

# Antimicrobial susceptibilities of Aeromonas species isolated from medical leeches

The aim of this study was to determine the antibiotic susceptibility of Aeromonas species isolated

from leeches are grown for use in medical treatment. The water samples and two leeches which

2-10 g weight from a leech hatchery were brought to Burdur Mehmet Akif Ersoy University, Faculty of Veterinary Medicine, Department of Microbiology. The samples were cultured on blood agar base added 7% defibrined sheep blood and MacConkey agar at 18-20 hours and 37°C. Besides

the samples were incubated on two Sabourrauds' Dextrose agar supplemented chloramphenicol

at 20°C and 37°C for 10 -14 days. Two different colonies on blood agar was detected to be Aero-

monas spp. by conventional microbiological methods such as Gram staining, haemolysis, catalase,

oxidase, triple tube methods. These colonies were identified to be Aeromonas hydrophila and Aeromonas veronii on species level by Matrix Assisted Laser Desorption Ionization-Time of Flight Mass Spectrometry, too. According to antimicrobial susceptibility tests, while Aeromonas hydrop-

hila and Aeromonas veronii isolates were found resistant to amoxicillin, ampicilin, gentamicin,

erytromycin, oxacillin and penicillin, these isolates were susceptible to ceftriaxone, enrofloxacin,

florfenicol and trimethoprim-sulphamethaxazole. Because of isolation Aeromonas hydrophila and Aeromonas veronii from medical leeches and environmental, and determine antimicrobial resistan-

Dilek Öztürk<sup>1</sup>, Sibel Yaman<sup>1</sup>, Azra Demirci Özdemir<sup>1</sup>

Department of Microbiology, Faculty of Veterinary Medicine, Burdur Mehmet Akif Ersoy University, Burdur, Türkiye

ABSTRACT

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Correspondence: D. ÖZTÜRK (dozturk@mehmetakif.edu.tr)

ORCID D. ÖZTÜRK : 0000-0002-9643-8570 S. YAMAN : 0000-0002-9998-3806 A. DEMIRCI ÖZDEMIR : 0009-0005-4058-0884

#### **INTRODUCTION**

Hirudotherapy, also known as leech therapy, has been used for the treatment of various diseases since ancient times. This traditional practice has gained renewed interest due to the discovery of numerous bioactive compounds in leech saliva. More than a hundred distinct compounds have been identified, and some of these exhibit anticoagulant, analgesic, bacteriostatic, and vasodilator properties (Unal et al., 2023). The leech's gut contains a predominantly Aeromonas hydrophila bacterial flora, which is crucial for the animal's ability to digest blood. Leeches do not produce digestive enzymes themselves; instead, they rely on various bacteria, such as Aeromonas, to help break down the blood they consume. Medicinal leeches are employed across a range of medical specialties, including traumatology, microvascular replantation, and plastic and reconstructive surgery. They have the ability to reduce edema and offer additional benefits, including preventing disorders of microcirculation, restoring the vascular permeability of injured organs and tissues, lowering blood pressure, boosting immunity, and alleviating pain. However, complications following leech therapy can include bleeding, anemia, allergic reactions, and infections such as local abscesses and cellulitis, as well as more severe conditions like myocarditis, peritonitis, and meningitis. Aeromonas species have been isolated from a wide range of aquatic environments. Many of these species have been shown to be opportunistic pathogens affecting not only humans but also various other animals, such as fish and amphibians. (Nonomora et al., 1996). Gram-negative bacteria, especially Aeromonas spp., have been isolated from leeches and their environments. Research has shown that A. hydrophila and A. veronii biovar sobria are the predominant symbiotic species in the leech digestive system. (Worthen et al., 2006; Litwinowicz and Blaszkowska, 2014). However, the primary pathogens responsible for patient infections are the symbiotic bacterial species A. veronii biovar sobria and A. hydrophila, which inhabit the digestive system of leeches. Consequently, prophylactic administration of antibiotics is recommended to mitigate the risk of bacterial infections before and during leech therapy. Additionally, there are notable variations in the antibiotic susceptibilities of Aeromonas spp. (Maetz et al., 2012; Jaberi et al., 2014; Çeviker et al., 2019; Korun et al., 2019). Although numerous studies have examined the antibiotic sensitivity of Aeromonas spp. isolated from food products, water, and fish, research on the antibiotic sensitivity of Aeromonas spp. isolated from leeches remains limited (Ozturk et al., 2007; Mus and Çetinkaya, 2013; Onuk et al., 2017; Ocak, 2018; Chen et al., 2019; Li et al., 2020; Silva et al., 2022).

The aim of this study was to assess the antibiotic susceptibility of *Aeromonas* species isolated from leeches and their environment.

#### **MATERIALS and METHODS**

#### Samples

Two leeches (2-10 g weight) from a leech hatchery were brought to Burdur Mehmet Akif Ersoy University, Faculty of Veterinary Medicine, Department of Microbiology. Inhalation anasthesia was applied to the leeches using isoflurane-USP (ADEKA, Samsun, TÜRKİYE) (Figure 1). The samples were also taken from water, skin and inside of leeches. ds' Dextrose agar (SDA, Oxoid Ltd., Hampshire, UK) supplemented chloramphenicol (Oxoid Ltd., Hampshire, UK) at 20 °C and 37°C for 10 -14 days. Two different colonies were obtained in blood agar. The colonies were detected to be *Aeromonas* spp. by conventional microbiological methods such as Gram staining, haemolysis, catalase, oxidase, triple tube methods (Koneman et al., 1992). These colonies were identified to be *Aeromonas hydrophila* and *Aeromonas veronii* on species level by Matrix Assisted Laser Desorption Ionization- Time of Fli-



Figure 1. The leeches applied the inhalation anasthesia.

#### Isolation and Identification of Aeromonas spp.

The samples were taken from the skin and inside of leeches by the sterile swab and sterile pasteur pipets, respectively. The samples were cultured on blood agar base (Oxoid Ltd., Hampshire, UK) added 7% defibrined sheep blood and Mac-Conkey agar (Oxoid Ltd., Hampshire, UK) at 18-20 hours and 37°C. Besides the samples were incubated on two Sabourrau-

ght Mass Spectrometry (MALDI-TOF-MS) (Bruker Daltonics GmbH, Bremen, Almanya). There was no in SDA.

## Antimicrobial susceptibility tests

The antimicrobial susceptibility of *A. hydrophila* and *A. veronii* were determined on Muller-Hinton agar (Oxoid Ltd., Hampshire, UK) for 14 antibiotics (amoxicillin (25µg, Bioanalyse, Türkiye), ampicillin (10µg, Bioanalyse, Türkiye), ceft-

 Table 1. The antimicrobial susceptibility of A. hydrophila and A. veronii isolates to 14

Antibiotics	A. hydrophila	A. veronii
Amoxycillin	R	R
Ampicillin	R	R
Ceftriaxone	S	S
Chloramphenicol	S	R
Enrofloxacin	S	S
Erythromicin	R	R
Florfenicol	S	S
Gentamicin	R	R
Nalidixic Acid	R	S
Oxacillin	R	R
Oxytetracycline	S	R
Penicillin	R	R
Tetracycline	S	R
Trimethoprim-sulphamethaxazole	S	S

R: resistance; S: susceptible

riaxone (30µg, Bioanalyse, Türkiye), chloramphenicol (30µg, Bioanalyse, Türkiye), gentamicin (10µg, Bioanalyse, Türkiye), enrofloxacin (5µg, Bioanalyse, Türkiye), erythromicin (15µg, Bioanalyse, Türkiye), florfenicol (30µg, Bioanalyse, Türkiye), nalidixic acid (30µg, Oxoid Ltd., Hampshire, UK), oxacillin (1µg, Bioanalyse, Türkiye), tetracycline (30µg, Bioanalyse, Türkiye), oxytetracycline (30µg, Bioanalyse, Türkiye), penicillin (10 units, Oxoid Ltd., Hampshire, UK), trimethoprim-sulphamethaxazole (25µg, Bioanalyse, Türkiye) by disc diffusion method (Ozturk et al., 2007).

## RESULTS

In bacteriological cultures, two distinct colonies exhibiting beta-hemolysis were isolated from all leech samples. The microorganisms showed no growth on Sabouraud Dextrose Agar (SDA). The colonies were characterized as Gram-negative, motile, and positive for catalase and oxidase activities, and were identified as *Aeromonas* spp. Further confirmation of these colonies as *A. hydrophila* and *A. veronii* was achieved using Matrix-Assisted Laser Desorption/Ionization Time-of-Flight Mass Spectrometry (MALDI-TOF-MS), a technique that analyzes the protein profiles of microorganisms to provide precise identification.

In this study, *Aeromonas* isolates were found to be resistant to at least seven antibiotics. These isolates exhibited resistance to amoxicillin, ampicillin, gentamicin, erythromycin, oxacillin, and penicillin. Additionally, the *A. hydrophila* isolate was resistant to nalidixic acid, while the *A. veronii* isolate was susceptible to nalidixic acid. However, *A. veronii* isolates were resistant to chloramphenicol, oxytetracycline, and tetracycline. In contrast, the *A. hydrophila* isolate was susceptible to ceftriaxone, chloramphenicol, enrofloxacin, florfenicol, oxytetracycline, tetracycline, and trimethoprim-sulfamethoxazole. The *A. veronii* isolates were susceptible to ceftriaxone, enrofloxacin, florfenicol, nalidixic acid, and trimethoprim-sulfamethoxazole, but resistant to other antibiotics as well. (Table 1).

#### DISCUSSION

Medical leeches have been used for post-traumatic wounds to maximize tissue salvage in severed tissue replantation or flap surgery. Additionally, they can be employed to treat persistent wounds that do not heal, such as pressure ulcers, venous leg ulcers, and diabetic foot ulcers. In medical leech applications, several problems may be encountered, including longterm bleeding, wound infections, anemia, and allergic reactions (Al et al., 2011; Garça et al., 2011; Kaya et al., 2011; Maetz et al., 2012; Gönen et al., 2013; Savrun et al., 2015; Najjari et al., 2022; Sproll et al., 2022). Researchers (Nonomuro et al., 1996; Jaberi et al., 2014; Sproll et al., 2022) have reported that medical leeches can harbor opportunistic pathogens. Leech therapy can lead to several infections in humans due to pathogenic bacteria. (Maetz et al., 2012; Nelson and Graf 2012; Menteş et al., 2019; Sproll et al., 2022). After leech therapy, Gram-negative bacteria, particularly Aeromonas species, may cause several infections (Korun et al., 2019; Nonomura et al., 1996; Gönen et al., 2013). In the present study, the body surfaces of two medical leeches and their surrounding water were investigated for the presence of pathogenic bacteria. The results indicated that medical leeches may harbor *Aeromonas* spp., which are pathogenic to humans. In this study, two different Aeromonas spp. were isolated from all samples using bacteriological methods. These were identified as *A. hydrophila* and *A. veronii* by MALDI-TOF MS.

Aeromonas spp. isolated from fish, leeches, seawater, and other marine animals have been found to exhibit resistance to various antibiotics in several studies (Altanlar et al., 2003; Hatha et al., 2005; Ozturk et al., 2007; Odeyemi and Ahmad, 2017). Altanlar et al. (2003) reported that Aeromonas isolates from well water samples were sensitive to trimethoprim-sulfamethoxazole, ciprofloxacin, and cefixime, but 100% resistant to erythromycin and ampicillin. Hatha et al. (2005) found that Aeromonas spp. isolated from fish were 100% resistant to ampicillin, 40% resistant to oxytetracycline, 10% resistant to nalidixic acid, and sensitive to streptomycin. Odeyemi and Ahmad (2017) reported that 53 Aeromonas isolates obtained from sea cucumber, seawater, sediment, and bivalves were resistant to ampicillin, novobiocin, and trimethoprim-sulfamethoxazole, with 24 isolates resistant to nalidixic acid, 49 to penicillin, and 25 to trimethoprim-sulfamethoxazole, but sensitive to tetracycline. However, the isolates showed varying susceptibility to gentamicin and oxytetracycline. Karun et al. (2019) found that nine Aeromonas isolates were 100% resistant to ampicillin and 100% sensitive to streptomycin. These isolates were 77.7% sensitive to nalidixic acid and 66.6% sensitive to tetracycline, and 66.6% resistant to trimethoprim-sulfamethoxazole. Hermansdorfer et al. (1988) reported that 16 A.hydrophila isolates from leeches were resistant to ampicillin but sensitive to chloramphenicol, cefoperazone, cefotaxime, cefoxitin, gentamicin, tetracycline, and trimethoprim-sulfamethoxazole. Maetz et al. (2012) obtained two A. veronii isolates from patients after leech therapy. These isolates were resistant to amoxicillin and amoxicillin-clavulanic acid but sensitive to cefotaxime, gentamicin, and ciprofloxacin. One of the isolates was also resistant to cephalothin. Sun et al. (2016) reported two different A. veronii isolates from Gibel carp. One isolate was resistant to oxacillin, penicillin, and ciprofloxacin but sensitive to ampicillin, cefoperazone, cefotaxime, erythromycin, gentamicin, streptomycin, and chloramphenicol. The other A. veronii isolate was resistant to oxacillin, penicillin, ampicillin, ciprofloxacin, and vancomycin, but sensitive to cefoperazone, cefotaxime, erythromycin, gentamicin, streptomycin, and chloramphenicol. In another study, Chen et al. (2019) detected that A. veronii isolates from carp were resistant to oxacillin, ampicillin, penicillin, amoxicillin, enrofloxacin, ciprofloxacin, nalidixic acid, cefixime, cephalexin, erythromycin, and chloramphenicol but sensitive to cefoperazone, gentamicin, neomycin, kanamycin, and tetracycline. Sproll et al. (2022) found that A. veronii isolates from a patient and leeches were resistant to ampicillin but sensitive to amoxicillin, sulbactam-amoxicillin, cefuroxime, gentamicin, and ciprofloxacin.

In the present study, the research results showed that these two *Aeromonas* isolates were resistant to six antibiotic agents. Some researchers have reported that *Aeromonas* isolated from leeches exhibit multiple resistances (Korun et al., 2019). Both *A. hydrophila* and *A. veronii* were found resistant to ampicillin, which is consistent with the findings of other researchers (Hermansdorfer et al., 1988; Hatha et al., 2005; Odeyemi and Ahmad, 2017; Chen et al., 2019; Karun et al., 2019; Sproll et al., 2022). In this study, *A. hydrophila* and *A. veronii* were found sensitive to trimethoprim-sulfamethoxazole. Hermansdorfer et al. (1988) also reported that *A. hydrophila* isolates were sensitive to trimethoprim-sulfamethoxazole. Karun et al. (2019) reported varying rates of resistance to trimethoprim-sulfamethoxazole among *Aeromonas* isolates.

## CONCLUSION

In conclusion, leech, which contains many bioactive compounds in its saliva, has been used for therapeutic purposes since ancient times. However, Aeromonas species, which are dominant in the leech intestinal flora, are pathogenic for humans and animals. The pathogenic microorganisms associated with leeches used in hirudotherapy may cause infections following leech therapy in humans. Antibiotic susceptibility results of *Aeromanas* species isolated from leeches have the potential to guide the treatment of infections in humans.

## DECLARATIONS

### **Ethics Approval**

I hereby declare that Ethics Committee Approval is not required for the publication given below prepared by the study team.

### **Conflict of Interest**

The authors declare that they have no conflict of interest.

## **Consent for Publication**

No applicable.

## Author contribution

Idea, concept and design: DÖ, SY, ADÖ

Data Collection and analysis: DÖ, SY, ADÖ

Drafting of the manuscript: DÖ, SY, ADÖ

Critical review: DÖ, SY, ADÖ

## Data Availability

The author has provided the required data availability statement, and if applicable, included functional and accurate links to said data therein.

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### REFERENCES

Al, B., Yenen, M. E., & Aldemir, M. (2011). Rectal bleeding due to leech bite: a case report. Ulus Travma Acil Cerrahi Dergisi, 2011; 17 (1):83-86.

Alkan-Çeviker, S., Günal, Ö., & Kılıç, S. S. (2019). Cellulitis and abscess caused by *Aeromonas hydrophila*: a case report. Klimik Dergisi. 32 (1): 99-101.

Altanlar, N., Yücel, N., & Akın, A. (2003). Occurenceand antibiotic susceptibility of motile *Aeromonas* spp. of untreated well water. Journal of Faculty of Pharmacy of Ankara University, 32(3): 151-157. https://doi.org/10.1501/Eczfak\_000000407.

Chen, F., Sun, J., Han, Z., Yang, X., Xian, Ja., Lv, A., Hu, X., & Shi, H. (2019). Isolation, Identification and Characteristics of *Aeromonas veronii* From Diseased *Crucian Carp* (*Carassius auratus gibelio*). Frontiers in Microbiology, 10, 1-10. https://doi.org/10.3389/fmicb.2019.02742.

Çakmak, T., Çaltekin, İ., Gökçen, E., Savrun, A., &Yaşar, E. (2018). Kounis syndrome due to hirudotherapy (leech therapy) in emergency department; a case report. Turkish Journal of Emergency Medicine, 18, 85-87. https://doi.org/10.1016/j. tjem.2017.12.005.

Eroglu, C., Hokelek, M., Guneren, E., Esen, S., Pekbay, A., &Uysal, O. A. (2001). Bacterial Flora of *Hirudo medicinalis* and Their Antibiotic Sensitivities in the Middle Black Sea Region, Turkey. Annals of Plastic Surgery 47(1): 70-73. https://doi. org/10.1097/00000637-200107000-00013.

Garc a, M. F., Yelken, M. K., Okur, M. H., & Yuca, S. A. (2010). Leech Infestation of the nasopharynx (A rare cause of epistaxis and hemorrhage). European Journal of General Medicine, 8(2): 141-143.

Gönen, İ., Özşahin, M., Turan, H., Uslu, M., Celbek, G., Yıldırım, M., & Ataoğlu, S. (2013). *Acinetobacter* Infection Developed After Leech Therapy In A Patient With Gonarthrosis: A Case Report. Turkish Journal of Geriatrics. 16(2), 237-240.

Hathaa, M., Vivekanandhanb, A. A., Joicea, G. J., & Christol. (2005). Antibiotic resistance pattern of motile aeromonads from farm raised fresh water fish. International Journal of Food Microbiology, 98, 131 – 134. https://doi.org/10.1016/j. ijfoodmicro.2004.05.017.

Hermansdorfer, J., Lineaweaver, W., Follansbee, S., Valauri, F. A., & Buncke ,H. J. (1988). Antibiotic sensitivities of *Aeromonas hydrophila* cultured from medicinal leeches. British Journal of Plastic Surgery, 41: 649-651. https://doi. org/10.1016/0007-1226(88)90176-2.

Jaberi, S., Rahnema, M., & Shapouri, R. (2014). Determine the Microbial Flora of Leeches in North of Iran and Designing Antimicrobial Solution to Sterile the Leeches. Journal of Applied Biological Sciences, 8 (3): 42-45.

Kaya, B., Bat, O., Esen Bulut, N., Altun, H., & Memisoglu, K. (2011). Prolonged venous bleeding due to traditional treatment with leech bite: a case report. Journal of Medical Case Reports, 5, 172. doi: 10.1186/1752-1947-5-172.

Koneman, E, W., Allen, S. D., Janda, W. M., Schreckenberger, P. C., & Winn, J. R. (1992). Color atlas and textbook of diagnostic microbiology. JP Lippincott, Philadelphia, pp.267-272.

Korun, J., Ulutas , A., & Go kog lu, M. (2019). Tibbi su lu k (*Hirudo verbana*)'den izole edilen *Aeromonas* spp. sus larının antibiyotik duyarlılıklarının belirlenmesi ve C oklu Antibiyotik Direnc (C AD) indeks sonuc ları. Journal of Advances in VetBio Science and Techniques, 4(2): 59-66. https://doi.org/ 10.31797/vetbio.534867. Li, T., Raza, S. H. A., Yang, B., Sun, Y., Wang, G., Sun, W., Qian, A., Wang, C., Kang, Y., & Shan, X. (2020). *Aeromonas veronii* Infection in Commercial Freshwater Fish: A Potential Threat to Public Health. Animals (Basel). 10(4): 608. https:// doi.org/10.3390/ani10040608.

Litwinowicz, A., & Blaszkowska, J. (2014). Preventing infective complications following leech therapy: elimination of symbiotic *Aeromonas* spp. from the intestine of *Hirudo verbana* using antibiotic feeding. Surgical Infections, 15(6):757-62. https://doi.org/10.1089/sur.2014.036.

Maetz, B., Abbou, R., Baptiste Andreoletti, J., & Bruant-Rodier, C. (2012). Infections following the application of leeches: two case reports and review of the literature. Journal of Medical Case Reports, 6, 364. https://doi.org/10.1186/1752-1947-6-364.

Mastersa, M. C., Guptab, A. R, Rhodesc, N. J., Flahertya, J. P., Zembowera, T. R., Alghoulg, M., & Kruegera, K. M. (2020). Multidrug resistant *Aeromonas* infection following medical leech therapy: A case report and development of a joint antimicrobial stewardship and infection prevention protocol. Journal of Global Antimicrobial Resistance, 23: 349–351. https://doi.org/10.1016/j.jgar.2020.10.010.

Menteş, B. B., Leventoğlu, S., Osmanov, İ., Kösehan, D., & Erol, T. (2019). Anal abscess due to leech therapy of hemorrhoids: mumbo jumbo is still in vogue. Journal of Surgical Case Reports, 2019 (7): 1-3. https://doi.org/10.1093/jscr/rjz218.

Muş, T. E., & Çetinkaya, F. (2013). Investigation of the Presence of *Aeromonas hydrophila* in Seafood at Retail Level. Uludağ University Journal of Veterinary Medicine, 32 (1), 7-10.

Najjari, M., Solgi, R., & Tavakoli Kareshk, A. (2022). Cellulitis Caused by *Hirudo orientalis* Bites That Lead to an Allergic reaction. Case Reports in Infectious Diseases, 1-4. https://doi. org/ 10.1155/2022/5493057.

Nelson, M. C., & Graf, J. (2012). Bacterial symbioses of the medicinal leech *Hirudo verbana*. Gut Microbes, 3 (4), 322-331. https://doi.org/10.4161/gmic.20227.

Nonomura, H., Kato, N., Ohno, Y., Itokazu, M., Matsunaga, T., & Watanabet, K. (1996). Indigenous bacterial flora of medicinal leeches and their susceptibilities to 15 antimicrobial agents. Journal of Medical Microbiology, 45, 490-493.

Ocak, F. (2018). Antibiotic Susceptibility of Motile *Aeromonas* spp. Isolated from Foods of Animal Origin and Water. Journal of the Faculty of Veterinary Medicine Erciyes University, 15 (2): 137-141.

Odeyemi, O. A., & Ahmad, A. (2017). Antibiotic resistance profiling and phenotyping of *Aeromonas* species isolated from aquatic sources. Saudi Journal of Biological Sciences, 24 (1), 65-70. https://doi.org/10.1016/j.sjbs.2015.09.016.

Onuk, E. E., Tanriverdi, Ç. Y., Çoban, A. Y., Çiftci, A., Balta, F., Didinen, B. İ., & Altun, S. (2017). Determination of antimicrobial susceptibility patterns of fish and rearing water originated *Aeromonas* isolates. Ankara Üniversitesi Veteriner Fakültesi Dergisi, 64(1): 69-73. https://doi.org/10.1501/Vet-fak\_0000002768.

Ozturk, D., Adanir, R., & Turutoglu, H. (2007). Isolation andantibiotic susceptibility of *Aeromonas hydrophila* in a carp (*Cyprinus carpio*) hatchery farm. Bulletin of the Veterinary Institute in Pulawy, 51: 361–364.

Sari, T., & Kaya, A. (2020). Leech Therapy in A Case with Arterial Embolism. International Journal of Traditional and Complementary Medicine Research, 1(3), 149-150.

Savrun, A., Bozkurt, S., Okumus, M., Gökcen, E., & Türkaslan, M. (2015) Prolonged bleeding on the neck in leech therapy: Case report. Archives of Clinical and Experimental Surgery (ACES), 4, 234-237. https://doi.org/10.5455/ aces.20131205020904.

Schnabl, S. M., Kunz, C., Unglaub, F., Olykandriotis, E., Horch, R. E., & Dragu, A. (2010). Acute postoperative infection with *Aeromonas hydrophila* after using medical leeches for treatment of venous congestion, Archives of Orthopaedic and Trauma Surgery, 130: 1323-28. https://doi.org/10.1007/ s00402-010-1135-y.

Silva, A. A., Leite, J. N., Winter, H. C. L., Furtado, T. L. J., Morais, N. M. L., Faria, R. A. P. G., Nascimento, E., Ritter, D. O., & Lanzarin, M. (2022). *Aeromonas* sp. in freshwater fish and antimicrobial resistance: emerging pathogen. Ciencia Rural, Santa Maria, 53(7): 1-14. https://doi.org/10.1590/0103-8478cr20220088.

Sproll, C., Lommen, J., Balasiu, A., Schorn, L., Ku bler, N. R., Henrich, B., Kram, R., & Petersdorf, S. (2022). Lethal *Aeromonas veronii* Sepsis in the Course of Medicinal Leech Therapy. Antibiotics, *11*, 1180. https://doi.org/10.3390/antibiotics11091180.

Unal, K., Erol, M. E., & Ayhan, H. (2023). Literature Review on the Effectiveness of Medicinal Leech Therapy in The Wound Healing. Ankara Med J, 23 (1), 151-164. https://doi.org/10.5505/amj.2023.20280.

Worthen, P. L., Gode, C. J., & Graf, J. (2006). Culture-independent characterization of the digestive-tract microbiota of the medicinal leech reveals a tripartite symbiosis. Applied Environmental Microbiology, 72 (7), 4775-81. https://doi. org/10.1128/AEM.00356-06.