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Diarrheic shellfish poisoning due to toxic mussel consumption: first recorded outbreak in Greece

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Abstract

During the week 14-20\textsuperscript{th} January 2000, 120 people visited the Emergency Departments of Thessaloniki (Northern Greece) hospitals complaining of acute gastrointestinal illness after eating mussels (\textit{Mytilus galloprovincialis}). The symptoms indicated diarrhoeic shellfish poisoning and the toxicity of mussels harvested from Thermaikos Gulf in Thessaloniki during the outbreak, was investigated using mouse bioassays. The bioassays revealed toxicity to mice by the mussel samples, while high numbers of toxic algae \textit{Dinophysis acuminata} were identified in water samples from Thermaikos Gulf. Harvesting of mussels was immediately suspended and a monitoring programme for algal blooms was established from then onwards. During a follow-up of the mussels' toxicity from January 2000 through January 2005, two more mussel samples were found positive for DSP, one harvested in March 2001 from the area of the outbreak (Thermaikos Gulf) and one harvested in January 2001 from North-western Greece (Amvrakikos Gulf). However, no sporadic cases or outbreaks were reported during this period.

Keywords: Diarrheic Shellfish Poisoning, Greece, mussels, algal toxins, Dinophysis, outbreak
Introduction

Diarrheic shellfish poisoning (DSP) is a toxic syndrome caused by the ingestion of shellfish contaminated with algal toxins produced by marine dinoflagellates belonging to Dinophysis spp. (D. fortii, D. acuta, D. acuminata, D. caudate, D. hastate, D. mitra, D. rotundata, D. tripus) (Hallegraef 1997; Yasumoto 2000) and Prorocentrum spp. (P. lima, P. maculosum, P. concavum and P. hoffmianum) (Van Dolah 2000). The DSP toxins belong to a group of fat-soluble polyether compounds, including Okadaic acid (OA) and the closely related Dinophysistoxins (DTX). Gastrointestinal effects have only been proven for OA, DTX-1 and DTX-3 (Murata et al. 1982; Rossini 2000; Vale and Sampayo 2002). DTXs are lipophilic and accumulate in the fatty tissue of shellfish. The toxin profiles in shellfish display considerable seasonal and geographical variation (Yasumoto et al. 1985; Sechet et al. 1990). Ordinary cooking processes do not destroy DSP toxins (Gestal – Otero 2000).

DSP symptoms include diarrhoea, nausea, vomiting, abdominal pain and chills, which manifest within 30 min to a few hours after consumption of contaminated shellfish and persist for 3 to 4 days (Aune and Yndestad 1993). Although short-term effects are relatively mild, long-term effects are more severe and chronic exposure may promote tumour formation in the digestive system (Hallegraef 1997; Rossini 2000). OA and DTX1 are potent inhibitors of protein phosphatases and this mode of action may be linked to the observed diarrhoea, degenerative changes in the absorptive epithelium of the small intestine and tumour development (Hallegraef 1997).
DSP was first reported in the Netherlands in the 1960s and in Japan in the late 1970s (Kat 1985; Yasumoto et al. 1980). Since then it has been recorded in several European countries including France (van Egmond et al. 1993), Norway (Rossebo et al. 1973; Underdal et al. 1985, Torgersen et al. 2005), Sweden (Krogh et al. 1985), Spain (Campos et al. 1982; Fernández et al. 1996), Italy (Viviani et al. 1995; Ciminiello et al. 1997), Portugal (Vale and Sampayo 1999), Belgium (De Schrijver et al. 2002) former USSR (Konovalova 1993). There are also reports from Japan (Yasumoto et al. 1984; Yasumoto et al. 1985; Yasumoto 2000; Kawabata 1989), India (Karunasagar et al. 1989), Australia, New Zealand, Thailand, North and South America (Hallegraef 1997; Scoging 1998; Gestal – Otero 2000). From the available literature it is concluded that DSP or the presence of DSP toxins in mussels, is increasingly reported particularly in Europe (Table I). The increased reporting may be the result of increasing knowledge and awareness about toxic shellfish poisonings (DSP, ASP and PSP) and the implementation of surveillance/monitoring programmes. Also, it has to be emphasized that toxin producing algae and toxic mollusks are reported from new areas, but well documented cases in Europe are rare and this may be attributed to under-diagnosis and/or underreporting. The shellfish most frequently implicated in DSP are mussels, but it has also been reported from scallops, clams, cockles, oysters and crabs (Gestal – Otero 2000; Vale and Sampayo 2002; Jørgensen et al. 2005; Torgersen et al. 2005). In the present paper the first DSP outbreak in Greece is reported, together with the laboratory findings from mussel samples collected during the outbreak and the subsequent four years after the outbreak.
1 **Materials and methods**

2 *The DSP outbreak investigation*

3 During the week 14-20\textsuperscript{th} January, 2000, one hundred and twenty people of both sexes, aged from 8 to 70 years old, visited the Emergency Departments of the hospitals in the city of Thessaloniki (Northern Greece), suffering from acute non-febrile gastro-enteritis (Table II). The predominant symptoms reported by the patients were diarrhea, nausea, vomiting, abdominal cramps and chills, which persisted for more than 24 h. All patients reported onset of symptoms within 30 min to 10 h after consuming a mussel meal (deep fried mussels, poached in cheese and tomato hot sauce, mussel pilaf and cooked mussel salads) in various establishments (restaurants, taverns, homes) within the Greater Thessaloniki area. All the hospitalized patients recovered completely within 12 to 36 h after the administration (i.v) of saline solution and were completely asymptomatic upon exit from the hospital. [Insert Table II about here]

4 Fecal samples from the hospitalised patients were examined for routine bacterial, viral and parasitic agents causing non febrile gastroenteritis, but they were found negative. The common history of the patients (reporting a mussels’ meal), based on relative questionnaires, combined with the clinical and laboratory findings were indicative of diarrheic shellfish poisoning, thus the Veterinary Authorities were immediately notified and consumption of mussels was banned until further notice. Mussel dishes are very popular in the coastal areas of Greece, especially in the vicinity of Thessaloniki and accordingly it was estimated that the actual number of people infected was actually much larger than the 120 cases recorded at the hospitals’ admissions desks. Hence, the estimates were for a few hundreds of people infected, who either visited privately a...
general practitioner or asked no medical assistance because their symptoms soon
subsided.

The patients who had prepared their meals at home reported purchase of fresh mussels
from seafood retails, supermarkets and open markets in the Thessaloniki greater area
and similar retail sources were reported by the restaurant and tavern owners. The fresh
mussels (Mytilus galloprovincialis) sold in the markets of Thessaloniki area and in most
markets in Northern and Northwestern Greece are harvested from aqua cultures located
into the Thermaikos Gulf (Figure 1).

The Veterinary and Sea Biology authorities reported numbers of dinoflagellates ranging
from $3 \times 10^4$ to $5.4 \times 10^4$ cells/L of the toxic genus Dinophysis spp. in the seawater samples
from Thermaikos Gulf, and specifically of the species D. acuminata and D. sacculus
(Koukaras and Nikolaidis 2002). No other episodes either of sporadic cases or outbreaks
associated with consumption of mussels exposed to toxin-producing Dinoflagellates of the
DSP type have been reported for the following four years, although the presence of toxic
Dinophysis acuminata was reported again in Thermaikos Gulf in March – May 2001
(Koukaras and Nikolaidis 2002). However, suspension of harvesting and withdrawal of
mussels from the market are being applied sporadically in Thermaikos Gulf, whenever
algal blooms are detected during the phytoplankton monitoring program, which has been
established after the outbreak. An algal bloom is a rapid increase in the population of
phytoplankton algae in an aquatic system. The appearance of Dinophysis, even at low
densities such as 200 cells per litre, can cause already a toxification of shellfish that is
enough to affect humans (Van Egmond et al. 2004). According to the Greek Veterinary
and Sea Biology authorities, seafood harvesting is suspended when toxic dinoflagellate counts are higher than 200 cells/L.

4 The mussel toxicity investigation

Collection of mussel samples

From January 2000 to January 2005, 36 batches (500 g each) of fresh mussels were examined for DSP toxins contamination. The mussel samples (species *Mytilus galloprovincialis*) were randomly collected from local seafood markets. Twenty samples were collected from Thermaikos Gulf (Halastra) in Thessaloniki (Northern Greece) and sixteen samples from Amvrakikos Gulf (Preveza) (Northwestern Greece) (Figure 1).

[Insert Figure 1 about here] Two out of the 36 samples were sent to the Food Microbiology Unit of the Microbiology Department; University of Ioannina from colleagues at the Hospital for Infectious Diseases in Thessaloniki during the DSP outbreak. These samples were harvested from the Halastra area of Thermaikos gulf at the 20 January 2000. Samples after April 2001 until January 2005 were collected every 3 months. All fresh mussel samples forwarded to our lab were deep-frozen (-30°C) immediately after collection and were transported by airplane (flight duration 40 min) in well insulated boxes to the Food Microbiology Unit, within less than 24 hours after collection and upon arrival were stored at -30°C until testing. The samples were tested within 7 days time after their arrival in our laboratory. The samples were defrosted at room temperature and were thoroughly cleaned under a stream of tap water after external materials were brushed off the shells. From each sample, 200 g of flesh was homogenized in a blending mixer and a portion of 100 g was weighed using an Ohaus model 1500D balance (Ohaus Co, P.O. Box 2033 19A Chapin Road Pine Brook, NJ 07058) prior to extraction.
Extraction of DSP toxins

The extraction of DSP toxins was performed following the method validated by the Marine Laboratory, Aberdeen, UK, which is the EU designated UK National Reference Laboratory (NRL) for Marine Biotoxins. The method is that of Yasumoto et al (Yasumoto et al. 1984) with slight modifications. A portion of 100 g of homogenized mussel flesh was suspended three times and thoroughly mixed with 100 ml of acetone (Scharlau, Analar grade) at room temperature. The aliquots were centrifuged at 3000 rpm for 10 min in a Sorvall GLC-4 desktop centrifuge and the supernatants were collected and pooled. Acetone was removed by rotary evaporation for 1h at 60°C or until all trace of acetone had gone. An Eyela type N rotary evaporator (Eyela Co, 3-3-4 Honcho Nihonbashi, Chuo-ku, Tokyo 103-0023, Japan) was used. The remaining aqueous-lipid extract was separated with diethyl ether (Scharlau, Analar grade), backwashed with a small volume of water and dried by rotary evaporation at 65°C for 2 to 4 h. The remaining material was suspended in 4 ml of 1% Tween 60 (Merck) aqueous solution.

Mouse bioassay

BALB-C strain white mice weighting 19 to 21 g each were used for the mouse bioassay. The mice were weighed prior to intra-peritoneal injection of 1ml of the mussel extract. Three mice were used for each sample. All injected mice and controls were monitored for a period of at least 24 h after injection. Initially the mice were observed constantly for the first 6 h and from then every 1 h for the remaining 18 h. During the 24 h monitoring any behavioral changes or symptoms were recorded in detail. When no typical symptoms of DSP intoxication were observed after 24 h, the mice were monitored for an additional 24 h period. The symptoms that were characterized as typical of DSP intoxication were initial apathy, general weakness, difficulty in movement, spasms, contractions, bluish skin
coloration and respiratory distress and death. According to the Decision 2002/225/EC, death of two out of three mice within 24 hours after inoculation into each of them of an extract equivalent to 5 g of hepatopancreas or 25 g whole body should be considered as a positive result for the presence of one or more of the toxins mentioned, when a mouse bioassay is utilized as a screening method.

Results and discussion

During this investigation positive mouse bioassay results were obtained in 4 out of 36 samples tested. Specifically, 3 samples out of 9 collected from the area of Halastra within a two-year period from the onset of the DSP outbreak were found positive by the mouse bioassay method. The two samples collected during the outbreak were toxic resulting in death of mice within 85-90 min after the intra-peritoneal injection. The third positive sample harvested from the area of Halastra was collected 15 months after the outbreak when the mussel withdrawal was recalled. However, no sporadic cases or outbreak due to DSP or similar gastrointestinal illness in humans were recorded during the period the DSP positive sample was collected.

The fourth positive sample was harvested from the Amvrakikos Gulf in Northwestern Greece, where no positive or suspect DSP cases have ever been recorded. Amvrakikos Gulf is the nearest to Ioannina and like Thermaikos, it is shallow, calm, warm and thought to be the most polluted gulf in the Ionian Sea, which is part of the Adriatic Sea, where there are frequent reports for toxic blooms (Boni et al. 1990; Fatorruso et al. 1992; Draisci 1995; Viviani et al. 1995; Ciminiello et al. 1997; 1998; Caroppo et al. 2001; Pavela – Vranic et al. 2002). Also, it should be noted that the mice injected with the extract of the Amvrakikos sample, in addition to the typical DSP intoxication symptoms, exhibited a
marked hypersensitivity 2 h prior to death, together with convulsions. The symptoms of
the mice following intraperitoneal injection are presented in Table III. [Insert Table III
about here]

There are a number of studies from different countries concerning DSP outbreaks,
sporadic cases or detection of toxins in a variety of seafood (Table I). The DSP outbreak
described in this paper is the first recorded in Greece and it was classified as a diarrheic
shellfish poisoning, based on clinical manifestations characteristic for DSP, the common
history of all patients reporting consumption of mussels, the absence of any known
pathogen in fecal and blood samples from all hospitalized patients, no detection of
antibodies to known pathogens, the subsequent analysis of mussels collected during the
outbreak and the detection of *Dinophysis acuminata* in the water of Thermaikos Gulf. The
actual number of the people affected cannot be precisely estimated, due to lack of
sufficient data. However, the number of 120 people needing urgent medical care within a
period of less than 7 days indicates a foodborne outbreak, of the group of seafood-borne
emerging diseases, the first recorded in Greece. . [Insert Table I about here]

The mouse bioassays performed during the outbreak are indicative of the presence of
lipophilic toxins. This finding combined with the increased concentration of *D. acuminata*
(Koukaras and Nikolaidis 2002), which is the most common DSP producing species in
Europe (Kumagai *et al.* 1996; Morono *et al.* 2002), indicates okadaic acid and / or DTX as
the potential cause of this outbreak. It should be noted that the third positive sample from
Thermaikos Gulf was collected in March 2001 when, according to other researchers
(Koukaras and Nikolaidis 2002) an increased number of *Dinophysis* spp. was observed.
Furthermore, the predominant DSP toxins detected in European mussels and especially
in the mussels of the Adriatic Sea are okadaic acid and DTX – 2 (Draisci 1995; Pavela – Vranic et al. 2002). In a recent publication (Ciminiello et al. 2005) concerning investigation of the toxin profile of Greek mussels M. galloprovincialis by Liquid Chromatography – Mass Spectrometry, the presence of okadaic acid only (at levels 0.10 – 0.20 µg/g) is confirmed. The hypersensitivity and the convulsions observed in mice injected with the extract of the positive sample form Amvrakikos gulf, is indicative of the simultaneous presence of an unknown lipophilic toxin along with okadaic acid and / or DTX – 2. Jumping before death, convulsions and short survival time is observed when mice are injected i.p. with yessotoxin (Ciminiello et al. 1997). Although the presence of yessotoxin in mussels has been reported in neighboring areas, it is quite improbable that yessotoxins are the cause of these symptoms. Yessotoxins are poorly soluble in diethyl ether and therefore probably could not co–elute with the other toxins (Ciminiello et al. 1997). Another possible explanation for the observed symptoms in this sample is that it contained azaspiracid. After intraperitoneal injection of azaspiracid, mice exhibit respiratory difficulties, spasms, paralysis of the limbs and death (Ito et al. 2000). Still, the presence of azaspiracid has not been proven by analytical methods in shellfish harvested from the Mediterranean Sea (James et al. 2004).

Detection of DSP is routinely based on mouse bioassays, HPLC methods and immunoassays. It is generally acknowledged that biological tests suffer from considerable variability and lack of sensitivity and because of increasing opposition to animal testing many efforts have been made to detect DSP toxins by HPLC based methods. However, the lack of availability of analytical standards and Certified Reference materials for all of the DSP toxins currently precludes the sole use of chemical methods in routine monitoring programmes. Additionally, the maximum level for DSP toxins set by regulatory authorities
varies considerably from country to country. In general, levels of DSP toxins greater than
200 ng/g in shellfish are considered dangerous for human consumption (Hallegraef, 1997). The potential public health risks and the expanding geographical distribution of the causative dinoflagellates have resulted in the issuing by the Commission of the European Countries of the Decision 2002/225/EC of the 15 May 2002, which is an amendment of the Council directive 91/492/EEC, which states that the maximum level of okadaic acid, dinophysistoxins and pectenotoxins together, in bivalves intended for human consumption (the whole body or any part edible separately) shall be 160 µg of okadaic acid equivalents/kg.

To date, control measures to protect human health against DSP contaminated seafood involve both biological and chemical procedures. At the time of the outbreak in the Food Microbiology Unit we were able to apply only the biological method (mouse bioassay).

The accumulation of algal toxins is one of the most critical problems in bivalve aquaculture. Amongst the three most important categories of shellfish poisoning (amnesic, diarrhoeic, paralytic), DSP is the least severe causing only gastrointestinal symptoms. However, the accumulation of toxic algae in many bivalve producing areas has a great economic impact as their appearance leads to the implementation of long term bans on shellfish harvest, which is happening frequently at Thermaikos Gulf aquacultures since the reported outbreak. The factors influencing the growth of the microalgal population include: a) changes in water temperature favoring encysting or excysting of dinoflagellates, b) decreased water salinity, c) increased concentrations of organic substances, d) extended duration of sunlight and e) calm waters (Gestal – Otero 2000; Caroppo et al. 2001).
All these factors are present in Thermaikos Gulf (North Aegean Sea), especially in the Halastra site, where the constantly calm and warm waters favor mussel cultures. However, the outfall of three large rivers in the gulf (Gallikos, Loudias and Axios), the waste effluents of Greater Thessaloniki area (second largest city of Greece) and the drainage of the plain of Central Macedonia (a plain with intensive agricultural activities), make Thermaikos Gulf, ideal aquatic environment for the growth of microalgal population and possible toxin production by dinoflagellates. Similar conditions exist at Amvrakikos Gulf (North Ionian Sea), which is part of the South-central Adriatic Sea. Red tide blooms are known to occur in the central Adriatic Sea since the 80’s (Boni et al. 1990). However, toxic blooms associated with shellfish intoxication are becoming more frequent during the last decade in this geographic area (Fattorusso et al. 1992; Viviani et al. 1995; Draisci et al. 1995; Ciminiello et al. 1997; Ciminiello et al. 1998; Draisci et al. 1999; Caroppo et al. 2001; Pavela – Vranic et al. 2002).

DSP intoxication is still an under reported illness, which is attracting interest after notification of outbreaks (Gestal – Otero 2000; Yasumoto 1985; Vale and Sampayo 2002). Therefore knowledge of its existence along with the recently increasing reports of red tide blooms spreading from Europe to America to Australia should trigger a constant awareness for this emerging seafood zoonotic disease.

Acknowledgments

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References


during a toxic episode caused by *Dinophysis acuminata*. Aquatic Toxicology 62: 269 – 280.


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<th>Year/month</th>
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<td>1984 October</td>
<td>Sweden&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Several hundred</td>
<td>Mussels</td>
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<td>1984 –1985</td>
<td>Norway&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>1990 August</td>
<td>Canada&lt;sup&gt;b&lt;/sup&gt;</td>
<td>16</td>
<td>Mussels</td>
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<td>1990</td>
<td>France&lt;sup&gt;c&lt;/sup&gt;</td>
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<td>Mussels imported from Denmark</td>
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<td>1990</td>
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<td>(Crassostrea virginica)</td>
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<td>Mussels</td>
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<td>Ireland&lt;sup&gt;e&lt;/sup&gt;</td>
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<td>Italy&lt;sup&gt;f&lt;/sup&gt;</td>
<td>NR</td>
<td>Mussels (M. galloprovincialis)</td>
<td>DTX–1: 0–0.32 µg/100g</td>
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<td>Portugal&lt;sup&gt;g&lt;/sup&gt;</td>
<td>18</td>
<td>Donax clams (Donax trunculus)</td>
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<td>UK&lt;sup&gt;h&lt;/sup&gt;</td>
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<td>49</td>
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<td>&gt;120</td>
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<td>China</td>
<td>NR</td>
<td>Clams, Scallops Gastropods</td>
<td>OA: 3.2-17.5 µg/100g</td>
</tr>
<tr>
<td>2003 December</td>
<td>Australia</td>
<td>NR</td>
<td>Oysters</td>
<td>DSTs total: 0.253</td>
</tr>
</tbody>
</table>

Note: OA = Octachloropentaene; DTX = Dieldrin; DST = Dieldrin; ND = Not detected.
|
|----------------|-------------|------------|--------------|----------------|
| Date           | Location    | Strain     | Toxin        | Value          |
| 2004 April     | Chile        | Mytilus chilensis | DTX-1:19 µg/100 g | NR=Not Reported, ND=Not Determined, OA= Okadaic acid, DTX = Dinophysisotoxin, DSTs= Diarrhetic Shellfish Toxins |

Aune and Yndestad 1993.
Carmody et al. 1996
Draisci et al. 1995.
Vale and Sampayo 1999.
Scoging and Bahl 1998.
Ramstad et al. 2001.
Mozetic and Bozic 2001.
Moroño et al. 2003.
Papadopoulou et al. (present study)
Vale and Sampayo 2002.
De Schrijver et al. 2002.
Torgersen et al. 2005
Vale et al. 2003
"Ciminiello et al. 2005

\(^\text{v}\) Wu et al. 2005

\(^\text{w}\) Madigan et al. 2005

\(^\text{x}\) Garcia et al. 2004.
Table II.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Values</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Demographics</strong></td>
<td></td>
</tr>
<tr>
<td>Male No. (%)</td>
<td>73 (60.8)</td>
</tr>
<tr>
<td>Female No. (%)</td>
<td>47 (39.2)</td>
</tr>
<tr>
<td>Mean age in years (range)</td>
<td>35 (8-70)</td>
</tr>
<tr>
<td><strong>Clinical characteristics</strong></td>
<td></td>
</tr>
<tr>
<td>Mean duration of symptoms in h (range)</td>
<td>5 (0.5-10)</td>
</tr>
<tr>
<td>No. (%) of patients with DSP symptoms seeking Hospital assistance</td>
<td>120 (100)</td>
</tr>
<tr>
<td>Estimated No. of patients with DSP not seeking medical assistance</td>
<td>&gt;500</td>
</tr>
<tr>
<td><strong>Laboratory tests</strong></td>
<td></td>
</tr>
<tr>
<td>No. of patients/no of faecal samples studied</td>
<td>120/120</td>
</tr>
<tr>
<td>No. of mussels’ samples bought in the same vendors as the cases during the onset of the outbreak</td>
<td>2</td>
</tr>
<tr>
<td>No. of unconsumed mussels (leftovers) tested</td>
<td>None</td>
</tr>
<tr>
<td>No. of mussels’ samples bought in the same market as the cases after the end of the outbreak</td>
<td>18</td>
</tr>
</tbody>
</table>
# TABLE III.

<table>
<thead>
<tr>
<th>Sampling Date</th>
<th>Place</th>
<th>Symptoms observed</th>
<th>Median Mouse survival Time (number of mice dead/number of mice tested)</th>
<th>DSP toxins Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>15/1/2000</td>
<td>Thermaikos Gulf</td>
<td>Apathy, weakness, difficulty in movement, respiratory distress, spastic contractions just before death</td>
<td>1 h 25 min (3/3)</td>
<td>Positive</td>
</tr>
<tr>
<td>19/1/2000</td>
<td>Thermaikos Gulf</td>
<td>Apathy, weakness, difficulty in movement, respiratory distress, spastic contractions just before death</td>
<td>1 h 30 min (3/3)</td>
<td>Positive</td>
</tr>
<tr>
<td>15/4/2000</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h (0/3)</td>
<td>Negative</td>
</tr>
<tr>
<td>6/12/2000</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h (0/3)</td>
<td>Negative</td>
</tr>
<tr>
<td>19/1/2001</td>
<td>Amvrakikos gulf</td>
<td>Apathy, weakness, difficulty in movement, hypersensitivity, respiratory distress</td>
<td>9 h (3/3)</td>
<td>Positive</td>
</tr>
<tr>
<td>22/2/2001</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h (0/3)</td>
<td>Negative</td>
</tr>
<tr>
<td>23/3/2001</td>
<td>Thermaikos Gulf</td>
<td>Apathy, weakness, difficulty in movement, respiratory distress</td>
<td>5 h (3/3)</td>
<td>Positive</td>
</tr>
<tr>
<td>10/9/2001</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h (0/3)</td>
<td>Negative</td>
</tr>
<tr>
<td>20/12/2001</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h (0/3)</td>
<td>Negative</td>
</tr>
<tr>
<td>Date</td>
<td>Location</td>
<td>Symptoms</td>
<td>Duration</td>
<td>Test Results</td>
</tr>
<tr>
<td>--------------</td>
<td>----------------</td>
<td>----------------</td>
<td>----------</td>
<td>--------------</td>
</tr>
<tr>
<td>15/4/2002</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h</td>
<td>(0/3)</td>
</tr>
<tr>
<td>20/7/2002-20/7/2005</td>
<td>Thermaikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h</td>
<td>(0/3)</td>
</tr>
<tr>
<td>20/7/2005</td>
<td>Amvrakikos Gulf</td>
<td>No symptoms</td>
<td>&gt; 48 h</td>
<td>(0/3)</td>
</tr>
</tbody>
</table>