

### ORIGINAL RESEARCH PAPER

**Medical Microbiology** 

# ISOLATION AND IDENTIFICATION OF BACTERIA FROM SYMPTOMATIC URINARY TRACT INFECTION

**KEY WORDS:** Asymptomatic, UTI, Children, *E.coli*, antibiotics

Dr.M.Ambiga\*

Head, Department of microbiology, Sakthikailash Woman's College, Dharmapuri, Tamilnadu, India. \*Corresponding Author

Mohanapriya A

Department of microbiology, Sakthikailash Woman's College, Dharmapuri, Tamilnadu,India.

Manikandan V

Department of Microbiology, Kamadhenu college of Arts and Science, Dharmapuri, Tamilnadu, India.

BSTRACT

Symptomatic and asymptomatic types of urinary tract infection caused by various microorganisms in different kinds of age groups. This study carry out with symptomatic UTI samples and those samples were collected from 10 years old both male and female. Most of the children shows symptoms like pain or irritation during urination. Collected samples were used to microbiological studies and few bacteria were isolated like *E.coli, Klebsiella pneumonia, Pseudomonas aeruginosa, Staphylococcus aureus, Staphylococcus saprophyticus, Enterococcus faecalis* and *Streptococcus-B.* Some antibiotics were used to identification of antimicrobial sensitivity test against of isolates.

#### INDRODUCTION:

The urinary tract infection is an infection caused by various microbes. Most of the time urinary tract infections are caused by bacteria sometime fungi and rarely caused by viruses. Kidneys, ureters, bladder, and urethra are linked together and called as urinary tract. The urethra and bladder mostly affected with urinary tract infection (UTI) in the lower tract, ureters and kidneys also affected in the upper tract. The upper tract UTIs are rarely affected than lower tract UTIs. Between 65% and 90% of urinary tract infections in children are caused by *E.coli*. Other pathogens include *Klebsiella*, *Proteus*, *Pseudomonas* and *Enterococcus*.

Types of urinary tract infection: An infection can happen in different parts of your urinary tract. Cystitis (bladder) - need to pee a lot or it may hurt when urination. It is also produce lower belly pain and bloody or cloudy urine. Pyelonephritis (kidneys)-This can cause fever, chills, nausea, vomiting, and pain in your upper back or side. Urethritis (urethra)-This can cause a discharge and burning when urination.

Symptomatic bacteriuria is bacteriuria with the accompanying symptoms of a urinary tract infection such as painful urination, fever, back pain and includes pyelonephritis or cystitis. The most common cause of urinary tract infections is *E. coli*.

In asymptomatic bacteriuria, large numbers of bacteria are present in the urine. The person do not have any symptoms of a urinary tract infection (without any symptoms). There is no clear clarifications why the bacteria don't cause any symptoms in the affected person. The asymptomatic bacteriuria may caused by less virulent bacteria. This condition of infection does not need to be treated.

There are number of conditions are cause painful urination (dysuria). In women, urinary tract infections are a common cause of painful urination. In men, urethritis and certain prostate conditions are frequent causes of painful urination. Pyelonephritis is inflammation that results from a urinary tract infection.

# MATERIALS AND METHODS Sample collection:

Urine samples were collected from Dharmapuri district surrounding area and it takes nearby three months. Totally 200 samples were collected from symptomatic children. The urine samples were labelled and immediately sent to the laboratory for microbiological analysis (1) The samples are analyze in various aspects like pH, colour and odour and direct microscopic examination (5).

#### Culturing:

Urine samples were inoculated into nutrient agar and incubated. After the proper incubation period the Colonies are selected based on size, shape, margin, texture and inoculated into selective media for the confirmation of bacterial colony morphology. Isolated colonies were examined microscopically for the identification of capsule on bacterial cell wall and motility.

Isolated bacteria were confirmed by biochemical analysis. The biochemical analysis were carried by the application of Peptone water, MR-VP medium, Simmon citrate agar, TSI and Urea broth. The media inoculated with isolated bacteria and incubated at 18-24 hours in  $37^{\circ}$ C.

#### Antimicrobial sensitivity test

Isolated bacteria are inoculated into peptone water for Antimicrobial sensitivity test. The broth cultures are swabbed into surface of the Muller Hinton Agar plates. After drying the selected antibiotic disc were place on inoculated plates.

The antibiotics used for treatment of urinary tract infections are selected for disc sensitivity method. Antibiotics name as: Ampicillin, Gentamycin, Tetracycline, Chloromphenicol, Piperacillin, Rifampicin, Amoxyclav (AC), Tobramycin, Cefixime and Streptomycin (10).

#### RESULTS AND DISCUSSION:

The collected samples were inoculated into the various media for the macroscopic identification. In direct microscopic observation, crystals and blood cells appear in maximum number of sample. Totally 200 sample were collected from female 108 (54%) and male 92 (46%). The samples are appear in three different colours pale yellow 89 (44.5%), yellow 78 (39%) and deep yellow in 33 (16.5%) samples. The odour divided into two types namely aromatic and ammonical. 127 (63.5) samples are in ammonical and 73 (36.5) samples are in aromatic. 163 (81.5%) samples in acidic condition and 37 (18.5%) in alkaline nature of pH.

 ${\bf Table 2: Isolated\ pathogens\ in\ urine\ sample}$ 

S.	Isolates	Patient code
NO		
1	Escherichia coli	1,2,3,4,11,16,17,22,30,31,32,33,48,49,5
		0,72,73,74,75,
		76,77,92,93,103,107,108,109,110,115,1
		16,118,133,
		134,140,141,143,147,148,154,162,163,
		172,173,175,
		176,186,192,193,197,198

		tiville of Kilbilikon   volume - 11   1334e -
2	Klebsiella pneumonia	5,6,12,18,27,36,37,41,42,47,62,71,82,9 1,94,95,111, 116,117,131,132,142,155,168,174,
3	Staphylococcus saprophyticus	7,13,14,15,28,34,35,55,61,63,69,70,81, 83,102,118,120,156,157,158,160,161,1 70,176,177,178,188,191,194,
4	Pseudomonas aeruginosa	8,19,26,29,38,43,51,54,80,85,90,101,11 2,113,119,121, 122,139,144,145,153,171,179,185,187,
5	Streptococcus-B	9,10,20,21,39,46,53,60,78,84,89,98,99, 100,114,123, 124,125,127,135,137,138,146,150,181, 199
6	Enterococcus faecalis	21,24,25,45,56,57,64,65,79,86,96,104,1 05,126,128,130 149,159,164,167,180,182,189,
7	Staphylococcus aureus	22,23,40,44,46,52,58,59,61,66,67,68,73 ,87,88,97,103, 106,129,136,149,151,152,165,166,169, 183,184,190, 195,196,200

There are 200 samples were used to isolate the bacteria. Only one bacteria isolated from most of the sample and two different kinds of bacteria were isolate from seven samples (21,22,46,73,103 and etc).

Table3: Isolated Pathogens In Different Media

Media	Pathogens	Colony morphology					
Nutrient agar	Escherichia coli	Large circular, white, mois colonies					
ayaı	771 1 1 11						
	Klebsiella	Circular, small mucoid colonies					
	pneumonia						
	Pseudomonas	Circle, green colour					
	aeruginosa	pigment					
	Staphylococcus	Round, golden yellow					
	aureus	colonies					
	Staphylococcus	White to pink circular					
	saprophyticus	colonies					
	Enterococcus	Circular, small opaque					
	faecalis	white colonies					
	Streptococcus-B	Circular with entire					
		margin colonies					
Eosin	Escheria coli	Green metallic sheen					
methylene		colonies are formed					
blue agar	Klebsiella	Pink to purple colonies					
	pnemoniae						
	Pseuomonas	Purple colonies					
	aerugionosa						
Mannitol	Staphylococcus	Ferment mannitol, yellow					
salt agar	aureus	colour colonies					
	Staphylococcus	Ferment mannitol, yellow					
	saprophyticus	halo around colonies					
Macconkey	Escheria coli	Colonies appear flat and					
agar		pink.circular,smooth,entii					
		te colonies					
	Klebsiella	Pink colour and mucoid					
	pneumonia	colonies					
	Pseudomonas	Blue-green pigment					
	aeruginosa						
	Staphylococcus	Pale pink colonies					
	aureus						
	Enterococcus	Colourless, white colonies					
	faecalis						
Blood agar	Escherichia coli	Circular, gray and					
-		moist,beta(β)haemolytic					
		colonies are formed					
	Klebsiella	Grey colour, haemolysis					
	pneumonia	1					

Pseudomonas aeruginosa	Grey colonies,βhaemolysi
Staphylococcus aureus	White,creamy,βhaemolysis
Staphylococcus saprophyticus	White colonies,no haemolysis
Enterococcus faecalis	Beta(β)haemolysis
Streptococcus-B	Beta(β)haemolysis,whitishgray coloniesSS

Table4: Identification of microbes using biochemical tests

Biochemi	E.	Klebsie	Pseudi	Staphyl	Staphyl	Entero	Sterpt
cal tests	coli	li   lla   monas   ococcus   ococ		ococcus	coccus	ococc	
		pneum	aerugi	aureus	saproph	faecali	us-B
		oniae	nosa		yticus	S	
Gram	-	-	-	+	+	+	+
staining	Rod	Rod	Rod	Cocci	Cocci	Cocci	Cocci
Motility	+	-	+	-	-	-	-
Indole	+	-	-	-	-	-	-
MR	+	-	-	+	+	-	+
VP	-	+	-	+	+	+	+
Citrate	-	+	+	-	-	-	
TSI	A	A/A,G	K/K	A/A	A/A	A/A	A/K
Nitrate	+	+	+	+	-	+	
Urease	-	+	-	-	+	-	-
Catalase	+	+	+	+	+	-	-
Oxidase	-	-	+	-	-	-	-
Starch	-	-	+	-	-	-	<u>+</u>
hydrolysis							
Casein	+	-	+	-	-	+	<u>+</u>
hydrolysis							
Lactose	+	+	-	+	-	+	+

Table5: Antimicrobial sensitivity test

Antibiotics	E.c	Klebsie	Pseudo	S.au	S.sa	E.fae	Strpto	
	oli	lla	monas	reus	pro	calis	сосси	
		pneum	aerugin		phyt		s-B	
		oniae	osa		icus			
Ampicillin	+	-	+	+	-	+	+	
Gentamycin	+	+	+	+	+	+	-	
Chloromphenicol	+	+	+	+	+	+	-	
Tetracycline	-	+	+	+	-	+	-	
Penicillin	-	-	-	-	-	-	+	
Rifambicin	-	-	+	+	-	-	-	
Steptomycin	+	-	-	+	-	-	-	
Ciprofloxacin	+	+	+	+	-	+	-	

Sensitive (+), resistance (-)

Table 6: Zone of inhibition for Kirby-baurer method

Antibiotics	E.c	Klebsi	Pseudo	S.aureu	S.sapr	E.fae	Strptoc
	oli	ella	monas	s	ophyti	calis	occus-
		pneum	aerugin		cus		В
		onia	osa				
Ampicillin	20	10 mm	12 mm	22 mm	23	14	18 mm
	mm				mm	mm	
Gentamycin	18	17 mm	16 mm	18 mm	17	18	17 mm
	mm				mm	mm	
Chloromphe	19	21 mm	17 mm	20 mm	19	16	12 mm
nicol	mm				mm	mm	
Tetracycline	13	17 mm	19 mm	18 mm	15	17	14 mm
	mm				mm	mm	
Penicillin	14	15 mm	14 mm	15 mm	16	13	17 mm
	mm				mm	mm	
Rifambicin	09	11 mm	16 mm	17 mm	12	13	09 mm
	mm				mm	mm	
Steptomycin	18	13 mm	13 mm	18 mm	10	14	11 mm
	mm				mm	mm	
Ciprofloxacin	19	15 mm	19 mm	16 mm	10	18	12 mm
	mm				mm	mm	

Urinary tract infections are among the most common bacterial infections. The most common bacteria found to cause urinary tract infections is *E.coli*. UTI are very common in both male and female children. Some kids have a problem with their bladder or kidneys that make some symptoms like UTI. In this study, 200 samples were collected and processed for isolation and identification of bacteria. Nutrient agar, Macconkey agar, Mannitol salt agar, EMB agar and blood agar were used to identification of culture characters of isolates. The results were interpreted in the table 3.

E.coli, Klebsiella pneumonia, Pseudomonas aeruginosa, Staphylococcus aureus, Staphylococcus saprophyticus, Enterococcus faecalis and Streptococcus-B were isolated from collected sample in various numbers. Initial achievement to identify the isolated bacteria on the basis of colony appearance. E.coli, Pseudomonas aeruginosa, Staphylococcus aureus, Enterococcus faecalis are produced β-haemolysis on blood agar. Karzan Mohammed (2017), collected urine samples around 25 to 35 years old and isolated organisms like E.coli and S.aureus. He reported that E.coli was present in the maximum number sample. John Cherulyot (2013) reported that E.coli was highest isolated organism from the urine samples and more over it was 80-90%.

Ezeadila (2015) collected sample from 30 to 35 years females and *E.coli* was maximum number of isolate from the whole study. He recorded that Ciprofloxacin was produce maximum level of zone of inhibition against of gram positive and negative bacteria. Nida wasmy shahab (2017) says that, 4 days to 10 years age group people are highly affected by *E.coli* and Female children will affected more than male children. According to many researchers report, *E.coli* will cause highest rate of urinary tract infections and followed by *Staphylococcus aureus, Klebsiella, Pseuodomonas*.

Various antibiotics were used to identification of antimicrobial sensitivity against of isolates. reported on table5. Gentamycin, chloramphenicol, ampicillin and ciprofloxacin are more effective against of *E.coli*. Gentamycin, Chloromphenicol and Tetracycline producing zone of inhibition against of maximum number of isolated organisms. The results were interpreted in table 5 and 6.

#### CONCLUSION:

Seven isolates of bacteria were identified from the two hundred samples. This investigation conducted with around ten years old. Mostly gram negative bacteria were isolated from the collected sample. Particularly *E.coli* causing UTI in most of the peoples. The female children highly affected by urinary tract infection than male children. There are so many antibiotics used to treat urinary tract infection and it very necessary to control infection it also support to prevent and reduce of kidney diseases.

## REFERENCE:

- Biswajit Batabyal and Dr. Himanshu (2018) OPJS University, Churu, Rajasthan, India. Department of Microbiology. Isolation and antimicrobial resistance patterns of Escherichia coli causing urinary tract infections in children aged 1 to 12 years. J Bacteriol Infec Dis, Volume 2 Issue 3.
- Bauer AW, Kirby WM, Sherris JC, et al., (2004) Antibiotic susceptibility testing by a standardized single disk method. Am J Clin Pathol. 1966; 45(4):493-6.
- J.O.Ezeadila et al., (2015) Department of Apllied microbiolohy, University of Nigeria Teaching Hospital. Isolation, Identification and Antibiotic Sensitivity Pattern of Bacteria from Urine Samples of Female Students Living in the Hosrels of Chukwuemeka Odumegwu Ojukwn University, Uli Campus, Anambra State, Nigeria. International Journal of Current Microbiology and Applied Sciences. ISSN:2319-7706 Volume 4 Number 12, pp.255-262.
- Joan cherulyot, et al., (2013) School of Medicine, Department of Medical Microbiology- Maseno University. Identification and Characterization of Urinary Tract Infectious Bacteria and the Effect of Different Antibiotics School of Medicine. Journal of Natural Sciences Research, ISSN 2224-3186 (Paper) ISSN 2225-0921 (Online) Vol.3, No.6.
- Karzan Mohammed K, ét al., (2017) Department of biology, Soran University, Iraq Isolation and Identification of Urinary Tract Infectious Bacteria and Exploring their Anti-drug Potential against Some Common Antibiotics. Volume 9(6):285-289-286,87.ISSN:1948-5948.
- Kass EH (1957) Bacteriuria and diagnosis of infections of urinary tract. Arch Intern Med. 100:709-14.

- Larcombe J (1999) Urinary tract infection in children. Br Medical Journal. 319:1173-5.
- Ladhani S, Gransden W (2003) Increasing antibiotic resistance among urinary tract isolates. Arch Dis Child. 88:444–5.
- Najar MS, Saldanha CL, Banday KA (2009) Approach to urinary tract infections Indian J Nephrol 19:129-139.
- Nidaa Wasmy Shahab et al., (2017) Department of Biology, College of Science, Tikrit University, Tikrit, Iraq. Isolation and Identification of bacteria causing Urinary tract infections in children in Kirkuk city, Journal of purescience 22(2), ISSN: 1813-1662, Online: 2415-1726.
- Naber.K.G (1991) Therapy of complicated urinary tract infections, Wien-med Wochenschr, 141(23-24):552-5.
- Onu GA, Korir SC, Cheruiyot JC, Ratemo OD, Mabeya BM, et al. (2013) Isolation, identification and characterization of urinary tract infections bacteria and the effect of different antibiotics. J Nat Sci Res 3: 150-159.
- Shilpi.T et al., (2013) Assistant professor, Dept. of Microbiology, Answer Khan Modern College Hospital. Isolation of Bacteria Causing Urinary Tract Infections and their Antibiotic Susceptibility Profile at Answer Khan Modern Medical College Hospital. AKMMC J 2013; 4(2): 23-27.