SSUrRNA that was published before in Shiraz E-Medical Journal 20 (16).

DNA extraction: The sample suspension was washed 3 to 6 times with PBS before freeze-thaw transfer and PCR was performed. Then, frost and thaw were carried out 3 times, and each bicycle for 10 transactions. DNA extraction was performed using a DNA kit (Yekta Tajhiz Co.) according to the mentioned procedure in the catalog. DNA concentration measured by spectrophotometric apparatus was and stored until freeze-20-PCR. To perform PCR for the GP60 gene the primer pair Forward: CGTTATAGTCTCCGCTGTA and Revers AAAGCAGAGGAACCGGCAT were used (15). The polymerase chain reaction was carried out under the following conditions and in 35 cycles: initial denaturation at 94 degrees 3 minutes, denaturation 94 degrees 30 seconds, annealing at 53 degrees 30 seconds, extension at 72 degrees 60 seconds, final extension at 72 degrees in 7 minutes. To evaluate the PCR_RFLP results and ensure the proliferation of the desired component, agarose gel electrophoresis was used. The molecular weight of the fragment was determined alongside a DNA marker.

To determine the species and genotypes of *Cryptosporidium* by the GP60 gene by using *RsaI*, *AluI* enzymes, to perform RFLP, the main mixture was obtained from a mixture of 2 µl buffers, 5 µl of PCR product, and one unit of the enzyme with water of a volume of 10 and for 2 hours was placed in binary (heated bath) 37 degrees. The contents of the product were then electrophoresed on 2% gel and the bands were observed along with the DNA marker with gel duck. (Gel Documentation system)

Results

From 182 children with diarrhea who were examined, 27 were recognized for *Cryptosporidium* oocyst. Among these, 14 cases were female and 13 cases were male infected with *Cryptosporidium*. The primer was used to reproduce a piece of about 961-883 depending on the species. Of the 27 human isolates examined, 17 isolates recognize as *Cryptosporidium parvum*, calf genotype, and 10 isolates of human genotype *Cryptosporidium hominis*. The band size of *C. parvum* species is 871-877-883 and *C. hominis* is 916-961. Some isolates and Sizes of predicted bands were shown in table1.

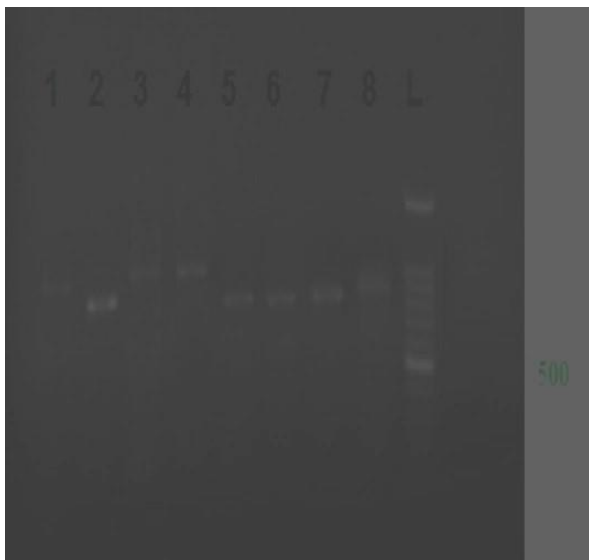


Figure 1. Electrophoresis of PCR product on 1% agarose gel. Line1: standard sample, lines 2-8: samples of the patients, line 9 (L): DNA marker (Leader).

In our study, some major bands were found as another studies, but some profile bandings were different. Profile banding digestion with *AluI* and *RsaI* in the Zabol region is shown in the Table 2. Subgenotype variation can be seen in Figure 2 and Figure 3, but the dominant genotype digested with *AluI* was IIb and *RsaI* was Ie.

Table 1. Enzyme Cutting patterns of *Cryptosporidium* (14).

Isolate	Sizes of predicted bands	Genotype	
<i>AluI</i>	<i>RsaI</i>		
CKJ7	36, 60, 81, 206, 242, 258	35, 143, 177, 199, 329	IIa
CI2	36, 60, 81, 206, 242, 258	35, 143, 177, 199, 329	IIb
IG1	36, 232, 278, 325	35, 81, 143, 256, 356	IIc
HJ3	146, 201, 587	143, 159, 241, 391	Ia1
HN6	131, 186, 587	143, 159, 241, 361	Ia2
HI2	56, 75, 328, 457	35, 143, 159, 200, 379	Ib
HJ2	30, 128, 143, 232, 328	106, 129, 134, 159, 424	Ie

Table 2. Isolated binding size from various *C. parvum* genotypes.

Profile banding size with <i>AluI</i>	Name	Profile banding size with <i>RsaI</i>	Name
81-206-212-258	IIb	35-143-177-379	IIa
81-206-212	IIa2	143-159-201-379	Ib
232-278-325	IIc	134-159-201-424	Ie
75-81-328-457	Ib	134-159-500	Ie2
60-81-206-212-258	IIc1	134-159-200-424	Ie

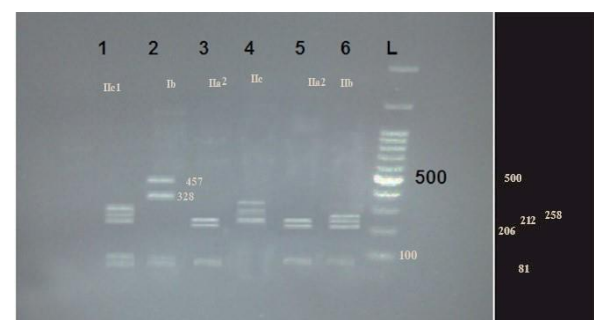


Figure 2. PCR-RFLP analysis of the *Cpgp60* gene by restriction with *AluI*.

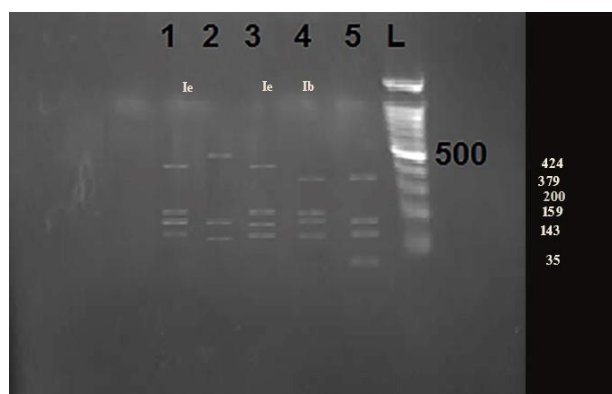


Figure 3. PCR-RFLP analysis of the *Cpgp60* gene by restriction with *RsaI*.

Discussion

Cryptosporidium is one of four important diarrheal pathogens in children, which is one of the health problems, eighteen *Cryptosporidium* species have been recognized (17, 18). A wide range of studies has been conducted on the various characteristics of *Cryptosporidium*, including biology, epidemiology, and diagnosis. The prevalence of *Cryptosporidium* species varies widely throughout the world. Therefore, this study was conducted to determine the species and genotype of *Cryptosporidium* in children with diarrhea to obtain more accurate information on epidemiology, control, and prevention of this parasite.

In this study, 182 specimens were selected, positive samples were selected for molecular testing, and were replicated using PCR primers. A total of 27 samples were genotyped. A total of 17 bovine genotypes were *Cryptosporidium parvum* and 8 isolates of human genotype were from *Cryptosporidium hominis*.

According to the results, the genotype of *Cryptosporidium parvum* was a dominant species, and the genotype pattern was consistent with countries like France with 61% (19), and Saudi Arabia with 100% (13). While in African states, the percentage was 76 (20), for instance the human genotype of *Cryptosporidium parvum* was consistent in Kenya with 82% (21), is (anthroponomics *C. parvum* subtypes are the major cause of cryptosporidiosis in South Africa). The reported rate of infection in Egypt was 17%, Uganda was 5.9%, Turkey 3.5%, Pakistan 10.3% (9). Genetic analysis of *Cryptosporidium* among immunocompromised individuals and children under five-years-of-age has shown that 11 *Cryptosporidium parvum* (68.8%), 4 *C. hominis* (25%), and one case of *C. meleagridis* (6.2%) (22).

In a study by Taghipour in 2011 using the genetically engineered GP60 gene by Nested PCR, 89.47% were *Cryptosporidium parvum* and 10.52% *Cryptosporidium hominis*, and all subtypes of *Cryptosporidium parvum* from two families IId, IIa they were (18). A study conducted by Sharma et al in 2013 entitled "*Cryptosporidium* genetic variation" on the patients in northern India using SSU, GP60 genes was performed by the PCR-RFLP method. 39 samples were obtained for *Cryptosporidium hominis* and 13 species of *Cryptosporidium parvum*. 5 Ia-If subtypes and 3 types of subtypes (IIa-IIe) were observed (5).

In 2014, Rafiei et al performed a study on 390 immunocompromised and diarrhea children using the SSU gene using Nested PCR in Ahvaz. 68% of the species belonged to *Cryptosporidium parvum* and 25% *Cryptosporidium* and 6.1% *Cryptosporidium meleagridis* Agidis were found (22). Dey et al., in 2016, performed immunocompromised patients with qPCR molecular analysis, 50.17% (70.4%) of *Cryptosporidium hominis*, 19.71% (26.8%), *Cryptosporidium parvum*, and 2.71% (2.8%) of the mixed infection of the two species (23).

Conclusion

Infection with *Cryptosporidium parvum* is more than *C. hominis* in this region, contact with livestock is considered as the most important source of human contamination. Subgenotype variation can be seen, but the dominant genotype digested with *AluI* was IIb, with *RsaI* was Ie. Limitations of the study: Some DNA samples were not completely extracted or disappeared during the producer and due to emigration or cure they were missed.

Declarations

Acknowledgments

The authors would like to respect and venerate the invaluable efforts of the Vice-chancellor of Research and Technology in Zabol Medical University, some authorities that help us.

Funding

This study was supported by grants from the deputy of Research of Zabol University of medical science.

Conflicts of interests

None.

Authors' Contributions

All authors contributed toward drafting and critically revising the paper and agree to be accountable for all aspects of the work.

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How to cite this article: Mohammadian H, Azizi H, Shahraki MK, Dabirzadeh M. Genotype and subtype analyses of *Cryptosporidium* isolate from humans by gp60 PCR-RLFP in Zabol, Southeast of Iran. *Mod Med Lab J*. 2021; 4(1):5-10.