Evidence for an indigenous female mouse urobiome

Sidra Sohail [1], Daniel Bushnell [2], Mark Khemmani [1], Sridhar Narla [2], Olivia Lamana [3], Bhanu Sharma [2], Robert B. Moreland [1], Alan J. Wolfe [1*], Catherine S. Forster [2*]

[1] Department of Microbiology and Immunology, Stritch School of Medicine, Loyola University Chicago, Maywood, IL, USA

[2] Department of Pediatrics, University of Pittsburgh School of Medicine and UPMC Children's Hospital of Pittsburgh, Pittsburgh, PA, USA

[3] Biomedical Research Institute, Rockville, MD, USA

*Co-Corresponding authors:

Catherine Forster, MD, MS
4401 Penn Ave
FP 3133
Pittsburgh, PA 15224
Ph: 412-692-8337, Email: forstercs@upmc.edu

Alan J. Wolfe, PhD
2160 South First Ave
CTRE
Maywood, IL 60153
Email: awolfe@luc.edu

Keywords: 16S rRNA gene sequencing, Microbiome, Mouse, Urinary tract, Urobiome

Author contributions: AJW and CSF designed and implemented the original study protocol and obtained funding. DB, SN, OL, and BS did the mouse work. MK processed the samples for sequencing. SS analyzed the data. MK and SS constructed the figures. AJW, MK, and CSF interpreted data. AJW, CSF, MK, RBM, and SS wrote the manuscript. All authors reviewed and approved the manuscript.

Funding: CSF was supported by 1K23DK129783. AJW was supported by a contract with Pathnostics.

Disclosure statement from authors
AJW discloses membership on the Scientific Advisory Boards of Urobiome Therapeutics, Pathnostics, and Cerillo. He also discloses funding from the Craig H. Neilsen Foundation, Pathnostics, and an anonymous donor. The rest of the authors have no relevant disclosures.

Data availability: Raw sequencing reads are publicly available at the NCBI SRA database (BioProject ID: PRJNA1229522).

Abstract

Mice have been used as a valuable model of understanding pathophysiological mechanisms of urinary tract infection for almost six decades. Mice offer many advantages including genetic manipulation to test the role of genes and mechanisms, the availability of germ-free mice, and similarities to humans in innate immune defenses and the strain-dependent presence of vesicoureteral reflux. However, like with humans, the mouse bladder urine above the urinary sphincter has generally been assumed to be sterile. Yet, given the presence of urobiomes in other mammals and the emerging role of the human urobiome in the defense of the urinary bladder and upper urinary tract, the existence of a mouse urobiome should be critically examined as indigenous microbiota may influence experimental results. To determine if an indigenous murine urobiome exists, we obtained expressed urine from two sets of female C57BL/6J mice during three different intervals using two different extraction and sequencing methods and analyzed them simultaneously by a single method. For one set, we also obtained urine by suprapubic aspiration, which we compared to the paired expressed urine samples. We conclude that an indigenous murine urobiome exists and that expressed urine contains post-urethral microbes.

Introduction

Urinary tract infections (UTI) are among the most common infections in clinical practice (1). Commonly diagnosed with urine dipstick and in office urinalysis, UTIs are responsible for the bulk of antibiotic prescriptions worldwide, leading to antibiotic resistant microbes (2). UTIs, especially when they recur, are associated with renal scarring and can lead to eventual renal failure (3, 4). In one autopsy study of all-cause mortality, healed pyelonephritis was found in 18% of patients while a total of 33% demonstrated evidence of active or healed pyelonephritis (3). Consequently, understanding the pathophysiological mechanisms involved in UTIs is of key importance (5).

Urine has long been believed to be sterile above the urethral sphincter (6, 7). This belief is reinforced by false negative urine dipstick analyses, and the fact that most standard urine cultures (SUC) exhibit no growth in the absence of symptoms. However, much of the myth of urine sterility is due to SUC methods that favor facultative anaerobes, such as members of the genera *Escherichia*, *Pseudomonas*, *Klebsiella*, *Proteus*, *Staphylococcus*, and *Enterococcus*, with *Escherichia coli* by far considered the predominant cause of UTI (5, 6, 8). We now know that human bladder urine is not sterile and that appropriate culture conditions can culture 70% of the genera detected by DNA sequencing methods (8, 9). Furthermore, negative

SUC or urine dipstick tests can miss many important emerging uropathogens, as

well as lead to unnecessary antibiotic use that destroys the indigenous healthy

urinary microbiome (also known as the urobiome) (1).

Research aimed at bettering our understanding of the virulence mechanisms and

host-pathogen interactions in UTI have relied on animal models (10). Key in

experiments with dogs, cats, rats and mice has been the assumption that urine

above the urethral sphincter is sterile and that introduction of test microbes reflects

human UTI. Recently, this notion has been disproved with low biomass,

indigenous microbiota in dogs (11-14), cats (15) and rats (16, 17). While defining

low biomass microbiota brings challenges associated with ruling out contamination

(15, 18, 19), the indigenous microbiota may play a role in the defense of the

bladder and understanding normal states and dysbiosis are key in any model of

UTI, as well as in human disease (20-23).

Mice have been used as a valuable model of understanding pathophysiological

mechanisms of UTI for almost six decades (10). Mice offer many advantages

including genetic manipulation to test the role of genes and mechanisms, the

availability of germ-free mice (which lack microbiota), and similarities to humans

in innate immune defenses and the strain-dependent presence of vesicoureteral

reflux (10, 24). However, like with humans, the mouse bladder urine above the

urinary sphincter has generally been assumed to be sterile. Yet, given the presence

of urobiomes in other mammals and the emerging role of the human urobiome in

the defense of the urinary bladder and upper urinary tract, the existence of a mouse

urobiome should be critically examined as indigenous microbiota may influence

experimental results. Indeed, two studies provide some evidence that a mouse

urobiome does exist.

One study examined microbes from mouse bladder urine sampled by suprapubic

aspirates using aerobic culture methods and viability assays (25). By aerobic

culture, they found 150 ± 220 CFU/ml (n=5); however, when cell viability was

examined using a BacLight LIVE/DEAD bacterial viability assay, they found $4.5 \pm$

2.8×10^6 cells/mL. These were scored as "viable but not culturable." Another study

examined the effect of microbiota on the transcriptome and weight of the urinary

bladder by comparing germ-free (GF) and specific pathogen-free (SPF)-housed

mice (26). The GF urinary bladders had on average 25% lower weight than

bladders from mice housed under standard SPF conditions. These experiments

were carried out in two different facilities using two different C57BL/6 substrains.

Histologically, hematoxylin-eosin-stained sections of GF and SPF bladder tissue

showed regular bladder tissue composition. The difference in bladder weight was

not correlated to any tissue structural changes by histological assessment of stained

sections. To confirm that reduced bladder weight was not a microbiota-driven

developmental anomaly, the investigators depleted microbiota among SPF-housed

mice using broad-spectrum antibiotics. This continuous antibiotic treatment

reproduced the reduced bladder weight phenotype in SPF mice. Thus, reduction in

bladder weight was consistent with an adaptive bladder change in response to the

absence of microbiota or their products. This study suggests that microbiota can

have a profound effect on the host it inhabits. Since germ-free mice are devoid of

gut and bladder microbiota, it is impossible to distinguish the effect of urinary

microbiota from gut microbiota. However, removing all microbiota from mice

affects urinary bladder weight and size. Taken together, these two studies provide a

compelling reason to ask whether an indigenous murine urobiome exists.

To answer this question, we obtained expressed urine from two sets of female

C57BL/6J mice during three different intervals using two different extraction and

sequencing methods and analyzed simultaneously by a single method. For one set,

we also obtained urine by suprapubic aspiration, which we compared to the paired

expressed urine samples. We conclude that an indigenous murine urobiome exists

and that expressed urine contains post-urethral microbes.

Materials and methods

Ethics Statement

This study was carried out in strict accordance with the recommendations in the

Guide for the Care and Use of Laboratory Animals of the National Institutes of

Health. This study was approved by the institutional animal care and use

committees at the University of Pittsburgh (protocol 23124147) and the

Biomedical Research Institute (protocol 20-01) prior to initiation of the work.

Suprapubic aspirations were performed under inhaled isofluorane anesthesia, and

all efforts were made to minimize suffering.

Mice. Two sets of female C57BL/6J mice (Jackson Labs, Bar Harbor, ME; stock

no. 000664) were analyzed. We allowed a three-week acclimation period prior to

urine collection for animals in set 1; the mice were 10 weeks at the time of urine

collection. For set 2, which were housed in a different institution, we allowed a

one-week acclimation period prior to urine collection; the mice were 10 weeks at

the time of urine collection. The mice in set 3 were some of the same mice in set 1,

but they were aged for an additional 4 months. There were no interventions or

other experimental procedures performed in the mice in set 3 while they aged. The

mice in set 3 were 27 weeks at the time of collection.

Housing and husbandry: All mice were socially housed with 5 mice per cage, with

standard enrichment in accordance with guidelines of the Association for

Assessment and Accreditation of Laboratory Animal Care. All animals within each

set were housed within the same room within the same vivarium and were given

the same chow and water from the same source. All mice for this work were

commercially-purchased: no mice were bred for this work.

Animal Care and Monitoring: Bladder expression for urine is not generally a

painful procedure and routine analgesia was not provided. Mice was anesthetized

with isoflurane prior to suprapubic aspiration. We had both ketoprofen and

buprenorphine available should mice display any signs of pain or distress, but no

mice required analgesia. There were no expected or unexpected adverse events. As

this was an observational study of the mouse urobiome, the endpoint was obtaining

sufficient urine for urobiome analysis. No mice were euthanized as part of this

work.

Urine Collection

<u>Expressed Urine</u>. To collect expressed urine samples, we first scruffed each mouse

while holding the tail up in the palm of the collector's hand and used alcohol wipes

to clean the perineum. The mouse was then held over the open tube (sterile, DNase

and RNase-free microcentrifuge tubes), and suprapubic pressure applied to induce

voiding directly into the tube without any contact with the lid or rim. We had to

combine urine samples from multiple expressions to obtain sufficient urine volume

for sequencing, which we determined was a minimum of 0.5 mL. On average, each

voiding produced approximately 50 µL of urine. We added AssayAssure® (nucleic

acid preservative, Sierra Molecular Corp, Princeton, NJ, LOT G3030C) to the

urine in a 1:9 ratio and froze the sample at -80°C. For sets 1 and 2, only expressed

urine was obtained.

<u>Suprapubic Aspiration</u>. For set 3, we obtained paired urine samples collected by

both expression (as described above) and suprapubic aspiration. To minimize the

time between the expressed and aspirated samples for each mouse, we collected the

expressed samples immediately before collecting the aspirated samples. For

suprapubic aspiration, we anesthetized the mice with inhaled isoflurane prior to

aspiration. Once anesthesia was confirmed, we placed the mice on their backs and

used Nair^{TM} (Church and Dwight Co, Ewing, NJ) to remove the fur on the

suprapubic region. We then thoroughly cleaned the area with alcohol swabs. We

placed the ultrasound probe (VisualSonics RMV 710B Ultrasound Imaging

Scanhead 25 MHz 70 x 140 μm for Vevo 770, FUJIFILM VisualSonics Inc,

Toronto, Canada) on the abdomen with the ultrasound machine (Vevo 770 High-

Resolution In Vivo Micro-Imaging System, FUJIFILM VisualSonics Inc, Toronto,

Canada) on the maximum refresh rate. Once the bladder was in view, we inserted a

1mL syringe with a 30G needle into the abdomen and into the bladder under

ultrasound guidance. From the bladder, we aspirated the urine and transferred it

into a sterile Eppendorf tube (Fisher brand Premium 1.5 mL MCT Graduated

Natural Eppendorf Tubes, sterile, RNase/DNase free, Cat No. 05-408-129). We

added AssayAssure® (Sierra Molecular Corp, Princeton, NJ, LOT G3030C) in a

1:9 ratio and stored the samples at -80°C.

Genome Extraction. For sets 1 and 3, each mouse's multiple samples of urine were thawed at 4°C and then pooled into a single microcentrifuge tube. Next, 0.5 mL of urine was transferred to a deepwell plate, which was centrifuged for 10 mins at 1300 x g and all but 100 μL of supernatant was removed. Enzymatic treatment consisting of 4 mg Lysozyme, 3 kU Mutanolysin, 4 μg Lysostaphin, and 200U Achromopeptidase in buffer (20 mM Tris, 2 mM EDTA, 1.2% Triton, pH 8.0) were added to each sample and incubated at 37°C, 5 hours, shaking intermittently at 1000rpm (Eppendorf Thermomixer with SmartBlock DWP1000). Samples were then processed using the Dneasy 96 Blood & Tissue kit (Qiagen, Germantown, MD) according to the manufacturer's instructions. To assess potential DNA contamination, extraction negative controls (no urine) were processed with samples and sequenced in every run. For set 2, genomic DNA was isolated using the DNeasy PowerSoil Kit (Qiagen, Germantown, MD), according to kit instructions, with the exception that DNA was eluted from the column with nuclease-free water (Sigma-Aldrich, St. Louis, MO).

Sequencing. The urine samples from sets 1 and 3 were sequenced by SeqCenter (Pittsburgh, PA), where they were prepared using Zymo Research's Quick-16S kit with phased primers targeting the V4 regions of the 16S rRNA gene (5'-GTGYCAGCMGCCGCGGTAA-3', 5'-GGACTACNVGGGTWTCTAAT-3') and sequenced. Following clean-up and normalization, samples were sequenced on a

P1-600cyc NextSeq2000 Flowcell to generate 2 x 301 bp PE reads. Adapters were

trimmed.

The urine samples from set 2 were sequenced by the Genomics and Epigenomic

Shared Resource at the Lombardi Comprehensive Cancer Center at Georgetown

University. Library preparation and sequencing was performed according to

Illumina 16S Metagenomics Sequencing Library Sample Preparation Guide. In

brief, genomic DNA isolated from mouse urine samples was used to amplify the

16S V3-V4 region. The primers used for the amplification were 16S Amplicon

PCR Forward Primer (5'-

TCGTCGGCAGCGTCAGATGTGTATAAGAGACAGCCTACGGGNGGCWGC

AG) and 16S Amplicon PCR Reverse Primer (5'-

GTCTCGTGGGCTCGGAGATGTGTATAAGAGACAGGACTACHVGGGTATC

TAATCC). The IDT-Illumina DNA-RNA UD Indices SetA Tagmentation index kit

was used for the index PCR. The amplicons were pooled and sequenced with

MiSeq v3 600 cycle reagent kit (Illumina) with 15% PhiX spike-in.

Taxonomic Identification. For sets 1, 2, and 3, high-quality reads were obtained

by trimming low-quality sequences using Cutadapt (27). The DADA2 software

(28) was then used to process the reads through filtering, dereplicating, removing

chimeras, and constructing an amplicon sequence variant (ASV) abundance table.

ASVs were annotated using the Bayesian LCA (BLCA) method (29) and the NCBI

database. ASVs with BLCA confidence scores below 70% were labeled

"unknown." For sets 1 and 3, ASVs linked to the genus *Lysobacter* were excluded

due to its recognized presence as a contaminant in the achromopeptidase enzyme

used during the DNA extraction process; for set 2, ASVs linked to *Lysobacter*

were excluded for comparability to sets 1 and 3. Additionally, ASVs with total

counts below the sample number threshold were excluded (n=48/52/54 for sets 1,

3, and 2, respectively). Contaminant ASVs were identified using control samples

and were determined via a scoring method that encompasses results from

Decontam (30), nonparametric statistical testing (Kruskal-Wallis $p<0.5$), mean

comparison (i.e., mean counts of samples were less than mean counts of extraction

controls), and whether sample read counts were less than the 5x greater than

extraction controls counts. Decontaminated ASV counts were used for downstream

analysis.

Analysis. For each set, the downstream analyses included beta diversity as

measured by Principal Coordinate Analysis (PCoA) of decontaminated ASV

counts. Following taxonomic identification, histograms and heatmaps were

constructed showing the 49 most relatively abundant genera plus the categories

"other" and "unknown." With the histograms, we included total read count for each

genus. These analyses were performed in R (R 4.3.1). For the PCoA, the Bray-

Curtis distance was calculated using the vegdist function in the vegan library

version 2.6.6.1 (31) and the resulting Bray-Curtis distance matrix was input to the

pcoa function in the ape library version 5.8 to perform PCoA. The first two axes of

the PCoA output were graphed using the plotly library version 4.10.4. The Bray-

Curtis distance matrix was used as input to the PERMANOVA function in the

PERMANOVA library version 0.2.0 to calculate the p-value. The relative

abundance graphs were created by aggregating ASVs at the genus level and

applying the transform function from the microbiome library (version 1.26.0) to

transform the sample counts and visualizing the relative abundance using the plotly

library (version 4.10.4). The heatmap analysis was graphed using the Heatmap

function in the ComplexHeatmap library version 2.20.0 (32). To directly compare

expressed urine samples from all three sets, the decontaminated ASV count tables

from each set were combined into one database. Suprapubic aspirate samples were

excluded. To directly compare paired suprapubic aspirates and expressed urine

from the mice of set 3, the decontaminated ASV count tables were combined into

one database. For both analyses, beta diversity, heatmap, and taxa histograms were

performed as described above. For biplot analysis, genus level PCA was performed

with the prcomp function (stats library v. 4.4.1) and visualized as a 3D biplot

using factoextra   (v.1.0.7)**.**

Results

We first determined a minimal urine volume for mouse urobiome studies, comparing 16S rRNA gene sequencing results across a range of urine volumes aliquoted from the same pooled urine from 4 different female mice. We determined that 500 µL was the smallest volume sufficient to extract and sequence enough DNA to adequately assess the urobiome while accounting for urine collection feasibility **(Supporting Fig. 1).**

Supporting Figure 1. Determination of the smallest volume sufficient to extract and sequence enough DNA to adequately assess the urobiome while accounting for urine collection feasibility. Histogram showing the 49 most relatively abundant genera detected in the extraction controls and expressed urine from 5 groups of mice. The category "Other" is an amalgamation of all other genera; the category "Unknown" represent all sequences that could not be identified. For each group of mice, different urine volumes were tested (125, 250, 500, 1000 µL). Note that the yellow line, which depicts total normalized arbitrary units (i.e., total reads per sample), correlates with sample volume, with 125µL producing numbers of reads apporximately the same as the extraction controls, while 1000 µL produced the largest number of reads. 500 µL were chosen for subsequent study as producing sufficiently high read numbers while balancing the feasiblity of obtaining urine from mouse bladders.

To determine whether the bioinformatically decontaminated data from each set of mice differed from their respective extraction controls, we performed PCoA using Bray-Curtis distances. For example, see **Supporting Fig. 2** for the analysis of the expressed urine samples of the set 1 mice. Although the samples differed significantly from the extraction controls (PERMANOVA, p = 0.003), some

samples appeared similar to the controls. However, a histogram of aggregated

ASVs at the genus level and total read counts revealed substantial differences in

terms of composition with total read counts of samples 10- to 100-fold greater than

those of the extraction controls (**Supporting Fig. 3**). Based on these results, we

decided to include all samples in the downstream analyses.

Supporting Figure 2. Example beta (between sample) diversity analysis used
to determine whether expressed urine samples from set 1 (blue) differ from
extraction controls (red). Several samples appear to be quite similar to the
extraction controls.
299
Supporting Figure 3. Example histogram comparing the compositions of
samples and extraction controls from set 1. The histogram shows the 49 most
relatively abundant genera plus plus the categories "other" and "unknown"
detected in the samples and extraction controls from Supplemental Figure 2. Left
Y-axis, relative abundance; right Y-axis, $\log_{10}$ of total units (i.e., reads). Note that
the compositions of the samples differ from those of the extraction controls and
that the samples contain at least 10-fold more reads than the controls. On the basis
of this analysis, we decided to keep all samples for downstream analyses.

As a first step towards determining if an indigenous murine urobiome exists, we

first determined whether the expressed samples from the three sets of mice

contained bacteria (**Fig. 1, Fig. 2**). **Figure 1** is a set of three histograms (one for

each set of mice), showing the 49 most relatively abundant genera across all three

sets of mice, plus the categories "other" and "unknown." **Figure 2** is a heatmap

that presents the expressed urine samples from all three sets of mice. Taken

together, these two figures show that the expressed urines contained DNA evidence

of bacteria. The most prevalent and predominant genus in all three sets was

Staphylococcus. Other less prevalent but predominant genera included

Enterococcus (all sets) and *Mammaliicoccus* (sets 1 and 3).

Figure 1. Three histograms showing the 49 most relatively abundant genera
detected in each of the 3 sets of mice. The category "Other" is an amalgamation
of all other genera; the category "Unknown" represent all sequences that could not
be identified.
322
Figure 2. Heatmap showing the 49 most relatively abundant genera detected
in the 3 sets of mice. The category "Other" is an amalgamation of all other genera;
the category "Unknown" represent all sequences that could not be identified. Set 1,
light blue; set 2, dark blue; set 3, green.

To compare the compositions of the expressed samples, we performed a PCoA.

The three sets differed significantly whether tested together (**Fig. 3,**

PERMANOVA, p = 0.001) or pairwise (**Supporting Fig. 4A-C**, PERMANOVA, p

= 0.001 for all comparisons). Thus, the young mice housed in 2 different facilities

(10 weeks of age; sets 1 and 2) differed significantly as did the young mice (set 1)

and aged mice (6 ½ months of age; set 3). However, there appeared to be

substantial overlap between the three sets. Sets 1 and 2 (both which included

samples from young mice) had considerable overlap (**Supporting Fig. 4A**), as did

sets 1 and 3 (young and aged mice) (**Supporting Fig. 4C**). Even sets 2 and 3 had

some overlap (**Supporting Fig. 4C**).

To identify the genera most responsible for distinguishing each set from the others,

we performed a biplot analysis, which identified them as *Staphylococcus,*

Mammaliicoccus, Ligilactobacillus, Enterococcus, Ralstonia, Burkholderia,

Phenylobacterium, Escherichia, and *Bradyrhizobium* plus the categories "other"

and "unknown" (**Fig. 4**).

Figure 3. Beta (between participant) diversity analysis comparing all 3 sets of
mice. Principal coordinate analysis of Bray-Curtis distances with P-value
calculated using PERMANOVA.
345
346   **Supporting Figure 4. Beta (between participant) diversity analysis doing a**
347   **pairwise comparison of all 3 sets of mice.** Principal coordinate analysis of Bray-
348   Curtis distances with P-value calculated using PERMANOVA. (A) Set 1 versus set
349   2, (B) set 1 versus set 3, and (C) set 2 versus set 3.
350
Figure 4. Biplot analysis identifying the taxa that differentiate the 3 sets of
mice from each other.

Because some of these genera are considered to be environmental species, we

hypothesized that expressed urine contained post-urethral microbes and thus

compared the expressed urine samples of set 3 with their paired aspirated samples.

First, we determined that the decontaminated aspirated samples differed

significantly from the six extraction controls (**Supporting Fig. 5A**,

PERMANOVA, p=0.001). One sample (483) seemed to resemble some of the

controls, but when a genus level histogram was constructed, it differed sufficiently

to be included downstream analyses (**Supporting Fig. 5B**). Next, we compared the

two sample types, which differed significantly as determined by PCoA (**Fig. 5A,**

PERMANOVA, p=0.001). This also was true when comparing the relative

abundance of taxa between each pair of samples (**Fig. 5B**). The differences in

bacterial taxa between aspirated and expressed samples are also illustrated in the

heatmap (**Fig. 5C**). While the samples with the highest relative abundance of

potential post-urethral microbes (e.g., *Staphylococcus, Ralstonia, Burkholderia)*

are from expressed samples, some aspirated samples also contain these microbes,

although at lower relative abundance compared to expressed samples.

Supporting Figure 5. Comparison of suprapubic aspirate samples to
extraction controls for set 3. (A) Principal coordinate analysis of Bray-Curtis
distances with P-value calculated using PERMANOVA. Note that one sample
(483) appears to resemble the extraction controls. (B) Histogram showing the 49
most relatively abundant genera plus the categories "other" and "unknown"
detected in the samples and extraction controls from panel A. Left Y-axis, relative
abundance; right Y-axis, $\log_{10}$ of total units (i.e., reads). Note that the composition
of sample 483 differed from those of the extraction controls. On the basis of this
analysis, we decided to keep all samples for downstream analyses.
378
Figure 5. Comparison of urobiome composition in expressed urine versus
paired suprapubic aspirate from the mice in set 3. (A) Principal coordinate
analysis of Bray-Curtis distances with P-value calculated using PERMANOVA.
(B) Histograms showing the 49 most relatively abundant genera detected in the
paired expressed urine (top) and suprapubic aspirate (bottom) for each mouse in set
3. The category "Other" is an amalgamation of all other genera; the category
"Unknown" represent all sequences that could not be identified. (C) Heatmap
showing the 49 most relatively abundant genera detected in the paired expressed
urine and suprapubic aspirate for each mouse in set 3. The category "Other" is an
amalgamation of all other genera; the category "Unknown" represent all sequences
that could not be identified. Light blue, expressed urine; dark blue, suprapubic
aspirate.

Discussion

Here, we provide the first comprehensive report of the female mouse urobiome.

We document similarity between the urobiome from the same strain of mice

housed at different institutions, and an effect of age on the urobiome. Finally, we

used suprapubic aspiration to demonstrate that there is a mouse urobiome that

persists after removal of suspected contaminants, and that samples collected via

aspiration significantly differ from those collected by manual expression.

An important aspect of this work is the data necessary to support the design of

future research involving the mouse urobiome. First, we demonstrated that the

urobiome is relatively consistent between mice housed in different sites. The mice

in sets 1 and 2 were located in different institutions and had different facilities

perform both the DNA extraction and sequencing. Despite these differences and

significant differences based on PCoA analysis, there was substantial overlap

between these 2 groups, suggesting some similarity between the sets. Second, we

determined that 0.5 mL is an ideal urine volume for mouse urobiome studies.

While this may not always be feasible and requires pooling of urine collected at

different time points, this volume yielded sufficient sequencing depth. Third, we

showed that aged mice before the onset of reproductive transition (~6 ½ months)

have urobiomes that differ significantly from their younger adult selves (10 weeks)

but with substantial similarities. Finally, we showed that urine collected by manual

expression has a high proportion of microbes from post-urethral sources and that

collection of urine by a method that minimizes the risk of contamination, including

aspiration, will reduce the inclusion of these microbes in the urine sample. Thus,

when feasible, urine for urobiome studies from mice should be collected using a

method that minimizes the potential for contamination, such as suprapubic aspiration.

Our work shows a small effect of age on the mouse urobiome. This is consistent with results from adult women, where the urobiomes of younger continent adult females were more likely to be predominated by members of the genus *Gardnerella*, whereas older continent adult females were more likely to be predominated by *Escherichia* (33). The authors hypothesized that the differences in the urobiome that corresponded to age were attributable to hormonal changes associated with aging. The mice in our work, while older, had not yet reached the age of reproductive transition, which correlates to menopause in women. This may partially explain the observed differences, but still there is a substantial overlap between our aged and non-aged mice. Further work that involves mice past the age of reproduction will provide further insights on the effect of age and hormonal status on the mouse urobiome.

There is limited literature with which to compare our results. However, there are a few works that document the rat urobiome. For example, Liu et al. (16) examined the effects of antibiotics on the urobiome of female rats. They collected urine by urethral catheterization and used 16S rRNA gene sequencing to describe the urobiome. Their control animals, which did not have any interventions, had a urobiome. While there are several genera in common between the urobiome of

their control animals and our mice, it is notable that their most abundant genus,

Bacillus, was not within the 51 most abundant genera that we identified in mice.

Chen et al. also examined the rat urobiome but used autoclaved metabolic cages

for urine collection (17). Their genus level microbiome results from their female

control rats have several genera in common with what we report in mice, including

Escherichia, Streptococcus, and *Acinetobacter.* Thus, while not directly

comparable given the differences in species, these reports that document the

urobiome in rats lend credence to our data documenting the urobiome in mice.

One of the most relevant implications of our work, as well as our documentation of

the presence of the host urobiome, is related to preclinical *in vivo* UTI work. There

is a vast body of preclinical studies using the mouse model of UTI that have

yielded critical information about the pathobiology of uropathogenic *Escherichia*

coli and host immune responses related to UTI (10, 24, 34). However, a notable

aspect of this model is that mice require a large number of bacteria, usually 10^7

colony forming units of *E. coli,* to induce more than transient bacteriuria.

Furthermore, not all mice that have that large number of bacteria instilled into their

bladders develop bacteriuria. One previously overlooked factor into the

heterogeneity of UTIs in mice is the native urobiome and its role in colonization

resistance. The concept of colonization resistance has been described in the context

of probiotics in the gut microbiome in which features of the gut microbiome can

predict subsequent colonization by exogenous bacteria. Colonization resistance is

built on the concept that a microbiome is an ecologically stable community of

bacteria (35). Disrupting an ecologically stable community requires alteration of

the host microbiome such as through exposure to antimicrobials, alteration of the

host to affect availability of resources, or provision of a large influx of exogenous

microbes that subsequently outcompetes the native community, such as occurs in

the UTI model. Considering the role of the native urobiome in UTI susceptibility is

critical to development of more translatable models (22, 23).

Limitations of this work include a small sample size of mice in each group.

Furthermore, we only included female C57BL/6 mice, and our results cannot be

generalized to either male mice or female mice of other strains. It is likely that both

sex- and strain-based differences exist within the urobiome that should be

described in future work. Also, we used short-read (V4) 16S rRNA gene

sequencing, which typically yields only confidently identifies taxonomy at the

family or genus levels. Future work should include long read 16S rRNA gene

sequencing for confident species level identification. Despite these limitations, our

work does have several strengths. We obtained data from two different sets of mice

in two different facilities, used two different sequencing methods, but analyzed all

the sequence data simultaneously with a single analytic approach. We compared

expressed versus aspirated urine to describe the effects of post-urethral microbes

on expressed urobiome samples. We used an improved DNA isolation method that

uses an extra enzyme (lysostaphin) with longer incubation times to increase cell

wall breakage. Finally, in the analytic step, we used a multi-step decontamination

procedure.

Conclusions

480   There is a native mouse urobiome that is largely stable in the same strain of mice.

481   There is a small effect of age in female mice who are capable of reproduction.

482   Finally, use of suprapubic aspiration, or a similar technique, to bypass post-urethral

483   microbes, is critical for accurately assessing the mouse urobiome.

Acknowledgements

486   We gratefully acknowledge Melline Fontes Noronha for help with bioinformatics.

Author ORCIDs

488   Sridhar Narla   http://orcid.org/0000-0001-9066-2072
489   Olivia Lamanna   http://orcid.org/0000-0003-4479-6752
490   Robert B. Moreland   http://orcid.org/0000-0001-8175-9219
491   Catherine Foster   http://orcid.org/0000-0002-6233-1070
492   Alan J. Wolfe   http://orcid.org/0000-0003-4532-0545
493

References

1. Moreland RB, Brubaker L, Tinawi L, Wolfe AJ. Rapid and accurate testing for urinary tract infection: new clothes for the emperor. Clin Microbiol Rev. 2025;38(1):e0012924.
2. Simoni A, Schwartz L, Junquera GY, Ching CB, Spencer JD. Current and emerging strategies to curb antibiotic-resistant urinary tract infections. Nat Rev Urol. 2024;21:707–22.
3. MacDonald RA, Levitin H, Mallory GK, Kass EH. Relation between pyelonephritis and bacterial counts in the urine. N Engl J Med. 1957;256(20):915–22.
4. JawetzE. Urinary tract infections; problems in medical management. California Med. 1953;79(2):99–102.
5. Timm MR Russell SK, Hultgren SJ. Urinary tract infections: pathogenesis, host susceptibility and emerging therapeutics. Nat Rev Microbiol. 2025;23(2):72–86.
6. Brubaker L Chai T, Horsley H, Khasriya R, Moreland RB and Wolfe AJ. Tarnished gold—the "standard" urine culture: reassessing the characteristics of a criterion standard for detecting urinary microbes. Front Urol. 2023;3:1206046.
7. Wolfe AJ, Brubaker L. Discovering the Urinary Microbiome. American Scientist. 2024;112(3):168–75.
8. Price TK, Dune T, Hilt EE, Thomas-White KJ, Kliethermes S, Brincat C, Brubaker L, Wolfe AJ, Mueller ER, Schreckenberger PC. The Clinical Urine Culture: Enhanced Techniques Improve Detection of Clinically Relevant Microorganisms. J Clin Microbiol. 2016;54(5):1216–22.
9. Du J, Khemmani M, Halverson T, Ene A, Limeira R, Tinawi L, Hochstedler-Kramer BR, Noronha MF, Putonti C, Wolfe AJ. Cataloging the phylogenetic diversity of human bladder bacterial isolates. Genome Biol. 2024;25(1):75.
10. Murray BO, Flores C, Williams C, Flusberg DA, Marr EE, Kwiatkowska KM, Charest JL, Isenberg BC, Rohn JL. Recurrent Urinary Tract Infection: A Mystery in Search of Better Model Systems. Front Cell Infect Microbiol. 2021;11:691210.
11. Burton EN, Cohn LA, Reinero CN, Rindt H, Moore SG, Ericsson AC. Characterization of the urinary microbiome in healthy dogs. PLoS One. 2017;12(5):e0177783.
12. Coffey EL, Gomez AM, Burton EN, Granick JL, Lulich JP, Furrow E. Characterization of the urogenital microbiome in Miniature Schnauzers with

and without calcium oxalate urolithiasis. J Vet Intern Med.
2022;36(4):1341–52.

13. Coffey EL, Gomez AM, Ericsson AC, Burton EN, Granick JL, Lulich JP,
Furrow E. The impact of urine collection method on canine urinary
microbiota detection: a cross-sectional study. BMC Microbiol.
2023;23(1):101.

14. Coffey EL, Becker ZW, Gomez AM, Ericsson AC, Churchill JA, Burton EN,
Granick JL, Lulich JP, Furrow E. Dietary Features Are Associated with
Differences in the Urinary Microbiome in Clinically Healthy Adult Dogs.
Vet Sci. 2024;11(7):286.

15. Joubran P, Roux FA, Serino M, Deschamps JY. Gut and Urinary Microbiota
in Cats with Kidney Stones. Microorganisms. 2024;12(6):1098.

16. Liu F HL, Sheng J, Sun Y, Xia Q, Tang Y, Jiang P, Wei S, Hu J, Lin H, Xu Z,
Guo W, Gu Y, Feng N. Can antibiotics for enteritis or for urinary tract
infection disrupt the urinary microbiota in rats? Front Cell Infect Microbiol.
2023;28(13):1169909.

17. Chen X, Cheng Y, Tian X, Li J, Ying X, Zhao Q, Wang M, Liu Y, Qiu Y, Yan
X, Ren X. Urinary microbiota and metabolic signatures associated with
inorganic arsenic-induced early bladder lesions. Ecotoxicol Environ Saf.
2023;259:115010.

18. Karstens L Asquith M, Caruso V, Rosenbaum JT, Fair DA, Braun J, Gregory
WT, Nardos R, McWeeney SK. Community profiling of the urinary
microbiota: considerations for low-biomass samples. Nat Rev Urol.
2018;15(12):735–49.

19. Agudelo J, Miller AW. Impact of study design, contamination, and data
characteristics on results and interpretation of microbiome studies.
mSystems. 2025; Online ahead of print.

20. Bleich A FJ. The Mammalian Microbiome and Its Importance in Laboratory
Animal Research. ILAR J. 2015;56(2):153–8.

21. Jayalath S, Magana-Arachchi D. Dysbiosis of the Human Urinary
Microbiome and its Association to Diseases Affecting the Urinary System
Indian J Microbiol. 2022;62(2):133–66.

22. Pastuszka A, Tobor S, Łoniewski I, Wierzbicka-Woś A, Sielatycka K,
Styburski D, Cembrowska-Lech D, Koszutski T, Kurowicz M, Korlacka K,
Podkówka A, Lemiński A, Brodkiewicz A, Hyla-Klekot L, Skonieczna-
Żydecka K. Rewriting the urinary tract paradigm: the urobiome as a
gatekeeper of host defense. Mol Biol Rep. 2025;52(1):497.

23. Reasoner SA, Francis J, Hadjifrangiskou M. The urinary microbiome: the
next frontier of bacterial ecology. J Bacteriol. 2025;:e0010525(:e0010525):
Online ahead of print.

24. Carey AJ, Tan CK, Ipe DS, Sullivan MJ, Cripps AW, Schembri MA, Ulett
GC. Urinary tract infection of mice to model human disease: Practicalities,
implications and limitations. Crit Rev Microbiol. 2016;42(5):780–99.
25. Anderson M, Bollinger D, Hagler A, Hartwell H, Rivers B, Ward K, Steck
TR. Viable but nonculturable bacteria are present in mouse and human urine
specimens. J Clin Microbiol. 2004;42(2):753–8.
26. Roje B, Elek A, Palada V, Bom J, Iljazović A, Šimić A, Sušak L, Vilović K,
Strowig T, Vlahoviček K, Terzić J. Microbiota Alters Urinary Bladder
Weight and Gene Expression. Microorganisms. 2020;8(3):421.
27. Martin M. CUTADAPT removes adapter sequences from high-throughput
sequencing reads. EMBNet J. 2011;17(1):10–2.
28. Callahan BJ, McMurdie PJ, Rosen MJ, Han AW, Johnson AJ, Holmes SP.
DADA2: High-resolution sample inference from Illumina amplicon data.
Nat Methods. 2016;13(7):581–3.
29. Gao X, Lin H, Revanna K, Dong Q. A Bayesian taxonomic classification
method for 16S rRNA gene sequences with improved species-level accuracy.
BMC Bioinformatics. 2017;18(1):247.
30. Davis NM, Proctor DM, Holmes SP, Relman DA, Callahan BJ. Simple
statistical identification and removal of contaminant sequences in marker-
gene and metagenomics data. Microbiome. 2018;6(1):226.
31. Oksanen J, Simpson GL, Blanchet FG, Kindt R, Legendre P, Minchin PR,
O'Hara RB, Solymos P, Stevens MHM, Szoecs E, Wagner H, Barbour M,
Bedward M, Bolker B, Borcard D, Borman T, Carvalho G, Chirico M, De
Caceres M, Durand S, Evangelista HBA, FitzJohn R, Friendly M, Furneaux
B, Hannigan G, Hill MO, Lahti L, Martino C, McGlinn D, Ouellette MH,
Cunha ER, Smith T, Stier A, Ter Braak JF, Weedon J. vegan: Community
Ecology Package. R package version 2.2-1 2015 [Available from:
http://CRAN.R-project.org/package=vegan.
32. Gu Z, Miller S, Schlesner M. Complex heatmaps reveal patterns and
correlations in multidimensional genomic data. Bioinformatics.
2016;32(18):2847–9.
33. Price TK, Hilt EE, Thomas-White K, Mueller ER, Wolfe AJ, Brubaker L.
The urobiome of continent adult women: a cross-sectional study. BJOG.
2020;127(2):193–201.
34. Chieng CCY, Kong Q, Liou NSY, Khasriya R, Horsley H. . The clinical
implications of bacterial pathogenesis and mucosal immunity in chronic
urinary tract infection. Mucosal Immunol. 2023;16(1):61–71.
35. Wu G, Zhao N, Zhang C, Lam YY, Zhao L. Guild-based analysis for
understanding gut microbiome in human health and diseases. Genome Med.
2021;13(1):22.

PCA − Biplot