

Minireview Article

Rotavirus in Food and Water in Latin American.

ABSTRACT

Rotavirus is considered a major public health problem worldwide because many children, adults, and animals die from gastroenteritis due to rotavirus; rotavirus contamination follows the fecal/oral route, and it is well supported that infection can also be achieved by consuming food and water that is contaminated with rotavirus. Research has shown that, in Latin American countries, unusual emerging strains of rotavirus are occurring in children and adults with gastroenteritis; which contain in their sequence genes from rotavirus genotypes detected in animals; Therefore, researchers consider it a virus with zoonotic potential. In the Latin American region, many farm animals and other wild animals share drinking water resources with the inhabitants, which proves to be an important vehicle for the transmission of rotavirus. Studies on the molecular characterization of rotavirus strains detected in food and water provide new insights into possible rotavirus genetic rearrangements and zoonoses. The emergence of strains derived from interspecies transmission has implicated and inspired the study of different vaccine strategies.

KEYWORDS: Rotavirus, food, waters, genotype.

INTRODUCTION

Foodborne diseases are currently a major public health problem; It is estimated that the consumption of contaminated food is responsible for 600 million cases of foodborne illness and approximately 420,000 deaths [1]. It is one of the main causes of infections due to water consumption, with 1,700 million cases registered each year [2], and 842,000 deaths of people [3]. Rotaviruses (RV) are the most important cause of childhood gastroenteritis worldwide, approximately 258 million cases of diarrhea occur worldwide in children under five years of age, which are attributed to RVs [4]. Between 2013 and 2017, it is estimated that 122,000 to 215,000 children die from diarrhea due to RVs annually [4]. RV is an endemic pathogen in many regions of the world [5]. It has been shown to cause deaths in mammals and birds [6]. The combination of high viral concentrations in environmental waters, RV's low infective dose required for infection, and its ability to remain stable and persist in the environment, has made it a successful agent that can remain in the aquatic environment, producing bad results for the health of the population by contaminating food [7]. In addition, it has been shown that it is an agent that has the capacity to produce many mutations in the genome and genetic rearrangements, for which research has shown that it is

considered to have zoonotic potential, which leads to the need to maintain molecular surveillance of RV in the continent [8,9].

RV is classified as a genus of the Reoviridae family; it is a naked virus, and it has a segmented genome [10]. It belongs to group A; antigenically RVs are classified into serogroups, subgroups, and serotypes. To date, 8 serogroups are known, defined by the epitopes present in the VP6 protein, each of which has been assigned a letter: groups A, B, C and H have been isolated both in humans and in animals, while groups D, E, F and G have only been isolated in animals [6]. Most RV infections are caused by group A RV [10]. Serogroup A is typically associated with diarrhea in people and young animals [10]. The VP6 protein is the predominant group antigen, constituting 51% of the virion [10].

Currently, 32 genotypes of G (VP7) and 47 genotypes of P (VP4) respectively are known [11]. Recognizing genetic relationships between human and animal strains has been made possible by whole genome sequence analysis of RVs [6, 12].

ROTA VIRUS INFECTION

RV infection follows the fecal-oral route and also through contaminated food and water [10]. RVs are excreted in high concentrations in the feces of infected individuals, which are routinely discharged into the environment [8]. High concentrations of RV have been found in wastewater, even after secondary wastewater treatment that is only partially efficient in removing viral agents [13]. Studies have shown that the respiratory tract is also involved, as is the case with influenza and measles viruses [14]. The detection of RV in drinking water for human consumption [15, 16], contaminated water, swimming pools [17, 18], in food [19, 20] and in contaminated objects, is well documented [14]. This virus is very stable in the environment, being able to survive for long periods of time [10, 14].

Other observations that suggest environmental contamination as a source of infection are: the persistence of infections in day care centers and the high frequency of nosocomial infections in RVs [21].

There are reports in Latin America and the world on the role of animals as a source of infectious RVs for humans, which consider RVs as a possible zoonotic potential [6, 8, 9, 22].

The spectrum of RV infection varies from being asymptomatic, through mild-moderate clinical presentation, to producing profuse, watery diarrhea that can cause dehydration and death. After an incubation period of 1 to 3 days, the picture begins abruptly with vomiting and fever, followed by profuse watery diarrhea that leads to dehydration; the temperature drops rapidly, vomiting subsides within 24 to 48 hours, and diarrhea in 2 to 7 days. There is passive immunity, which comes via the placenta and by breastfeeding [10]; occasionally, fatal gastroenteritis occurs, because dehydration is not treated on time [1,10].

EPIDEMIOLOGICAL CHARACTERISTICS OF ROTAVIRUSES

Knowledge of the epidemiology of RV is essential for the control of this disease, especially since it has been observed that it presents differences between developed and developing countries, as well as between temperate and tropical regions [23]. These differences could be associated with risk factors that are not yet well established but have been linked to socioeconomic status and home overcrowding (23). RV diarrhea is much more severe in populations of low socioeconomic status; most RV deaths occur in less developed countries [23, 24]. RV transmission is mainly fecal-oral or/through ingestion of food and water that has been contaminated with animal and/or human waste [20, 25]. It has been identified that in poorer countries, many of them in Latin America, the appearance of unusual emerging genotypes of RVs is occurring in children and adults with gastroenteritis; which harbor in their sequence genes from RV genotypes detected in animals; Therefore, RV is considered to have zoonotic potential [8, 24]. Studies have shown that in Latin America many farm animals and other wild animals share drinking water resources with the inhabitants, which could be an important vehicle for RV transmission [8, 24]. In recent decades, this agent was responsible for 3.1% of foodborne outbreaks in Brazil [26]. Enteric viruses, such as RV, can be used as indicators of environmental contamination in the food handling process, and evaluate the sanitary quality of the water used in these procedures [27]. Thus, the spread of these pathogens can occur in food handling environments, mainly through food handlers or contaminated water [18,19, 20].

Some viruses can be resistant to cleaning and disinfection processes and can serve as a source of cross-contamination in commercial and domestic settings [13]; RVs exist extracellularly as small, non-enveloped virions; they are devoid of superficial lipid bilayers that form an envelope, while the outer protein layers, the so-called capsids, provide them with greater resistance to environmental conditions, disinfectants, and common sanitizers [28].

It is important to be aware that RV has a seasonal behavior that influences the age at which the first RV infection occurs [23]. In tropical countries, the age at which the first infection appears is very early (< 6 months of age), because all children born are exposed to the virus, regardless of date of birth; while, in countries with marked seasonality or temperate countries, the first infections occur at later ages (9-15 months of age) [23, 29].

ROTAVIRUS VACCINE

The following vaccines are approved against RV: RotaTeq®, Rotarix® Rotavac® and Rotasiil® [30]. In 2015, 1.31 million children died due to diarrhea, of which 500,000.00 were children under five years of age. From 2005 to 2015, the number of cases of diarrhea in children under five years of age decreased by approximately 10%. Deaths from diarrhea decreased by about 34% and deaths due to RV decreased by 44% [31]. The World Health Organization (WHO) recommends maintaining RV vaccines in all national immunization programs worldwide [32]. Currently, 19 countries in Latin America and the Caribbean include RV vaccines in their national immunization programs [33]. To date, more than one hundred countries in the world have introduced RV vaccination programs [34].

ROTAVIRUS DETECTED IN FOOD AND WATER IN LATIN AMERICA

According to the WHO, after the development and application of the Rotarix® vaccine, it should be noted that the figures for deaths in children under five years of age have decreased from 500,000.00 to 215,000.00 deaths per year, between 2013 and 2016, worldwide [33]. In Latin American countries, diarrheal diseases continue to be one of the most important public health problems [35]. An investigation published by Santos et al. [36] illustrates that in low- and middle-income countries in Latin America, the early and widespread use of the RV vaccine has resulted in a significant reduction in deaths and hospitalizations due to RV. Meta-analysis of the many studies on the impact of Rotarix™ and RotaTeq® vaccines estimated that an overall vaccine effectiveness of 53% was observed against RV infections, 73% against RV-related hospitalizations, and 74% against severe RV disease [36]. Foodborne viruses, such as RV, are a common and probably the least recognized cause of gastroenteritis outbreaks [19]. Research has shown that the main foods implicated in the transmission of human enteric viruses are mollusks, fruits and vegetables irrigated with wastewater and/or washed with non-potable or contaminated water; or these foods can be contaminated by contact with surfaces or hands of infected personnel during their preparation [37]. In addition to causing acute illness, they are of public health concern because low infectious doses are needed; to cause an infection such as gastroenteritis [2]. RV transmission is primarily through ingestion of food and water that has been contaminated with animal and/or human waste [19, 20, 24].

RV has been detected in perishable foods for consumption such as shellfish and vegetables in countries like Mexico, where this virus has been detected together with other viruses such as norovirus and hepatitis [13]. RV detection studies have been carried out in drinking water for consumption in the Central Valley

of Costa Rica, where the presence of RV has been identified [38]. In Leon, Nicaragua, RV was identified in wastewater, in low prevalence, after vaccination [25]. In a study carried out in Panama, the presence of RV was determined in lettuce and mollusks (*Anadara tuberculosa*) in the capital and in the western region of that country, where the same genotype was identified that circulated in both foods [20]. In Colombia, the presence of RV has been detected in drinking water for consumption [39, 40]. In Uruguay, RV have been detected in groundwater and wastewater [41, 42]. Studies have shown the presence of RV in berries, vegetables, and oysters (*Crassostrea gigas*) in Argentina [43, 44, 45]. In Chile, a pilot study was used for the first time in Latin America by studying the RNA virosphere using a single wastewater sample in Santiago de Chile using viral metagenomics, demonstrating high RV content [46]. In a poor marginal neighborhood in Quito, Ecuador, the use of reused water for hand washing and the washing of raw vegetables are applied, detecting the presence of RV [47]. Several studies of RV in food and water have been carried out in Brazil locations, such as Manginhos in Rio de Janeiro, detected the presence of RV in drinking water for human consumption [48]. RVs have been detected in rivers that are located within forest reserves. Other studies carried out in Rio Negro in Brazil during a flood showed that the increase in the presence of RVs was possibly related to the increases in diarrheas that occurred in the neighboring population [49]. RV has also been detected in recreational waters (swimming pools) in Brazil [50]. RV have been detected in mussels and oysters in Brazil [51, 52, 53, 54]. In another study in Brazil, they have shown the presence of RV in pork, beef and chicken, which shows failures in the food handling process [55]; as well as in fresh vegetables, lettuce [56], cheeses and jellies in that country. As far as it is known, it is the only report of a study of this type developed in that country and in Latin America [57].

I do not omit to state that 80% of the investigations where RV presence has been found in food and water in Latin America have also detected norovirus. This is demonstrated by the investigations that have revealed that norovirus is also considered one of the most important in the production of gastroenteritis in young people and adults, and its main source of contamination is through contaminated water and food [58].

According to the WHO and the United Nations Children's Emergency Fund (UNICEF) 2015 reports, untreated water is used by 663 million people worldwide. People living in poor or rural areas and developing regions are affected by a lack of access to safe drinking water, including people living in developed countries with advanced water and wastewater treatment facilities, which studies indicate that are not safe from diseases transmitted by viral contamination in water [59]. Furthermore, it has been estimated that by the year 2030, approximately 1.6 billion people (19% of the world's population) will lack clean water, leading to more outbreaks of waterborne diseases [60].

RV transmission through food and water is concerning from a public health perspective due to the low infectious dose required to establish an infection, and the high load of viral excretion through feces, even in asymptomatic cases, facilitating thus the spread in the environment [61]. Despite the public health relevance of foodborne illnesses caused by RVs and other viruses, only few studies have been conducted in Latin America to assess the presence of RVs and other pathogenic viruses in meat cuts of animal origin, mollusks, vegetables, and waters [55]. While RV infections are usually self-limited, studies of foodborne viruses in animal products are relevant and beneficial in the One Health concept to clarify epidemiological aspects and molecular characteristics [20, 55]. The presence of these pathogens in food may indicate a public health problem since RVs have the ability to survive on different surfaces [55], at low temperatures, and during food storage [20]. Considering that RV is considered an important pathogen associated with neonatal diarrhea and children worldwide, it should be noted that, in recent decades, this agent was responsible for 3.1% of foodborne outbreaks in Brazil [26].

Bidawid et al. [62] explains that food can be contaminated with viruses in the pre- or post-harvest stages; In the post-harvest stage the main source of viral contamination can be attributed to infected food handlers who could be the contaminating source of the virus during handling and packaging. They emphasize that 9.2% of infectious virus particles on contaminated hands can be transferred to lettuce during handling [62].

Indicators of fecal bacteria are among the most widely used indicators for microbial water quality, even though most evidence indicates that a direct correlation with pathogenic viruses is not observed and should not be expected, because enteric viruses are generally more resistant than bacteria to wastewater treatment procedures [63]. In turn, enteric viruses can enter environmental waters through a direct discharge route of treated wastewater; currently, there is no regulation that determines the control of enteric viruses in aqueous matrices in Central America and some South American countries. Some studies show that the pattern of viral genotypes circulating in the community is similar to that observed in contaminated water used for irrigation [64]. This situation suggests an implication of the discharge of untreated or poorly treated wastewater premises to environmental waters [64]. Unfortunately, this situation seems to be a common occurrence in different regions of the world [64]. Research reports the appearance of viruses in different aquatic environments, following the route of contamination from untreated wastewater to surface waters that receive other wastewater discharges [65].

Other studies indicate that some RV genotypes circulating in the community are also detected in green leafy vegetables, suggesting that irrigation water contaminated by fecal contamination could be a source of plant contamination with viral particles [20]. It should be noted that RV has been detected frequently in green vegetables compared to the frequency detected in wastewater samples, irrigation water, which could

be related to the binding of RV to plants [45]. Another explanation could be that the vegetables are fumigated with the same irrigation water before they are put on the market [45]. Some researchers consider that perhaps the combination of the two factors mentioned above could contribute to a greater contamination of vegetables with RV [56]. Also, in the pre-harvest stage, food can be contaminated on the farm during the growth stage by contact with contaminated fertilizers, wastewater or the use of irrigation water contaminated with feces [7]. This is particularly relevant when the food is green leafy vegetables that are eaten raw [7].

Frozen and refrigerated foods are similar in their sowing and harvesting process, and only differ in their preservation; in frozen foods that are placed in bags, moisture forms causing a layer of frost and ice crystals that can damage the surface of the food causing the penetration of agents capable of causing diseases; it is known that RV can remain viable for up to several months at a temperature of 4 °C [66].

The worldwide distribution of RV G (VP7) and P (VP4) genotypes shows a number of diarrhea-associated combinations: G1P [8]; G2P [4]; G3P [8]; G4P [8] being these considered the most common in the history of the study of VR worldwide [24, 67]. Studies carried out in contaminated water, fresh fruits and vegetables in Latin America have detected the genotypes (G1, G2, G3; G4, G6, G8 and G9) [42, 45]. Studies carried out on mussels and oysters in Brazil in Arraial, in Rio de Janeiro, reveal in the sequencing of the VP6 gene of RV the identification of the I2 genotype, which presented high homology with human strains of the G1P [8] and G3P [8] genotypes isolated in Brazil, Taiwan, Australia and the Dominican Republic; Another investigation carried out in the coasts of the Brazilian Amazon identified the I2 genotype of RV in mussels and cultured oysters [53]. In Argentina, this I2 genotype was detected in oyster samples, associated with G8-P [1]-I2, which has a genome similar to that of bovine RV [44]. Investigations carried out in Brazil have detected the VP6 gene of RV genotype I2 in stool samples from children in that country [68, 69]. Previous investigations show that genetic rearrangement and zoonosis transmission of RV possibly occurs through transmission of RV to water, food, animals and from there to man (Fig 1). It is important to highlight; that, the latest investigations have revealed in Latin America the appearance of emerging strains of RV in humans and that also share genes of animal origin, for which, after carrying out an analysis of the results published in the region, they reveal the possibility of zoonoses [8, 24]. In Latin America, in some countries in poor conditions, part of their population lives close to animals and uses water contaminated with fecal remains to irrigate many crops, thus causing an increase in food contamination and new infections with RV strains. Considering that many farm animals share water for consumption by many residents, this also allows the increase and outbreaks of infections in our Latin American countries, thus causing a rapid increase in the detection of unusual new strains with zoonotic potential [8], emerging from RV in association with genetic heterogeneity, which raises

interesting questions about the evolution of RV in the region. Another interesting finding discovered worldwide is that many fruit and insectivorous bats harbor large numbers of RV strains, demonstrating that bats appear to serve as reservoirs for multiple RV genotypes, which could pose a veterinary and public health risk [9]. However, several studies conclude that there is the possibility of RV zoonosis from bats to some wild animals, other farm animals and from there to man. Research carried out in Latin America reveals the possibility that the bat *Carollia perspicillata* is the reservoir (KCR10-93) and transmitter of the G20 genotype to children in Surinam (SUR/2014735512) and Ecuador (Ecu534). [9, 22]. In some Asian and Latin American countries where sanitary conditions are poor, some bats consume water and defecate in areas where this water is shared with animals and humans [70].

Bats such as *Eidolon helvum* have been observed skimming bodies of water in Africa, which researchers believe is probably done by collecting water to drink [70, 71]. In Asia and Africa, human excrement is sometimes used as fertilizer on farmland [70]. Viable human RV genotypes have been detected in surface water, reservoirs, wastewater, and drinking water [72, 73]; contact with human feces during drinking or feeding provides a mechanism by which fruit bats can likely ingest human RVs, which would serve as a source of RV genetic rearrangement. Hence the probable explanation of why RV strains of human origin were identified in the feces of bats in Bangladesh [70] and in other countries, as is the case of the G1 genotype that has also been detected in environmental water samples [74]. and bivalve shellfish samples [75], supporting the hypothesis that human RVA strains may contaminate local water sources. On the other hand, other studies have shown in Latin American countries that farm animals and other types of wild animals share water sources with humans [24] (Fig 1).

Although it is difficult to have exact estimates of epidemiological data and RV disease burden in Latin American children, it is clear that RV diarrhea is common in Latin America and the Caribbean. After vaccination programs, deaths, and hospitalizations due to diarrhea in children under five years of age have decreased considerably [76].

Further studies are needed to determine the seasonal profile of viruses in fresh products using metagenomics and, further sequencing studies on circulating foodborne RV strains are needed. Studies have shown that some pathogenic viruses can be internalized in lettuce once the product is contaminated, which represents a potential risk for consumer safety, since fresh vegetables are generally consumed without the use of preparation methods that would eliminate viruses. associates [77]. Studies carried out in Japan show that RVs infecting patients with either symptomatic or asymptomatic manifestations can accumulate in bivalve mollusks and can persist for a long time in them; moreover, research shows the accumulation of vaccine strains in bivalve mollusks that represent a threat of unexpected infections and RV genomic rearrangements [78].

It is important to stress that the Codex Alimentarius examines the types of risk management tools that can be created to help countries protect the health of consumers from foodborne viral illnesses. The Codex Alimentarius Commission has recently proposed a regulation to promote guidance on the control of viruses in food [79].

CONCLUSION

Further studies are required to understand the feasibility and whether this RV bioaccumulation and bioconcentration in bivalve mollusks has any stimulatory role in genetic rearrangement. A better knowledge about which viruses may be present in our food, even if they are not associated with human disease, may be valuable for surveillance of potential new public health threats.

The results of the molecular characterization of these RV strains detected in food and water would provide new knowledge about possible RV genetic rearrangements in the future. The emergence of strains derived from interspecies transmission has implicated and inspired the study of different vaccine strategies. Vaccine selection pressure could increase the circulation pressure of rare strains and consequently reduce the effectiveness of the current vaccine.

In response to the surveillance reports of unusual strains with zoonotic potential carried out in the Latin American Region, little information has been found. Therefore, we consider the urgent need to maintain molecular surveillance of RV strains in the region; with the intention of evaluating the impact that the vaccine will have in the future.

REFERENCES

1. World Health Organization (WHO). United Nations Children Emergency Fund. 2015. Progress on sanitation and drinking water: 2015 update and MDG assessment.
2. World Health Organization (WHO). WHO Estimates of the Global Burden of Foodborne Diseases. 2015. Available online: https://apps.who.int/iris/bitstream/handle/10665/199350/9789241565165_eng.pdf?sequence=1 (accessed on 15 September 2022).
3. WHO. 2019. World Health Organization—Drinking Water. Retrieved November 4, 2019, from Disponível em: <https://www.who.int/news-room/fact-sheets/detail/drinking-water>.
4. Troeger C, Khalil IA, Rao PC, Cao S, Blacker BF, Ahmed T, Armah G, Bines JE, Brewer TG, Colombara DV, Kang G, Kirkpatrick BD, Kirkwood CD, Mwenda JM, Parashar UD, Petri WA Jr, Riddle MS, Steele AD, Thompson RL, Walson JL, Sanders JW, Mokdad AH, Murray CJL, Hay SI, Reiner RC Jr. Rotavirus Vaccination and the Global Burden of Rotavirus Diarrhea Among Children Younger Than 5 Years. *JAMA Pediatr.* 2018; 172(10):958-965. doi: 10.1001/jamapediatrics.2018.1960.
5. Tate JE, Burton AH, Boschi-Pinto C, Parashar UD. World Health Organization—Coordinated Global RV Surveillance Network Global, Regional, and National Estimates of RV Mortality in Children <5 Years of Age, 2000–2013. *Clin. Infect. Dis.* 2016; 62: S96–S105. doi: 10.1093/cid/civ1013.
6. Luchs A, Timenetsky Mdo C. Group A rotavirus gastroenteritis: post-vaccine era, genotypes and zoonotic transmission. *Einstein (Sao Paulo).* 2016; 14(2):278-87. doi: 10.1590/S1679-45082016RB3582.
7. Lanrewaju AA, Enitan-Folami AM, Sabiu S, Edokpayi JN, Swalaha FM. Global Public Health Implications of Human Exposure to Viral Contaminated Water. *Front. Microbiol.* 2022; 13, 981896. doi: 10.3389/fmicb.2022.981896
8. Bourdett-Stanziola L. 2022. Genetic Diversity of Bat Rotavirus. *Microbiology Research Journal International* 32(1), 17-31. <https://doi.org/10.9734/mrji/2022/v32i130365>.
9. Bourdett-Stanziola L. Diversidad Genética del Rotavirus. Son los Murciélagos los Reservorios de los Rotavirus Emergentes?. 2022. Book. ISBN: 979-8-88676-434-5. Copyright © 2022 Generis Publishing.
10. Estes, MK., Greenberg, HB. *Field's Virology*. Knipe, DM., Howley, PM., editors. Lippincott: Williams & Wilkins. 2013; 1347-1401p.
11. Leuven, KU. 2017. Rotavirus Classification Working Group: RCWG. KU Leuven Laboratory of Viral Metagenomics. 2017. <https://rega.kuleuven.be/cev/viralmetagenomics/virus-classification/rcwg>
12. Santos FS, Sousa Junior EC, Guerra SFS, Lobo PS, Penha Junior ET, Lima ABF, Vinente CBG, Chagas EHN, Justino MCA, Linhares AC, Matthijnsens J, Soares LS, Mascarenhas JDP. G1P[8] Rotavirus in children with severe diarrhea in the post-vaccine introduction era in Brazil: Evidence of reassortments and structural modifications of the antigenic VP7 and VP4 regions. *Infect Genet Evol.* 2019; 69:255-266. doi: 10.1016/j.meegid.2019.02.009.

13. Atabakhsh P, Kargar M, Doosti A. Molecular detection and genotyping of group A rotavirus in two wastewater treatment plants, Iran. *Braz J Microbiol.* 2020;51(1):197-203. doi: 10.1007/s42770-019-00131-0.
14. Offit, Paul A. and Harold F. Clark. "Rotavirus vaccine." *Reactions Weekly.* 1999; 1334: 40.
15. Rebato ND, de Los Reyes VCD, Sucaldito MNL, Marin GR. Is your drinking-water safe? A rotavirus outbreak linked to water refilling stations in the Philippines, 2016. *Western Pac Surveill Response J.* 2019; 20;10(1):1-5. doi: 10.5365/wpsar.2017.8.1.007.
16. Miura T, Kadoya SS, Takino H, Sano D, Akiba M. Temporal variations of human and animal Rotavirus A genotypes in surface water used for drinking water production. *Front Microbiol.* 2022;13:912147. doi: 10.3389/fmicb.2022.912147.
17. Prado T, de Castro Bruni A, Barbosa MRF, Garcia SC, de Jesus Melo AM, Sato MIZ. Performance of wastewater reclamation systems in enteric virus removal. *Sci Total Environ.* 2019; 15; 678:33-42. doi: 10.1016/j.scitotenv.2019.04.435.
18. Soller JA, Schoen ME, Bartrand T, Ravenscroft JE, Ashbolt NJ. Estimated human health risks from exposure to recreational waters impacted by human and non-human sources of faecal contamination. *Water Res.* 2010;44(16):4674-91. doi: 10.1016/j.watres.2010.06.049.
19. Quiroz-Santiago C, Vázquez-Salinas C, Natividad-Bonifacio I, Barrón-Romero BL, Quiñones-Ramírez EI. Rotavirus G2P [4] detection in fresh vegetables and oysters in Mexico City. *J Food Prot.* 2014; 77(11):1953-9. doi: 10.4315/0362-028X.JFP-13-426.
20. Bourdett-Stanziola L, Cuevas-Abrego M, Ferrera A, Durant-Archibold AA. Rotavirus in Oysters, Lettuce, and Feces in Children with Diarrhea from Panama. *Journal of Advances in Microbiology.* 2022; 22(5):16-21. doi: 10.9734/JAMB/2022/v22i530459.
21. Enserink R, Mughini-Gras L, Duizer E, Kortbeek T, Van Pelt W. Risk factors for gastroenteritis in child day care. *Epidemiol Infect.* 2015; 143(13):2707-20. doi: 10.1017/S0950268814003367.
22. Simsek C, Corman VM, Everling HU, Lukashev AN, Rasche A, Maganga GD, Binger T, Jansen D, Beller L, Deboutte W, Gloza-Rausch F, Seebens-Hoyer A, Yordanov S, Sylverken A, Oppong S, Sarkodie YA, Vallo P, Leroy EM, Bourgarel M, Yinda KC, Van Ranst M, Drost C, Drexler JF, Matthijssens J. At Least Seven Distinct Rotavirus Genotype Constellations in Bats with Evidence of Reassortment and Zoonotic Transmissions. *mBio.* 2021; 19;12(1): e02755-20. doi: 10.1128/mBio.02755-20.
23. de Oliveira LH, Danovaro-Holliday MC, Andrus JK, de Fillipis AM, Gentsch J, Matus CR, Widdowson MA. Rotavirus Surveillance Network. Sentinel hospital surveillance for rotavirus in latin american and Caribbean countries. *J Infect Disx.* 2009; 1;200 Suppl 1:S131-9. doi: 10.1086/605060.
24. Bourdett-Stanziola L, Centeno E, Cuevas-Abrego M, Durant-Archibold A. A, Ortega-Barría E, Bucardo F. The Emergence of New Rotavirus Strains in America. *Review. South Asian Journal of Research in Microbiology.* 2021; 11(1), 46-62. doi.org/10.9734/sajrm/2021/v11i130244.
25. Bucardo F, Lindgren PE, Svensson L, Nordgren J. Low prevalence of rotavirus and high prevalence of norovirus in hospital and community wastewater after introduction of rotavirus vaccine in Nicaragua. *PLoS One.* 2011; (10): e25962. doi: 10.1371/journal.pone.0025962.

26. BRASIL, Surtos de Doenças Transmitidas por Alimentos no Brasil. <http://portalarquivos2.saude.gov.br/images/pdf/2019/fevereiro/15/Apresenta—o-Surtos-DTA-Fevereiro-2019.pdf>, 2019 (accessed July 28, 2021).
27. Matthijnsens J, Van Ranst M. Genotype constellation and evolution of group A rotaviruses infecting humans. *Curr Opin Virol.* 2012; 2(4):426-33. doi: 10.1016/j.coviro.2012.04.007.
28. Alidjinou, EK, Sane, F, Firquet, S, Lobert, PE, Hober, D. Resistance of enteric viruses on fomites, *Intervirology.* 2019; 61(5): 205–213, <https://doi.org/10.1159/000448807>.
29. Rheingans RD, Constenla D, Antil L, Innis BL, Breuer T. Economic and health burden of rotavirus gastroenteritis for the 2003 birth cohort in eight Latin American and Caribbean countries. *Rev Panam Salud Publica.* 2007; 21(4):192-204. doi: 10.1590/s1020-49892007000300002.
30. Steele AD, Victor JC, Carey ME, Tate JE, Atherly DE, Pecenka C, Diaz Z, Parashar UD, Kirkwood CD. Experiences with rotavirus vaccines: can we improve rotavirus vaccine impact in developing countries? *Hum Vaccin Immunother.* 2019; 15(6):1215-1227. doi: 10.1080/21645515.2018.1553593.
31. GBD Diarrhoeal Diseases Collaborators. Estimates of global, regional, and national morbidity, mortality, and aetiologies of diarrhoeal diseases: a systematic analysis for the Global Burden of Disease Study 2015. *Lancet Infect Dis.* 2017; 17(9):909-948. doi: 10.1016/S1473-3099(17)30276-1.
32. World Health Organization Position Paper. Rotavirus vaccines. *Wkly Epidemiol Rec.* 2013;88(5):49–64. <http://www.who.int/wer/2013/wer8805/en/>. Accessed 7 Dec 2016.
33. PAHO WHO. Countries using RV and pneumococcal vaccine. 2016. http://www.paho.org/hq/index.php?option=com_content&view=article&id=2586%3A2010-countries-using-RV-pneumococcal-vaccine&catid=1552%3Anew-vaccines-about&Itemid=2087&lang=en. Accessed 7 Dec 2016.
34. Vaccine in National Immunization Programme Update In: Immunization VaB, ed. https://www.who.int/immunization/monitoring_surveillance/en/: World Health Organization; 2020.
35. LeClair CE, McConnell KA. Rotavirus. 2023 Jan 2. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan–. PMID: 32644377.
36. Santos VS, Marques DP, Martins-Filho PR, Cuevas LE, Gurgel RQ. Effectiveness of rotavirus vaccines against rotavirus infection and hospitalization in Latin America: systematic review and meta-analysis. *Infect Dis Poverty.* 2016; 12;5(1):83. doi: 10.1186/s40249-016-0173-2.
37. Barker SF, Amoah P, Drechsel P. A probabilistic model of gastroenteritis risks associated with consumption of street food salads in Kumasi, Ghana: evaluation of methods to estimate pathogen dose from water, produce or food quality. *Sci Total Environ.* 2014; 15; 487:130-42. doi: 10.1016/j.scitotenv.2014.03.108.
38. Barrantes K, Chacón L, Morales E, Rivera-Montero L, Pino M, Jiménez AG, Mora DC, Jiménez PS, Silva B, Romero-Esquivel LG. Occurrence of pathogenic microorganisms in small drinking-water systems in Costa Rica. *J Water Health.* 2022; 20(2):344-355. doi: 10.2166/wh.2022.230.
39. Villamizar R, Peláez-Carvajal D, Acero LF. Identification of enteric viruses from raw water using fluoro-immuno-magnetic separation coupled to RT-PCR. *Biomedica.* 2021; 15;41(4):745-755. doi: 10.7705/biomedica.6032.

40. Villamizar-Gallardo RA, Osma JF, Ortíz OO. New technique for direct fluoroimmunomagnetic detection of rotavirus in water samples. *J Water Health*. 2017;15(6):932-941. doi: 10.2166/wh.2017.028.
41. Gamazo P, Victoria M, Schijven JF, Alvareda E, Tort LFL, Ramos J, Burutaran L, Olivera M, Lizasoain A, Saprizza G, Castells M, Colina R. Evaluation of Bacterial Contamination as an Indicator of Viral Contamination in a Sedimentary Aquifer in Uruguay. *Food Environ Virol*. 2018; 10(3):305-315. doi: 10.1007/s12560-018-9341-9.
42. Victoria M, Tort LF, García M, Lizasoain A, Maya L, Leite JP, Miagostovich MP, Cristina J, Colina R. Assessment of gastroenteric viruses from wastewater directly discharged into Uruguay River, Uruguay. *Food Environ Virol*. 2014; 6(2):116-24. doi: 10.1007/s12560-014-9143-7.
43. Oteiza JM, Prez VE, Pereyra D, Jaureguiberry MV, Sánchez G, Sant'Ana AS, Barril PA. Occurrence of Norovirus, Rotavirus, Hepatitis A Virus, and Enterovirus in Berries in Argentina. *Food Environ Virol*. 2022; 14(2):170-177. doi: 10.1007/s12560-022-09518-z.
44. Mozgovej M, Miño S, Barbieri ES, Tort FL, Victoria-Montero M, Frydman C, Cap M, Baron PJ, Colina R, Matthijnsens J, Parreño V. GII.4 human norovirus and G8P[1] bovine-like rotavirus in oysters (*Crassostrea gigas*) from Argentina. *Int J Food Microbiol*. 2022; 16; 365:109553. doi: 10.1016/j.ijfoodmicro.2022.109553.
45. Prez VE, Martínez LC, Victoria M, Giordano MO, Masachessi G, Ré VE, Pavan JV, Colina R, Barril PA, Nates SV. Tracking enteric viruses in green vegetables from central Argentina: potential association with viral contamination of irrigation waters. *Sci Total Environ*. 2018; 1;637-638:665-671. doi: 10.1016/j.scitotenv.2018.05.044.
46. Guajardo-Leiva S, Chnaiderman J, Gaggero A, Díez B. Metagenomic Insights into the Sewage RNA Virosphere of a Large City. *Viruses*. 2020; 21;12(9):1050. doi: 10.3390/v12091050.
47. Sempértegui F, Estrellá B, Egas J, Carrión P, Yerovi L, Díaz S, Lascano M, Aranha R, Ortiz W, Zabala A, et al. Risk of diarrheal disease in Ecuadorian day-care centers. *Pediatr Infect Dis J*. 1995; 14(7):606-12. doi: 10.1097/00006454-199507000-00011.
48. Miagostovich MP, Rocha MS, Dos Reis FB, Sampaio MS, de Saldanha da Gama Gracie Carrijo R, Malta FC, Rodrigues J, Genuino A, Ribeiro da Silva Assis M, Fumian TM, Barrocas PRG. Gastroenteric Viruses Detection in a Drinking Water Distribution-to-Consumption System in a Low-Income Community in Rio de Janeiro. *Food Environ Virol*. 2020; 12(2):130-136. doi: 10.1007/s12560-020-09423-3.
49. Vieira CB, de Abreu Corrêa A, de Jesus MS, Luz SLB, Wyn-Jones P, Kay D, Rocha MS, Miagostovich MP. The Impact of the Extreme Amazonian Flood Season on the Incidence of Viral Gastroenteritis Cases. *Food Environ Virol*. 2017; 9(2):195-207. doi: 10.1007/s12560-017-9280-x.
50. Girardi V, Demoliner M, Gualarte JS, Spilki FR. 'Don't put your head under water': enteric viruses in Brazilian recreational waters. *New Microbes New Infect*. 2019; 14;29: 100519. doi: 10.1016/j.nmni.
51. Keller R, Pratte-Santos R, Scarpati K, Martins SA, Loss SM, Fumian TM, Miagostovich MP, Cassini ST. Surveillance of Enteric Viruses and Thermotolerant Coliforms in Surface Water and Bivalves from a Mangrove Estuary in Southeastern Brazil. *Food Environ Virol*. 2019; 11(3):288-296. doi: 10.1007/s12560-019-09391-3.
52. do Nascimento LG, Sarmiento SK, Leonardo R, Gutierrez MB, Malta FC, de Oliveira JM, Guerra CR, Coutinho R, Miagostovich MP, Fumian TM. Detection and

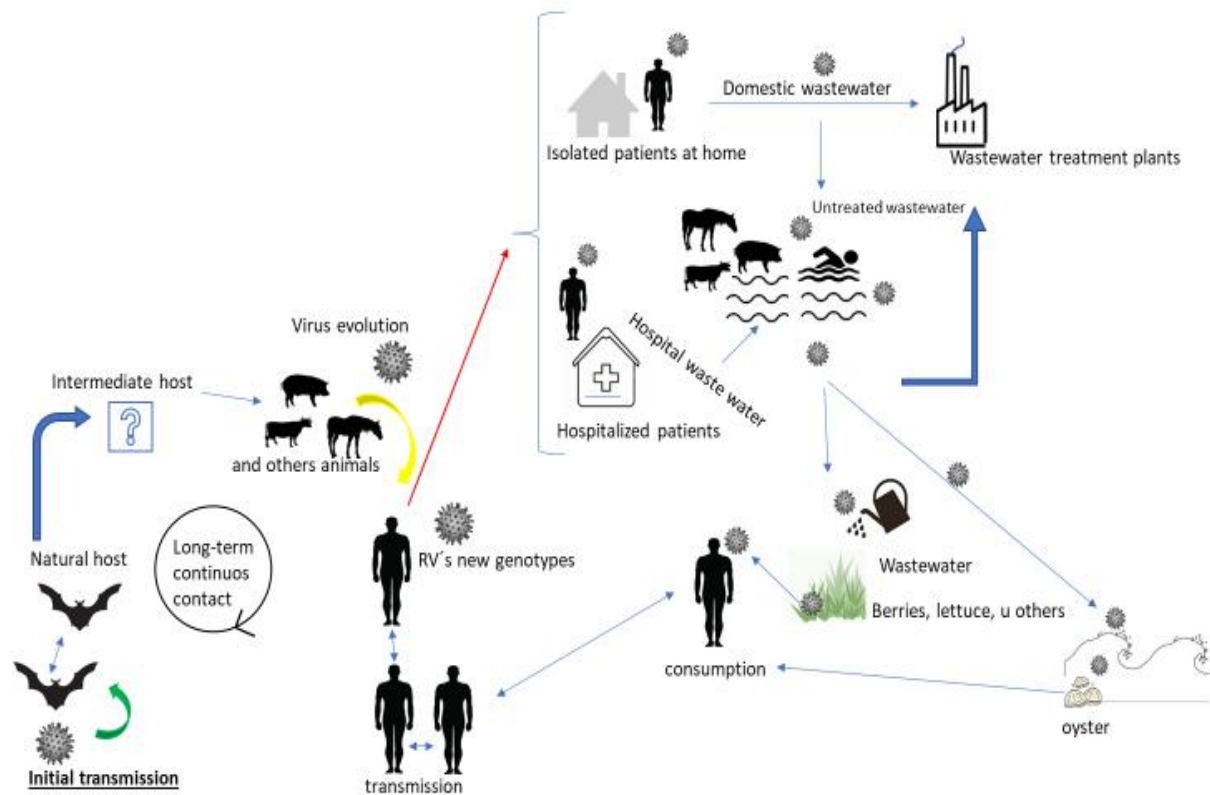
- Molecular Characterization of Enteric Viruses in Bivalve Mollusks Collected in Arraial do Cabo, Rio de Janeiro, Brazil. *Viruses*. 2022; 26;14(11):2359. doi: 10.3390/v14112359.
53. Marinho ANR, Rocha DCC, Kanai YK, Alves CM, Costa DC, Sousa AH, Barros BCV, Bonfim MCMS, Mascarenhas JDP. Rotavirus analyses by SYBR Green real-time PCR and microbiological contamination in bivalves cultivated in coastal water of Amazonian Brazil. *J Water Health*. 2018; 16(6):970-979. doi: 10.2166/wh.2018.130.
 54. Souza DSM, Dominot AFÁ, Moresco V, Barardi CRM. Presence of enteric viruses, bioaccumulation and stability in *Anomalocardia brasiliensis* clams (Gmelin, 1791). *Int J Food Microbiol*. 2017; 2; 266:363-371. doi: 10.1016/j.ijfoodmicro.2017.08.004.
 55. Soares VM, Dos Santos EAR, Tadielo LE, Cerqueira-Cézar CK, da Cruz Encide Sampaio AN, Eisen AKA, de Oliveira KG, Padilha MB, de Moraes Guerra ME, Gasparetto R, Brum MCS, Traesel CK, Henzel A, Spilki FR, Pereira JG. Detection of adenovirus, rotavirus, and hepatitis E virus in meat cuts marketed in Uruguaiana, Rio Grande do Sul, Brazil. *One Health*. 2022; 1; 14:100377. doi: 10.1016/j.onehlt.2022.100377.
 56. Werneck LMC, Vieira CB, Fumian TM, Caetano TB, Emílio Dos Santos J, Ferreira FC, Pimenta MM, Miagostovich MP. Dissemination of gastroenteric viruses in the production of lettuce in developing countries: a public health concern. *FEMS Microbiol Lett*. 2017; 1;364(9). doi: 10.1093/femsle/fnx085.
 57. de Castro Carvalho SV, Rogovski P, Cadamuro RD, Viancelli A, Michelon W, Dos Reis DA, Santana das Chagas IA, Assenço R, da Silva Lanna MC, Treichel H, Fongaro G. Co-contamination of food products from family farms in an environmental disaster area in Southeast Brazil with pathogenic bacteria and enteric viruses. *Arch Virol*. 2020; 165(3):715-718. doi: 10.1007/s00705-019-04501-9.
 58. da Silva Poló T, Peiró JR, Mendes LC, Ludwig LF, de Oliveira-Filho EF, Bucardo F, Huynen P, Melin P, Thiry E, Mauroy A. Human norovirus infection in Latin America. *J Clin Virol*. 2016; 78:111-9. doi: 10.1016/j.jcv.2016.03.016.
 59. Adelodun B, Ajibade FO, Ighalo JO, Odey G, Ibrahim RG, Kareem KY, Bakare HO, Tiamiyu AO, Ajibade TF, Abdulkadir TS, Adeniran KA, Choi KS. Assessment of socioeconomic inequality based on virus-contaminated water usage in developing countries: A review. *Environ Res*. 2021; 192:110309. doi: 10.1016/j.envres.2020.110309.
 60. World Health Organization/United Nations Children Emergency Fund. 2021. Progress on Household Drinking water, Sanitation, and Hygiene 2000–2020: Five Years into the SDGs. Geneva, Switzerland.
 61. Parada-Fabián JC, Juárez-García P, Natividad-Bonifacio I, Vázquez-Salinas C, Quiñones-Ramírez EI. Identification of Enteric Viruses in Foods from Mexico City. *Food Environ Virol*. 2016;8(3):215-20. doi: 10.1007/s12560-016-9244-6.
 62. Bidawid S, Farber JM, Sattar SA. Contamination of foods by food handlers: experiments on hepatitis A virus transfer to food and its interruption. *Appl Environ Microbiol*.2000; 66(7):2759-63. doi: 10.1128/AEM.66.7.2759-2763.2000.
 63. Lambertini E, Spencer SK, Kieke BA Jr, Loge FJ, Borchardt MA. Virus contamination from operation and maintenance events in small drinking water distribution systems. *J Water Health*. 2011; 9(4):799-812. doi: 10.2166/wh.2011.018.

64. Peláez D, Guzmán BL, Rodríguez J, Acero F, Nava G. Presence of enteric viruses in water samples for consumption in Colombia: Challenges for supply systems. *Biomedica*. 2016; 15;36(0):169-78. doi: 10.7705/biomedica.v36i0.2987.
65. Rusiñol M, Fernandez-Cassi X, Timoneda N, Carratalà A, Abril JF, Silvera C, Figueras MJ, Gelati E, Rodó X, Kay D, Wyn-Jones P, Bofill-Mas S, Girones R. Evidence of viral dissemination and seasonality in a Mediterranean river catchment: Implications for water pollution management. *J Environ Manage*. 2015; 15; 159:58-67. doi: 10.1016/j.jenvman.2015.05.019.
66. Sair AI, D'Souza DH, Jaykus LA. Human Enteric Viruses as Causes of Foodborne Disease. *Compr Rev Food Sci Food Saf*. 2002; 1(2):73-89. doi: 10.1111/j.1541-4337.2002.tb00008.x.
67. Luchs A, Timenetsky Mdo C. Unexpected detection of bovine G10 rotavirus in a Brazilian child with diarrhea. *J Clin Virol*. 2014; 59(1):74-6. doi: 10.1016/j.jcv.2013.11.001.
68. Gutierrez MB, Fialho AM, Maranhão AG, Malta FC, Andrade JDSR, Assis RMS, Mouta SDSE, Miagostovich MP, Leite JPG, Machado Fumian T. Rotavirus A in Brazil: Molecular Epidemiology and Surveillance during 2018-2019. *Pathogens*. 2020; 27;9(7):515. doi: 10.3390/pathogens9070515.
69. Gutierrez MB, de Figueiredo MR, Fialho AM, Cantelli CP, Miagostovich MP, Fumian TM. Nosocomial acute gastroenteritis outbreak caused by an equine-like G3P[8] DS-1-like rotavirus and GII.4 Sydney[P16] norovirus at a pediatric hospital in Rio de Janeiro, Brazil, 2019. *Hum Vaccin Immunother*. 2021; 2;17(11):4654-4660. doi: 10.1080/21645515.2021.1963169.
70. Islam A, Hossain ME, Rostal MK, Ferdous J, Islam A, Hasan R, Miah M, Rahman M, Rahman MZ, Daszak P, Epstein JH. Epidemiology and Molecular Characterization of Rotavirus A in Fruit Bats in Bangladesh. *Ecohealth*. 2020; 17(3):398-405. doi: 10.1007/s10393-020-01488-7.
71. Stier SC. Dietary habits of two threatened co-roosting flying foxes (Megachiroptera) Subic Bay Philippines: A Graduate Student Theses Paper. University of Montana. 2003; Paper no. 6513. Available: <https://scholarworks.umt.edu/cgi/viewcontent.cgi?article=7548&context=etd>
72. Miura T, Gima A, Akiba M. Detection of Norovirus and Rotavirus Present in Suspended and Dissolved Forms in Drinking Water Sources. *Food Environ Virol*. 2019; 11(1):9-19. doi: 10.1007/s12560-018-9361-5.
73. Purpari G, Macaluso G, Di Bella S, Gucciardi F, Mira F, Di Marco P, Lastra A, Petersen E, La Rosa G, Guercio A. Molecular characterization of human enteric viruses in food, water samples, and surface swabs in Sicily. *Int J Infect Dis*. 2019; 80:66-72. doi: 10.1016/j.ijid.2018.12.011.
74. Kittigul L, Pombubpa K. Rotavirus Surveillance in Tap Water, Recycled Water, and Sewage Sludge in Thailand: A Longitudinal Study, 2007-2018. *Food Environ Virol*. 2021; 13(1):53-63. doi: 10.1007/s12560-020-09450-0.
75. Kittigul L, Panjangampathana A, Rupprom K, Pombubpa K. Genetic diversity of rotavirus strains circulating in environmental water and bivalve shellfish in Thailand. *Int J Environ Res Public Health*. 2014; 24;11(2):1299-311. doi: 10.3390/ijerph110201299.
76. Chavers T, De Oliveira LH, Parashar UD, Tate JE. Post-licensure experience with rotavirus vaccination in Latin America and the Caribbean: a systematic review and

- meta-analysis. *Expert Rev Vaccines*. 2018; 17(11):1037-1051. doi: 10.1080/14760584.2018.1541409.
77. DiCaprio E, Purgianto A, Li J. Effects of Abiotic and Biotic Stresses on the Internalization and Dissemination of Human Norovirus Surrogates in Growing Romaine Lettuce. *Appl Environ Microbiol*. 2015; 81(14):4791-800. doi: 10.1128/AEM.00650-15.
78. Hoque SA, Wakana A, Shimizu H, Takanashi S, Okitsu S, Anwar KS, Hayakawa S, Maneeakarn N, Okabe N, Ushijima H. Detection of Rotavirus Strains in Freshwater Clams in Japan. *Food Environ Virol*. 2022; 14(1):94-100. doi: 10.1007/s12560-021-09505-w.
79. CAC. 2012. Guidelines on the application of general principles of food hygiene to the control of viruses in food. CAC/GL, 79: Codex Alimentarius Commission.

UNDER PEER REVIEW

Figure 1 : Proposal for Transmission Mechanisms and Genetic Rearrangement of Rotavirus in Environments



Proposal for the transmission and genetic re-arrangement of the RV of animals, water, food until it reaches man. Research shows that there is a high probability that bats are the reservoirs of various viruses including RVs. Research carried out in Latin America reveals the probability that the bat *Carollia perspicillata* is the reservoir (KCR10-93) and transmitter of the G20 genotype to children in Surinam (SUR/2014735512) and Ecuador (Ecu534). Furthermore, it could be the probable explanation for the transmission of the VP6, I2 gene detected in water, oysters, animals and in children with diarrhea in Brazil and Argentina.