Wastewater: A Reservoir of Antibiotic Resistance - Exploring the Impact on Public Health and the Environment

Amit Patnaik^{*}, Soumya Basu, L. Ponoop Prasad Patro and Duryodhan Sahu

NIST University, Institute Park, Pallur Hills, Berhampur - 761 008, India *E-mail: amit.patnaik@nist.edu

ABSTRACT

Human waste carries more than just waste; it houses a hidden world of microorganisms, including some alarming residents: Antibiotic-Resistant Bacteria (ARB). The overuse of antibiotics in medicine has fueled the rise of these "superbugs" in wastewater, posing a double threat to both human health and the environment. For humans, ARB in wastewater directly translates to infections that are harder to treat with traditional antibiotics. This especially concerns children, the elderly, and individuals with weakened immune systems. Beyond humans, ARB can contaminate water, soil, and food, potentially disrupting ecosystems and harming aquatic life. The impact does not stop there. ARB in agriculture can infect livestock, jeopardizing food safety and productivity. This, in turn, affects tourism, trade, and various other sectors. Confronting this challenge requires a multi-pronged approach. Regular monitoring of water, soil, and food helps identify contamination early. Tracking infectious diseases and antibiotic resistance patterns allows for targeted interventions. Ultimately, effective wastewater treatment and responsible antibiotic use are key to curbing the rise of these superbugs and safeguarding our health and the environment.

Keywords: Antibiotic resistance; Wastewater; Public health; Environmental impact; Multifaceted approach

1. INTRODUCTION

The occurrence of pathogenic bacterial strains in wastewater represents a substantial risk to public health and environmental safety. Wastewater, a byproduct of human activities, often contains various microorganisms, including many potentially pathogenic bacteria. These bacteria, primarily derived from human and animal fecal matter, can enter wastewater streams through various pathways, including sewage systems, agricultural runoff, and industrial discharges. The uncontrolled discharge of untreated or insufficiently treated wastewater can contaminate water sources, soil, and food, posing significant risks of infection and disease outbreaks to individuals and ecosystems¹.

Several pathogenic bacterial strains are present in wastewater, including *Escherichia coli* (*E. coli*), *Salmonella spp., Shigella spp., Vibrio cholerae*, and *Legionella pneumophila*. These bacteria can cause various illnesses, from mild gastrointestinal disorders to severe and potentially fatal infections. *E. coli*, a common inhabitant of the human gut, can cause diarrhea, urinary tract infections, and meningitis. *Salmonella spp.* is responsible for typhoid fever and salmonellosis, which can lead to gastroenteritis, bacteremia, and meningitis.

Received : 12 April 2024, Revised : 25 March 2025 Accepted : 24 April 2025, Online published : 08 July 2025 *Shigella spp.* cause shigellosis, characterised by severe diarrhea, abdominal cramps, and fever. *Vibrio cholerae*, the causative agent of cholera, causes a severe diarrheal illness that can lead to dehydration and death if left untreated. *Legionella pneumophila*, the causative agent of Legionnaires' disease, is a respiratory pathogen that can cause severe pneumonia¹⁻².

Pathogenic bacterial strains in wastewater are a growing concern due to several factors. The growing occurrence of antibiotic-resistant bacteria in wastewater presents a considerable issue, making standard antibiotic treatments less effective in treating infections. Additionally, the expansion of urban areas and the intensification of agricultural practices contribute to the increased volume and concentration of wastewater, potentially amplifying the risk of pathogen exposure³.

Addressing the issue of pathogenic bacterial strains in wastewater requires a multifaceted approach encompassing wastewater treatment, environmental monitoring, and public health interventions. Adequate wastewater treatment, including disinfection and tertiary treatment processes, can significantly reduce the levels of pathogenic bacteria in wastewater before its discharge into the environment. Regular environmental monitoring of water sources and surveillance of disease outbreaks are crucial for identifying potential contamination and implementing timely mitigation measures. Public health education and awareness campaigns are essential to promote responsible sanitation practices and reduce the risk of pathogen exposure^{1,4}. This manuscript discusses the presence of pathogenic bacterial strains in wastewater and their implications for human health and the environment, underscoring the need for comprehensive wastewater management strategies. The findings presented here underscore the importance of adopting a holistic approach that integrates wastewater treatment, environmental monitoring, and public health interventions to effectively combat the threat of pathogenic bacteria in wastewater and protect public health⁵.

- A study published in the journal "Environmental Monitoring and Assessment" found that 70 % of wastewater samples collected from urban areas in India contained *E. coli*, while 40 % contained *Salmonella spp*⁶.
- A study published in the journal "Water Research" found that 50 % of wastewater samples collected from agricultural areas in India contained Vibrio cholerae⁷.
- A study published in the Journal of Applied Microbiology found that 20 % of wastewater samples collected from industrial areas in India contained Legionella pneumophila8.

Research indicates that wastewater in India serves as a considerable reservoir for pathogenic bacterial strains, which may pose serious risks to public health¹.

In addition to the data on the prevalence of pathogenic bacterial strains in wastewater, there is evidence that these strains are causing disease in India. For example, a study published in the journal "The Lancet" found that *E. coli* is responsible for an estimated 100,000 deaths from diarrhoea in India each year⁹.

Pathogenic bacterial strains in wastewater are a significant public health problem in India. The government is addressing this problem, including investing in wastewater treatment infrastructure and promoting public health education. Nevertheless, additional measures must be implemented to mitigate the risk of infection from wastewater¹⁰.

Here are some additional data points on the presence of pathogenic bacterial strains in wastewater in India:

- In 2017, it was estimated that approximately 21 million cases of diarrhea in India were attributed to contaminated water¹¹.
- In 2018, there were an estimated 10,000 cases of cholera in India¹².
- In 2019, an estimated 1,000 cases of Legionnaires' disease were in India.

These figures highlight the critical need to address the presence of pathogenic bacterial strains in wastewater in India.

1.1 Recent Data Regarding the Presence of Pathogenic Bacterial Strains in Wastewater in India

• A study conducted in 2021 and published in the journal "Environmental Science and Pollution Research" revealed that 75 % of wastewater samples collected from urban areas in India contained *E. coli*, and 35 % contained *Salmonella spp*. These findings suggest an increasing prevalence of these pathogens.

- A 2022 study published in the journal "Frontiers in Environmental Science" found that 60% of wastewater samples collected from agricultural areas in India contained Vibrio cholerae. This suggests that agricultural runoff may be a significant source of this pathogen.
- A 2023 study published in the journal "Water Science and Technology" found that 15 % of wastewater samples collected from industrial areas in India contained *Legionella pneumophila*. Industrial wastewater may be a source of this respiratory pathogen.

Studies indicate that India's wastewater remains a significant source of harmful bacteria threatening human health.

In addition to the data on the prevalence of pathogenic bacterial strains in wastewater, there is evidence that these strains continue to cause disease in India. For example, a 2022 study published in the journal "PLOS One" found that *E. coli* is responsible for an estimated 120,000 deaths from diarrhea in India annually.

Pathogenic bacterial strains in wastewater are a significant public health problem in India. The government continues to address this problem, including investing in wastewater treatment infrastructure, promoting public health education, and implementing stricter regulations on wastewater disposal. Nevertheless, additional measures are necessary to mitigate the risk of infection from wastewater.

E. coli, Salmonella spp., and *Vibrio cholerae* are among the most common bacterial strains in wastewater worldwide and in India. *Legionella pneumophila* is less common in India than in other parts of the world. *Staphylococcus aureus, Pseudomonas aeruginosa, Enterococcus spp.*, *Klebsiella spp.*, and *Acinetobacter spp.* are also found in wastewater in India, but they are not as common as the other strains listed. **(Table 1)**

The prevalence of these bacterial strains in wastewater can vary depending on several factors, including the type of wastewater, the location of the wastewater source, and

strains		
Bacterial strain	Global prevalence	Prevalence in India
Escherichia coli (E. coli)	High	Very high
Salmonella spp.	Moderate	High
Shigella spp.	Moderate	Moderate
Vibrio cholerae	Moderate	High
Legionella pneumophila	Moderate	Low
Staphylococcus aureus	Moderate	Moderate
Pseudomonas aeruginosa	Moderate	Moderate
Enterococcus spp.	Moderate	Moderate
Klebsiella spp.	Moderate	Low
Acinetobacter spp.	Moderate	Low

 Table 1. A comparative account for the prevalence of bacterial strains

the level of wastewater treatment. For example, wastewater from urban areas is typically more contaminated with bacteria than wastewater from rural areas. Wastewater from industrial areas may also be contaminated with higher levels of bacteria than wastewater from other sources.

The presence of these bacterial strains in wastewater can pose a serious threat to human health. If wastewater is not treated correctly, it can contaminate water sources, soil, and food, leading to the spread of disease. Additionally, antibiotic-resistant strains of these bacteria are becoming increasingly common, which makes them more challenging to treat.

It is important to take steps to reduce the contamination of wastewater with bacteria. This can be done by improving wastewater treatment practices, reducing the use of antibiotics, and promoting better sanitation practices.

1.2 Several Common Antibiotics Contribute to Bacterial Antibiotic Resistance, Including

- β-lactam antibiotics, such as penicillin, cephalosporins, and carbapenems, are widely used. These agents work by inhibiting the synthesis of bacterial cell walls. However, bacteria have developed mechanisms to resist β-lactam antibiotics, including producing β-lactamase enzymes that degrade these antibiotics¹³.
- Fluoroquinolones, like ciprofloxacin and levofloxacin, treat respiratory, urinary tract, and skin infections by inhibiting bacterial DNA replication. However, mutations in bacterial DNA topoisomerase enzymes have reduced their effectiveness¹⁴.
- Tetracyclines, such as tetracycline and doxycycline, are antibiotics used to treat various infections, including those affecting the respiratory system, urinary tract, and skin. They function by inhibiting bacterial protein synthesis. However, bacterial resistance has emerged through the development of tetracycline-resistant ribosomal proteins, reducing the effectiveness of these antibiotics¹⁵.
- Macrolides, including erythromycin and azithromycin, are antibiotics frequently used to treat respiratory, skin, and sexually transmitted infections. They function by inhibiting bacterial protein synthesis. However, some bacteria have developed mechanisms to modify their ribosomes, reducing their susceptibility to macrolides¹⁶.
- Aminoglycosides, including gentamicin and streptomycin, are antibiotics employed in treating severe infections such as pneumonia, meningitis, and bloodstream infections. They function by interfering with bacterial protein synthesis. Nevertheless, bacteria have evolved mechanisms to alter their ribosomes or utilise efflux pumps, reducing their susceptibility to aminoglycosides¹⁷.

The overuse and misuse of antibiotics have led to an increase in antibiotic-resistant bacteria. Unnecessary use or incorrect durations of antibiotic treatments provide opportunities for bacteria to develop resistance mechanisms. Furthermore, the application of antibiotics in agriculture and animal husbandry has also contributed to the dissemination of antibiotic-resistant bacteria¹⁸.

2. SOURCES OF ANTIBIOTICS IN WASTEWATER

The primary sources of antibiotics in wastewater include:

- Human waste: Antibiotics are excreted in urine and feces after being metabolised by the body.
- Agricultural runoff: Antibiotics in animal agriculture can enter wastewater through manure runoff and leaching from fields.
- Industrial discharges: Pharmaceutical manufacturing plants and other industries that use antibiotics in their processes can discharge wastewater containing these drugs¹⁹.

2.1 Here are Some Specific Examples of Heavy Metals that Have Been Shown to Contribute to ARB in Wastewater

- **Copper:** Copper can induce the production of ROS, disrupt cell membranes, and interfere with protein synthesis.
- Zinc: Zinc can promote horizontal gene transfer and induce stress responses in bacteria.
- Lead: Lead can disrupt DNA replication and repair, which can lead to mutations that confer antibiotic resistance.
- Mercury: Mercury can interfere with producing essential enzymes for antibiotic resistance²⁰.

2.2 Heavy Metals can Contribute to Developing Antibiotic-Resistant Bacteria (ARB) in Wastewater Through Several Mechanisms

- 2.2.1 How Heavy Metals Contribute to Antibiotic Resistance (ARB)
- 1. Co-selection: Heavy metals and antibiotics exert selective pressure on bacteria, favoring those resistant to both²¹.

2. Direct Induction

- Heavy metals increase reactive oxygen species (ROS), damaging DNA and leading to mutations that confer resistance.
- They disrupt cell membranes, hindering antibiotic entry.
- They interfere with protein synthesis, preventing antibiotic binding²².

3. Enhanced Horizontal Gene Transfer

- Heavy metals induce stress responses in bacteria, increasing the release of genetic material.
- They increase the permeability of bacterial cell membranes, facilitating gene transfer²³.

2.3 List of Antibiotic Resistance Genes (ARGs) that are of Primary Concern Worldwide and in India

2.3.1 Worldwide Concern

• blaCTX-M: This gene encodes β -lactamase enzymes that resist a wide range of β -lactam antibiotics, such

as penicillins, cephalosporins, and carbapenems.

- blaTEM: Another β-lactamase gene, blaTEM, is responsible for resistance to ampicillin and other penicillins.
- blaNDM encodes a carbapenemase enzyme that provides resistance to carbapenems, which are considered the last-resort antibiotics for treating multidrug-resistant infections.
- mecA: This gene encodes the mecA protein, which makes bacteria resistant to methicillin, a type of penicillin used to treat staphylococcal infections.
- vanA/vanB: These genes encode vancomycin resistance proteins, which make bacteria resistant to vancomycin, a last-resort antibiotic for treating Methicillin-Resistant Staphylococcus Aureus (MRSA) infections.

2.3.2 India-Specific Concern

In addition to the globally concerning ARGs, India faces specific challenges with the following genes:

- blaOXA-48: This gene encodes an oxacillinase enzyme that confers resistance to carbapenems, like blaNDM.
- tetA/tetB/tetC/tetD/tetE/tetG: These genes encode tetracycline resistance proteins, making bacteria resistant to tetracyclines, a commonly used antibiotic class.
- aac(3)-IV/aac(6')-Ib: These genes encode aminoglycoside resistance enzymes, making bacteria resistant to aminoglycosides, another frequently used antibiotic.
- sull/sul2: These genes encode sulfonamide resistance proteins, making bacteria resistant to sulfonamides, a group of antibiotics that inhibit bacterial growth.
- dfrA1/dfrA17: These genes encode trimethoprim resistance enzymes, making bacteria resistant to trimethoprim, an antibiotic often used with sulfonamides. The widespread presence of these Antibiotic-Resistant

Genes (ARGs) in India presence of these Antibiotic-Resistant Genes (ARGs) in India presents a substantial public health risk. It reduces the efficacy of antibiotics in treating infections, thereby increasing the likelihood of antimicrobial treatment failures.

Addressing antibiotic resistance (ARB) demands a comprehensive approach across healthcare, agriculture, and public health. Key strategies include:

- 1. Promote judicious antibiotic use: Overuse and misuse are major drivers of ARB. Educating healthcare professionals and the public about the proper use of antibiotics is crucial to reduce unnecessary consumption. This includes prescribing antibiotics only when necessary, ensuring the correct dosage and duration of treatment, and avoiding self-medication with antibiotics.
- 2. Enhancing infection prevention and control: Enforcing robust infection prevention and control protocols within healthcare environments can mitigate the spread of resistant bacteria and safeguard at-risk patients. This encompasses rigorous hand hygiene practices, the judicious application of personal protective equipment, effective disinfection of medical instruments and surfaces, and the timely isolation of infected individuals.
- 3. Investing in the research and development of new antibiotics and alternative therapies is essential. The

progression of developing new antibiotics has markedly decelerated in recent decades, necessitating substantial support for the innovation of novel antibiotics and alternative treatments. This includes exploring new antibiotic targets, developing combination therapies, and investigating bacteriophage therapies that employ viruses to target bacteria.

- 4. Enforce antibiotic regulations: Strict enforcement of regulations governing antibiotic distribution and manufacturing can help curb the misuse and proliferation of resistant bacteria. This includes regulating antibiotic sales over the counter, ensuring proper labeling and dosage instructions, and monitoring the production and distribution of antibiotics to prevent counterfeit or substandard products.
- 5. Promote public awareness: Raising public awareness about the ARB crisis can encourage responsible antibiotic use and support collective action to address this global threat. Public education campaigns should emphasize the importance of proper antibiotic use, the risks of self-medication, and the need to conserve antibiotics for future generations.
- 6. Promote responsible antibiotic use in agriculture: Antibiotic use in animal farming can lead to the spread of resistant bacteria. Promoting responsible antibiotic use in agriculture, such as using antibiotics only for therapeutic purposes and avoiding routine prophylactic use, can help reduce the burden of resistant bacteria.
- 7. Improve wastewater treatment: Wastewater serves as a reservoir for antibiotic-resistant bacteria. Upgrading wastewater treatment facilities to include advanced technologies can effectively remove antibiotics and resistant bacteria from wastewater before it is discharged into the environment.
- 8. Support global surveillance and collaboration: International collaboration and surveillance of ARB trends are essential to track the spread of resistance and develop effective countermeasures. Sharing data, expertise, and best practices across countries can help coordinate global efforts to combat ARB.
- 9. Advocate for alternative methods of disease prevention and treatment: Supporting the use of vaccines, probiotics, and other preventive measures can decrease dependence on antibiotics and limit the spread of resistance. Additionally, encouraging healthy practices such as hand washing, proper hygiene, and maintaining a strong immune system can help prevent infections initially.
- 10. Investing in education and training is essential. Educating healthcare professionals, farmers, veterinarians, and the public about antimicrobial resistance (AMR) is crucial for promoting responsible antibiotic use and preventing the spread of resistance. Comprehensive training programs and educational resources should be readily available to disseminate knowledge and encourage changes in behavior.

Combating ARB requires a concerted effort from

individuals, healthcare providers, policymakers, pharmaceutical companies, and the global community. By adopting a comprehensive and collaborative approach, we can mitigate the threat posed by antibiotic-resistant bacteria and protect human health and the environment for future generations.

2.4 Biotechnological Interventions are Vital in Fighting Antibiotic Resistance, Providing Promising Solutions to this Global Issue

Key interventions include

- 1. To address bacteria's resistance mechanisms, new antibiotics with novel mechanisms of action need to be developed. This includes investigating new targets for antibiotics, such as enzymes or cell wall components that are less likely to develop resistance.
- 2. Antibiotic modification: Modifying existing antibiotics to enhance their effectiveness against resistant bacteria is another promising approach. This can involve structural modifications to the antibiotic molecule, altering its binding affinity or stability, or combining it with other agents to overcome resistance mechanisms.
- 3. Bacteriophage therapy: Bacteriophages, viruses that specifically infect and lyse bacteria, present a potential alternative to conventional antibiotics. Phage therapy can be customized to target specific bacterial strains, including antibiotic-resistant ones.
- 4. Enzyme-based therapies: Enzymes can be engineered to degrade bacterial cell walls, disrupt bacterial metabolism, or neutralise bacterial toxins. They can be used as therapeutic agents or with antibiotics to enhance their efficacy.
- 5. Antimicrobial peptides (AMPs) are small molecules with broad-spectrum activity against bacteria, fungi, and viruses. They can be synthetically produced or derived from natural sources, providing potential alternatives to traditional antibiotics.
- 6. Gene editing: Gene editing techniques, such as CRISPR-Cas9, can modify bacterial genomes to eliminate resistance genes or introduce mechanisms that make bacteria more susceptible to antibiotics.
- 7. Biofilm Disruption: Biofilms are aggregates of bacteria encased in a self-generated extracellular matrix, which renders them resistant to antibiotics. Developing techniques to disrupt biofilms, such as employing enzymes or antimicrobial peptides, can improve the efficacy of antibiotic therapy.
- 8. Bacterial diagnostics: Rapid and accurate diagnostic tools for identifying antibiotic-resistant bacteria are essential for guiding appropriate antibiotic use and preventing the spread of resistance. Advanced molecular techniques, such as Polymerase Chain Reaction (PCR) and whole-genome sequencing, can quickly and precisely identify resistant bacteria.
- 9. Biomarker development: Biomarkers that predict the likelihood of antibiotic resistance development in bacteria are valuable tools for optimising antibiotic

treatment and preventing resistance spread. Identifying and validating biomarkers can inform the development of personalised treatment strategies.

10. Probiotic interventions: Probiotics, live microorganisms that confer health benefits when consumed, can modulate the gut microbiome, reducing the prevalence of antibiotic-resistant bacteria and improving overall gut health.

These biotechnological interventions promise

to combat ARB and preserve antibiotic effectiveness. By continuing to invest in research and development, we can harness the power of biotechnology to address this critical global health threat.

3. **DISCUSSION**

The manuscript comprehensively examines the issue of Antibiotic-Resistant Bacteria (ARB) in wastewater, highlighting its far-reaching consequences for human health, the environment, and various sectors. The authors emphasise the urgent need for a multifaceted approach to address this global challenge.

Key Points

- Wastewater as a Reservoir of ARB: Wastewater, a byproduct of human activities, serves as a reservoir for ARB, primarily due to the widespread use of antibiotics in human and veterinary medicine.
- Threat to Human Health: ARB in wastewater directly threatens human health by increasing the risk of infections that are difficult or impossible to treat with conventional antibiotics. This is particularly concerning for vulnerable populations.
- Environmental Impact: ARB in wastewater can contaminate water sources, soil, and food, disrupting microbial communities and potentially harming aquatic organisms.
- Broader Implications: The spread of ARB in wastewater affects agriculture, tourism, and global trade, threatening food safety, damaging reputations, and facilitating the spread of resistance.
- Addressing the Challenge: Effective wastewater treatment, environmental monitoring, and public health interventions are crucial to combat ARB in wastewater.

3.1 Some Scientific Hypotheses Related to ARB in Wastewater

- 1. The prevalence of ARB in wastewater is positively correlated with the use of antibiotics in the community. This hypothesis is supported by numerous studies showing a direct link between antibiotic use and the occurrence of ARB in wastewater. For example, a study published in the journal Environmental Science and Technology found that the levels of ARB in wastewater were significantly higher in areas with higher rates of antibiotic use.
- 2. Wastewater treatment plants are hotspots for the

horizontal transfer of Antibiotic Resistance Genes (ARGs).Horizontal gene transfer transfers genes between bacteria, even if they are not closely related. This process can lead to the spread of ARGs from resistant bacteria to susceptible bacteria. Wastewater treatment plants, which contain high concentrations of bacteria and ARGs, provide an ideal environment for horizontal gene transfer.

- 3. Discharging wastewater into the environment contributes to the spread of ARB in aquatic ecosystems. Wastewater can contaminate rivers, lakes, and other water bodies, introducing ARB and ARGs into these ecosystems. These resistant bacteria can then harm aquatic organisms and increase the risk of antibiotic resistance in human pathogens.
- 4. The use of antibiotics in agriculture contributes to the spread of ARB in wastewater. Animal manure is a significant source of ARB in wastewater. When manure is applied to land, it can contaminate surface water and groundwater. Additionally, animal waste can enter wastewater treatment plants through runoff.
- 5. Using personal care products containing antibiotics contributes to the spread of ARB in wastewater. Some personal care products, such as soaps, antibacterial lotions, and hand sanitizers, contain antibiotics. When used and rinsed down the drain, these antibiotics can enter wastewater.

These hypotheses provide a framework for understanding the complex relationships between ARB, wastewater, and the environment. Further research is needed to test these hypotheses and develop effective strategies for controlling the spread of ARB.

4. CONCLUSION

Waste wateris a source of Antibioitic-Resistant Bacteria(ARB). These bacteria as discussed in the article pose challenge for human health as well as environment.

The manuscript concludes with a call to action, emphasising the urgent need for a collaborative and holistic approach that integrates wastewater management, environmental monitoring.public health interventions, and multisectoral collaboration to effectively combat the threat posed by ARB in wastewater and safeguard human and environmental health.

REFERENCES

- Chahal C, van den Akker B, Young F, Franco C, Blackbeard J, et al. Pathogen and particle associations in wastewater. Adv Appl Microbiol. 2016;97:63-119. doi: 10.1016/bs.aambs.2016.08.001
- Gerba C.P. Environmentally transmitted pathogens. In Environ Microbiol, Elsevier, 2009;445-484. doi: 10.1016/B978-0-12-370519-8.00022-5
- 3. Mutuku C, Gazdag Z, Melegh S. Occurrence of antibiotics and bacterial resistance genes in wastewater: Resistance mechanisms and antimicrobial resistance control approaches.

World J Microbiol Biotechnol. 2022;38(9):152. doi: 10.1007/s11274-022-03334-0

- Zhang S, Li X, Wu J, Coin L, O'Brien J, Hai F, et al. Molecular methods for pathogenic bacteria detection and recent advances in wastewater analysis. Water (Basel). 2021;1(24):3551. doi: 10.3390/w13243551
- Silva JA, Wastewater treatment and reuse for sustainable water resources management: A systematic literature review. Sustainability. 2023;15(14):10940. doi: 10.3390/su151410940
- Hajare R, Labhasetwar P, Nagarnaik P. Evaluation of pathogen risks using QMRA to explore wastewater reuse options: A case study from New Delhi in India. Water Sci Technol. 2021;83(3): 543-555. doi: 10.2166/wst.2020.583
- Abia A.L.K, Ubomba-Jaswa E, Momba M.N.B. Riverbed sediments as reservoirs of multiple vibrio cholerae virulence-associated genes: A potential trigger for cholera outbreaks in developing countries. J Environ Public Health. 2017;2017:1-9. doi: 10.1155/2017/5646480
- 8. Guidelines for drinking-water quality: Fourth edition incorporating the first and second addenda [Internet]. Guidelines for drinking-water quality: Fourth edition incorporating the first and second addenda. 21 March 2022.
- 9. Baker KK, Simiyu S, Busienei P, Gutema FD, Okoth B, Agira J, et al. Protocol for the PATHOME study: A cohort study on urban societal development and the ecology of enteric disease transmission among infants, domestic animals and the environment. BMJ Open. 2023;13(11):e076067. doi: 10.1136/bmjopen-2023-076067
- Taneja N, Sharma M. Antimicrobial resistance in the environment. Indian J Med Res. 2019;149(2):119-128. doi: 10.4103/ijmr.IJMR_331_18
- Maramraj KK, Subbalakshmi G, Ali MS, Dikid T, Yadav R, Sodha SV, et al. Community-wide acute diarrheal disease outbreak associated with drinking contaminated water from shallow bore-wells in a tribal village, India, 2017. BMC Public Health. 2020;20(1):231. doi: 10.1186/s12889-020-8263-2
- Saha GK, Ganguly NK. Spread and endemicity of cholera in India: Factors beyond the numbers. J Infect Dis. 2021;224(Supplement_7):S710-S716. doi: 10.1093/infdis/jiab436
- Pandey N, Cascella M. Beta-lactam antibiotics. 2023 Jun 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing. 2025;PMID:31424895.
- Hooper DC, Jacoby GA. Topoisomerase inhibitors: Fluoroquinolone mechanisms of action and resistance. Cold Spring Harb Perspect Med. 2016;6(9):a025320. doi: 10.1101/cshperspect.a025320
- 15. Chopra I, Roberts M. Tetracycline antibiotics: Mode of action, applications, molecular biology, and epidemiology of bacterial resistance.

Microbiol Mol Biol Reviews. 2001;65(2):232-260. doi: 10.1128/MMBR.65.2.232-260.2001

- Patel PH, Hashmi MF. Macrolides. 2023 May 16. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing. 2025 Jan;PMID: 31855339.
- Krause KM, Serio AW, Kane TR, Connolly LE. Aminoglycosides: An overview. Cold Spring Harb Perspect Med. 2016;6(6):a027029. doi: 10.1101/cshperspect.a027029
- 18. Ventola CL. The antibiotic resistance crisis: Part 1: Causes and threats. PT 2015;40(4):277-283.
- Manyi-Loh C, Mamphweli S, Meyer E, Okoh A. Antibiotic use in agriculture and its consequential resistance in environmental sources: Potential public health implications. Molecules 2018;23(4):795. doi: 10.3390/molecules23040795
- Zhao F, Yu Q, Zhang XX. A mini-review of antibiotic resistance drivers in urban wastewater treatment plants: Environmental concentrations, mechanism and perspectives. Water (Basel) 2023;15(17):3165. doi: 10.3390/w15173165
- Pal C, Bengtsson-Palme J, Kristiansson E, Larsson DGJ. Co-Occurrence of resistance genes to antibiotics, biocides and metals reveals novel insights into their co-selection potential. BMC Genomics. 2015;16(1):964. doi: 10.1186/s12864-015-2153-5
- 22. Jaishankar M, Tseten T, Anbalagan N, Mathew BB, Beeregowda KN. Toxicity, mechanism and health effects of some heavy metals. Interdiscip Toxicol. 2014;7(2):60-72. doi: 10.2478/intox-2014-0009
- 23. Michaelis C. & Grohamann, E. Horizontal Gene Transfer of Antibiotic Resistance Genes in Biofilms. Antibiotics. 2023;12(2):328. doi: 10.3390/antibiotics12020328

CONTRIBUTORS

Dr Amit Patnaik is PhD (Molecular biology) from Ranchi University, Ranchi, in 2016. His area of interest is Cancer Biology, ARBs, Bioinstrumentation and Infection disease, and he is presently working as an Assistant Professor (Biotechnology) at the Department of Biotechnology, NIST University, Berhampur. He has contributed to generating the idea and compilation of the review and shaping the manuscript to its current state.

Dr Soumya Basu is a PhD from VIT, Vellore, in 2023. His areas of interest are ARBs, Microbiology, and Bioinformatics. He is currently an Assistant Professor (Biotechnology) in the Department of Biotechnology at NIST University, Berhampur. He has contributed to the manuscript preparation and editing of the manuscript.

Dr L. Ponoop Prasad Patro is a PhD from IIT, Hyderabad, in 2023. His area of interest is Bioinformatics, and he is currently an Assistant Professor (Biotechnology) at the Department of Biotechnology, NIST University, Berhampur.

He has contributed to the manuscript preparation and editing of the manuscript.

Dr Duryodhan Sahu is a PhD from the National Chiao-Tung University, Taiwan, in 2010. His area of interest is Chemical analysis, and he is presently working as an Associate Professor (Chemistry) at NIST University, Institute Park, Pallur Hills, Berhampur, Odisha 761008.

He conceived the study and contributed to manuscript preparation.