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DETEKSI DAN IDENTIFIKASI BAKTERI PATOGEN PADA SEMUT
Monomorium sp. DI LINGKUNGAN RUMAH SAKIT UMUM KOTA
KENDARI SULAWESI TENGGARA

DETECTION AND IDENTIFICATION OF PATHOGENIC BACTERIA IN *Monomorium* sp. ANT
IN THE ENVIRONMENT OF KENDARI CITY HOSPITAL SOUTHEAST SULAWESI

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Abstrak

Semut *Monomorium* sp. merupakan salah satu serangga yang dianggap sebagai hama di lingkungan rumah sakit dan berpotensi menjadi vektor mekanis yang membawa bakteri patogen dan menyebabkan penyebaran penyakit. Penelitian ini bertujuan untuk mendeteksi dan mengidentifikasi bakteri patogen yang ditemukan pada semut *Monomorium* yang berasal dari lingkungan Rumah Sakit Umum Daerah (RSUD) kota Kendari, Sulawesi Tenggara. Pengambilan sampel *Monomorium* sp. dilakukan dengan metode *bait/sugar trap* di 3 lokasi RSUD Kendari, yaitu ruang rawat inap internal, instalasi gizi dan instalasi laboratorium. Deteksi bakteri patogen dilakukan dengan metode tuang pada media selektif, yaitu *Mac Conkey Agar* dan *Mannitol Salt Agar*. Identifikasi bakteri dilakukan dengan analisis numerik-fenetik berdasarkan karakter fenotipik menggunakan aplikasi MVSP 3.1. Hasil penelitian mengidentifikasi 5 spesies bakteri patogen yang ditemukan pada semut *Monomorium* dari lingkungan Rumah Sakit Kota Kendari. Tiga spesies bakteri ditemukan pada semut dari ruang rawat inap internal, yaitu *Pseudomonas aeruginosa*, *Stenotrophomonas maltophilia* dan *Brevundimonas vesicularis* dan dua spesies ditemukan pada semut dari instalasi gizi, yaitu *Pseudomonas luteola* dan *Staphylococcus auricularis*. Bakteri patogen tidak ditemukan pada semut dari instalasi laboratorium.

Kata kunci: Bakteri patogen; infeksi nosokomial; vektor mekanik; semut *Monomorium*

Abstract

Monomorium sp. ant is one of the insects that are considered pests in the hospital environment and potential to be mechanical vectors that can carry pathogenic bacteria and cause the spread of disease. This study aims to detect and identify pathogenic bacteria found in *Monomorium* sp. ants originating from the environment of Kendari City Hospital, Southeast Sulawesi. Sampling of *Monomorium* sp. was carried out by the bait/sugar trap method in 3 locations of Kendari City Hospital, namely internal inpatient rooms, nutrition installations and laboratory installations. Detection of pathogenic bacteria was carried out by the pour plate method on selective media, namely *Mac Conkey Agar* and *Mannitol Salt Agar*. The identification of bacteria was carried out by numerical-phenetic analysis based on phenotypic characters using the MVSP 3.1 application. The results of the study identified 5 species of pathogenic bacteria found in *Monomorium* sp. ants from the Kendari City Hospital environment. Three species of bacteria were found in ants from the internal inpatient room, namely *Pseudomonas aeruginosa*, *Stenotrophomonas maltophilia* and *Brevundimonas vesicularis* and two species found in ants from nutrition installations, namely

50 *Pseudomonas luteola* and *Staphylococcus auricularis*. No pathogenic bacteria were found in ants
51 from the laboratory installation.

52 **Keywords:** Mechanical vector; *Monomorium* ant; Nosocomial infection; Pathogenic bacteria

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54 INTRODUCTION

55 The presence of ants in residential environments and public facilities is known to often
56 cause considerable inconvenience and losses (Klimeš and Okrouhlik, 2015). Ants can transmit
57 disease agents through food contamination and spread diseases due to association with several
58 pathogenic microorganisms (Koehler *et al.*, 2017). Generally, people are not too worried if there are
59 ants in their food and continue to consume food that has been infested with ants, even though ants
60 are known to be vectors of disease through their movements. Foodborne diseases will generally
61 cause diseases such as enteric infections and urinary tract infections (UTIs) in consumers who
62 consume these contaminated foods.

63 One of the public facilities that cannot be separated from the existence of ants is health
64 service places such as hospitals (Lestari *et al.*, 2019). Several types of ants, apart from being pests,
65 are also reported to have the potential to be mechanical vectors for various human diseases. Ants
66 can also penetrate wound bandages and other sterile equipment found in hospitals, so ants can be
67 referred to as mechanical vectors that cause the spread of disease (Wetterer, 2010).

68 Several species of insects can be vectors of pathogenic bacteria, one of which is the
69 *Monomorium* sp. (Setianingsih *et al.*, 2017; Alharbi *et al.*, 2019). *Monomorium* sp. ants are one of
70 the types of insects that are widely found in residential environments, including hospitals (Lestari
71 *et al.*, 2019; Alharbi *et al.*, 2019). The ant that has been known to be the most famous hospital pest in
72 the United Kingdom is the *Monomorium* sp. Based on research also conducted by Alharbi *et al.*
73 (2019), found that ants and bacterial associations have been detected in many hospitals, raising
74 concerns about the role of ants as vectors of disease and the spread of microbes. Several studies
75 conducted in hospitals have also shown a mutualistic relationship between ants and the presence of
76 bacteria found on the ant's exoskeleton (Lestari *et al.*, 2019). *Monomorium* sp. ants can cause major
77 common problems, such as skin irritation and skin lesions that develop into infections. The
78 infection is due to the presence of pathogenic microorganisms found in *Monomorium* sp. ants, such
79 as *Escherichia coli*, *Pseudomonas* sp., *Salmonella* sp., *Clostridium* sp., *Proteus vulgaris* and
80 *Micrococcus pyogenes* (do-Nascimento *et al.*, 2020). Infection is caused by pathogenic bacteria that
81 can enter the patient's body, healthcare workers or other non-compounding objects and materials
82 that are in the hospital environment such as contaminated devices or food and humid environments
83 through *Monomorium* sp. ants as an intermediate (vector).

84 Alharbi *et al.* (2019) reported that the bacteria found from ants were 68.8% of *Bacillus* spp.
85 and *Listeria* spp., as well as 16.4% of *Streptococcus* spp. and *Staphylococcus aureus*, while Lestari
86 *et al.* (2019), reported that *Monomorium* sp. ants found in postpartum patient inpatient positive
87 carried *Escherichia coli* and *Bacillus* sp. bacteria, while *Monomorium* sp. found in internal
88 medicine hospitalization and children tested positive carrying *Escherichia coli*, *Bacillus* sp. and
89 *Staphylococcus* sp. bacteria.

90 This study aims to detect and identify pathogenic bacteria carried by *Monomorium* sp. ants
91 in the Kendari City Hospital environment. Information about pathogenic bacteria that cause
92 nosocomial infections obtained from this study is expected to be a reference in efforts to anticipate
93 disease transmission through *Monomorium* sp. ants as disease vectors.

94 MATERIAL AND METHODS

95 15
96 This research was carried out from January to March 2023 at Kendari City Hospital and at
97 the Microbiology Laboratory, Department of Biology, Faculty of Mathematics and Natural
98 Sciences, Halu Oleo University, Kendari. *Monomorium* sp. ants were collected from Kendari City
99 Hospital. The specific media were used for the detection of pathogenic bacteria namely McConkey
100 Agar (MCA) and Mannitol Salt Agar (MSA) media. The media and reagents were used for the

101 characterization of bacteria are Nutrient Agar media, Blood Agar media, Gram painting reagents,
102 API (Analytical Profile Index) 20E Kit (characterization kit for the Enterobacteriaceae group), API
103 20NE Kit (characterization kit for the non-Enterobacteriaceae group) and API 20 Staph Kit
104 (characterization kit for the Staphylococcus group) (Biomerieux, 2015).

105 **Sampling of *Monomorium* sp. Ant**

106 Ant sampling was carried out in the Kendari city hospital environment, including the
107 Internal inpatient Room, Laboratory Installation and Nutrition Installation. Sampling was carried
108 out using the *bait/sugar trap* method by making a bait trap in the form of a *microtube* containing
109 cotton soaked in sugar solution and sterilized. Bait traps (bait/sugar traps) are placed open at certain
110 corners on the path that ants often pass and the floor is cleaned first using *alcohol swabs*. If a
111 number of ants have entered the trap, the trap is immediately closed and then stored in the
112 refrigerator before the detection and isolation of bacteria is carried out, so that the temperature is
113 maintained (Setianingsih *et al.*, 2017 and Lestari *et al.*, 2019).

114 **Detection of Pathogenic Bacteria from *Monomorium* sp.**

115 Detection of pathogenic bacteria from *Monomorium* sp. ants was carried out by the pour
116 plate method on a specific medium. A sample of 5 *Monomorium* sp. ants was put into a bottle
117 containing 90 mL of sterile and suspended aquadest solvent solution. The suspended sample was
118 taken as much as 1 mL using a micropipette and blue tip and placed in a vial containing 9 mL of
119 diluent solution and suspended to obtain a 10^{-1} dilution. Then 1 mL of dilution 10^{-1} is taken and
120 placed in a vial containing 9 mL of diluent solution and suspended to obtain dilution 10^{-2} . The
121 dilution stage is carried out until dilution 10^{-3} , then 1 mL is taken from each dilution 10^{-1} , 10^{-2} , 10^{-3}
122 and put into a petri dish, then the selective media MCA (Mac Conkey Agar), and MSA (Mannitol
123 Salt Agar) is poured into each Petri dish that has contained the sample suspension. After that, the
124 petri dish is homogenized and incubated at room temperature for 24 hours. The detection of
125 pathogenic bacteria is then carried out by observing the color of the colony and the shape of the
126 colony that grows on a specific medium, and compared with the literature (Soedarto, 2015; Riski *et*.
127 *al.*, 2017).

128 **Purification of Bacterial Isolate from selective media**

129 Bacterial colonies that grew on a specific medium and exhibit pathogenic bacterial
130 characteristics, are isolated and purified. Bacterial isolates are selected based on differences in
131 colony morphology which include shape, edges, elevation, color and structure in bacteria on a
132 selective medium. Colonies that have different characteristics are isolated by scratching method on
133 Nutrient Agar (NA) medium in petri dishes. Bacterial isolates that have been purified are stored
134 using inclined NA on test tubes for characterization.

135 **Characterization of Bacteria**

136 The characterization of pathogenic bacteria is carried out based on the morphological,
137 physiological and biochemical characterization of bacteria. Cell morphological characterization is
138 carried out by Gram staining. Physiological characterization includes oxygen demand test using
139 Nutrient broth media and biochemical characterization includes catalytic test using H_2O_2 reagent,
140 hemolysis test using Blood Agar media and biochemical tests using API 20E kit, API 20NE kit and
141 API Staph kit.

142 **Identification of Bacteria by Numerical-Phenetic Analysis**

143 This identification was carried out using character data from bacterial isolates and compared with
144 the character of the reference strain. The data on the character of bacterial isolate was analyzed
145 using a numerical-phenetic analysis method with the MVSP (*Multi Variate Statistical Package*)
146 program version 3.1. The similarity of the phenotypic character of bacteria is determined based on
147 the Simple Matching Coefficient (SSM) value. The grouping was carried out using the UPGMA
148 (*Unweighted Pair Group Method with Arithmetic Averages*) algorithm. The result of the analysis
149 was presented as dendrogram. The resulting dendrogram was used as a basis to determine the
150 similarities between bacterial isolates and reference strains (Yanti *et al.*, 2019).

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153 **RESULTS**

154 The detection of pathogenic bacteria in *Monomorium* sp. ants was carried out based on the
 155 characteristics of bacterial colonies that grew on the selective media of Mac Conkey Agar (MCA)
 156 and Mannitol Salt Agar (MSA). The characteristics of bacterial colonies growing on selective
 157 media are shown in Table 1.

158 **Table 1.** Detection of bacteria from the *Monomorium* sp. ant on selective media
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Sample Location	Isolate code	Media	Colony Characteristics				Suspected bacteria
			Color	Shape	Edge	Media discoloration	
Internal inpatient Room	I.1	MCA	Colorless	round	Flat	Transparent Media	<i>Pseudomonas</i>
	I.2	MCA	Colorless black dot in the middle	round	Flat	Transparent Media	<i>Pseudomonas</i>
	I.3	MCA	Colorless	irregular	Uneven	Transparent Media	<i>Pseudomonas</i>
Nutrition Installation	G.1		Colorless black spot in the middle	irregular	Uneven	Transparent Media	<i>Pseudomonas</i>
	G.2	MSA	Yellowish-white with yellow zones	round	Flat	Media changes from red to yellow	<i>Staphylococcus</i>
Laboratory Installation	There is no growth in MCA and MSA media						

160 Note : MCA = Mac Conkey Agar, MSA = Mannitol Salt Agar
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162 The cell characteristics of the five bacteria isolates isolated from the selective media were
 163 observed using Gram painting to determine the cell shape and Gram reaction shown in Figure 1.

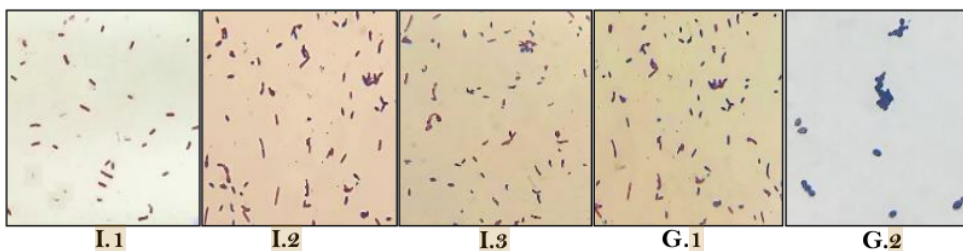


Figure 1. Visualization of bacterial isolate cells from *Monomorium* sp. observed under a microscope with 1000x magnification

The phenotypic characters analyzed totaled 62 characters including cell morphological characters, biochemical characters and characters using the API Kit, as listed in Table 2. The references species used at the identification stage amounted to 5 species, namely *Pseudomonas aeruginosa*, *Stenotrophomonas maltophilia*, *Pseudomonas luteola*, *Brevundimonas vesicularis* and

Staphylococcus auricularis. The selection of reference species was carried out based on the results of preliminary identification using API software apiweb™ (<https://apiweb.biomerieux.com>).

Table 2. Phenotypic characters of the pathogenic bacteria from *Monomorium* sp. ant and reference species

No.	Characteristics	Bacteria Isolates and references species									
		I.1 <i>Pseudomonas aeruginosa</i>	I.2 <i>Stenotrophomonas maltophilia</i>	G.1 <i>Pseudomonas luteola</i>	I.3 <i>Brevundimonas vesicularis</i>	G.2 <i>Staphylococcus auricularis</i>					
1	2	3	4	5	6	7	8	9	10	11	12
1.	Bacil Cell Shape	+	+	+	+	+	+	+	+	-	-
2.	Coccus Cell Shape	-	-	-	-	-	-	-	-	+	+
3.	Gram Properties	-	-	-	-	-	-	-	-	+	+
4.	Motility	+	+	+	+	+	+	+	+	-	-
5.	Aerob	+	+	+	+	+	+	+	+	-	-
6.	Anaerob facultative	-	-	-	-	-	-	-	-	+	+
7.	Catalase	+	+	+	+	+	+	+	+	+	+
8.	Fermenting Carbohydrates	-	-	-	-	-	-	-	-	+	+
9.	α -Hemolysis	-	-	-	-	-	-	-	-	-	-
10.	β -Hemolysis	+	+	-	-	-	-	-	-	+	+
11.	γ -Hemolysis	-	-	+	+	+	+	+	+	-	-
12.	Oksidase	-	+	-	-	-	-	+	+	-	-
13.	Ortho nitrophenyl β D Galactopyranosidase (ONPG)	-	-	-	-	+	+	-	-	-	-
14.	Arginine Dihydrolase (ADH)	+	+	-	-	-	-	-	-	-	-
15.	Lysin Decarboxilase (LDC)	-	-	-	-	-	-	-	-	-	-
16.	Ornithin Decarboxilase (ODC)	-	-	-	-	-	-	-	-	-	-
17.	Citrate utilization (CIT)	+	+	+	+	-	-	-	-	-	-
18.	H ₂ S	-	-	-	-	-	-	-	-	-	-
19.	Urease (URE)	-	-	-	-	-	-	-	-	+	+
20.	Tryptophan deaminase (TDA)	-	-	-	-	-	-	-	-	-	-
21.	Indol production (IND)	-	+	-	-	-	-	-	-	-	-
22.	Voges Proskauer (VP)	+	-	+	-	+	+	-	-	+	+
23.	Gelatinase (GEL)	+	+	-	-	-	-	-	-	-	-
24.	D-glucosa fermentation (GLU)	+	+	-	+	+	+	-	-	+	+
25.	D-mannitol (MAN)	+	+	+	+	+	+	-	-	-	-
26.	Inositol (INO)	-	-	-	-	-	-	-	-	-	-
27.	D-sorbitol (SOR)	-	-	-	-	-	-	-	-	-	-
28.	L-Rhamnose (RHA)	-	-	-	-	-	-	-	-	-	-
29.	D-saccharose (SAC)	-	-	-	-	-	-	-	-	+	+
30.	D-melibiosa (MEL)	-	-	-	-	-	-	-	-	-	-
31.	Amygdalin (AMY)	-	-	-	-	-	+	-	-	-	-

Table 2. Continued

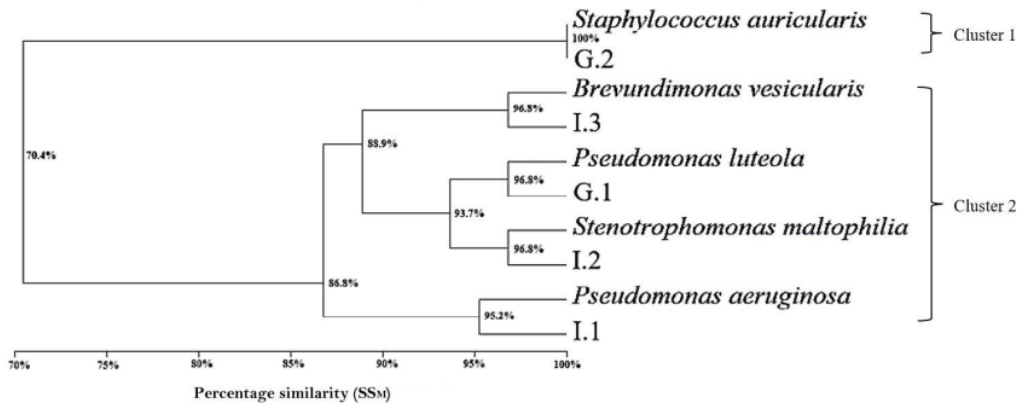
<i>I</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>
32.	Arabinose (ARA)	-	-	-	-	-	+	-	-	-	-
33.	NO ₃ Reduction	-	-	-	-	-	-	-	-	-	-
34.	L-tryptophan (TRP)	-	-	-	-	-	-	-	-	-	-
35.	Esculin hydrolysis (ESC)	-	-	-	-	-	-	+	+	-	-
36.	4-Nitrophenyl βD galactopyranosidase (PNPG)	-	-	-	-	-	-	-	-	-	-
37.	D-glucose [GLU]	-	-	-	-	-	-	+	-	-	-
38.	L-Arabinose [ARA]	-	-	-	-	-	-	-	-	-	-
39.	D-Mannose [MNE]	-	-	-	-	-	-	-	-	-	-
40.	D-mannitol [MAN]	-	-	-	-	-	-	-	-	-	-
41.	N acetyl glucosamine [NAG]	-	-	-	-	-	-	-	-	-	-
42.	D-maltose [MAL]	-	-	-	-	-	-	-	+	-	-
43.	Potassium gluconate [GNT]	-	-	-	-	-	-	-	-	-	-
44.	Capric acid [CAP]	-	-	-	-	-	-	-	-	-	-
45.	Adiptic acid [ADI]	-	-	-	-	-	-	-	-	-	-
46.	Malic acid [MLT]	-	-	-	-	-	-	-	-	-	-
47.	Trisodium citrate [CIT]	-	-	-	-	-	-	-	-	-	-
48.	Phenylacetic acid [PAC]	-	-	-	-	-	-	-	-	-	-
49.	Fructose (FRU)	-	-	-	-	-	-	-	-	+	+
50.	D-Mannose (MNE)	-	-	-	-	-	-	-	-	+	+
51.	D-maltose (MAL)	-	-	-	-	-	-	-	-	+	+
52.	D-lactose (LAC)	-	-	-	-	-	-	-	-	-	-
53.	D-trehalose (TRE)	-	-	-	-	-	-	-	-	+	+
54.	D-mannitol (MAN)	-	-	-	-	-	-	-	-	-	-
55.	Xylitol (XLT)	-	-	-	-	-	-	-	-	-	-
56.	D-melibiose (MEL)	-	-	-	-	-	-	-	-	-	-
57.	Nitrat reduction (NIT)	-	-	-	-	-	-	-	-	-	-
58.	β-Naphthyl phosphate (PAL)	-	-	-	-	-	-	-	-	-	-
59.	D-Raffinose (RAF)	-	-	-	-	-	-	-	-	-	-
60.	D-xylose (XYL)	-	-	-	-	-	-	-	-	-	-
61.	Methyl αD-glucopyranoside (MDG)	-	-	-	-	-	-	-	-	-	-
62.	N acetyl glucosamine (NAG)	-	-	-	-	-	-	-	-	-	-

Note : Characters 13-62 using the API kit ³⁵

Characters for reference species based on *Bergey's Manual of Determinative Bacteriology*

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165 The dendrogram results of numerical-phenetic analysis of phenotypic characters between
 166 pathogenic bacterial isolates that were successfully detected from *Monomorium* sp. ants at Kendari
 167 City Hospital and 5 reference species using the MVSP version 3.1 program are listed in Figure 2.



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170 **Figure 2.** The dendrogram showing the level of similarity between the pathogenic bacterial isolates
171 were detected from *Monomorium* sp. ants at Kendari City Hospital and the references
172 species was based on the analysis of *Simple Matching Coefficient (SSM)* and the
173 *Unweighted Pair-Group Method with Arithmetic Average (UPGMA)* algorithm based on
174 phenotypic characteristics

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The results of the identification of pathogenic bacterial isolates detected from
Monomorium sp. ants at Kendari City Hospital based on numerical-phenetic analysis are listed in
Table 3.

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Table 3. Pathogenic bacterial isolate species detected from *Monomorium* sp. ants at Kendari City
Hospital based on numerical-phenetic analysis

No.	Species	Isolate code	Ant location
1.	<i>Pseudomonas aeruginosa</i>	I.1	Internal inpatient Room
2.	<i>Stenotrophomonas maltophilia</i>	I.2	Internal inpatient Room
3.	<i>Brevundimonas vesicularis</i>	I.3	Internal inpatient Room
4.	<i>Pseudomonas luteola</i>	G.1	Nutrition Installation
5.	<i>Staphylococcus auricularis</i>	G.2	Nutrition Installation

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20 DISCUSSION

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Based on Table 1, it is known that several isolates of pathogenic bacteria detected from
Monomorium sp. ants were obtained from internal inpatient rooms (3 isolates) and nutrition
installations (2 isolates). In the laboratory installation, no bacterial colony growth was found on
MCA and MSA media. This is caused in laboratory installations the room is cleaned periodically
using antiseptic compounds. In addition to that actions or activities in the laboratory are carried out
aseptic, so that the room conditions are always sterile.

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Table 1 shows that the characteristics of bacterial colonies in *Mac Conkey Agar (MCA)*
media are generally colorless and the media around the transparent colony however there are two
isolates (isolate I.2 and G.1) that form black spots in the center of the colony. The characters of this
colony is one of the characteristics of bacteria that does not have the ability to ferment lactose and it
is suspected that the bacteria belong to the genus *Pseudomonas*. This is in accordance with the
statement of Darna *et al.* (2018), which reported that a group of bacteria that had colorless colonies
and black spots in the middle of the colony on *Mac Conkey agar* medium showed that the bacteria
were not able to ferment lactose, but could break down sulfur-containing amino acids and produce
H₂S, resulting in the formation of black spots in the middle of the colony. do-Nascimento *et al.*
(2020) stated that *Pseudomonas* is bacteria do not ferment lactose, and the character of the colony

201 on the MCA medium is colorless and so that the surrounding bacterial colony is transparent. Mac
202 Conkey agar is a selective medium used to detect rod-form Gram-negative bacteria, especially
203 members of the *Enterobacteriaceae* family and the genus *Pseudomonas* and a differentiation
204 medium between Gram-negative bacilli bacteria that ferment lactose by not fermenting lactose (do-
205 Nascimento et al., 2020).

206 Bacterial colonies that grow on *Mannitol Salt Agar* (MSA) media (isolate G.2) show a
207 yellowish-white colony character with a yellow zone around it, a rounded shape and flat edges and
208 a color change around the colony from red to yellow (Table 1). This is caused by the bacteria have
209 the ability to ferment mannitol. Bacteria with colony characteristics like this are thought to be a
210 group of bacteria of the genus *Staphylococcus*. This is in accordance with the statement of Dewi,
211 (2013), that the bacterial group of the genus *Staphylococcus* in the *Mannitol Salt Agar* (MSA)
212 medium shows the growth of yellowish-white colonies surrounded by yellow zones due to the
213 ability to ferment mannitol. Bacteria that are unable to ferment mannitol appear to be surrounded by
214 pink zones. The yellow zone indicates the fermentation of mannitol and produces acid, causing a change
215 in the medium from red to yellow (Dewi, 2013; Mamay, 2022). *Mannitol salt agar* media is a
216 selective and differential medium for detecting *Staphylococcus* bacteria and distinguishing
217 *Staphylococcus* bacteria from other species from the fermentation ability of mannitol which
218 changes the color of the phenol red indicator from red to yellow (Mamay, 2022).

219 Based on the results of observation of the morphology of bacterial isolate cells isolated from
220 *Monomorium* sp. ants, it is known that four bacterial isolates, namely isolates I.1, I.2, I.3 and G.1,
221 have a bacil (rod) cell shape and the cells are red which indicates Gram negative bacteria, while 1
222 isolate, namely isolate G.2, has a coccus (round) cell shape with bluish-purple cells indicating Gram
223 positive bacteria (Figure 1). Gram-negative traits in bacteria are characterized by red cells, while
224 Gram-positive traits in bacteria are characterized by cells that are purple when observed under a
225 microscope (Brabb et al., 2012). Four bacterial isolates (isolates I.1, I.2, I.3 and G.1) have bacilli-
226 shaped cells and are Gram-negative, indicate that the bacterial isolates belong to the genus
227 *Pseudomonas*. This is in accordance with the statement of Suyono and Farid (2011), state that
228 bacteria of the genus *Pseudomonas* have the characteristics of basil-shaped cells and are Gram-
229 negative. The isolate of G.2 have coccus-shaped cells with a clustered arrangement cell and Gram-
230 positive, is indicated as member of the genus *Staphylococcus*. This statement is supported by Brabb
231 et al. (2012), that the genus *Staphylococcus* group has the main characteristics with morphological
232 features in the form of coccus cells and Gram-positive.

233 Dendrogram based on the similarity of 5 bacterial isolates and 5 reference species shown in
234 Figure 2, forming 2 main clusters. Cluster 1 consists of G.2 isolates and the reference species
235 *Staphylococcus auricularis* with a similarity value of 100% while cluster 2 consists of pathogenic
236 bacterial isolates and reference species which are in the genus *Pseudomonas* group with two species
237 having undergone reclassification of the bacterial genus, namely the genus *Brevundimonas* and
238 *Stenotrophomonas* which were previously included in the genus *Pseudomonas*.

239 Cluster 2, which is a group of the genus *Pseudomonas* with a cluster similarity value of
240 86.8%, forms 4 subclusters. Subcluster 1 consists of bacterial isolate I.3 and the reference species
241 *Brevundimonas vesicularis* with a similarity value of 96.8% (Figure 2). According to Gupta et al.,
242 (2014), *Brevundimonas vesicularis* is a Gram-negative bacillus bacterium that is aerobic, non-spore
243 and does not ferment glucose. *Brevundimonas vesicularis* was formerly known as *Pseudomonas*
244 *vesicularis* and was reclassified as a new genus *Brevundimonas* by Segers et al. (1994). Subcluster
245 2 consists of G.1 and *Pseudomonas luteola* bacterial isolates with a similarity value of 96.8%
246 (Figure 2). Sub cluster 3 consists of isolate bacteria I.2 and *Stenotrophomonas maltophilia* with a
247 similarity value of 96.8% (Figure 2). *Stenotrophomonas maltophilia* was first isolated in 1943 and
248 identified as *Pseudomonas maltophilia* (Hugh and Leifson, 1963). However, based on the results of
249 the analysis of the 16SRNA gene, it is known that *P. maltophilia* is more appropriately named
250 *Xanthomonas maltophilia* (Swings et al., 1983) and based on further analysis it is proven that this
251 organism has its own genus, so the classification and naming of *Xanthomonas maltophilia* is
252 named *Stenotrophomonas maltophilia* (Palleroni and Bradbury, 1993). Subcluster 4 consists of I.1

253 and *Pseudomonas aeruginosa* bacteria isolates with a similarity value of 95.2% (Figure 2). Based
254 on the similarity value between bacterial isolate and the reference species shown in Figure 2, it is
255 known that G.2 bacterial isolate is identical to *S. auricularis*, isolate I.3 is identical to *B. vesicularis*,
256 isolate G.1 is identical to *P. luteola*, isolate I.2 is identical to *S. maltophilia* and isolate I.1 is
257 identical to *P. aeruginosa*. Priest & Austin (1993) stated that bacterial isolates are considered
258 identical to a particular species if the value of their phenotypic character similarity $\geq 80\%$.

259 Based on Table 3 shows that the pathogenic bacteria detected in *Monomorium* sp. ants
260 from the internal inpatient room consist of 3 species of bacteria, all of which belong to the group of
261 Gram-negative bacil bacteria, namely *Pseudomonas aeruginosa*, *Stenotrophomonas maltophilia*
262 and *Brevundimonas vesicularis* while the pathogenic bacteria detected in ants from the nutrition
263 plan consisted of a group of Gram-negative bacil bacteria, namely *Pseudomonas luteola* bacteria
264 and a group of Gram-positive coccus bacteria *Staphylococcus auricularis*. These results are in line
265 with a study reported by Setianingsih *et al.*, (2017), which found Gram-negative bacilli bacteria in
266 the ants *Monomorium* sp. and Lestari *et al.* (2019), also reported that *Monomorium* sp. ants as the
267 causative vector of nosocomial infections found in hospitals carry the pathogenic bacteria
268 *Staphylococcus* sp.

269 Pathogenic bacteria detected in *Monomorium* sp. ants as mechanical vectors originating
270 from internal dormitories and nutrient installations, as shown in Table 3 can cause nosocomial
271 infections. Nosocomial infections or what is referred to as *Health care Associated Infections* (HAIs)
272 are infections that are acquired in the hospital from patients who have been hospitalized for at least
273 72 hours and the patient does not show symptoms of infection when admitted to the hospital
274 (Baharutan *et al.*, 2015).

275 Disease transmission through mechanical vectors such as insects can come from feces,
276 urine or sputum of the sufferer which are only attached to the body part of the vector and can then
277 be transferred to food or drinks at the time of landing/absorbing the food, thus causing many cases
278 of nosocomial infections (Wijayanti, 2008). According to Sardi, (2021), pathogenic bacteria that
279 have a high virulence level and are often found in humid areas in the hospital environment from the
280 Gram-negative bacteria group, namely *Pseudomonas* spp., and Gram-positive bacteria, namely the
281 genus *Staphylococcus*.

282 *Pseudomonas aeruginosa* is one of the bacteria that causes nosocomial infections in
283 humans (Darmadi, 2008). *P. aeruginosa* as an opportunistic pathogenic bacteria can cause invasive
284 conditions in patients with critical illnesses as well as patients with very low immunity levels (Putri
285 *et al.*, 2015).

286 *Stenotrophomonas maltophilia* is a Gram-negative, aerobic, non-fermenting glucose
287 bacteria, which is a nosocomial pathogenic (Fujita *et al.*, 1996). *S. maltophilia* is known as multi-
288 drug-resistant organism pathogenic bacteria (MDROs) Gram-negative causative agents of
289 nosocomial infections that cause respiratory tract infections (pneumonia) in hospitalized patients,
290 bacteremia, endocarditis, meningitis, gastrointestinal infections, as well as urinary tract infections
291 (Pien *et al.*, 2015).

292 *Brevundimonas vesicularis* is a nonfermented, oxidase and catalase-positive Gram-
293 negative bacil (rod) form bacteria that is one of the human opportunistic pathogenic bacteria that
294 can be found in abundance in the environment and causes several serious diseases in
295 immunocompromised patients (Ryan & Pembroke, 2018). Nosocomial infectious diseases related to
296 *B. vesicularis*, one of which is in dialysis patients who have resistance to quinolones, which is a
297 class of broad-spectrum antibiotics used in the treatment of various bacterial infections
298 (Paramasivam *et al.*, 2021). *Pseudomonas luteola* is a Gram-negative bacteria in the form of bacilli
299 and catalase-positive which is the causative agent of respiratory tract infections (pneumonia),
300 urinary tract infections, skin infections, eye infections, ear infections, and septicemia in humans that
301 causes sepsis, which is a serious condition because inflammation occurs that extends throughout the
302 body and can cause death (Ali and Aljanaby, 2022).

303 *Staphylococcus auricularis*, which is a member of the genus *Staphylococcus*, is a group of
304 opportunistic pathogenic bacteria that can cause infections in humans who have a weakened

305 immune system (Wahyuni *et al.*, 2017). *S. auricularis* is a normal flora on human skin and mucous
306 membranes. This bacteria can be pathogenic because it can hemolyze the blood (Table 2), coagulate
307 plasma and produce enzymes and toxins that are stable ³⁴ hot temperatures in the intensive care
308 room, so they can cause nosocomial infections due to **food poisoning and toxic shock syndrome**
309 (Baharutan *et al.*, 2015).

310

311 CONCLUSION AND SUGGESTION

312 Five pathogenic bacteria were detected in the ants *Monomorium* sp. obtained in the Kendari
313 City Hospital, namely 3 species from the internal inpatient room and 2 species from nutrition
314 installation. Pathogenic bacteria from ants originating from the internal inpatient room were
315 identified as *Pseudomonas aeruginosa*, *Stenotrophomonas maltophilia* and *Brevundimonas*
316 *vesicularis* and 2 species of bacteria from the nutrition installation, namely *Pseudomonas luteola*
317 and *Staphylococcus auricularis*. Ant *Monomorium* sp. which came from the laboratory installation
318 in the Kendari City Hospital, no pathogenic bacteria were found.

319 **1** Based on the results of this study, it is known that *Monomorium* sp. ants are a potential vector
320 for the spread of disease-causing bacteria. Therefore, Attention should be focused on the hygiene of
321 food storage, which is considered to be the main source of uncontrolled re-infestation. Hospitals are
322 advised to adopt pest prevention management through licensed professionals.

323

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327

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