



## Potential of *Levofloxacin* and *Ciprofloxacin* against citrus canker caused by *Xanthomonas axonopodis* pv. *citri*

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### Abstract

Citrus canker caused by *Xanthomonas axonopodis* pv. *citri* (*Xac*) is the most devastating threat to the world citrus industry. A greenhouse and field trial were conducted at Department of Plant Pathology, University of Agriculture Faisalabad. Levofloxacin, Ciprofloxacin were tested against *Xac* by injection technique under Randomized Complete Block Design (RCBD). Three concentrations (1, 1.5 and 2 %) after 10, 20, and 30 days were tested. Out of these treatments, combination of Levofloxacin and Ciprofloxacin (14.51 %) followed by Levofloxacin 17.48 %, Ciprofloxacin (21.66 %), in greenhouse respectively. In interaction between treatments and concentrations, combination of Levofloxacin and Ciprofloxacin expressed minimum disease incidence (10.44 %) at 2 % and 9.278 % after 30 days of inoculation in the interaction between treatments and days. In field study, combination of Levofloxacin and Ciprofloxacin (17.51 %) followed by Levofloxacin 20.48 %, Ciprofloxacin (24.09 %), and control (64.00 %) respectively. Interaction between treatments and concentrations, combination of Levofloxacin and Ciprofloxacin expressed minimum disease incidence (13.44 %) at 2 % while in interaction between treatments and days, this combination showed (12.27 %) disease incidence followed by Levofloxacin 15.27 % and Ciprofloxacin 17.22 % and control 69.11 % after 30 days of inoculation. In conclusion, combination of Ciprofloxacin and Levofloxacin expressed best results at concentration of 2 % after 30 days of inoculation.

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## Introduction

Citrus belongs to family *Rutaceae* and is known for its versatility and unique property of having multiple fruit species among its rank making it an important crop all over the world including Pakistan (Wali *et al.*, 2013). Among biotic factors various bacterial diseases causing massive losses in which citrus canker caused by *Xanthomonas axonopodis* pv. *citri* (*Xac*) is the most damaging one. Citrus canker signifies as most devastating threat to citrus and cause severe losses in the world (Ware, 2015). In United States, more than 13 million US dollars are dedicated annually to citrus canker control program (Zhang, 2011). *Xac* is a straight rod shaped, mono-flagellum, gram negative bacteria which give yellowish colonial growth due to production of xanthomonadin pigment. The citrus canker produces typical necrotic lesions on stem, leaves and fruits. The disease causes leaf fall, drying of twigs and premature fruit drop which leads to low quality fruits and yield losses (Gottwald *et al.*, 2002; Graham *et al.*, 2004). One of the key strategies being used in management of disease is use of resistant varieties. Use of such disease resistant varieties is of great help in disease management and saving losses (Deng *et al.*, 2010) but this comes with additional constraints including a long term durational span required for cross breeding and checking of each generation separately, attaining of additional traits which are of no good in disease management and probably exerts fitness penalty reducing plant yields. Over the time, canker disease has been tried to be managed by use of various synthetic chemicals.

These chemicals have been somewhat effective in disease control, but their side effects outweigh their benefits. They cause massive water, air, and soil contamination as a large portion of these chemicals either get mixed up with runoff or rainwater or disposed away by the air (Heinlaan *et al.*, 2008). Pesticides also causes various level of toxic effects on every population group with manufacturing workers, agricultural farmers and people living in close vicinity. Long term low concentration absorbance of such chemicals by human results into endocrine functional abnormalities; which includes role in

production and destruction of hormones, dementia, reproductive abnormalities and certain forms of cancers (Mostafalou and Abdollahi, 2013). These chemicals also cause severe damage to beneficial soil microbiome resulting in reduction of soil biodiversity. For management of bacterial diseases various bactericides having copper as an active ingredient has been used. Use of such chemicals is effective in control of disease to an extent but it also causes some severe side effects, in many cases continuous application of copper has been seen to cause accumulation of copper residues on to top layer of soil bounded with organic matter which implies possibility of toxic impact. Also traces of copper left on to plant products later consumed by humans can result in to excess of copper in body which can produce various harmful effects including free radical production, per-oxidation of lipids, and antioxidant imbalance (Husak, 2015). In consideration to the above facts, its need of time to devise a strategy that does not involve the use of such chemicals and does not pollute the environment is essential. In response to this need, use of antibiotics can be a valuable asset in controlling the disease. These remain active on plants for less than a week and have no considerable residues on harvested fruits. Various experiments have been done to check the efficacy of certain antibiotics against the *Xac* which revealed that use of antibiotics is relatively more than the traditional pesticides as it does not produce any harmful residual effects. The antibiotics have been observed massively to reduce pathogen growth but investigation on new antibiotics at optimum concentration is the need of hour. So that establishment of resistance against *Xac* in already available antibiotics should be addressed (Mubeen *et al.*, 2015). Therefore, the current study was planned to evaluate the efficacy of certain antibiotics which are available in the local market.

## Materials and methods

The assessment of three concentrations (1, 1.5 and 2 %) of both antibiotics and their combination (Table 1) and control (distilled water) were conducted in greenhouse and field by using injection and spray method.

For obtaining these concentrations, an ample quantity of stock solutions of each antibiotic was prepared by following protocol explained by Rehman *et al*, 2015. Leaves showing typical characteristics canker symptoms were collected in brown paper bags (10" x 12") then taken to Phyto-bacteriology Lab. for isolation of *Xac* by using streaking method (Ruangpan and Tendencia, 2004). Firstly, Nutrient Agar (NA) media (Beef extract 3g, Glucose 2.5g, Agar 15g and Peptone 5g, and 1000 ml distilled water for 1-liter media) was prepared and autoclaved (RTA85, Robus United Kingdom) at 121°C temperature and 15 psi pressure for 15 minutes (Hemraj *et al*, 2013). Small infected areas of leaves along with healthy portions (5-7 mm long pieces) were cut into small pieces and surface sterilized them with 70 % ethanol and then washed three times in sterile water and dried them on filter paper to avoid the contamination.

These pieces were transferred on NA media containing petri plates using sterilized forceps and after wrapping and labelling with permanent marker, incubated (temperature controlled with range  $\pm 2$  °C ambient to 70 °C) at 25°C for 24 hours (Riaz *et al.*, 2008). Bacterial growth in the form of yellow ooze was appeared beneath the infected samples after 24-36 hours and transferred them to new plates containing NA media by using streak method for purification. Round colonies along with yellow color were appeared after 24-36 hours incubation period. Bacterial inoculum was prepared in broth media by putting purified colonies in it and kept on shaker for

overnight. In greenhouse experiment, antibiotics (Ciprofloxacin & Levofloxacin) were used at the concentrations of 1, 1.5 and 2 % and were applied on one-year old citrus plants grown in pots @ 10 mL per liter which were already inoculated with 10 mL suspension of *Xac* (Jahanshir and Dzhililov, 2010).

Three replications of each treatment and concentrations were used. Plants which were considered as control treated with sterile distilled water. Three replications were maintained. Data were calculated following RCBD after 10, 20 and 30-days interval.

One-year old plants of susceptible citrus plants (Grapefruit) were transplanted into established field and *Xac* suspension was sprayed. The antibiotics with different concentrations @ 10 mL/liter were applied by spraying method. Treatments were applied to the plants arranged by following (RCBD) Randomized Complete Block Design Data on canker incidence were recorded after 10, 20- and 30-days interval.

## Results

All treatments (T), concentration (C), days (D) and their interactions (TxC), (TxD) except (CxD) and (TxCxD) expressed significant effects against citrus canker. Lowest disease incidence (14.51%) was observed under the combination of Levofloxacin + Ciprofloxacin, followed by Levofloxacin (17.48 %) and Ciprofloxacin (21.66 %) as compared to the control (Table 2 & Fig.1).

**Table 1.** Detail list of antibiotics, their active ingredients, molecular formula and molecular weight used in this study.

Sr No.	Antibiotics	Active ingredients	Molecular formula	Molecular weight
1	Levofloxacin	Levaquin	$C_{18}H_{20}FN_3O_4$	370.38 g/mol
2	Ciprofloxacin	Ciprofloxacin hydrochloride	$C_{17}H_{18}FN_3O_3$	331.346 g/mol
3	Water	Control	$H_2O$	18.01528 g/mol

In treatments and concentration interaction (TxC), Ciprofloxacin expressed 17.38, 21.66 and 24.22, Levofloxacin 13.33, 17.88, 21.22 percent disease incidence at 1, 1.5, 2 % concentrations while minimum disease incidence was observed by the

combination of both (Levofloxacin and Ciprofloxacin) 10.44, 14.88 and 18.22 % respectively at three concentrations as compared to the control (Table 3 & Fig. 2). Interaction between treatment and days (TxD) exhibited that Ciprofloxacin expressed (27.33,

21.72 and 14.22) % disease incidence while Levofloxacin (23.05, 17.11 and 12.27) and Levofloxacin + Ciprofloxacin 20.16, 14.11 and 9.27 %

disease incidence when applied @ 1, 1.5 and 2 % after ten, twenty and thirty days consistently as compared to the control (Table 4 & Fig. 3).

**Table 2.** Evaluation of *Levofloxacin* and *Ciprofloxacin* against citrus canker under greenhouse conditions.

Sr #	Treatments	Disease incidence (%)
T <sub>1</sub>	Ciprofloxacin	21.66b
T <sub>2</sub>	Levofloxacin	17.48c
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	14.51d
T <sub>4</sub>	Control	60.00a
	LSD	1.3658

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

**Table 3.** Impact of interaction between treatments and concentrations (T×C) against citrus canker under greenhouse conditions.

Sr #	Treatments	Disease incidence (%)		
		Concentrations (%)		
		At 1 %	At 1.5 %	At 2 %
T <sub>1</sub>	Ciprofloxacin	24.22c	21.66d	17.38e
T <sub>2</sub>	Levofloxacin	21.22d	17.88e	13.33f
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	18.22e	14.88f	10.44g
T <sub>4</sub>	Control	54.00b	58.00a	58.00a
	LSD	2.3657		

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

#### Evaluation of antibiotics against citrus canker under field conditions

All treatments (T), concentration (C), days (D) their interactions (T×C), (T×D) except (C×D) and (T×C×D) showed significant effects against citrus canker. Least

disease incidence (17.51) was expressed in the combination of Levofloxacin + Ciprofloxacin, followed by Levofloxacin (20.48) % and Ciprofloxacin (24.09) as compared to the control (Table 5 & Fig. 4).

**Table 4.** Impact of interaction between treatments and days (T×D) against citrus canker under greenhouse conditions.

Sr #	Treatments	Disease incidence (%)		
		Days		
		After 10 days	After 20 days	After 30 days
T <sub>1</sub>	Ciprofloxacin	27.333d	21.722ef	14.222h
T <sub>2</sub>	Levofloxacin	23.056e	17.111g	12.278h
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	20.167f	14.111h	9.278i
T <sub>4</sub>	Control	52.667c	56.667b	60.667a
	LSD	2.3657		

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

**Table 5.** Evaluation of *Levofloxacin* and *Ciprofloxacin* against citrus canker under field conditions.

Sr #	Treatments	Disease incidence (%)
T <sub>1</sub>	Ciprofloxacin	24.09b
T <sub>2</sub>	Levofloxacin	20.48c
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	17.51d
T <sub>4</sub>	Control	64.00a
	LSD	1.4010

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

In treatments and concentration interaction ( $T \times C$ ) Ciprofloxacin expressed 27.22, 24.66 and 20.38, levofloxacin 24.22, 20.88, 16.33 percent disease incidence at 300, 500 and 700 ppm concentrations while minimum disease incidence was observed by

the combination of both (Levofloxacin and Ciprofloxacin) 21.22, 17.88 and 13.44 % respectively at three concentrations as compared to the control (Table 6 & Fig. 5).

**Table 6.** Impact of interaction between treatments and concentrations ( $T \times C$ ) against citrus canker under field conditions.

Sr #	Treatments	Disease incidence (%)		
		Concentrations (%)		
		1	2	3
T <sub>1</sub>	Ciprofloxacin	27.22c	24.66d	20.38e
T <sub>2</sub>	Levofloxacin	24.22d	20.88e	16.33f
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	21.22e	17.88f	13.44g
T <sub>4</sub>	Control	62.00b	66.00a	66.44a
	LSD		2.4266	

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

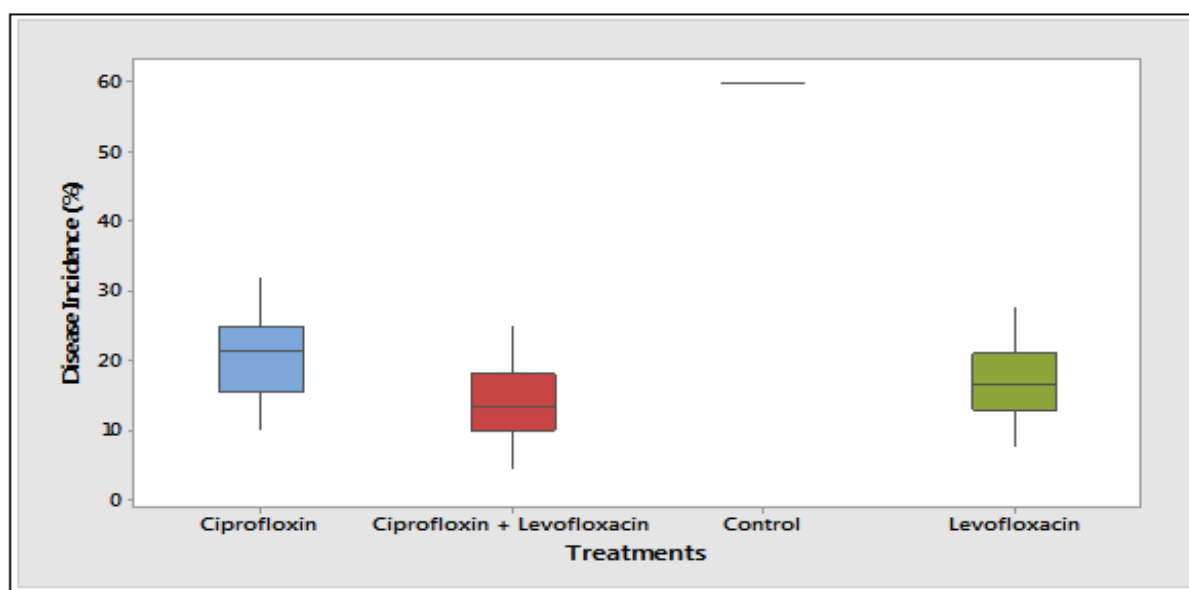
**Table 7.** Impact of interaction between treatments and days ( $T \times D$ ) against citrus canker under field conditions.

Sr #	Treatments	Disease incidence (%)		
		Days		
		After 10 days	After 20 days	After 30 days
T <sub>1</sub>	Ciprofloxacin	30.33d	24.72ef	17.22h
T <sub>2</sub>	Levofloxacin	26.05e	20.11g	15.27h
T <sub>3</sub>	Levofloxacin + Ciprofloxacin	23.16f	17.11h	12.27i
T <sub>4</sub>	Control	60.66c	64.66b	69.11a
	LSD		2.4266	

Mean values in a column sharing similar letters do not differ significantly as determined by the LSD test ( $P \leq 0.05$ ).

Treatments and days interaction ( $T \times D$ ) exhibited that Ciprofloxacin expressed 30.33, 24.72 and 17.22 % disease incidence while Levofloxacin (26.05, 20.11 and 15.27) and Levofloxacin + Ciprofloxacin 23.16,

17.11 and 12.27 % disease incidence when applied @ 1, 1.5 and 2 % after ten, twenty and thirty days respectively as compared to the control (Table 7 & Fig. 6).

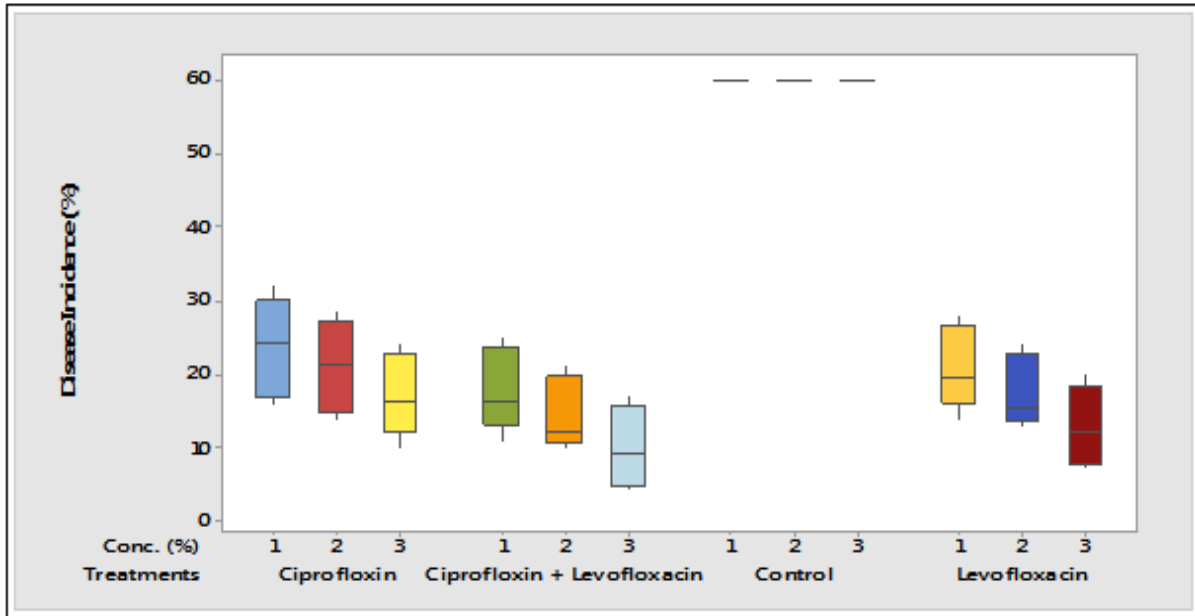


**Fig. 1.** Evaluation of treatments on the development of citrus canker under greenhouse conditions.

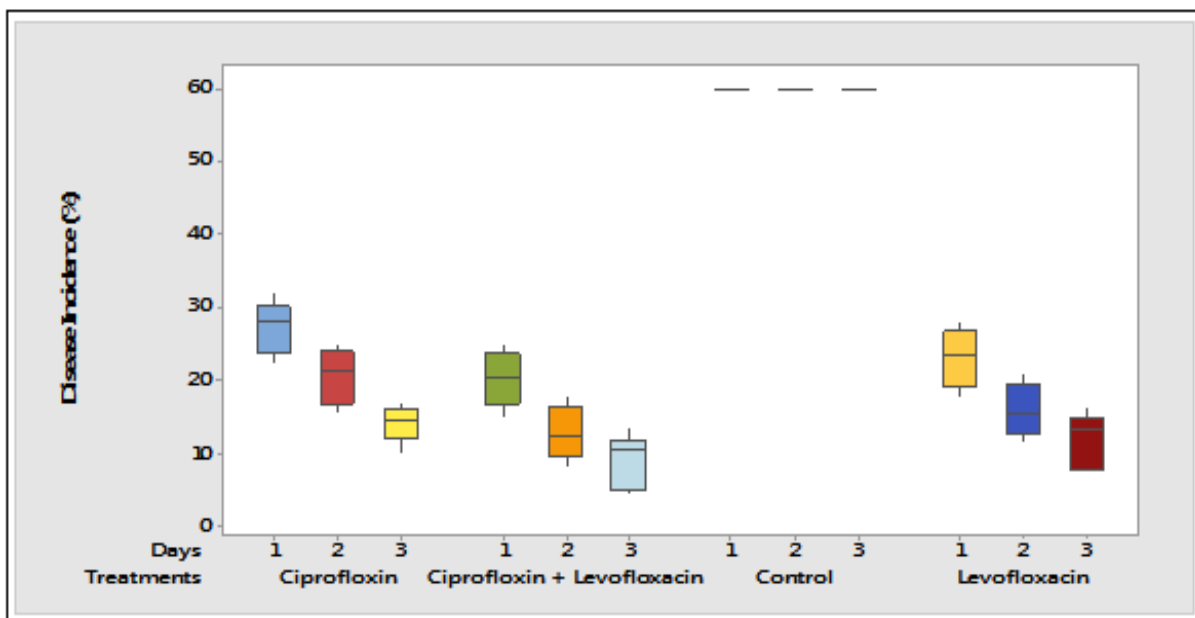
**Discussions**

Canker disease is a major issue for the citrus cultivation all over the world and causes huge losses every year. It caused by multiple strains of the *Xanthomonas axonopodis* pv. *citri* (Graham *et al*,

2004). No doubt, chemical management practices used for inhibiting the manipulation and multiplication of pathogen either by killing or blocking of metabolic pathways, but they cause severe hazardous effects on environment and human beings.



**Fig. 2.** Impact of interaction b/w treatments and concentrations (TxC) on the development of citrus canker under greenhouse conditions.



**Fig. 3.** Impact of interaction b/w treatments and days (TxD) on the development of citrus canker under greenhouse conditions.

The application of antibiotics is helpful in controlling plant diseases and in enhancing the resistance against the potential pathogens (Islam *et al.*, 2014).

Development of drug-resistant strains causes various serious problems' formulating fool-proof control (Gnanamanickam *et al*, 1999). Fitt *et al*, (1992)

recorded that few antibiotics can be used for controlling bacterial growth; according to their conclusion penicillin/dihydro-streptomycin and chloramphenicol were proved most effective during

first 48 h. Erasmus *et al*, (1997) also observed that cefotaxime and chloramphenicol at 150 mg and 20 mg mL<sup>-1</sup> respectively inhibited and suppressed the bacterial growth.

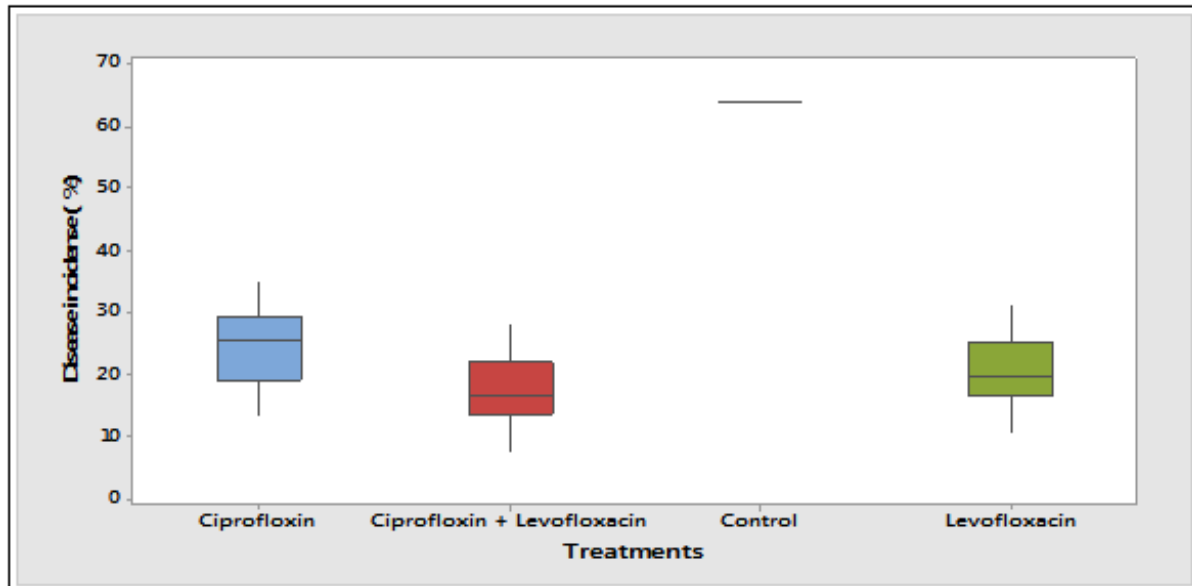


Fig. 4. Evaluation of antibiotics on the development of citrus canker under field conditions.

In the present studies, efficacy of various antibiotics was checked for management of the disease. A total 9 antibiotics were tested against *Xanthomonas axonopodis* pv. *citri* under *in-vitro* conditions. Levofloxacin at 700 ppm concentration was recorded best against *Xac*. Outcomes of present study was

supported by the findings of Christiano *et al*, 2010 who studied the effect of different antibiotics for controlling bacterial spots of stone fruits (peach and nectarine) and concluded that Oxytetracycline expressed the best result against the *Xanthomonas arboricola* pv. *pruni*.

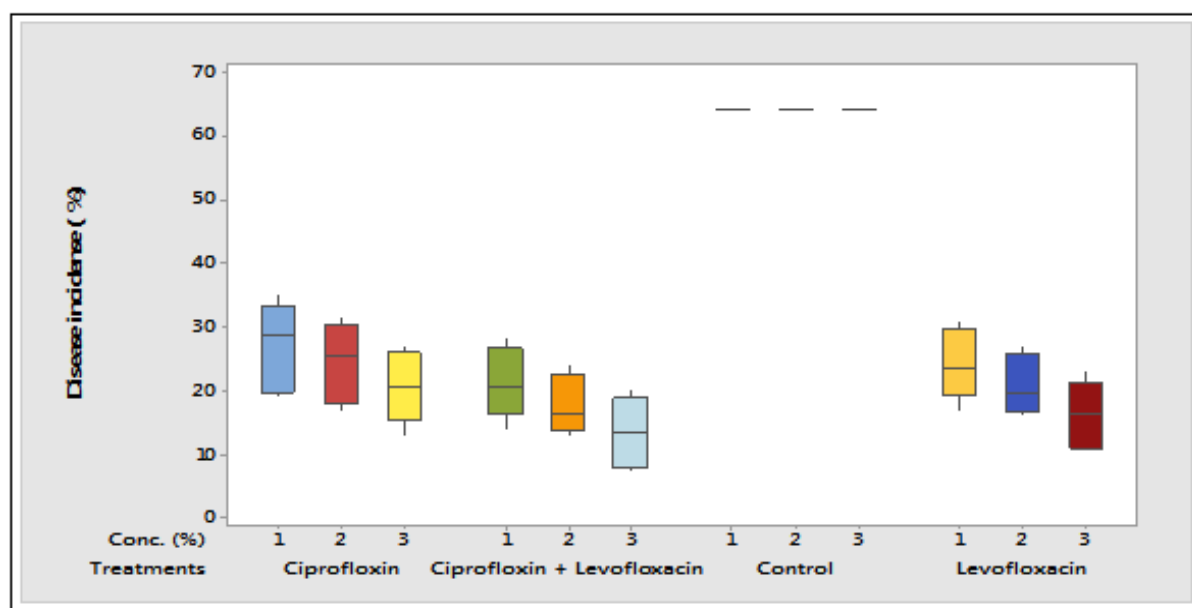
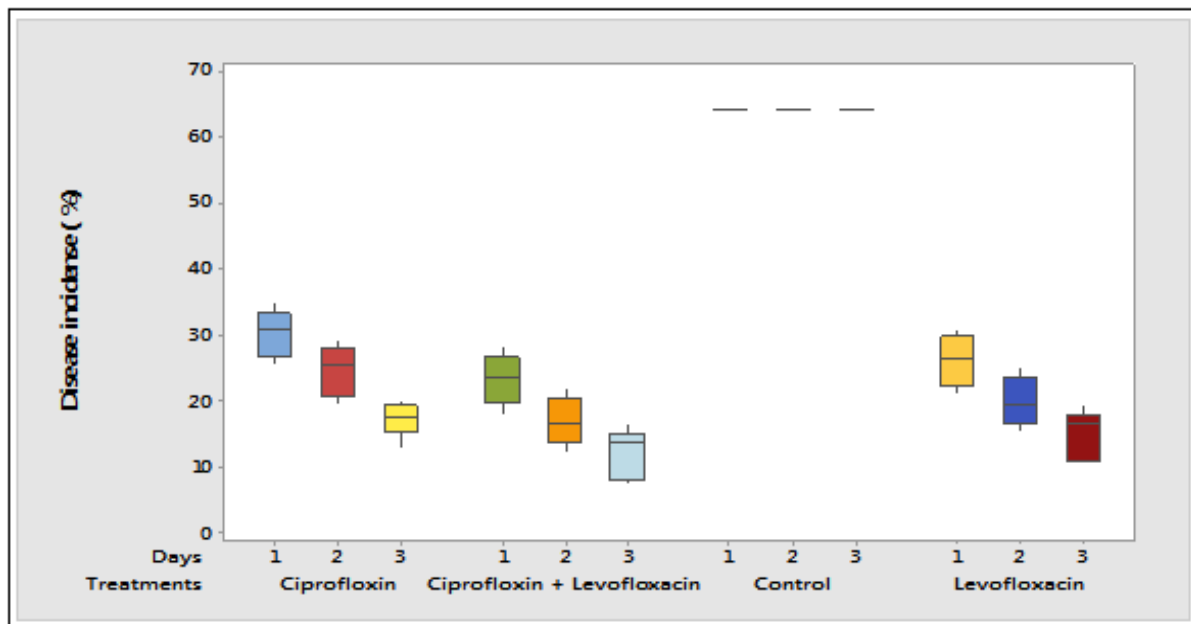


Fig. 5. Impact of interaction b/w treatments and concentrations (TxC) on the development of citrus canker under field conditions.

It acts as a bacteriostatic and prevent the multiplication of bacteria by binding with chromosomes. Oxalinic acid is found best in Japan

and registered for the management of bacterial panicle blight of rice, caused by *Burkholderia glumaea* (Nandakumar *et al*, 2010).



**Fig. 6.** Impact of interaction b/w treatments and days on the development of citrus canker under field conditions.

They revealed that oxalinic acid stopped the DNA replication and ultimately bacterial growth by inactivating the target DNA enzymes like gyrase and topoisomerase IV. Francis *et al*, 2010 who observed that high levels of penicillin sodium/dihydrostreptomycin and chloramphenicol decreases bacterial population.

Jones A.L. & Schnabel E.L., (2000) also studied the effect of streptomycin on the fire blight of apple and pear caused by *Erwinia amylovora* and concluded that these antibiotics are bactericidal, irreversibly bind with the bacterial chromosomes, cause a spontaneous mutation in the *rpsL* chromosomal gene which is directly responsible for the synthesis of proteins.

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#### Conflict of interest statement

The author (s) declares (s) that there is no conflict of interest.

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