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**Evaluation of *staA*, *viaB* and *sopE* genes in *Salmonella* detection using conventional polymerase chain reaction (PCR)**

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FK acquired, analyzed and interpreted the data, drafted and revised the manuscript. PG acquired the data, evaluated and interpreted antimicrobial resistance data. The concept and design of the study and manuscript revision were performed by FK, AN, GJ, PK, JK.

## 26 **Abstract**

27

28 Typhoid fever is caused by the bacteria *Salmonella enterica* subspecies *enterica* serovar  
29 Typhi (*S. Typhi*) and remains a significant health problem in many developing countries. The lack  
30 of adequate diagnostic capabilities in these poor resource settings have contributed greatly in  
31 making typhoid fever endemic in these regions. Reliable and inexpensive diagnostic tests are  
32 needed to improve the management of this disease burden. This study evaluated the ability of  
33 *staA*, *viaB* and *sopE* genes to detect *Salmonella* spp. Conventional polymerase chain reaction  
34 (PCR) amplification of *staA*, *viaB* and *sopE* genes of *Salmonella* was used to detect and  
35 differentiate between the three most prevalent *Salmonella* spp. in Kenya (*S. Typhi*, *S.*  
36 *Typhimurium* and *S. Enteritidis*). The *staA* primers (StaA-Forward / StaA-Reverse) and *viaB*  
37 primers (vi- Forward / vi- Reverse) were found to be specific only for the different strains of *S.*  
38 *Typhi*, producing PCR products of 585 bp and 540 bp respectively. No amplification was observed  
39 with *S. Typhimurium*, *S. Enteritidis*, *E. coli* and *S. boydii* bacterial strains. The *sopE* primers  
40 (SopE- Forward / SopE- Reverse) was demonstrated to be specific for all *Salmonella* spp.  
41 producing a 465 bp PCR product with no amplification observed with the *E. coli* and *S. boydii*  
42 bacterial strains. Conventional PCR using these *staA* and *viaB* primers for detection of *S. Typhi*  
43 shows great potential for diagnosis of typhoid fever however, further studies need to be carried out  
44 with actual food samples and human samples (blood, stool or saliva) to determine the effectiveness  
45 of this method in the detection of common *Salmonella* spp. in Kenya.

46

## 47 **Author summary**

48 Typhoid fever is a severe disease caused by the bacteria *Salmonella Typhi* (*S. Typhi*) and  
49 is a significant health problem in many developing countries. The lack of adequate diagnostic

50 capabilities in poor resource settings common in most public health facilities in Kenya and Africa  
51 in general, hinder prompt diagnosis of typhoid fever. Currently, the available diagnostic tests are  
52 often expensive and more so not readily available in most resource poor endemic areas. This has  
53 often led to misdiagnosis of the disease, thereby delaying appropriate treatment and making  
54 typhoid fever widespread in most resource poor areas. This study examines the ability of three  
55 different genes to detect and differentiate between the three most prevalent *Salmonella* strains in  
56 Kenya using a readily available and widely used genetic test known as conventional polymerase  
57 chain reaction (PCR). This research found that *staA* and *viaB* genes were specific only for *S. Typhi*,  
58 while the *sopE* gene was specific for all *Salmonella* strains. Consequently, conventional PCR using  
59 these *staA* and *viaB* genes for detection of *S. Typhi* shows great potential to be used as a readily  
60 available diagnostic tool to detect the presence of the *S. Typhi* organism in individuals or foods  
61 sample in Kenya.

62

## 63 **Introduction**

64 Microbial food borne diseases are widespread and have resulted in considerable economic  
65 losses in many parts of the world particularly the low-income developing countries of South East  
66 Asia, Africa, and Latin America [1,2]. *Salmonella* is a major foodborne pathogen responsible for  
67 a large number of food-poisoning cases in humans both in the developed and developing countries.  
68 For example, *Salmonella* accounts for approximately 65% and 11% of food poisoning cases in  
69 France [3] and the United States [4] respectively. Additionally, the costs associated with  
70 *Salmonella* infections are also remarkably high. For example, according to the World Health

71 Organization (WHO), the *Salmonella* associated costs in the United States of America are  
72 estimated at US\$ 3.6 billion annually [5].

73 In the sub-Saharan Africa, the disease burden is high and the cost constraints prevent the creation  
74 of robust surveillance programs and the widespread use of newer, more effective but expensive  
75 diagnostic tool, thus making *Salmonella* incidences endemic [6]. Large outbreaks of *Salmonella*  
76 infections have been associated with poor sanitation and poor hygiene conditions [7]. Transmission  
77 of *Salmonella* to humans has been linked to numerous sources, including contaminated and  
78 uncooked poultry and poultry products, meat, milk and other dairy products, pork, fresh vegetables  
79 and fruits as well as contaminated water and contact with infected animals [8,9].

80 Typhoid fever is a bacterial disease, caused by the typhoidal *Salmonella* serovar *S. Typhi* and is  
81 transmitted through the ingestion of food or drink contaminated by the faeces or urine of infected  
82 people or carriers. It is a significant health problem in many developing countries. Worldwide, an  
83 estimated 17 million cases [10] occur annually with most of the disease burden occurring among  
84 citizens of low-income countries, particular those in South East Asia, Africa, and Latin America.  
85 [1]. To avoid severe complications or even the loss of life because of salmonellae infections,  
86 definite and accurate diagnosis and treatment need to be initiated as soon as the onset symptoms  
87 of the infection begin to manifest. However, the lack of adequate diagnostic capabilities in poor  
88 resource settings common in most public health facilities in Kenya and Africa in general, hinder  
89 prompt diagnosis of Salmonellae infections particularly typhoid fever. This has often led to  
90 misdiagnosis of the disease, thereby delaying appropriate treatment and making typhoid fever  
91 endemic in most resource poor areas.

92 To improve accurate and early detection of *Salmonella Typhi* (*S. Typhi*) in Kenya, we  
93 tested the ability of three pairs of primers targeting three different genes: SopE invasion-associated

94 secreted protein (Gene ID: 1250812), ViaB region DNA for Vi antigen (GI: 426443) and StaA  
95 fimbrial protein (Gene ID: 1246701) to detect and differentiate *S. Typhi* from other salmonella  
96 serovars and closely related disease causing bacteria.

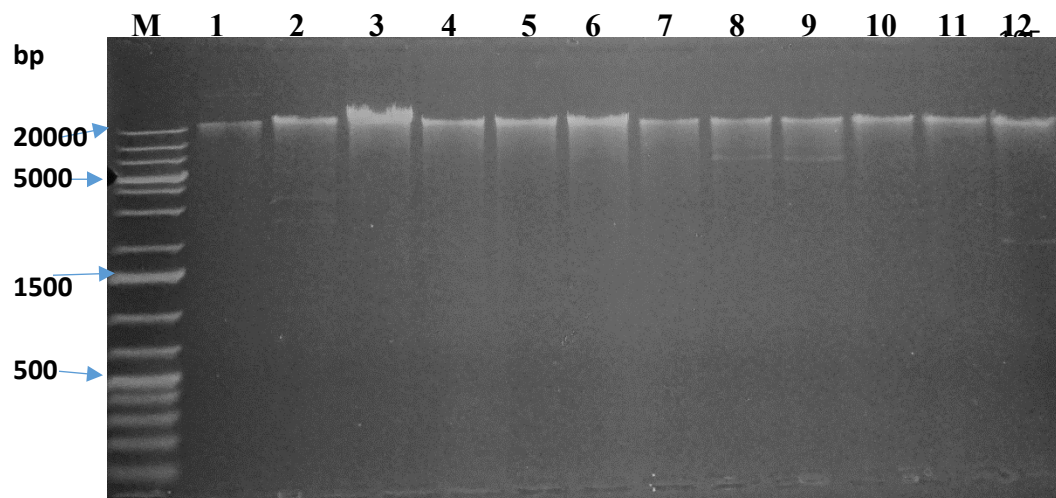
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## 98 **Results**

### 99 **Genomic Products from DNA Extraction**

100 An overnight (16 hrs. @ 37 °C) 5ml culture of each of the bacterial isolates was harvested  
101 and DNA extracted using the standard phenol-chloroform method. The genomic DNA products  
102 extracted from the twelve (12) bacterial isolates, was analyzed and confirmed on a 1% agarose gel  
103 (Fig 1).

104



113 **Figure 1. 1 % Agarose gel of Genomic DNA products isolated from**  
114 **various bacterial isolates.**

115 Lanes 1-12 represent DNA isolated from various bacteria using the standard phenol-chloroform method. M - 1kb DNA ladder, 1- *E. coli*, 2 - *S. boydii*, 3 - *S. Typhimurium*, 4 - *S. Typhi* (s), 5 - *S. Typhi* (i), 6 - *S. Typhi* (r), 7 - *S. Typhimurium* (s), 8 - *S. Typhimurium* (i), 9 - *S. Typhimurium* (r), 10 - *S. Enteritidis* (s), 11 - *S. Enteritidis* (i), 12 - *S. Enteritidis* (r)

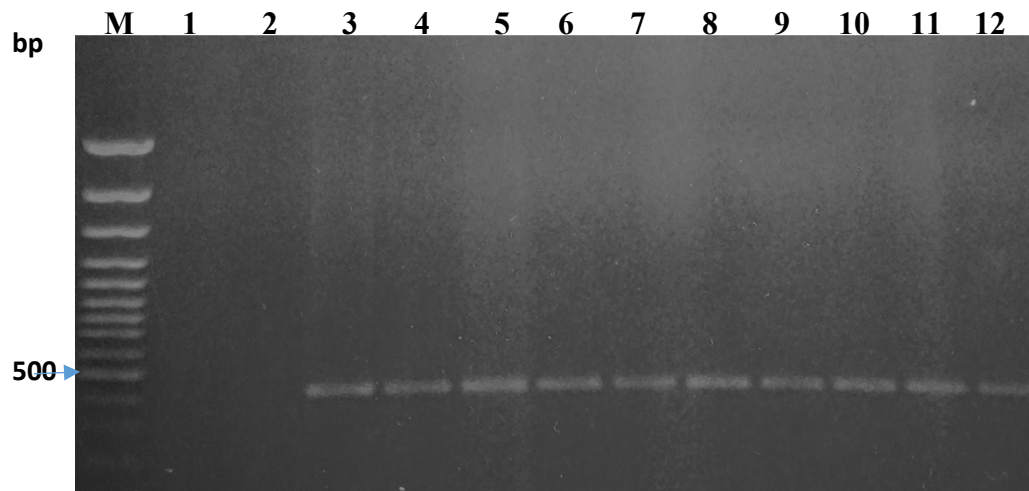
## 116 Evaluation of the primers

117 The specificity of each set of primers (table 2) was tested against each of the bacterial  
118 isolates (table 1). The 16s rRNA primers (Minf / Minr) was able to confirm the genus *Salmonella*.  
119 Amplification occurred for all the tested *Salmonella* spp. resulting in a 402 bp pcr product. No  
120 amplification was observed from the *E. coli*, *S. boydii* bacterial strains using the same primers  
121 (figure 2).

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**Figure 2. 1% Agarose gel of the PCR products using 16S rRNA target primers and DNA templates extracted from various bacterial isolates. (Expected product size is 402 bp).**

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M (100 bp DNA ladder). Lane 1-12 (PCR product of various bacteria using 16S rRNA target primers). 1- *E. coli*, 2 - *S. boydii*, 3 - *S. Typhimurium*, 4 - *S. Typhi* (s), 5 - *S. Typhi* (i), 6 - *S. Typhi* (r), 7 - *S. Typhimurium* (s), 8 - *S. Typhimurium* (i), 9 - *S. Typhimurium* (r), 10 - *S. Enteritidis* (s), 11 - *S. Enteritidis* (i), 12 - *S. Enteritidis* (r)

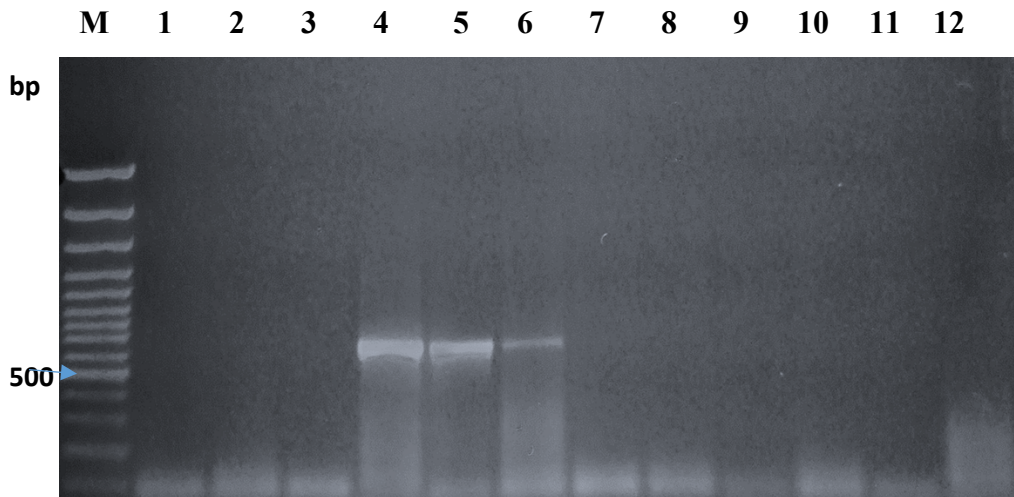
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131 The *staA* primers (StaA-Forward / StaA-Reverse) and *viaB* primers (vi- Forward / vi-  
132 Reverse) were found to be specific only for the different strains of *S. Typhi*, with amplification  
133 resulting in a 585 bp (figure 3) and 540 bp (figure 4) PCR product respectively. No amplification  
134 was observed with *S. Typhimurium*, *S. Enteritidis*, *E. coli* and *S. boydii* bacterial strains.

135 The *sopE* primers (SopE- Forward / SopE- Reverse) was found to be specific for all  
136 *Salmonella* spp. with PCR amplification resulting in a 465 bp product (figure 5). No amplification  
137 was observed with the *E. coli*, *S. boydii* bacterial strains.

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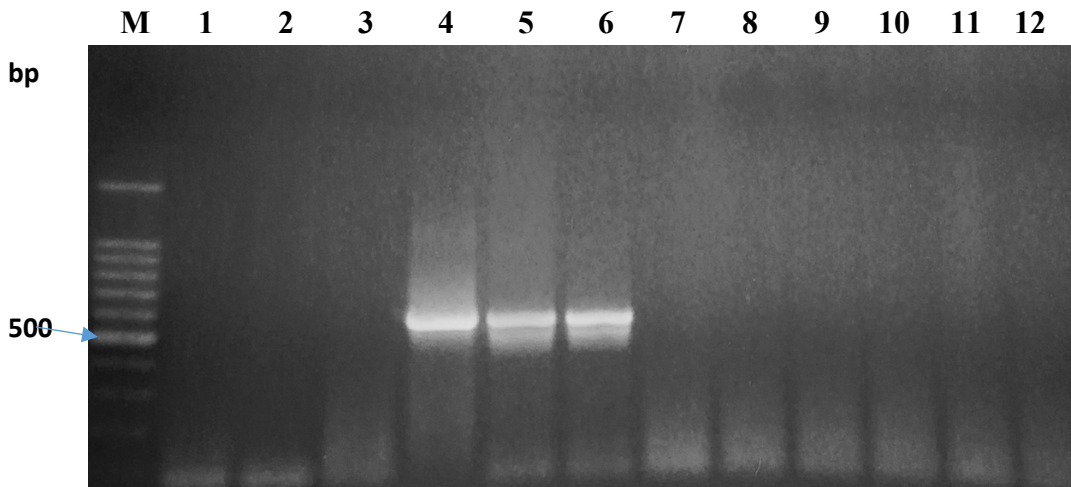
**Figure 3. 1% Agarose gel of the PCR products using *staA* target primers and DNA templates extracted from various bacterial isolates. (Expected product size is 585 bp).**

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M (100 bp DNA ladder). Lane 1-12 (PCR product of various bacteria using *staA* target primers). 1- *E. coli*, 2 - *S. boydii*, 3 - *S. Typhimurium*, 4 - *S. Typhi* (s), 5 - *S. Typhi* (i), 6 - *S. Typhi* (r), 7 - *S. Typhimurium* (s), 8 - *S. Typhimurium* (i), 9 - *S. Typhimurium* (r), 10 - *S. Enteritidis* (s), 11 - *S. Enteritidis* (i), 12 - *S. Enteritidis* (r).

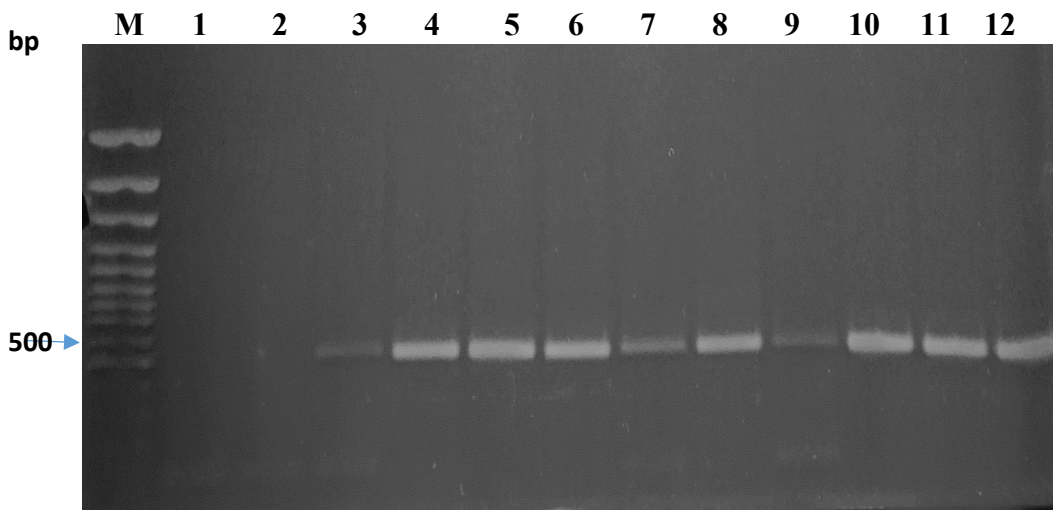
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147 **Figure 4. 1% Agarose gel of the PCR products using *viaB* target primers and**  
148 **DNA templates extracted from various bacterial isolates. (Expected product**  
149 **size is 540 bp).**

150 M (100 bp DNA ladder). Lane 1-12 (PCR product of various bacteria using  
151 *viaB* target primers). 1- *E. coli*, 2 - *S. boydii*, 3 - *S. Typhimurium*, 4 - *S.*  
152 *Typhi* (s), 5 - *S. Typhi* (i), 6 - *S. Typhi* (r), 7 - *S. Typhimurium* (s), 8 - *S.*  
153 *Typhimurium* (i), 9 - *S. Typhimurium* (r), 10 - *S. Enteritidis* (s), 11 - *S.*  
154 *Enteritidis* (i), 12 - *S. Enteritidis* (r)



155 **Figure 5. 1% Agarose gel of the PCR products using *sopE* target primers**  
156 **and DNA templates extracted from various bacterial isolates. (Expected**  
157 **product size is 402 bp).**

158 M (100 bp DNA ladder). Lane 1-12 (PCR product of various bacteria using  
159 *sopE* target primers). 1- *E. coli*, 2 - *S. boydii*, 3 - *S. Typhimurium*, 4 - *S.*  
160 *Typhi* (s), 5 - *S. Typhi* (i), 6 - *S. Typhi* (r), 7 - *S. Typhimurium* (s), 8 - *S.*  
*Typhimurium* (i), 9 - *S. Typhimurium* (r), 10 - *S. Enteritidis* (s), 11 - *S.*  
*Enteritidis* (i), 12 - *S. Enteritidis* (r)



## 161 **Discussion**

162

163           The goal of this study was to analyze the ability of three different sets of primers (*staA*,  
164 *viaB* and *sopE*) to identify *S. Typhi* strains circulating in Kenya and examine their capacity to  
165 identify and differentiate commonly isolated *Salmonella* spp. and closely related bacteria. The  
166 results demonstrated the ability of the designed primers targeting the *StaA* fimbrial protein gene  
167 (*staA* gene), the *ViaB* region DNA for *Vi* antigen gene (*viaB* gene) and the *SopE* invasion-  
168 associated secreted protein gene (*sopE* gene) to detect *Salmonella* serovars isolated from different  
169 regions in Kenya using conventional (qualitative) PCR. The primers targeting the *staA* gene and  
170 the *viaB* gene were both found to be specific for only *S. Typhi* while the primers targeting the  
171 *SopE* gene were able to detect all tested *Salmonella* serovars but not any of the non-*Salmonella*  
172 bacteria.

173           It has been noted that there has been an increase in multidrug-resistant (MDR) *S. Typhi*  
174 isolated from patients in Kenya since 1997 and sporadic outbreaks have also been reported in  
175 resource-poor settings, especially in slum areas [11–14]. This very alarming trend will continue to  
176 burden the Kenyan health system especially with poor diagnostic capabilities, the increasing rate  
177 of over-the-counter sale without prescription of first-line antibiotics for typhoid fever and the  
178 continued overcrowding and population rise within the slum areas [15]. The primers used in this  
179 study targeting the *staA* gene and the *viaB Salmonella* genes demonstrated their ability to only  
180 detect *S. Typhi* bacterial using conventional PCR. This may provide another tool in the accurate  
181 diagnosis of patients with typhoid fever in resource poor, endemic regions. Additionally, primers  
182 targeting the *SopE salmonella* gene may be used to also identify human nontyphoidal *Salmonella*  
183 (NTS) infections in Kenya, that have increased markedly over the years with the two main serovars

184 isolated from cases of bacteremia and gastroenteritis with high fatality, being *S. Typhimurium* and  
185 *S. Enteritidis* [13]. With an increased prevalence of multidrug resistance among NTS serotypes  
186 [16], conventional PCR using primers targeting the *sopE* salmonella gene used in this study can  
187 be applied to identify NTS when combined together with conventional PCR using *staA* or *viaB*  
188 primers used in this study.

189 The *staA* primers (StaA-Forward / StaA-Reverse), and *viaB* primers (vi- Forward / vi-  
190 Reverse) used in this study have been shown to be specific only for the different strains of *S.*  
191 *Typhi* in Kenya and may be used as a diagnostic tool to detect the presence of the organism in  
192 individuals or foods samples using conventional pcr methods. Additionally, the *sopE* primers  
193 (SopE- Forward / SopE- Reverse) in this study were proven specific for the three most common  
194 *Salmonella* spp. while discriminating the closely related bacteria *E. coli* and *S. boydii* bacterial  
195 strains. Further studies are to be carried out with actual food samples and human samples (blood,  
196 stool or saliva) to determine the effectiveness of conventional pcr using these *staA* primers, *viaB*  
197 primers and *sopE* primers in the detection of common *Salmonella* spp. in Kenya.

198

## 199 **Materials and methods**

200

### 201 **Bacterial strains**

202 *Salmonella* strains were obtained from the Centre for Microbiology Research (CMR) at the  
203 Kenya Medical Research Institute (KEMRI) [17,18] and Kenyatta national hospital [14] in  
204 Nairobi, Kenya. The isolates were confirmed using slide agglutination techniques, conventional  
205 Polymerase Chain Reaction and Antimicrobial susceptibility testing. The 3 most common  
206 salmonella serovars: *Salmonella Typhi*, *Salmonella Typhimurium* and *Salmonella Enteritidis* were

207 used in this study with each serovar consisting of 3 subtypes: susceptible (S), intermediate (I) and  
208 resistant (R). Three standard organisms: *Escherichia coli* (*E. coli*) ATCC 25922, *Shigella boydii*  
209 (*S. boydii*) ATCC 9207 and *Salmonella* Typhimurium (*S. Typhimurium*) ATCC 14022 from the  
210 National Microbiology Reference laboratory (NMRL) at the National Public Health Laboratory  
211 (NPHL) in Nairobi, Kenya were also included in the study (Table 1).

212 The bacteria stock cultures were maintained on a 5% nutrient broth agar slope at 4<sup>0</sup>C.  
213 Bacterial cultures for genomic DNA extraction were cultured in Tryptic Soy Broth (TSB) for  
214 salmonella bacteria and Luria-Bertani (LB) medium for non-salmonella bacteria. A sample of each  
215 culture was also plated on MacConkey plates for salmonella bacteria and LB agar plates for non-  
216 salmonella bacteria.

217

1	<i>E. coli</i> ATCC 25922	4	<i>S. Typhi</i> (S)	7	<i>S. Typhimurium</i> (S)	10	<i>S. Enteritidis</i> (S)
2	<i>S. boydii</i> ATCC 9207	5	<i>S. Typhi</i> (I)	8	<i>S. Typhimurium</i> (I)	11	<i>S. Enteritidis</i> (I)
3	<i>S. Typhimurium</i> ATCC 14022	6	<i>S. Typhi</i> (R)	9	<i>S. Typhimurium</i> (R)	12	<i>S. Enteritidis</i> (R)

218 **Table 1.**

219 List of bacterial isolates used in the study

220

221

### 221 **DNA Isolation**

222 Genomic DNA was extracted from a pure culture following the standard phenol-  
223 chloroform method [19]. Quantification of DNA was done spectrophotometrically using a UV  
224 mini 1240 UV-VIS spectrophotometer (Shimadzu, Kyoto, Japan).

### 225 **PCR Primers**

226 1 6S rRNA target primers [20] were used for salmonella enterica bacteria confirmation. The  
227 *staA* [21], *viaB* and *sopE* primers were used to differentiate between different salmonella serovars

228 and also differentiate non-salmonella bacteria. The list of all the primers (Inqaba biotec, Pretoria,  
229 South Africa) is indicated in table 2.

230

Gene and Primer	Length	Tm (°C)	Amplified fragment size (bp)	Source (GenBank Accession numbers)
16s rRNA				
MINf- Forward (5'-ACGGTAACAGGAAGCAG-3')	17	51.7	402	J01859.1
MINr- Reverse (5'- TATTAACCACAACACCT -3')	17	44.4		
<i>viaB</i>				
vi- Forward (5'- ATG AGG TTT CAT CAT TTC TGG CC-3')	23	55.6	540	NC_003198.1
vi- Reverse (5'- TTA CAG TAA AGT AAC TGA ATC CGG C-3')	25	54.9	(4524679-4524140)	(AL513382.1)
<i>sopE</i>				
SopE- Forward (5'-ATG CTT CAA ACG CTC AAT GAT ATA G-3')	25	53.7	465	NC_003198.1
SopE- Reverse (5'-TCA GGG AGT GTA TTG TAT ATA TTT ATT AGC -3')	30	52.8	(4482059-4482523)	(AL513382.1)
<i>staA</i>				
StaA-Forward (5'- ATG AAA AAA GCG ATT TTA GCT GC -3')	23	52.9	585	NC_003198.1
StaA-Reverse (5'- TTA CTG GTA AGT AAA GGT ATA CAT TGC -3')	27	52.9	(217411-216827)	(AL513382.1)

231

**Table 2.**

232

List of primer used in identification and differentiation of salmonella bacteria

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234

235 **Conventional PCR Amplification of *staA*, *viaB* and *sopE* Gene**

236

PCR amplification of the 16S rRNA, *staA*, *viaB* and *sopE* genes was carried out with 50

237

ng of purified genomic DNA (template DNA), 1 μM of upstream primer, 1 μM of downstream

238

primer, 1X GoTaq Green Master Mix solution (Promega, Wisconsin, USA) and nuclease-free

239

water (Promega, Wisconsin, USA) to a final volume of 20 μl. The amplification reaction was

240

performed on a Tprofessional thermal cycler (Biometra, Goettingen, Germany) with the following

241 temperature and duration profile (Table 3): A volume of 10  $\mu$ l of the PCR product was analyzed  
242 on a horizontal 1 % (w/v) agarose gel.

243

Cycle step	Temperature	Time	Number of Cycles
<b>Initial Denaturation</b>	95	2 minutes	1
<b>Denaturation</b>	95	1 minute	
<b>Annealing</b>	43 °C (16S rRNA) 51 °C ( <i>staA</i> ) 53 °C ( <i>viaB</i> ) 51 °C ( <i>sopE</i> )	45 seconds	35
<b>Extension</b>	72 °C	1 minute	
<b>Final Extension</b>	72 °C	10 minutes	1
<b>Hold</b>	4 °C	$\infty$	1

244 **Table 3:**  
245 Temperature programme used in the PCR amplification of the 16S rRNA,  
246 *staA*, *viaB* and *sopE* genes

246

## 247 **Acknowledgments.**

248

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250 Institute and Kenyatta National Hospital in Nairobi, Kenya for providing access to different  
251 bacterial strains and raw samples.

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254

255 **Competing interests**

256 The authors declare that they have no competing interests.

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