



POTENTIAL OF FUMAGILLIN AGAINST NOSEMA SP., A MICROSPORIDIAN ENDOPARASITE OF HONEY BEE *APIS MELLIFERA* L.

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ABSTRACT

Nosema apis and *Nosema ceranae* are two kinds of microsporidian parasites that cause the recently identified illness known as noseiosis in European honey bees (*Apis mellifera*). 10 samples of adult honey bees from each infected colony of a single apiary were collected, located in the village of Handia, district of Prayagraj, India, from September 2022 to January 2023 to investigate the frequency of intestinal infections and the effectiveness of fumagillin antibiotic against noseiosis in *A. mellifera* with the use of monocular LED optical microscopy and a haemocytometer, the mean and median spore count of each composite sample was calculated. It was observed that 5% of the infected gut samples contained *Nosema* spores. The results show that 10% of colonies tested positive for *Nosema*, and fumagillin is effective against noseiosis.

Key words: *Apis mellifera*, *Nosema ceranae*, *Nosema apis*, Protozoa, fumagillin, endoparasite, microsporidian noseiosis, European honey bee, Prayagraj, intestinal infections, noseiosis

Honey bees have long been associated with vigour, assiduity, and collaboration in our environments. Several opponents of bee health pose a threat to honey bee survival as well as the livelihoods of people who profit from their labour. Exposure to chemicals, inadequate fodder, mite parasites, and diseases have led to a high annual death rate in colonies. The fungal infection noseiosis caused by spore forming endoparasite *Nosema ceranae* and *Nosema apis* is one of the possibilities involved in bee decline and is extremely common in both healthy and declining colonies. A 'new *Nosema*' typically connected with the Asian honey bee *Apis cerana*, in colonies of the European honey bee *Apis mellifera* first identified in Europe in 2006 has been known, *Nosema ceranae* is a species of *Nosema* that infects *A. mellifera* naturally (Higes et al., 2006). Since then, several reports on the prevalence of *N. ceranae* in *A. mellifera* and other host species (Klee et al., 2007; Chen et al., 2008). *Nosema* sp., spores can be seen under a microscope with relative ease, and some skilled technicians may be able to distinguish between *N. apis* and *N. ceranae* spores by eye. However, species identification is difficult because both species can cause isolated or mixed infections in *A. cerana* and *A. mellifera* (Chen et al., 2009; Forsgren and Fries 2010; Milbrath et al., 2015). Beekeepers in India have previously reported dramatically rising colony losses, (Grupe and Quandt, 2020). Viruses (Foster et al., 2007) and noseiosis are the primary pathogens responsible for these increases

in colony mortality (Martín et al., 2007). In the winter and fall of 2021 and 2022, Indian beekeepers suffered huge losses, and they have since observed an increase in overwintering mortality. In a study involving 100 colonies in the Prayagraj district, the prevalence of *Nosema* spores infection was observed. Effectiveness of a well-known antifungal drug fumagillin, used to treat *Nosema* infections was also evaluated to determine whether *Nosema* can be linked to these losses.

MATERIALS AND METHODS

During September 21, 2022 to January 26, 2023, samples of *A. mellifera* were taken using sterile forceps in collection jars filled with 70% ethanol from a single apiary situated in the village of Handia in the district of Prayagraj. When requested to gather samples of 10 adult bees from all infected hives, beekeepers consented to give the research samples. Bees at the hive entrance or on frames far from the brood nest were considered to be older bees. The Stevanovic et al. (2011) approach was used to demonstrate that there was no *Nosema* infection in the colonies. The feeding solution was prepared in sucrose syrup (50%w/v) with fumagillin concentration of 26.4 mg/l (Heever et al., 2014) which was then stored in amber vials and utilized for 5 days as described by Raymann et al. (2017). From the ten selected colonies (infected), 10 adult worker bees were removed, and put in net bags, and then maintained overnight in an incubator (35°C 67% RH). The next morning, five worker bees

were selected at random and placed in cages. There were 50 bees in each cage. A solution of 50% (w/v) sugar was given to all the groups. The infected controls received nothing and other groups of bees were fed fumagillin treatments from 22 September 2022 to 24 January 2023; total of three doses were given at an interval of 30 days as part of their diet. Gathered bee samples were then preserved in 70% ethanol at ambient temperature. Five worker bees were randomly chosen from each sample and viewed under a microscope to check for *Nosema* spores. The bees' abdomens were removed and crushed using a mortar and pestle in 1 ml of distilled water. To estimate the number of spores, extracts were diluted 1:10 in water and placed onto a Bright-line haemocytometer to quantify the spores/ bee as described by Cantwell (1970) and OIE (2018).

RESULTS AND DISCUSSION

Nosema is affecting over 10% of bee colonies, and data shows a considerable drop in spore mean count after fumagillin administration ($p=0.42$, $df=2$, $f=0.74$). There is a need for a quick, accurate, and efficient assay to check for *Nosema* in samples submitted by beekeepers due to the high incidence of the disease in Prayagraj. A "loss of seasonality" is reportedly the characteristic of the particular type of nosemosis brought on by *Nosema* sp. According to reports, more colonies will have measurable infection levels in the spring, which means more individuals will be sick and show a greater spore load. Generally, early spring will bring out the pathological signs of nosemosis (creeping bees and dysentery inside the hive). Colonies will then decline before the season even begins (Fries, 2010). Moreover, counsel beekeepers to use Fumagillin-B to treat seriously diseased hives before the winter. Unfortunately, our knowledge of the *Nosema* infection cycle and the elements that could lead to a more severe outbreak within colonies is limited. It is vitally necessary to conduct further study on the yearly cycle and the variables that affect nosemosis severity.

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AUTHOR CONTRIBUTION STATEMENT

AS wrote the paper. AK created the experimental procedure. SM translated the manuscript.

CONFLICT OF INTEREST

The researcher affirms that no financial or commercial ties that might be viewed as having a conflict of interest existed throughout the course of the research.

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