



## Short Communication

Does fumagillin control the recently detected invasive parasite *Nosema ceranae* in western honey bees (*Apis mellifera*)? ☆Geoffrey R. Williams<sup>a</sup>, Michelle A. Sampson<sup>a</sup>, Dave Shutler<sup>a,\*</sup>, Richard E.L. Rogers<sup>b</sup><sup>a</sup> Department of Biology, Acadia University, Wolfville, NS, Canada B4P 2R6<sup>b</sup> Wildwood Labs Inc., 53 Blossom Drive, Kentville, NS, Canada B4N 3Z1

## ARTICLE INFO

## Article history:

Received 27 February 2008

Accepted 15 April 2008

Available online 24 April 2008

## Keywords:

*Apis mellifera*

Emerging diseases

Fumagillin

Honey bee

Microsporidian

*Nosema apis**Nosema ceranae*

## ABSTRACT

Western honey bee (*Apis mellifera*) colonies in Nova Scotia, Canada were sampled in spring and late summer 2007 to evaluate efficacy of fumagillin dicyclohexylammonium (hereafter, fumagillin) against *Nosema ceranae*. Colonies treated with fumagillin in September 2006 ( $n = 94$ ) had significantly lower *Nosema* intensity in spring 2007 than did colonies that received no treatment ( $n = 51$ ), but by late summer 2007 no difference existed between groups. Molecular sequencing of 15 infected colonies identified *N. ceranae* in 93.3% of cases, suggesting that fumagillin is successful at temporarily reducing this recent invasive parasite in western honey bees.

© 2008 Elsevier Inc. All rights reserved.

Nosemosis of western honey bees (*Apis mellifera*) is caused by two different microsporidians, *Nosema apis* and *Nosema ceranae*. Infection occurs in adult midgut epithelial cells after spores are ingested during trophallaxis or cleaning of contaminated comb (Bailey, 1981; Webster, 1993). Pathology associated with *N. apis*, the historical *Nosema* parasite of western honey bees, is well-described, and includes dysentery, reduced honey yield, increased winter mortality, and poor spring build-up of surviving colonies (Fries, 1993). First detected in western honey bees in 2005 (Huang et al., 2007), *N. ceranae* likely jumped from the Asian honey bee (*Apis cerana*) over 10 years ago (Klee et al., 2007; Paxton et al., 2007; Chen et al., 2008), so its pathology is not as well understood. In Spain, *N. ceranae* was associated with reduced honey production and increased colony mortality (Higes et al., 2006a), and was highly pathogenic when inoculated experimentally (Higes et al., 2007; Paxton et al., 2007).

To combat *N. apis*, apiculturists recommend the use of the antibiotic fumagillin dicyclohexylammonium (hereafter, fumagillin), which disrupts this parasite's DNA replication (Katznelson and Jamieson, 1952; Hartwig and Przelecka, 1971; Webster, 1994). In Canada, Fumagilin-B® (Medivet Pharmaceuticals Ltd.) is the only commercially registered product containing fumagillin available

to beekeepers for *Nosema* treatment. Chemotherapy typically occurs during fall syrup-feeding of hives (Gochbauer and Furgala, 1969), before peak infection during winter and early spring (Picard and El-Shemy, 1989). Fall and spring chemotherapy is often recommended for severe infections, but this may not reduce *N. apis* below damaging levels (Wyborn and McCutcheon, 1987). It is not known if fumagillin is effective against *N. ceranae*, in part, because fumagillin was ineffective against the closely related *Nosema bombi* in the bumble bee *Bombus occidentalis* (Whittington and Winston, 2003). Because *N. ceranae* may be more virulent than *N. apis*, and because the former has only recently spread from Eurasia to become a global concern, data on the efficacy of fumagillin against this parasite are of significant interest. Here we present evidence that fumagillin is effective at managing *N. ceranae* in western honey bees.

Eight different beekeeping operations from 5 counties in Nova Scotia, Canada, volunteered their colonies for this study; 94 (5 beekeeping operations) and 51 (3 beekeeping operations) colonies had been treated or not treated with Fumagilin-B®, respectively, in September 2006 according to label instructions (Table 1). We collected bees in both spring (20 April–4 May) and late summer (20–26 August) 2007 ( $n = 15$ –21 colonies per operation) from each of these 145 colonies. Workers were collected from the hive entrance using a portable vacuum device, and kept at  $-20\text{ }^{\circ}\text{C}$  until spore suspensions for each colony from each sampling period were created by adding 15 ml of distilled water to crushed abdomens of 15 randomly selected individuals (Cantwell, 1970; Rogers and Williams, 2007a). Estimation of *Nosema* intensity per colony (mean spores

☆ Disclaimer: Mention of trade names in this article is for the purpose of providing specific information and does not imply endorsement by Acadia University or Wildwood Labs Inc.

\* Corresponding author. Fax: +1 902 585 1059.

E-mail address: [dave.shutler@acadiau.ca](mailto:dave.shutler@acadiau.ca) (D. Shutler).

**Table 1**

Median intensity (number of spores/bee) and prevalence (percent of colonies) of *Nosema* in spring (20 April–4 May) and late summer (20–26 August) 2007 in western honey bee (*Apis mellifera*) colonies (*n*) from 8 beekeeping operations in Nova Scotia, Canada that had been treated or untreated with Fumagilin-B® in September 2006

Operation	<i>n</i>	Spring		Late summer	
		Median intensity	Prevalence (%)	Median intensity	Prevalence (%)
<i>Untreated</i>					
1	15	10,725,000	100	1,425,000	80
2	19	2,725,000	74	1,625,000	89
3	17	1,475,000	82	1,875,000	71
<i>Treated</i>					
4	16	0	31	0	38
5	21	0	29	0	33
6	17	0	6	2,625,000	88
7	20	700,000	70	2,925,000	90
8	20	2,375,000	90	2,687,500	95

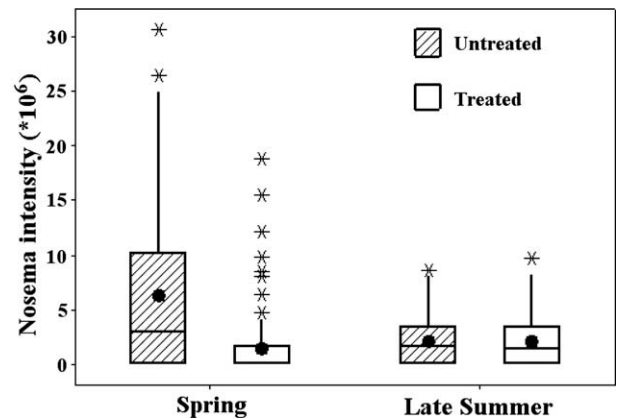
per bee) was accomplished using light microscopy and a hemacytometer (Cantwell, 1970; Rogers and Williams, 2007a). For each spore suspension, averages of 2 estimates of intensity were used.

We performed molecular analyses of the 16S rRNA gene (Higes et al., 2006a) on a random subset (*n* = 15 infected colonies from 7 operations in the spring, 1–3 per operation) of the 145 colonies to identify species of *Nosema* that were present. PCR conditions and sequencing methods are described in Williams et al. (2008). Blastn searches compared sequence data to those of related species on GenBank. Sample representatives were deposited in GenBank (Accession Nos. EU545140, EU545141).

Fourteen of 15 (93.3%) colonies had high probability (100%) matches on GenBank to *N. ceranae*, and one colony had a high probability (100%) match to *N. apis*. Results are comparable to molecular analyses we performed on a subset (*n* = 7 infected colonies, 3 belonging to 3 operations previously sampled from the 145 colonies above and 4 belonging to 2 operations not previously sampled) of 345 colonies sampled in spring 2007, where 6 of 7 (85.7%) infected colonies had high probability matches (100%) on GenBank to *N. ceranae*, and one had a high probability match (100%) to *N. apis* (Williams, unpublished data). As has been reported from other geographic regions (Klee et al., 2007; Paxton et al., 2007; Chen et al., 2008), our data suggest that *N. ceranae* is displacing *N. apis*. Because the historical parasite *N. apis* is still present in Canada (Williams et al., 2008), as well as northern and western Europe and Australasia (Klee et al., 2007), *N. ceranae* is likely a relatively recent arrival to these regions compared to regions, such as the United States (Chen et al., 2008), where only *N. ceranae* has recently been detected.

We first used repeated-measures ANOVA to analyze effects of fumagillin treatment, using R 2.0.1. Infection intensity data were square root-transformed to improve fit to normality, but perfect fit could not be achieved due to the high frequency of uninfected colonies (Table 1). Nonetheless, our analyses are likely to be robust because of our large sample sizes.

Infection intensities were significantly different between treatment groups (repeated-measures ANOVA  $F_{1,143} = 24.6$ ,  $P < 0.001$ ). Because of the significant treatment effect, we tested for differences within sampling periods with ANOVA. *Nosema* intensity in the spring was significantly lower in colonies treated with Fumagilin-B® the previous fall than colonies that had not been treated (Fig. 1,  $F_{1,143} = 39.3$ ,  $P < 0.001$ ), but by late summer no difference existed between groups (Fig. 1,  $F_{1,143} = 0.1$ ,  $P = 0.82$ ). Given that 93.3% (14/15) of the colonies on which we did molecular work were infected with *N. ceranae*, our surveys suggest that fumagillin treatment in the fall successfully reduced intensity of this invasive parasite in the subsequent spring. Because only a single colony in-



**Fig. 1.** Comparison of western honey bee (*Apis mellifera*) colonies in Nova Scotia, Canada treated (*n* = 94, from 5 beekeepers) and untreated (*n* = 51, from 3 beekeepers) with Fumagilin-B® in September 2006 in spring (20 April–4 May) and late summer (20–26 August) 2007 (*n* = 15–21 colonies per operation). Boxplots show interquartile range (box), median (black line within interquartile range), data range (vertical lines), and outliers (asterisks). Black dots represent means.

fectured with *N. apis* was part of our statistical analyses, we were unable to test whether fumagillin was more effective against one of the *Nosema* species.

Our results could be due to differences in beekeeping management practices, rather than because of differences in fumagillin treatment. We believe this is unlikely for several reasons. First, we observed extreme differences in *Nosema* intensities (Fig. 1) that we judge would be difficult to ascribe to shared differences in beekeeping management for the eight operations we sampled. Second, geographic locations of the fumagillin-treated and untreated bee operations overlap, so that local differences in, for example, microclimates, are unlikely to be responsible for the significant differences in infection intensities. Third, bees from all of the operations are transported long distances (100s of km) through the same regions of Nova Scotia, and thus are all likely to have broadly similar exposures to *Nosema* (and many other pathogens). Fourth, our findings are supported by additional unpublished observations (Higes et al., 2006b; Pernal et al., in press). Nonetheless, future cage and field trials should be conducted to evaluate the efficacy of fumagillin against *N. ceranae*. Future studies should also investigate if fumagillin is favoring displacement of *N. apis* by *N. ceranae* because it is more effective against the former.

Differences between treated and untreated colonies disappeared approximately 1 year after treatment, suggesting that infected colonies naturally recover during the summer (Pickard and El-Shemy, 1989), that fumagillin loses its efficacy (Furgala, 1962), or that fumagillin becomes depleted from colony honey stores.

*N. ceranae* has been blamed for colony collapse of western honey bees in Spain (Martín-Hernández et al., 2007), whereas Israeli acute paralysis virus has been associated with colony collapse in the United States (Cox-Foster et al., 2007). However, many colony collapses likely result from synergistic interactions among multiple pathogens and other stressors (Rogers and Williams, 2007b). Moreover, as is the case for *N. bombi* (Tay et al., 2005), virulence may vary among *N. ceranae* haplotypes. Virulence in Spain may be higher than in other regions of the world, such as in eastern Canada and other regions of North America, that appear to be colonized by a different European haplotype (Williams et al., 2008). Investigating virulence and efficacy of fumagillin against these different haplotypes should be a priority to protect bees whose pollination services to agriculture are valued at over \$14 billion annually in the United States alone (Morse and Calderone, 2000).

## Acknowledgments

Research was supported by a Natural Sciences and Engineering Research Council of Canada (NSERC) Industrial Postgraduate Scholarship to G.R.W., and a Nova Scotia Agri-Futures (Agriculture and Agri-Food Canada) grant and NSERC Discovery grant to D.S. Additional support was provided by Medivet Pharmaceuticals, Praxair, and Country Fields Beekeeping Supplies. We thank Cate Little and Aaron Shafer for both field and lab assistance, the Nova Scotia Beekeepers' Association Research Committee, and beekeepers who allowed us access to their colonies.

## References

- Bailey, L., 1981. Honey Bee Pathology. Academic Press, London, UK.
- Cantwell, G.E., 1970. Standard methods for counting *Nosema* spores. *Am. Bee J.* 110, 222–223.
- Chen, Y., Evans, J.D., Smith, I.B., Pettis, J.S., 2008. *Nosema ceranae* is a long-present and wide-spread microsporidian infection of the European honey bee (*Apis mellifera*) in the United States. *J. Invertebr. Pathol.* 97, 186–188.
- Cox-Foster, D.L., Conlan, S., Holmes, E.C., Palacios, G., Evans, J.D., Moran, N.A., Quan, P.L., Briese, T., Hornig, M., Geiser, D.M., Martinson, V., vanEngelsdorp, D., Kalkstein, A.L., Drysdale, A., Hui, J., Zhai, J.H., Cui, L.W., Hutchison, S.K., Simons, J.F., Egholm, M., Pettis, J.S., Lipkin, W.I., 2007. A metagenomic survey of microbes in honey bee colony collapse disorder. *Science* 318, 283–287.
- Fries, I., 1993. *Nosema apis*—a parasite in the honey bee colony. *Bee World* 74, 5–19.
- Furgala, B., 1962. Residual fumagillin activity in sugar syrup stored by wintering honeybee colonies. *J. Apicult. Res.* 1, 35–37.
- Gochnauer, T.A., Furgala, B., 1969. Chemotherapy of *Nosema* disease: compatibility of fumagillin with other chemicals. *Am. Bee J.* 109, 309–311.
- Hartwig, A., Przelecka, A., 1971. Nucleic acids in the intestine of *Apis mellifera* infected with *Nosema apis* and treated with Fumagillin DCH: cytochemical and autoradiographic studies. *J. Invertebr. Pathol.* 18, 331–336.
- Higes, M., García-Palencia, P., Martín-Hernández, R., Meana, A., 2007. Experimental infection of *Apis mellifera* honeybees with *Nosema ceranae* (Microsporidia). *J. Invertebr. Pathol.* 94, 211–217.
- Higes, M., Martín-Hernández, R., Meana, A., 2006a. *Nosema ceranae*, a new microsporidian parasite in honeybees in Europe. *J. Invertebr. Pathol.* 92, 93–95.
- Higes, M., Martín-Hernández, R., Garrido-Bailón E., Meana, A., 2006b. An approach to *Nosema ceranae* control with fumagillin in field conditions. In: Vesely, V., Vořechovská, M., Titěra, D. (Eds.), Proceedings of the Second European Conference of Apidology EurBee, Prague, Czech Republic, 10–16 September 2006. Bee Research Institute. Dol, Czech Republic, p. 33.
- Huang, W.F., Jiang, J.H., Wang, C.H., 2007. A *Nosema ceranae* isolate from the honeybee *Apis mellifera*. *Apidologie* 38, 30–37.
- Katznelson, H., Jamieson, C.A., 1952. Control of *Nosema* disease of honeybees with fumagillin. *Science* 115, 70–71.
- Klee, J., Besana, A.M., Genersch, E., Gisder, S., Nanetti, A., Tam, D.Q., Chinh, T.X., Puerta, F., Ruz, J.M., Kryger, P., Message, D., Hatjina, F., Korpela, S., Fries, I., Paxton, R.J., 2007. Widespread dispersal of the microsporidian *Nosema ceranae*, an emergent pathogen of the western honey bee, *Apis mellifera*. *J. Invertebr. Pathol.* 96, 1–10.
- Martín-Hernández, R., Meana, A., Prieto, L., Salvador, A.M., Garrido-Bailón, E., Higes, M., 2007. Outcome of colonization of *Apis mellifera* by *Nosema ceranae*. *Appl. Environ. Microbiol.* 73, 6331–6338.
- Morse, R.A., Calderone, N.W., 2000. The value of honey bees as pollinators of U.S. crops in Gleanings in Bee Culture Suppl. 1–15.
- Paxton, R.J., Klee, J., Korpela, S., Fries, I., 2007. *Nosema ceranae* has infected *Apis mellifera* in Europe since at least 1998 and may be more virulent than *Nosema apis*. *Apidologie* 38, 558–565.
- Pernal, S.F., Pettis, J., Melathopoulos, A.P., in press. A preliminary evaluation of control methods for *Nosema apis* and *Nosema ceranae*. *Am. Bee J.*
- Pickard, R.S., El-Shemy, A.A.M., 1989. Seasonal variation in the infection of honeybee colonies with *Nosema apis* Zander. *J. Apicult. Res.* 28, 93–100.
- Rogers, R.E.L., Williams, G.R., 2007a. Monitoring *Nosema* disease in honey bee colonies. *Bee Culture* 135, 19–21.
- Rogers, R.E.L., Williams, G.R., 2007b. Honey bee health in crisis: what is causing bee mortality? *Am. Bee J.* 147, 441.
- Tay, W.T., O'Mahony, E.M., Paxton, R.J., 2005. Complete rRNA gene sequences reveal that the microsporidium *Nosema bombi* infects diverse bumblebee (*Bombus* spp.) hosts and contains multiple polymorphic sites. *J. Eukaryot. Microbiol.* 52, 505–513.
- Webster, T.C., 1993. *Nosema apis* spore transmission among honey bees. *Am. Bee J.* 133, 869–870.
- Webster, T.C., 1994. Fumagillin affects *Nosema apis* and honey bees (Hymenoptera: Apidae). *J. Econ. Entomol.* 87, 601–604.
- Whittington, R., Winston, M.L., 2003. Effects of *Nosema bombi* and its treatment fumagillin on bumble bee (*Bombus occidentalis*) colonies. *J. Invertebr. Pathol.* 84, 54–58.
- Williams, G.R., Shafer, A.B.A., Rogers, R.E.L., Shutler, D., Stewart, D.T., 2008. First detection of *Nosema ceranae*, a microsporidian parasite of European honey bees (*Apis mellifera*), in Canada and central USA. *J. Invertebr. Pathol.* 97, 189–192.
- Wyborn, M.H., McCutcheon, D.M., 1987. A comparison of dry and wet fumagillin treatments for spring *Nosema* disease suppression of overwintered colonies. *Am. Bee J.* 127, 207–209.