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3 **Molecular detection of *Anaplasma platys*, *Ehrlichia canis*, *Hepatozoon canis* and**
4 ***Rickettsia monacensis* in dogs from Maio Island of Cape Verde archipelago**

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1 **Abstract**

2 Tick-borne diseases are emerging worldwide and have an important zoonotic relevance. Dogs play
3 an important role in the epidemiology of several zoonotic tick-borne pathogens acting as sentinels
4 and/or reservoirs. This study focused on the molecular identification of tick-borne pathogens in
5 blood samples of 153 autochthonous asymptomatic dogs in Maio Island, Cape Verde archipelago.
6 Eighty-four (54.9%) dogs were positive for one or more pathogens. Fifty-five (35.9%) dogs were
7 infected with *Hepatozoon canis*, 53 (34.6%) with *Anaplasma platys*, five (3.3%) with *Ehrlichia*
8 *canis* and *Rickettsia monacensis*, an emerging human pathogen, was also identified in a single dog
9 (0.7%). The former three pathogens cause important canine tick-borne diseases that are transmitted
10 or potentially transmitted by *Rhipicephalus sanguineus* s.l., the only hard tick identified in Cape
11 Verde. Furthermore, *Wolbachia* spp. was amplified from the blood of one dog. None of the dogs
12 were positive for *Anaplasma phagocytophilum*, *Borrelia burgdorferi* sensu lato, *Midichloria*
13 *mitochondrii*, *Bartonella* spp., *Babesia* spp. or *Theileria* spp. Fifty-four (35.3%) animals showed
14 single infections and 30 (19.6%) co-infections, with *A. platys* and *H. canis* co-infection being the
15 most frequent (28 dogs, 18.3%). The frequency of *E. canis* infection was statistically different
16 among age groups ($P = 0.017$), being higher among dogs older than 4 years compared to younger
17 dogs. Infection by *A. platys* was also statistically different among age groups ($P = 0.031$), being
18 higher in dogs younger than 2 years compared to older dogs. The statistical analyses showed no
19 significant association of PCR positivity with gender or location. The frequency of tick-borne
20 pathogens detected in dogs in Maio Island, including *R. monacensis*, highlights the need to improve
21 diagnosis and control in order to prevent the risk of transmission of these pathogens among dogs
22 and humans living in or travelling to this touristic island.

23

1 **1. Introduction**

2 Tick-borne diseases (TBDs) are recognized as important emerging diseases worldwide in humans
3 and animals and have an important zoonotic relevance (Chomel, 2011). Zoonotic TBDs shared
4 between humans and dogs, such as anaplasmosis, babesiosis, ehrlichiosis, Lyme borreliosis and
5 rickettsiosis are known for decades, and a One Health approach is recommended for their
6 management (Dantas-Torres et al., 2012). To our knowledge, no zoonotic risk has been reported up
7 to now for canine Hepatozoon spp. infections. Recently, Ehrlichia canis and Anaplasma platys,
8 two typical canine tick-borne diseases, have emerged as human pathogens in Venezuela (Arraga-
9 Alvarado et al., 2014; Perez et al., 2006). Midichloria mitochondrii, the agent responsible for an
10 emerging tick-borne zoonosis, and a potential new zoonotic Bartonella species have also been
11 identified in dogs (Bazzocchi et al., 2013; Chomel et al., 2012). Considering the close association
12 with humans and the susceptibility to tick bites and tick-borne agents, dogs can act as sentinels for
13 numerous human tick-borne infections and for other zoonotic pathogens potentially transmitted by
14 ticks, such as bartonellosis (Chomel, 2011; Hornok et al., 2013).

15 In recent years, several factors have been linked to the emergence of these diseases, including
16 climate changes and increase in international travel (Kilpatrick and Randolph, 2012). An increasing
17 number of TBDs, especially rickettsioses, have been reported in European and North American
18 travelers and dogs exposed to tick bites while travelling during warmer months in foreign countries
19 (Delord et al., 2014; Leschnik et al., 2008). Rickettsia conorii sensu lato, the agent of Mediterranean
20 spotted fever (MSF) transmitted by the brown dog tick Rhipicephalus sanguineus s.l., is endemic in
21 all Mediterranean areas, with sporadic cases reported in sub-Saharan Africa, northern and central
22 Europe and Asia (Parola et al., 2013). Apart from R. conorii sensu lato, other Rickettsia species of
23 the spotted fever group (SFG) cause MSF-like illness: R. helvetica, R. monacensis, R. massiliae or
24 R. aeschlimannii (Parola et al., 2013). MSF is the most emerging rickettsiosis among European
25 travelers (Delord et al., 2014). Recently, an eschar, typical finding in MSF or MSF-like illness, was
26 observed in a veterinary colleague returning to Europe after an animal welfare campaign conducted

1 in early summer 2012 in the touristic Maio Island, Cape Verde and rickettiosis was confirmed
2 (Pereira C., personal communication). Despite the presence of the tick vector *R. sanguineus* s.l. and
3 the report of MSF-like illness in this traveler, no data is available on the presence of rickettioses or
4 other TBDs in Maio Island, to the best of our knowledge. *R. sanguineus* s.l. is the only hard tick
5 reported on Cape Verde archipelago, being prevalent throughout the year, and pathogens
6 transmitted or potentially transmitted by this tick species, such as *Babesia canis*, *Babesia gibsoni*,
7 *Hepatozoon canis*, *A. platys* and *E. canis*, have been reported in dogs in Santiago Island of this
8 archipelago (Duarte, 2013; Götsch et al., 2009; Kirchner et al., 2008). The aim of this work was
9 molecular detection and identification of tick-borne pathogens in canine blood from free-roaming
10 private dogs from Maio Island.

11

12 **2. Materials and methods**

13 **2.1. Animals and sample collection**

14 Dogs from Maio Island were included in this study by random sampling. Autochthonous dogs, aged
15 ≥ 6 months were included after owner's consent to participate in the study. All the animals included
16 in the study were private dogs with an outdoor or mixed indoor-outdoor lifestyle and were therefore
17 considered free-roaming. All dogs were apparently healthy, but detailed clinical examinations were
18 not performed. Owners were not aware of TBDs and no tick control measures had been used in
19 these dogs. Sampling was performed in July 2012 and data on age, gender and locality were
20 recorded for each dog.

21 Blood samples were collected by jugular venipuncture in ethylene diamine tetraacetic acid (EDTA)
22 and 200 μ l of whole blood from each animal were spotted onto Whatman filter paper into four
23 separate 50 μ l dots and dried completely for 1 day and kept at 4°C to be used later on for molecular
24 analyses. The packed cell volume (PCV) was also measured on whole blood collected in EDTA and
25 transferred to microhematocrit capillary tubes, using a portable microhematocrit centrifuge
26 (Heraeus Pico 17Haematocrit, Heraeus Kulzer GmbH, Germany), at 12,000 rpm for 10 min.

1 **2.2. PCR and sequencing**

2 DNA was extracted using a commercial kit, following the kit manufacturer's instructions
3 (NucleSpin Tissue, Macherey-Nagel, Germany). Firstly, a portion of the gene coding for canine
4 GAPDH (Glyceraldehyde 3-phosphate dehydrogenase) was amplified to confirm DNA extraction
5 following a published protocol (Bazzocchi et al., 2003). Extracted DNAs were analyzed through
6 specific PCR protocols, for the presence of bacteria of the Anaplasmatataceae family (Parola et al.,
7 2000), Rickettsia genus (Labruna et al., 2004; Roux et al., 1996), Borrelia burgdorferi sensu lato
8 complex (Marconi and Garon 1992), Midichloria mitochondrii (Epis et al., 2008) and Bartonella
9 genus (Jensen et al., 2000). Piroplasms (Babesia/Theileria) (Beck et al., 2009) and Hepatozoon
10 species (Ujvari et al., 2004) were also screened by PCR. In order to characterize the bacterial
11 species of the Anaplasmatataceae family detected by PCR in positive samples, species-specific PCRs
12 for A. phagocytophilum (Massung et al., 1998), A. platys (Inokuma et al., 2000), and E. canis (Stich
13 et al., 2002) were also performed. DNAs extracted from blood of naturally infected dogs with A.
14 phagocytophilum, A. platys, E. canis, H. canis or Babesia vogeli, were used as positive controls in
15 the corresponding PCR reaction. DNAs extracted from infected I. ricinus ticks with R. helvetica,
16 B. burgdorferi sensu lato or M. mitochondrii were included as positive controls in the Rickettsia
17 genus PCR, B. burgdorferi sensu lato complex PCR and M. mitochondrii PCR, respectively. DNA
18 extracted from the blood of a naturally infected cat with B. henselae was used as positive control in
19 the Bartonella genus PCR. A negative control without DNA was also included in all PCR reactions.
20 PCR products were visualized under UV after electrophoresis migration on a 1.5% agarose gel
21 stained with ethidium bromide.

22 For Hepatozoon spp. and for bacteria belonging to the genus Rickettsia, the amplicons of the
23 expected sizes from PCR positive samples were purified and sequenced using the forward
24 and reverse primers used for DNA amplification (Labruna et al., 2004; Ujvari et al., 2004). One
25 PCR positive sample for Anaplasmatataceae family that was negative for the species-specific PCR

1 protocols (targeting *A. phagocytophilum*, *A. platys* and *E. canis*) was also sequenced. Sequencing
2 was performed using a Big Dye Terminator version 1.1 Cycle Sequencing kit (Applied Biosystems,
3 CA, USA) and an ABI PRISM 3130 sequencing device, as well as sequenced by a commercial
4 sequencing facility (Macrogen Inc.). The sequence data were assembled and manually corrected
5 using BioEdit software version 7.0 (freely available at
6 <http://www.mbio.ncsu.edu/BioEdit/bioedit.html>) and Geneious version 6.1 (Biomatters Ltd). The
7 sequences were then compared with those available in GenBank using BLAST
8 (<http://blast.ncbi.nlm.nih.gov/Blast.cgi>). The sequences obtained in this study were deposited in the
9 GenBank under accession numbers: *H. canis* (KU961914- KU961968), *R. monacensis*
10 (KU961970), and *Wolbachia* spp. (KU961969).

11

12 **2.3. Data analysis**

13 In the presence of negative results for the pathogens tested, the maximum possible prevalence in the
14 total dog population was calculated using WinEpi (<http://www.winepi.net>). A Person's Chi-square
15 test was used to assess the relationship between presence of pathogens and independent variables
16 such as gender, age and location. The presence of at least one pathogen was also treated as single
17 entity. The PCV values recorded in dogs with and without pathogens were compared using a non-
18 parametric t-test (Mann-Whitney U test), with 95% confidence interval (CI) as a measure of
19 uncertainty. A p value <0.05 was considered as statistically significant. Statistical analysis was
20 performed in an Excel (Microsoft Corp, Redmond, WA, USA) spreadsheet using the Analyse-it
21 2.30 software (Analyse-it Software Ltd, Leeds, UK).

22

23 **3. Results**

24 A total of 153 dogs of private owners were analysed in this study, which represent approximately a
25 quarter of the dog population in Maio Island (Antunes, 2013). Dogs came from the 10 most
26 important municipalities of the island (Table 1) and data on age and gender are reported in Table 2.

1 Based on molecular analysis, 84 (54.9%) dogs were positive for at least one of the tested pathogens
2 (Table 1). Fifty-five (35.9%) dogs were positive for *H. canis*, as confirmed by BLAST analysis
3 showing 98%-100% of identity to *H. canis* sequences available in GenBank. Fifty-three (34.6%)
4 dogs were positive for *A. platys* and five (3.3%) for *E. canis*. One (0.7%) dog was positive for *R.*
5 *monacensis*, as confirmed by BLAST analysis showing 100% of identity with *R. monacensis* isolate
6 SK1 from *I. ricinus* (GenBank accession no. KC996728). Fifty-four (35.3%) dogs were infected
7 with a single pathogen and 30 (19.6%) were co-infected with two pathogens.

8 *H. canis* and *A. platys* were the most frequently detected either as single infections or co-infections
9 (Table 3). One *Wolbachia* spp., confirmed by BLAST analysis as 100% identical to a *Wolbachia*
10 endosymbiont of *Dirofilaria repens* (GenBank accession no. AJ276500), was also identified in the
11 sample of the only dog that was PCR positive in the Anaplasmataceae family PCR but not in the
12 species-specific PCRs (*A. phagocytophilum*, *A. platys* or *E. canis*). DNA from *A.*
13 *phagocytophilum*, *B. burgdorferi sensu lato*, *M. mitochondrii*, *Bartonella* spp., *Babesia* spp or
14 *Theileria* spp was not detected in the dogs tested. A 1.8% maximum possible prevalence in the total
15 dog population of Maio Island was calculated for these pathogens with negative PCR results in all
16 the samples tested.

17 Results on the presence of tick-borne pathogens in dogs among dog age groups and gender are
18 shown in Table 2. *E. canis* infection was statistically different among age groups ($P = 0.017$), with
19 a higher number of infections in dogs older than 4 years compared to younger dogs ($P = 0.029$ vs 2-
20 4 years of age, and $P = 0.018$ vs <2 years of age). Positivity of *A. platys* was statistically different
21 among age groups ($P = 0.031$). In particular, a significant difference was observed in dogs younger
22 than 2 years compared to dogs older than 4 years ($P = 0.019$). No significant difference was
23 observed in dogs younger than 2 years compared to 2-4 years old dogs. No significant association
24 was observed for positivity to *H. canis*, *R. monacensis* or for the presence of at least one pathogen
25 and dog age groups. The statistical analyses showed no significant association of PCR positivity
26 with gender or location. Dogs infected with at least one pathogen had a significantly lower PCV (P

1 = 0.019) compared to non-infected dogs, although the mean values of infected dogs were within the
2 accepted reference intervals of 37-55 PCV adopted in our laboratory.

3

4 **4. Discussion**

5 Our results showed the presence of four tick-borne pathogens in dogs of Maio Island characterized
6 by different prevalences. *H. canis* and *A. platys* were the most frequently detected pathogens
7 (35.9% and 34.6%, respectively), while *E. canis* was sporadically detected (3.3%) and *R.*
8 *monacensis* rarely detected (0.7%).

9 *H. canis* and *A. platys* were also the most frequently detected either as single infections (17% and
10 16.3%, respectively) or as co-infections (18.3%). This is not surprising given that the co-occurrence
11 of *H. canis* and other canine tick-borne pathogens are commonly reported, especially in
12 Europe (Baneth, 2011). The presence of these pathogens in asymptomatic dogs in Maio Island is
13 in accordance with previous reports of both infections in apparently healthy dogs because these
14 pathogens often cause subclinical to mild disease, even if laboratory abnormalities can be observed
15 (Baneth, 2011; Harrus et al., 1997). *H. canis* and *A. platys* are the agents of canine hepatozoonosis
16 and infectious canine cyclic thrombocytopenia, respectively, and are reported worldwide (Baneth,
17 2011; Harvey, 2012). Dogs are important in the life cycle of these pathogens, serving as natural
18 hosts for *H. canis* and *A. platys* (Baneth, 2011; Harvey, 2012). *H. canis* is transmitted and *A. platys*
19 is potentially transmitted by *R. sanguineus* s.l. (Dantas-Torres and Otranto, 2015), the only hard tick
20 reported up to now in Cape Verde archipelago (Duarte, 2013).

21 *E. canis* is the primary etiologic agent of canine monocytic ehrlichiosis, an important canine disease
22 that is also transmitted by *R. sanguineus* s.l. It is a severe disease of dogs and it is divided into
23 acute, subclinical and chronic phases, with minimal clinical signs observed only during the
24 subclinical disease phase (Waner et al., 1997). The low prevalence observed in our study in
25 apparently healthy dogs may reflect the persistence of the subclinical phase of disease in the

1 sampled animals (Harrus et al., 1998) and is in accordance with a study conducted in asymptomatic
2 dogs from Turkey (Aktas et al., 2015).

3 Interestingly, *R. monacensis* was the only rickettsiae identified in our study, whereas *R. conorii*
4 *sensu lato* was not detected, despite the fact that dogs may act as sentinels for human infections and
5 have been recently indicated as probable reservoir hosts for *R. conorii* subsp. *conorii* (Levin et al.,
6 2012). To our knowledge, *R. monacensis*, an emerging human pathogen of the SFG rickettsiae, has
7 never been reported in dogs up to now (Wächter et al., 2015). The pathogen has been detected in
8 ticks from Europe, North Africa, and Asia and is reported in humans with MSF-like illness from
9 Spain and Italy and in lizards from Madeira Island (Portugal) (Benredjem et al., 2014; De Sousa et
10 al., 2012; Jado et al., 2007; Madeddu et al., 2012; Parola et al., 2013; Sun et al., 2015). Recently,
11 lizards have been proposed as potential or transitory reservoir for this pathogen (De Sousa et al.,
12 2012). *R. monacensis* is mainly transmitted by *I. ricinus* but it has also been found in other ticks
13 and mites, suggesting that many vector species are involved in the zoonotic cycles and wide
14 geographic distribution (Schreiber et al., 2014; Ye et al., 2014; Mi'ková et al., 2015). The
15 invertebrate hosts were not included in our study, but the fact that *R. monacensis* has been reported
16 in *R. sanguineus* s.l. (Pennisi et al., 2015) could explain the presence of this pathogen in Maio
17 Island. This assumption is in accordance with previous findings that suggest that when ticks of the
18 genus *Rhipiephalus* are prominent, these may act as vectors for *R. monacensis* (Madeddu et al.,
19 2012), but further investigations are needed on the prevalence of tick-borne pathogens in *R.*
20 *sanguineus* s.l. in the Cape Verde archipelago. Regarding the other tick-borne pathogens tested in
21 this study, the fact that all our samples were negative for these pathogens is indicative, in the total
22 dog population of Maio Island, of the absence of infection or of a very low (1.8%) maximum
23 possible prevalence. The negative PCR results for piroplasms transmitted by *R. sanguineus* s.l. are in
24 accordance with the low prevalence recently reported for *B. canis* and the absence of *B. gibsoni* in
25 dogs from Santiago, the closest island to Maio on the Cape Verde archipelago (Dantas-Torres and
26 Otranto 2015; Götsch et al., 2009). The negative results for *A. phagocytophilum*, *B. burgdorferi*

1 sensu lato and *M. mitochondrii* is not surprising because these pathogens are normally transmitted
2 by hard ticks other than *R. sanguineus* s.l. that have never been reported in Maio Island (Duarte,
3 2013). Furthermore, the absence of bartonellosis in this island should be further confirmed by
4 analyzing cats that are known to be the reservoir of different *Bartonella* species, including zoonotic
5 *B. henselae*, the causative agent of cat scratch disease in humans (Chomel et al., 2006).

6 One dog was found with *Wolbachia* spp. DNA identical to a *Wolbachia* endosymbiont of *D. repens*.
7 *Wolbachia* spp. are intracellular endosymbionts of filarial nematodes and their involvement in
8 canine febrile illness has been proposed (Unver et al., 2003).

9 The finding of *Wolbachia* spp. DNA in canine blood is considered presumptive of dirofilariosis
10 (Landum et al., 2014), which is in accordance with the fact that *D. repens* was identified in this dog
11 in a recent study (Marcos et al., 2016).

12 The overall prevalence of tick-borne pathogens presented in our study for dogs in Maio Island
13 (54.9%) was lower than the prevalence reported for dogs from Santiago Island (77.7%) (Götsch et
14 al., 2009), whereas *A. platys* infection was more frequent in Maio Island (34.6% compared to 7.7%
15 in Santiago Island). *R. monacensis* was only reported in Maio Island. Interestingly, dogs from Maio
16 Island were apparently healthy, while animals analysed in Santiago Island were presented at the
17 veterinary centre in Praia and therefore the clinical status of the dogs might explain the different
18 prevalences of tick-borne pathogens in the two islands. Moreover, the differences between both
19 studies in Cape Verde may reflect a different epidemiological situation in the two islands, which
20 could be associated with the ecological features of both islands and distribution of vectors, or
21 different analytical sensitivities of the molecular protocols used (Aktas et al., 2015).

22 In this study, the absence of a significant association between pathogen infection and location
23 suggests that the infections are distributed on the whole island, probably reflecting the wide distri-
24 bution of the vector *R. sanguineus* s.l. (Duarte, 2013). No significant association between age and
25 TBDs was generally reported in dogs up to now (Maia et al., 2015). A higher frequency of tick-
26 borne infections was recently observed in Turkey in adult dogs compared to dogs younger than 1

1 year in endemic areas, where older dogs have a higher probability of exposure to infected ticks than
2 young animals (Aktas et al., 2015). Our results did not show a significant association between age
3 and overall tick-borne infection but showed that animals aged over 4 years were more likely to be
4 infected by *E. canis* compared to younger dogs, probably reflecting the persistence of subclinical
5 disease in older animals (Harrus et al., 1998) and in agreement with the findings of Sainz et al.
6 (2015). Furthermore we found a significantly higher frequency of *A. platys* infection in dogs less
7 than 2 years old compared to dogs older than 4 years. Considering that no age predisposition for *A.*
8 *platys* infections have been described, further studies including a more homogenous composition of
9 age groups are needed, because sampling size and limitation in the detection methods used could
10 bias the estimation of pathogen infection (Jovani and Tella, 2006).

11 Previous studies showed that dogs infected by TBDs may have severe anemia and
12 thrombocytopenia, especially in symptomatic *E. canis* infections (Harrus et al., 1997). However,
13 even if in our study infections with at least one pathogen were associated with significantly lower
14 PCV values compared to uninfected dogs, PCV mean values within the accepted reference interval
15 in all the sampled animals were indicative of the absence of anemia in dogs from Maio Island. This
16 finding, together with the apparent absence of clinical signs of disease in these dogs, supports that
17 PCV may not be a reliable indicator of the presence of tick-borne infection in dogs.

18 Regarding the impact of the results of this study for human health, three of the four pathogens
19 detected in dogs from Maio Island have a zoonotic relevance. While *A. platys* and *E. canis* have
20 rarely been reported in humans (Arraga-Alvarado et al., 2014; Perez et al., 2006), *R. monacensis* is
21 an important emerging human pathogen (Parola et al., 2013). Concerning the risk of rickettiosis for
22 human travelers to this touristic island, further investigations are needed.

23

24 **5. Conclusions**

25 The prevalence of tick-borne pathogens, some of them zoonotic, in apparently healthy dogs in Maio
26 Island is high. This is probably because private dogs are free-roaming and are at high risk of tick

1 infestations, particularly because owners are not aware of these diseases and prophylactic/control
2 measures (acaricides) are not used.

3 Our results should encourage a campaign of TBDs monitoring and control in this island, with
4 special emphasis on the investigation in humans, animals and vectors, to obtain a wider
5 epidemiological perspective on tick-borne pathogens and to understand *R. monacensis* infection
6 dynamics. Our results should also reinforce the importance to alert the veterinary community,
7 owners and public health authorities to prevent the risk of transmission of tick-borne pathogens
8 among dogs and humans in this touristic island.

9

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11

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16

Table 1

Frequency of tick-borne pathogens in dogs at municipalities in Maio Island.

Municipality	Dogs tested	Positive dogs No.				Total infected dogs (≥ 1 pathogen)
	No.	H. canis	A. platys	E. canis	R. monacensis	
Morro	13	4	5	-	-	6
Calheta	42	20	14	5	1	29
Praia Gonçalo	4	3	1	-	-	3
Pedro Vaz	13	4	5	-	-	6
Alcatraz	13	2	5	-	-	6
Pilão Cão	11	4	8	-	-	8
Ribeira D. João	17	5	2	-	-	6
Figueira da Horta	8	1	1	-	-	2
Barreiro	8	4	2	-	-	5
Cidade do Porto Inglês		24	8	10	-	- 13
Total	153	55 (35.9%)	53 (34.6%)	5 (3.3%)	1 (0.7%)	84 (54.9%)

Table 2

Number and percentage of dogs positive for tick-borne pathogens according to age and gender

	Age (years)			Gender	
	<2	2-4	>4	Male	Female
No. tested (%)	69 (45.1)	61 (39.9)	23 (15)	101 (66.1)	52 (33.9)
H. canis (%)	27 (39.1)	21 (34.4)	7 (30.4)	38 (37.6)	17 (34.7)
A. platys (%)	31 (44.9) ^a	18 (29.5)	4 (17.4) ^a	35 (34.7)	18 (34.6)
E. canis (%)	1 (1.4) ^a	1 (1.6) ^b	3 (13) ^{a,b}	2 (2)	3 (5.8)
R. monacensis (%)	0 (0)	0 (0)	1 (4.3)	1 (1)	0 (0)
Total infected dogs (≥ 1 pathogen) (%)		43 (62.3)	29 (47.5)	12 (52.2)	53 (52.5) 31 (59.6)

^{a,b} Significant difference for the same pathogen between categories of the same variable ($p < 0.05$).

Table 3

Frequency of tick-borne pathogens in dogs.

No. of pathogens	Pathogen	Dogs No. (%)
Single infection	H. canis	26 (17)
	A. platys	25 (16.3)
	E. canis	3 (2)
Co-infection	H. canis/A. platys	28 (18.3)
	H.canis/E. canis	1 (0.7)
	E.canis/R.monacensis	1 (0.7)
Negative		69 (45.1)
Total		153 (100)