Kufa Journal for Veterinary Medical Sciences Vol.4 No.1 (2013) 96-104



# Kufa Journal for Veterinary Medical Sciences

www.vet.kufauniv.com



# Stability of Resistance Induced by *Escherichia coli* in Comparison with That Carried by Clinical Isolates *In Vivo*

Sajaa R. kareem Al-Saedi Pro

Prof. Dr. Ali A. Al-Khayyat

Pharmacology & Toxicology, College of Veterinary Medicine, University of Baghdad E-mail: sajakareem253@yahoo.com.

#### **Abstract:**

This study was conducted to investigate the stability in experimentally induced resistance in sensitive Escherichia coli for comparison with clinical resistant strains of the same microorganism so the first step was collected of 14 strains of E.coli from different disease cases: diarrhea (children= 6, calve= 3, poultry= 1), UTI (urine= 2), mastitis (milk= 2). And identificated these strains by using biochemical tests. These strains were divided to sensitive and resistant strains to cefquinome (β-lactam antibacterial) according to the results of sensitivity test (Agar well diffusion method). The minimum inhibitory concentration (MIC) by tube dilution method (TDM) was estimated to 8 selected strains (4 sensitive and 4 resistance) for comparison. The MIC values for sensitive strains were 0.007, 0.003, 0.017 and 0.005 µg/ml, for resistant strains were 372, 400, 42 and 25 µg /ml for cefquinome respectively. The second step was to induce resistance to sensitive strains in vitro by exposing the microorganisms to sub inhibitory concentration (1/4 MIC) of antibacterial for 14 passages through which the bacteria was reidentified by using a differential media to exclude any contamination. The new MIC values were 1.25, 0.8, 2.0 and 1.5 µg/ml for cefquinome respectively. The comparison method was employed to study the degree of stability of resistance in sensitive and resistant strains against this drug are in vivo by multiple injections (three times) of standard suspension test microorganisms in mice followed by reisolation and reidentification from liver. The mean of drop MIC value for sensitive strainswas 10.34 folds, and for resistant strains was increase in 1.40 folds for cefquinome, which represent statistically significant a drop in the values of MIC for sensitive strains but in the resistant strains not significant because a slight elevation in the values of MIC.

**Key words**: Escherichia coli, sensitivity test, MIC, in vivo, antibacterial.

ثبات المقاومة المستحثة ومقارنتها مع العتر المقاومة المعزولة سريريا في جرثومة الاشريشيا القولونية سجى رحمان كريم الساعدي أ. د. علي عزيز الخياط فرع الفسلجة و الأدوية، كلية الطب البيطري، جامعة بغداد

#### الخلاصة

اجريت الدراسة الحالية لمعرفة مدى ثبات المقاومة في جراثيم الاشريشيا القولونية بالعتر الحساسة التي استحدثت بها المقاومة بالمقارنة مع العتر المقاومة سريريا وذلك من خلال جمع اربعة عشر عترة من جراثيم الاشريشيا القولونية من مختلف الامراض المسببة لها :الاسهال (اطفال=1 وعجول=7 ودواجن=1) والتهاب المجاري البولية (٢) والتهاب الضرع

(٢). وتم تشخيص هوية الجرثومة بالأوساط الكيموحيوية والتغريقية وباستخدام عدة ال IAPIلخاص بها. وقسمت العتر الى مجموعتين حساسة و مقاومة للسفكوينوم (بيتا لاكتام) اعتمادا على نتائج فحص الحساسية و بعد ذلك قدرت حساسية ثماني عتر من جراثيم E.coli (MIC) (ببعة حساسة و اربعة مقاومة) لمضاد السفكوينوم باختبار التركيز المثبط الادنى (TDM) بطريقة التخفيف بالانابيب (TDM) حيث كانت اقيام ال MIC (مكغم/مل) للعتر الحساسة هي ٢٠٠٠، ٢٠٠٠، ٢٠٠٠، ٢٠٠٠، ١٥٠٠، السفكوينوم على التوالي . ولغرض إحداث المقاومة في العتر الحساسة مختبريا تم تعريض هذه العتر إلى تركيز واطئ منالسفكوينوم (ربع قيمة ال MIC) اربعة عشر تمريرة تم خلالها التاكد من هوية البكتريا بزرعها على الوسط التفريقي لاستبعاد حصول التلوث وقدرت أقيام ال MIC بعد ذلك فوجدت كالتالي (مكغم/مل) ١٠٥،٢،٠،١،١٠٥ للسفكوينوم على التوالي . و لغرض مقارنة ثبات المقاومة في العتر المقاومة المتكرر للجراثيم في الفئران وإعادة عزلها وتنقيتها من الكبادها وقياس معدل هبوطقيم ال MIC للعتر الحساسة هي ٣٤،٠١ ضعفا وللعتر المقاومة زيادة هي ١٠٤٠ ضعفا للسفكوينوم في العتر الحساسة بينما تظهر العتر المقاومة في اقيام ال MIC ليس لها فرق معنوى احصائيا.

الكلمات المفتاحية: الاشريشيا القولونية،MIC،API، في الحي ،المضاد الحيوي.

#### **Introduction:**

Antibiotics constitute one of the most significant contributions of modern science. The discovery of these life-saving drugs transformed the health-care scene during the last century. Antibiotics are widely used in human and veterinary medicine to treat and prevent diseases and as growth promoters in animal intensive industries. The consequences are severe. Infections caused by resistant microbes fail to respond to treatment, resulting in prolonged illness and greater risk of death. The increasing incidence of resistance to a wide range of antibiotics microorganisms is a major concern facing modern medicine (1). Escherichia coli are normal inhabitants of the gastrointestinal tract of animals and humans of which only some strains have become highly adapted to cause diarrhea and a range of extraintestinal diseases. Escherichia coli is the most common cause of food and waterborne human diarrhea, urinary tract meningitis, peritonitis, infection, septicemia, and gram-negative bacterial pneumonia infection and other complications which are depending on the virulence factors E.coli causes (2). The development of resistance to older agents such as ampicillin and trimethoprimsulfamethoxazole, as well as the emerging problem of fluoroquinolone resistance. may substantially limit our antibiotic choices (3). The search for more beta-

lactamase-stable, broad-spectrum cephalosporins led to the development of the new class of beta-lactams: the so-called fourth generation cephalosporins 4GC such cefquinome an aminothiazolyl , cephalosporin for exclusive use veterinary medicine for, as well as similar and cefpirome in human cefepime medicine for injection used. It hashigher affinity to penicillin binding proteins, Lower affinity and higher stability to betalactamases and Improved penetration into the periplasmatic space increases the intrinsic potency. It was used to treatment of respiratory disease and mastitis (4).

# **Materials and Methods:**

present study 14 strains of Escherichia coli were collected from different disease cases. These isolated spices were identified by studying morphological examination (Gram stain, MacConky blood agar culture, culture, Eosin Methylene blue agar culture, motility test) and some biochemical tests (indoltest, catalase test, API 20 E). The average number of viable E. coli cell per ml of the stock suspension wasdetermined by taking 1 ml from overnight culture (nutrient broth) of E. coli suspension washing with 9 ml of Peptone water, then taking 1 ml of this suspension and making serial ten-fold dilution to comparison with Standard McFarland tube No.0.5 and

Spectrophotometer were used to measure the turbidity of E. coli suspension. In this study,these strains were divided sensitive and resistant strains cefquinome by used agar well diffusion method (sensitivity test) and broth dilution MIC methods (macrodilution). All these methods described in this protocol is in accordance with the international recommendations given by the National Committee for Clinical Laboratory Standards (NCCLS) (5). In this study the resistance in sensitive strains were induced after determining the initial MIC by exposing the test bacteria to sub minimum inhibitory concentration in Muller Hinton broth with incubation for 24 hours at 37C°. Repeating this method fourteen times until induction of new resistance generations for this drug, purification of bacteria by differential media (MacConky agar) for 24 h at 37 Co, and MIC values of drug was made after 14 passages and compared with initial as follow.

Proportional MIC (increase) = final MIC/initial MIC(6).

In vivo was employed to compare the stability of induced resistance with that carried by clinical isolates. Bacteria isolates (sensitive and resistance) were injected inoculums as 0.5 ml of intraperitoneally in laboratory animals (mice) using 30 mice type BALA/C, mal, range between 4-6 months age, and weighed between 18-24 g .They were divided sporadically in 3 groups:

- 1-Resistant bacteria group (12 mice) was divided to four sub groups, one to each strain.
- 2-Sensitive bacteria group (12 mice) was divided to four sub groups, one to each strain.
- 3-Control group (6 mice), was injected sterile media broth.

The injection was repeated three times, in each time the animals were sacrificed after three days and reisolationfrom liver on differential media for 24 hours at 37 C° and purification of the bacteria was done.

After that reestimated of MIC value of cefguinome in natural and induced resistance bacteria and then compared between them.

No. (1)

#### Results and Discussion:

The results of morphological biochemical test show that the test microorganisms are motile, pink rod shape (Gram negative), pink colonies MacConky agar because their ability to ferment lactose, Green-metallic sheen on Eosin methylene blue agar culture, positive for catalase enzyme and produce indole, resemble the description Escherichia coli mentioned by other workers (7). The API 20E test was done by incubation of strip for 24h at 37 C° and the result was readaccording to guide of manufacture company.

Antibacterial susceptibility tests: Different concentrations of cefquinome (1000, 100, 10, 1, 0.1 µg/ml) were used in agar well diffusion assay, caused different degrees of the results was seen in table (1). The organisms were selected based on their World Health Organization (WHO) classification to resistance and sensitive, when cefauinome at 10 µg/ml concentration was given the diameter of inhibition zone equal or less than 19 mm is resistance while it was equal or more than 23 mm is sensitive (8). In our study, the means diameter of inhibition zone to sensitive strains at 10 µg/ml are 25.67 mm while to resistant strains at the same concentration are 5.33 mm these results were close to Series of studies on the resistance of E. coli which were isolated animals and humans strongly from suggested that those bacteria which are resistant to antimicrobials used in animals would also be resistant to antimicrobials used in humans (9.10).

The values of MIC were estimated by tube dilution method are listed in table (2). These were 0.007, 0.003, 0.017, 0.005 µg/ml for sensitive strains and 372, 400, 42, 25  $\mu g/ml$ for resistant strains respectively. According to the National Committee for Clinical Laboratory Standards (NCCLS), the equivalent MIC resistance and breakpoints sensitive established are  $\geq 4$  and  $\leq 8$  µg/ml respectively (11). A high level of susceptibility to cefquinome has been demonstrated in sensitive group pathogenic *E.coli*. These results are close to that limbertet al.,(12) when they found the MIC value ranged between 0.006-0.781 µg/ml against pathogenic Escherichia coli, While Al-Taher, (13)estimated suceptibility of E.coli strains from diarrheic isolated calves cefquinome 0.06-2 µg/ml,but in our study cefquinome susceptibility reached more than these values perhaps, because it is newly used in our country, in addition to, specific molecular structure cefauinome provides higher affinity topenicillin binding proteins (PBPs), higher stability to AmpC-type betalactamase also, less likely to be hydrolyzed by extended spectrum beta-lactamases (ESBLs) and improved penetration into the periplasmatic space increases the intrinsic potency (14). The first report of resistance to cefquinome in E. coli of equine and origin. Luhofer*et* al., determined cefquinome resistance to E.coli to be equal or more of 8 µg/ml, but in methicillin resistant Staphylococcus aurous (MRSA) the MICs ranged between  $1.563-50 \, \mu g/ml$  (12). In our study we observed that resistance to cefquinome can reach to 400 µg/ml. The predominant characteristic of beta-lactam resistance in E. coli and other gram-negative bacteria is the production of beta-lactamases. The relatively narrow-spectrum lactamases but others have a much broader spectrum, such as extended-spectrum betalactamases (ESBLs), which can hydrolyze many different beta-lactams. ESBLs may be encoded by single plasmids and chromosomal independent.A change in outer membrane proteins (OMP) is a different mechanism of resistance. High-

level resistance to fourth- generation of cephalosporin appears to require the synergistic activity of two mutations: enhanced beta-lactamase hyperproduction and hydrolysis, and decreased membrane permeability (16). Recently, efflux has become increasingly recognized as a major component of resistance. Some efflux selectively pumps extrude specific antibiotics such as macrolides, betalactames and tetracyclines, whereas others referred to as multiple drug resistance pumps. Nine proton-dependent efflux pumps have been identified in E. coli so far. This cause the efflux of many (two or more) antibiotics leading to miltidrug resistance MDR (17).

The results of exposure of susceptible microorganisms inhibitory to sub concentration (1/4 of MIC value) of cefquinome used for seven and fourteen passages are listed in table (3). After 7 passages the mean MIC values was 0.386 µg/ml for cefquinome, which represent an increase of 57.29 folds. After 14 passages the MIC values was 1.39 µg/ml, which represent an increase of 205.35 folds. Although, the elevation in cefquinome resistance did not pass the breakpoint resistance because it is highly sensitive and need more passages, nevertheless we called resistance metaphorically. Exposure of *E.coli* to different levels of antibacterial drug may result in increase in degree of resistance as reported before by many workers (18, 19, 20).

InVivo: The stability of antibacterial resistance when bacteria were injected and reisolated for three times in mice. The results of this experiment represent all sensitive strains showed dramatic drop in the values of MIC. The greatest drop was seen (26.66 folds) however, the values did not return to the value seen before exposure to sub inhibitory concentration. All drops in resistance was statistical significant. In contrast resistant strains showed insignificant increase, the mean of elevation folds were (1.28, folds), see the

table (4,5). The difference in rate of resistance lose can be explained on basis of (plasmid resistance type of chromosomal) and whether it is stable or unstable (21). The resistance tended to be lost after passage this strain in vivowas nonspecific and unstable because it found onsmall plasmids bands interaction between E.coli and the host immune system is complex. The outcome of an infection is the result of a balance between the in vivo environment where the bacteria survive, grow and the regulation of fitness genes at a level sufficient for the bacteria to retain their characteristic rate of growth in a given host. This adaptation does not confer increased resistance but can be detected as an enhancement in the bacterial net growth rate later in the infection. The enhanced growth rate is lost

upon a single passage in vitro, and it is therefore transient and not due to selection of mutants (23). This study was supported the insignificant resistance increase which occurred resistant clinical isolates. Enterobacteriaceae are capable of exchanging resistance genes under intestinal conditions in animals. It has been shown that genetic transfer of determinants for drug resistance can occur rapidly in vitro, but frequency of transfer in vivo is lower (10).

## **Conclusion:**

Induced resistance to cefquinome by exposure to subinhibitoryconcentration was unstable when the microorganisms were passed for three times in mice while no change in degree of resistance in resistant clinical isolates when these were passed for three times in mice.

Table (1): Mean diameter of inhibition zone (mm)  $\pm$  SE of cefquinome at different concentrations against different resistant and sensitive strains of *E.coli*.

Conc. (µg/ml)					
Mean±	1000	100	10	1	0.1
SE	30.50 ±	28.42 ±	25.67 ±	20.75 ±	16.75 ±
of	0.41	0.59	0.92	0.74	0.56
sensitive					
strain					
Mean±	19.83 ±	14.50 ±	5.33 ±	0.00 ±	$0.00 \pm$
SE	0.86	1.05	0.42	0.00	0.00
of					
resistant					
strain					
T- test	6.54 *	5.89 *	8.05 *	6.33 *	4.17 *
Value					
(P<0.05)*					

T-test value comparison between mean of sensitive and resistant strains for each concentration.

Table (2): Initial MIC value of sensitive and resistant strains of *E.coli* to cefquinome.

Strains	Initial MIC (µg/ml) for sensitive strains	Strain	Initial MIC (µg/ml) for resistant strains	
S1	$0.007 \pm 0.002$	R5	372.00 ±1.20	
S2	$0.003 \pm 0.001$	R6	400.00 ±5.78	
S4	$0.017 \pm 0.006$	R8	42.00 ± 1.15	
S5	$0.005 \pm 0.002$	R10	25.00 ± 2.89	
Mean± SE	$0.008 \pm 0.002$	Mean ± SE	209.75 ± 6.21	
Т-				
	ue   28.05 *			
(P<0.05)*				

T-test value comparison between mean ofinitial MIC for sensitive and resistant strains. R: Resistance strain. S: Sensitive strain.

Table (3): The initial and final MIC values of sensitive strains of *E.coli* after seven and fourteen passages in vitro in media contains sub inhibitory concentration (1/4 MIC) of cefquinome and the folds of elevation.

Strains	Initial MIC (µg/ml)	MIC after 7 times of passages	Fold of elevation	MIC after 14 times of passages	Folds of elevation
S1	0.007 0.002	0.500 ± 0.057	71.42	1.25 ± 0.144	178.50
S2	0.003 ± 0.001	0.145 ± 0.058	48.33	0.80 ± 0.057	266.66
S3	0.017 ± 0.006	0.500 ± 0.057	29.41	2.00 ± 0.289	117.64
S5	0.005 0.002	0.400 ± 0.057	80.00	1.50 ± 0.288	258.60
LSD Value * (P<0.05	12.96 *				

Table (4): Stability of resistance of cefquinome which was measured after bacteria were injected for 3 times in laboratory animals (mice).

	injected for 5 times in ideoratory diffines;					
	Initial MIC	Final MIC	Change in			
Strains	(µg/ml)	(μg/ml)	folds of			
S 12 W1115	(MB/)	(M8/)	resistance			
			resistance			
S1	$1.25 \pm 0.14$	$0.08 \pm 0.02$	15.62			
51	1.25 ± 0.14	0.00 ± 0.02	13.02			
			•			
S2	$0.80 \pm 0.05$	$0.03 \pm 0.01$	26.66			
22	0.00 = 0.00	0.00 = 0.01	_ <del>_</del>			
<b>S4</b>	$2.00 \pm 0.28$	$0.26 \pm 0.06$	<b>7.</b> 69			
			♦			
~ <del>-</del>	1.05	0.00	14.04			
S5	$1.25 \pm 0.14$	$0.08 \pm 0.02$	<b>10.34</b>			
			▼			
Moon	1 22 + 0 27	0.11 + 0.02	15.00   2.16			
Mean±	$1.33 \pm 0.27$	$0.11 \pm 0.03$	$15.08 \pm 2.16$			
SE						
R5	372.00 ±1.20	400.00± 15.3	1.12			
KS	3/2.00 -1.20	400.00± 13.3	1.12			
			l			
R6	400.00 ±5.78	$428.33 \pm 6.00$	1.07			
-10	100100 20170	1201002 0100				
<b>R8</b>	$42.00 \pm 1.15$	$65.00 \pm 7.64$	1.54			
D40	<b>A=</b> 00 <b>A</b> 00	25.00 2.00	1 10			
R10	$25.00 \pm 2.89$	$35.00 \pm 2.89$	<b>1.4</b> 0			
Maan	200.75 + 6.21	227.00 + 6.22	1 20 + 0.06			
Mean±	$209.75 \pm 6.21$	$237.08 \pm 6.33$	$1.28 \pm 0.06$			
SE						
T-test	44.32 *	41.93 *	6.33 *			
	77102	71,73	0.00			
Value						
(P<0.05)*						
(2 1000)						

T-test value comparison between mean of initial and final MIC for sensitive and resistant strains.

R: Resistance strain. S: Sensitive strain.  $\downarrow$  = **Decrease.**  $\uparrow$  = **Increase.** 

Table (5): Change of resistance (folds) to cefquinome was resulted after three injections in laboratory animals.

Strain	Cefquino	Strain	Cefquino
	me		me
R5	1.12	S1	15.62
R6	1.07	S2	26.66
R8	1.54	S4	7.69
R10	1.40	S5	10.34
L.S.D	0.846 NS	L.S.D	6.31 *
Value		Value	
(P<0.05)*			

R: Resistance strain. S: Sensitive strain.  $\downarrow =$ **Decrease.**  $\uparrow =$ **Increase.**  $\uparrow =$ **Increase.** 

## **References:**

- 1- Sengupta, S. and Chattopadhyay, M.K. (2012). Antibiotic resistance of bacteria: Adlobal challenge antimicrob. Agents Chemother., 55(1):177-191.
- 2- Mohammad, S.; Mahboob, H. and Shaila, K. J. (2010). A survey on antimicrobial sensitivity pattern of different antibiotics on clinical isolates of *Escherichia coli* collected from Dhaka city, Bangladesh Appl. Sci. Environ. Manage., 14 (3) 19 20.
- 3- Karlowsky, J.A.; Kelly, L.J.; Thornsberry, C.; Jones, M.E. and Sahm, D.F. (2002). Trends in antimicrobial resistance among urinary tract infection isolates of *Escherichia coli* from female outpatients in the United States. Antimicrob. Agents Chemother., 46:2540-2545.
- 4- Belongia, E. (2007). Beware wider use of antibiotics in animals. Star.Tribune., Pp. 9-13.
- 5- National Committee for Clinical Laboratory Standards. Methods for Dilution Antimicrobial Susceptibility Tests for Bacteria that Grow Aerobically Fifth Edition. Approved Standard NCCLS Document M7-A5, Vol. 20, No. 2, NCCLS, Wayne, PA, January 2000.
- 6- Limb, D.T.;Dabbs, D.J. and Spencer, R.C. (1987). In Vitro selection of bacteria resistant to the 4 quinolone agents .J. of Antimicrob.Agents Chemother.19:65-71.
- 7- Huang, C.J.; Lin, H. and Yang, X. (2012). Industrial production of recombinant herapeutics in *Escherichia coli* and its recent advancements. J. Ind. Microbiol. Biotechnol., 39 (3): 383-99.
- 8- WHO. (World Health Organization) (2002). Use of

- antimicrobials outside human medicine and resultant antimicrobial resistance in humans. World Health Organization.
- 9- Miles, T.D.; McLaughlin, W. and Brown, P.D. (2006). Antimicrobial resistance of *Escherichia coli* isolates from broiler chickens and humans. BMC Vet. Res., 2: 7.
- 10- Bryana, J.; Leonardb, N.; Fanningc, S.; Lisa Katza, L. and Duggan, V. (2010). Antimicrobial resistance in commensal faeacal Escherichia coli of hospitalised horses. Irish Veterinary Journal. 63 (6): 2046-2081.
- 11- NCCLS (2002). Development of *in vitro* Susceptibility Testing Criteria and Quality Control Parameters for Veterinary Antimicrobial Agents; Approved Guideline Second Edition. NCCLS document M37-A2. Vol. 22, No.7, NCCLS, Wayne, PA, USA.
- 12-Limber, M.; Isert, D.; Klesel, N.; Markus, A.; Seeger, K.; Seibert, G. and Schrinner. E. (1991).Antibacterial activities in vitro and in vivo pharmacokinetics of Cefquinome (HR broad-spectrum 111V), a new cephalosporin. Antimicrob. Agents Chemother.; 35: 14-19.
- 13- Al-Taher, A.Y. (2010). Pharmacokinetics of cefquinome in camels. Jornal of animal and veterinary advances, 9(4): 848-852.
- 14- Bryskier, A. (1997). New concepts in the field of cephalosporins: quarternary ammonium cephems (Group IV). Clin. Microbiol. Infect. 3 (1): 1-6.
- 15- Luhofer, G.; Bottner, A.; Hafez, H.M.; Kaske, M.; Kehrenberg, C. and Kietzmann, M. (2004). Layout Proposal of the working group "Antibiotic Resistance" for microtitre plates to be used in routine

- susceptibility testing of antimicrobial bacterial pathogens from infections of large food-producing animals and from mastitis cases. Berl.Munch.Tierarztl. Wschr.,117: 245-251.
- Hammerum, A.M. and Heuer, O.E. 16-(2009). Human health hazards from antimicrobial-resistant Escherichia coli of animal origin. Clinical Infectious Diseases, 48:916-21.
- 17-Jayaraman, R. (2009). Antibiotic resistance: an overview of mechanisms and a paradigm shift. Current Science, 96(11): 1474-1484.
- 18-Al-Kaisy, W.S. (1992). A Study of Some Aspects of Resistance for Three Antibacterials Currntly Used for Treatment of Infection In E. coli Broilers. M.sc.Thesis , University of Baghdad / Medicine College Veterinary Pharmacology and Toxicology. Iraq.
- 19-Abid, A.K. (1997). Combination of Antibacterials as a Mean of Suppresion of Emerged Resistance in Escherchia Coli 078. P.H.D. Thesis , University of Baghdad / Veterinary Medicine College, Pharmacology and Toxicology. Iraq.

- Ngwai, Y.B.; Garasin, 20-U.M.; Ngbede, F.E.; Nkene, I.H. and Akpotu, M.O. (2011). Sub-growth concentrations of ceftriaxone and gentamicin induce changes in phenotypes of Escherichia coli. Research International Journal Microbiology, 2(9): Pp: 333-337.
- 21-Mawer, S.L. and Greenwood, D. Specific and non-specific (1978).resistance to aminoglycosides in Escherichia coli. Journal of Clinical Pathology, 31:12-15.
- 22-Abdul-Sattar, U.K. (2008). Study of Plasmid and Protein Discipline of Escherichia coli Responsible For the Contamination of Major Rivers in Iraq. M.sc.Thesis , University of Baghdad / Institute of Genetic Engineering and Biotechnology. Iraq.
- 23-Mastroeni, P.; Morgan, J.E.; McKinley, T.J.; Shawcroft, E.; Clare, S. Maskell, D.J.and Grant, A.J. (2011). Enhanced Virulence of Salmonella enterica Serovar Typhimurium after Passage through Mice. Infection and immunity, Feb., 79(2): Pp: 636-643.