

Plasmid content studies of local isolates of Salmonella

Ass, Prof. Dr. Israa Abdul Jabbar Ibrahim
Prof. Dr. Amur Al Najjar
Prof. Dr. Muhammad Abdul Kaddar

Summary

A genus of Salmonella was isolation and identification from 40 stool samples of patients at different hospitals in Baghdad, during the period between June 2001 and July 2002. The following serotypes were isolated: - *S.typhimurium* (69%), *S.enteritidis* (10%), *S.typhi* (8%) and (13%) of other *Salmonella* species. All isolates were screened for their resistance to amoxicillin, ampicillin, chloramphenicol, co-trimexazole, cephalixin, cefotaxaime and ciprofloxacin, using disc diffusion method. *Salmonellae typhimurium* isolates (80%) were multidrug resistance (MDR) for six antimicrobial agents. Screening of plasmid content revealed that the presence of single mega plasmid was found in 72.7% of multidrug resistance *Salmonella* isolates and presence of small plasmid in all tested isolates was detected. High frequency molecular weight was observed in the range between 2.1-2.93kb (1.33-1.86Md), in *Salmonella* isolates.

Introduction

Salmonellosis is a global health problem. Most *Salmonella* infections arise from oral ingestion of contaminated food or water (1). It is estimated that from 2 to 4 million cases of salmonellosis occur in the U.S annually (2). Nontyphoidal salmonellosis, a disease caused by *Salmonella* other than *S.typhi*, is an important food-borne infection with a worldwide distribution (3, 4). The two most common causes of nontyphoidal salmonellosis are *S.typhimurium* and *S.enteritidis* (5). Typhoid (enteric) fever is more serious form of salmonellosis (6). The enteric fevers are caused by infection with *S.typhi* and *S.paratyphi* A, B and C (7). Several antibiotics are effective in enteric fever. Ciprofloxacin (500 mg/ 12hr) is the drug of choice. Alternatives include co-trimoxazole (500 mg 6-hourly), amoxycillin (750mg 6-hourly) and chloramphenicol (500mg 6-hourly) (8). Data obtained in 1996 survey CDC of *Salmonella* isolates revealed that 37% were resistant to at least one antimicrobial agent (6, 9). Local study in 1993 reported that all *S.typhimurium*, *S.wien*, *S.muencher*, *S.senftenberg* and *S.enek* have resistance range from 11%- 66% to chloramphenicol, ampicillin, streptomycin, tetracycline, and gentamycin (10). Other hocal studies revealed some identical antibiotic resistance patterns among *Salmonella*, *Shigella*, and

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

E.coli, with inclusive resistance to ampicillin penicillin G and tetracycline (11, 12).

Epidemiological investigations have traditionally relied on biochemical and serological methods for the primary identification of strains (13). The modern typing methods are based on characterization of the genotype of the organism by analysis of plasmid and chromosomal DNA (14). The LD₅₀ values obtained from plasmid-positive strains of *S.typhimurium*, *S.enteritidis* and *S.dublin* were up to 10⁶- fold lower than the values obtained for the plasmid free strains of the same serotype (15, 16). Various Iraqi studies investigated plasmids in *Salmonella* spp. There were reported that *S.typhi* isolates showed one to two large plasmids (17) and only one isolate of *S.typhimurium* have one mega plasmid and three small plasmid in different molecular weight. Other study showed that plasmid contents of *S.typhimurium* isolates revealed the presence of single mega plasmid involved in antibiotic resistance isolates (11).

The present study was planned and designed to reach the following aims:

- 1- To study the rate of *Salmonella* species among suspected typhoid fever and diarrhea patients.
- 2- The susceptibility of *Salmonella* isolates to antimicrobial agents used against Gram-negative bacteria.
- 3- Determination of the plasmid profile and the relationship between the known number of plasmids and resistance to antimicrobial agent.

Materials and Method

Bacterial isolates

Forty *Salmonella* isolates were obtained from the Central Public Health Laboratory (CPHL), Central Child Hospital and AL-Elwea Child Hospital. Stool specimens were collected in sterile plastic containers, and a loopful was inoculated in tetrathionate broth within 15 minutes. Conventional laboratory procedures for isolation and identification of enteric microorganisms were used according to the Cappuccino & Sherman manual (18). All strains were biotyped by determination the results of 20 different biochemical tests with API 20E strips (Biomerieux) and diagnostic antisera (Fisher) (*Salmonella*: polyvalent O, Specific O-group: 9.12(D) and VI, Specific O-group: 4.5(B), Specific H: d, i).

Antimicrobial susceptibility testing

All *Salmonella* isolates were tested with disc diffusion method for susceptibility to the following antimicrobial agents: (AL-Razi Center): Ciprofloxacin 5 μ g, chloromphenicol 30 μ g, cefotaxime 30 μ g, amoxicillin 10 μ g, ampicillin 10 μ g, trimethoprim 1.25 μ g + sulfamethoxazole 23.25 μ g, tetracycline 30 μ g , Cephalexine 30 μ g.

Plasmid DNA isolation procedure

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

All *Salmonella* isolates were screened for plasmid content by the alkaline method of Brinboim and Doly (19), with modifications by Popiech and Neumann (20) and Nasir (21). Bacterial cells were grown overnight in 50ml Luria-Bertain (LB) medium at 35°C, harvested by centrifugation (10 000 rpm/ 20 min.), and washed twice by tris-EDTA-salts (TES) buffer. The pellet was resuspended by 1.5ml Tris-EDTA glucose (TEG), and 2.5mL sodium dodecyl sulfate (SDS) (1%) were added, then incubated at 25°C for 30 minutes. 1.5ml of an ice-cold solution of potassium acetate was added . The tube was vortexes gently in an inverted position three times. It was then stored on ice for 10 minutes. The preparation was centrifuged for 20 minutes at 6000 rpm. 600ml of the supernatant was transferred to an Eppendrof tube. The lysate was extracted once with an equal volume of phenol /chloroform / isoamyl alcohol mixture. The contents were mixed by inverting the Eppendrof tube rapidly (2-3) times. The mixture was centrifuged for 10 minutes at 10 000 rpm. Then supernatant was transferred to a fresh tube. The DNA was precipitated with two volumes of absolute ethanol, and mixed by vortexing. The mixture was stored at -20°C overnight. It was centrifuge for 10 minutes at 10 000 rpm. The supernatant was removed, and the tube placed in an inverted position on a filter paper to allow all of the fluid to drain away. The DNA was redissolved in 20 μ l tris-EDTA (TE) buffer and stored at -20°C.

Agarose gel electrophoresis:

Plasmid DNA samples were resolved by horizontal agarose gel LKB electrophoresis (22). Agarose (0.7 & 1%) was made by adding 1gm or 0.7gm of agarose to 100mL of 1x Tris-borate EDTA (TBE) buffer. Power was turned on at 60v. for 2hr. for 1% agarose and 75v. for 2hr. for 0.7% agarose . The ethidium bromide stained bands in gel for 15 minutes. The bands were visualized by using LKB UV transilluminator at 350nm and photographed by UV scanner. λ DNA pstI digest, served as markers during electrophoresis.

Result and discussion

Salmonellosis is an important zoonotic disease and of a worldwide spread (23). The present results showed that most currency of *S.typhimurium* was the commonest among all *Salmonellae* isolates mainly from children hospital. *Salmonella typhimurium* was found to be the most prevalent organism isolated, which represented 69% of isolates. Whereas *S.enteritidis* represented 10%, *S.typhi* 8% and others *Salmonellae* 13%. Such results have been noticed. Local study reported that 4.9% of 913 stool sample of infants and children under six-year old were *Salmonella* isolates [*S.emek* (42.2%), *S.agona* (22.2%), *S.typhimurium* (20%), *S.typhimurium* var.copenhagen (11.1%), *S.muenchen* (2.2%), *S.anatum* (2.2%)] (24). The sources of infection may be either direct or indirect contact with animal or animal products and / or person-to-person spread

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

of *S.typhimurium* (25). *Salmonella paratyphi* B and *S.typhimurium* were the most common isolates from local foods, mainly kubba, cakes, meat, unpasteurized raw milk, chicken, and sweat foods in varying percentage in three city of Baghdad (26).

Antimicrobial therapy usually is not given to uncomplicated (noninvasive) gastroenteritis caused by nontyphoidal *Salmonella* species because therapy does not shorten the duration of disease (27). Antibiotics are usually given to: infants, the elderly, and the immunocompromised, as well as those whose infections have moved from the intestines (28).

Table (1) showed the percentage of resistance of *S.typhimurium* isolates to each antimicrobial agents used. *Salmonella typhimurium* isolated of resistant to ampicillin, amoxacyline, chloramphenicol, cefotaxime and co-trimexazol (ranging from 89.2% - 82.1%). Resistant to cephalexine was found to be 78.5% and to tetracycline 7.1%.

Table (2) revealed the percentage of MDR isolates when compared with total resistance of isolates *S.typhimurium* showed high percentage of resistance to ampicillin, amoxicillin, co-trimexazole, chloramphenicol, cefotaxime and cephalexine reaching up to 80% and only 8% resistance to tetracycline in addition to the previous six antimicrobial agents.

All of the chloramphenicol-resistant *S.typhimurium* isolates (except STM₂₁), were resistant at least to four antibiotics.

The alkaline method was used for the detection of characterization of plasmid types in *Salmonella* species, the isolates selected according to their resistance to antimicrobial agent. The plasmids types detected were small or large. *Salmonella* plasmids were compared with λ DNA digest under different electrophoresis conditions (Fig. 1; 2; 3). Some *Salmonella* isolates were free from plasmids.

S.typhi (ST₁, ST₃) isolates showed that no DNA bands apparent, in spite of the fact the ST₃ isolates revealed resistance for sulphamethaxazole and trimethoprim, this may be due to either destruction occurred during preparation or such isolates were free from plasmids. In addition, due to the limited number of *S.typhi* isolates, verification of the result could not be achieved. However previous local study revealed one to two mega plasmids present in *S.typhi* isolates (17). *S.typhi* is a serovar in which the majority of strains are plasmid free (29).

In the case of *S.enteritidis* (SE₁, SE₂, SE₄), each antimicrobial agents sensitive isolate was free from plasmids. Only SE₁ isolate was resistant to ampicillin and cephalexine revealed two small plasmid 12.28 kb (7.79 Md), and 4.77kb (3.02 Md). Comparison between such isolates may not be enough to

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

state that there is specific plasmid for each serotype of different *Salmonella* species.

Plasmid profiling method, in case of *S.typhimurium* isolates, revealed significant result, when compared with other *Salmonella* species isolates. Approximately all *S.typhimurium* (STM) isolate revealed mega plasmid (> 60kb), except STM9 which is sensitive for all antimicrobial agent used in this study, and may be non - virulent strains. Plasmid of 60 Md was found to be present in *S.typhimurium*, its prevalence among veterinary isolates was significantly higher than among human isolates (30, 31).

In this study, STM₁₁, STM₁₃, STM₁₉, STM₁₈, and STM₁₇ revealed three plasmid bands in different molecular weight (5.29, 2.75, 2.27 kb) which may be responsible for drug resistance. The similarity in plasmid content of strains isolated is widely separated areas suggests that they have a clonal origin (32).

It was also shown that STM₁₅ and STM₁₄ showed 4 to 5 plasmid bands ranging between 5.29 kb to 2.1 kb. STM₂₁ lose of the mega plasmid in spite of appearance of two small plasmids of M.W 3.31kb (2.1 Md) and 2.56kb (1.62 Md), such isolate was resistance to ampicillin only. STM₂₁ isolate may have lost the mega plasmid during preparation or may be less virulent than other isolate with mega plasmid. Previous local study showed *S.typhimurium* isolates contain single mega plasmid (90 kb) and only a small number of isolates showed only one small plasmid (11). In conclusion, our data indicate that multidrug resistant nosocomial infection is becoming an important problem and the possibility of transfer of resistance to other enteric organisms.

Table 1 The percentage of resistance by use disc diffusion method for *S.typhimurium*

Antimicrobial agent	No.of resistance isolate	%
Ampicillin	25	89.2
Amoxacyline	25	89.2
Chloramphenicol	24	85.7
Cefotaxime	23	82.1
Co-trimexazol	23	82.1
Cephalexin	22	78.5
Tetracycline	2	7.1
Ciprofloxacin	0	0
Total	28	

Table 2 The percentage of *MDR isolates in disc diffusion method

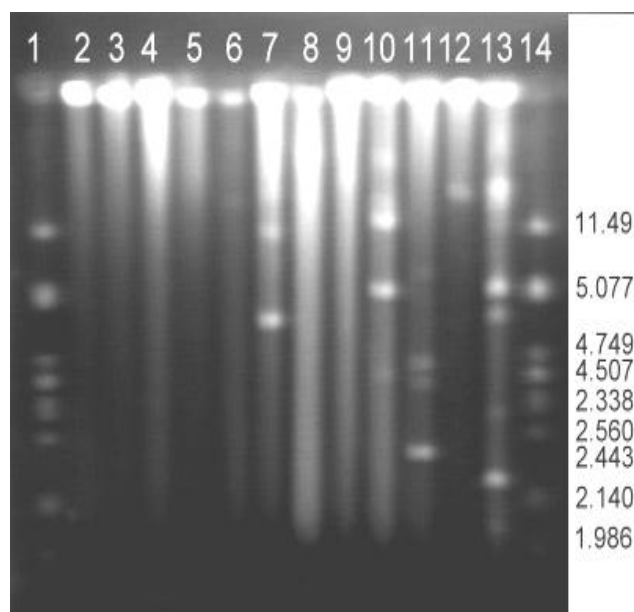
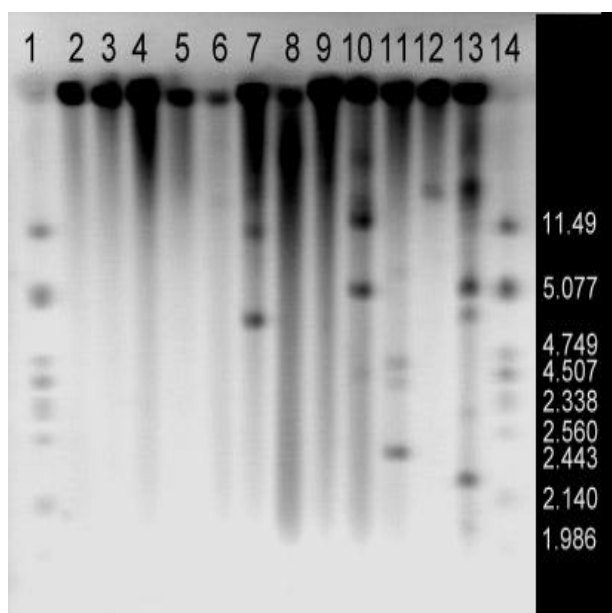
Antimicrobial agents	No.of Anti. Agent	No. of MDR isolates	%
Am, Ax, SXT, Te,Cf, CTX,C	7	2	8
Am, Ax, SXT, Cf, CTX, C	6	20	80

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

Am, Ax, SXT, C Or Am, Ax, CTX, C	4	2	8
Am (STM ₂₁)	1	1	4
Total	25		

- MDR multidrug resistance



b

a

Figure 1 Agarose gel electrophoresis of plasmids extracted from various *Salmonella* species. a. No. 1 & 14 λ DNA (PstI); 2&3 *S.typhi*; 4 *S.paratyphi* B; 5 *S.paratyphi* A; 6,7,8 *S.enteritidis*; 9 *S.senftenberg*; 10 *S.meterinum*; 11 *S.hadar*; 12,13 *S.typhimurium* (1% agrose, 60 v., 2 hr.). b. Negative picture for a.

Plasmid content studies of local isolates of *Salmonella*

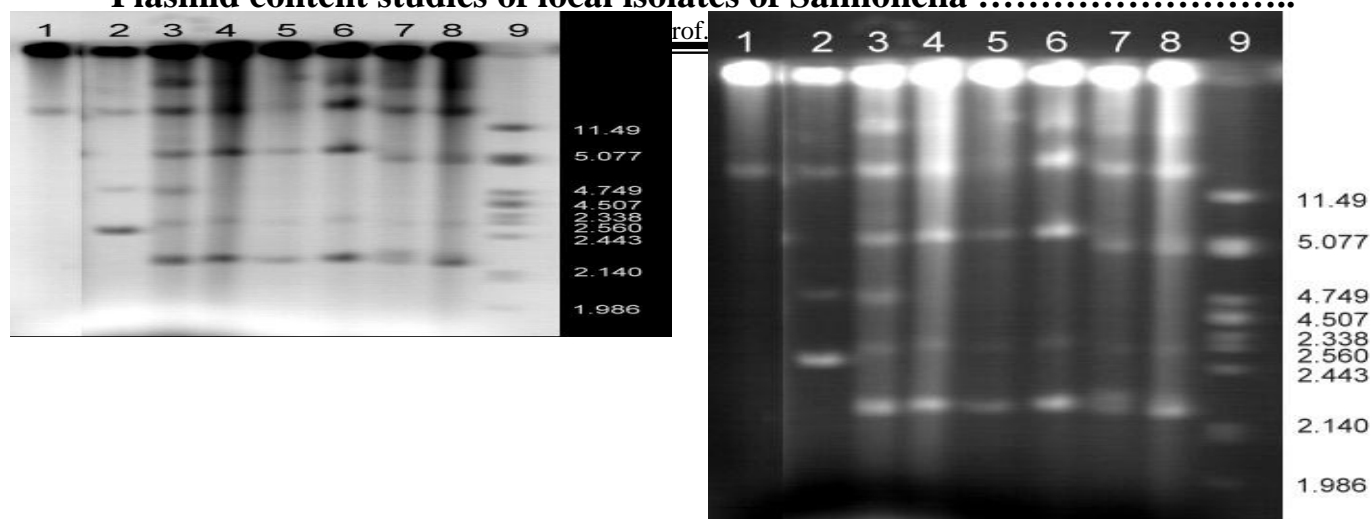


Table 3 Isolates of *Salmonella* spp. tested for antimicrobial resistance and plasmid profile

No.	Isolates	Antimicrobial resistance	No. of plasmid		Mass of plasmids (kilo base) kb 1% agarose
			Mega	Small	
1	ST ₁	-	Free		
2	ST ₃	Su, Tr	Free		
3	SPB	-	Free		
4	SPA	-	Free		
5	SE ₂	-	Free		
6	SE ₁	Ce, Am		2	9.73, 4.02
7	SE ₄	-	Free		
8	SS	Am, Ce, C, Tr, Su, Cf	Free		
9	SM	Tr, Su, Te		2	12.28, 4.77
10	SH	Te		3	3.14, 2.93, 2.40
11	STM ₉	-	Free		
12	STM ₁₅	C, Cf, Ce, Am, Tr, Su, Te	1	5	5.02, 4.18, 2.65, 2.25, 2.10
13	STM ₂₁	Am		2	3.31, 2.56
14	STM ₄	C, Cf, Ce, Am, Su, Tr, Te	1	4	5.29, 3.31, 2.7, 2.27
15	ETM ₁₁	C, Am, Su, Tr	1	3	5.29, 2.75, 2.27
16	STM ₁₃	C, Cf, Ce, Am, Su, Tr	1	3	5.29, 2.75, 2.27
17	STM ₁₉	C, Cf, Ce, Am, Su, Tr	1	3	5.6, 2.75, 2.27
18	STM ₁₈	C, Cf, Ce, Am, Su, Tr	1	3	4.77, 2.65, 2.3
19	STM ₁₇	C, Cf, Ce, Am, Cu, Tr	1	3	5.02, 2.65, 2.27

b

a

Plasmid content studies of local isolates of *Salmonella*

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

Figure 2 Agarose gel electrophoresis of plasmids extracted from various *S.typhimurium* isolates. a. No. 1,2,3,4,5,6,7,8 *S.typhimurium* and 9 λ DNA (Pst1)(1% agarose, 60 v., 2hr.). b. Negative picture for a.

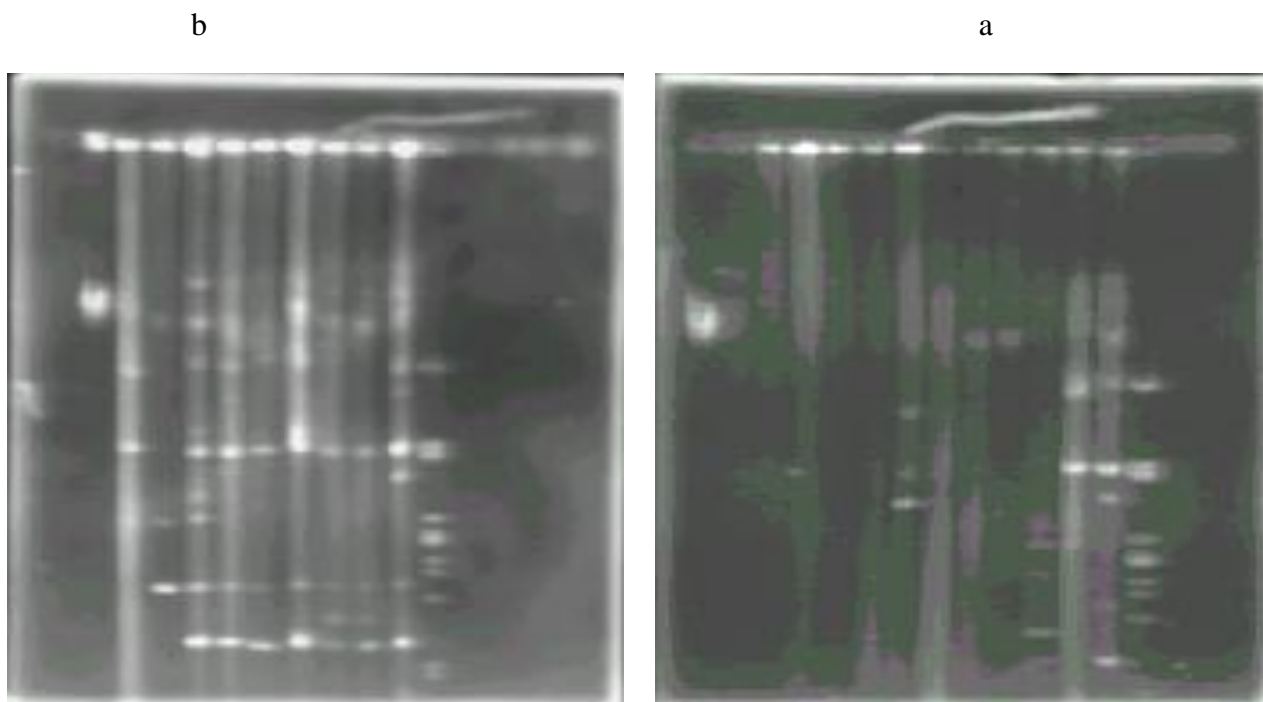


Figure 3 a. Plasmid migration in 0.7% agarose, 75 v., 2 hr. for various *Salmonella* spp. Isolates. b. Plasmid migration in 0.7% agarose, 75 v., 2 hr. for various *S.typhimurium* isolates. Notes: 1st column in the left picture show chromosomal DNA marker in M.W range (60- 100 Kb)

References

1. Chinh, N.T.; Parry, C.M. ; Ly, N.T. ; M.D.H.A ; Thong, M.X.; Diep, T.S.; Wain, J.; White, N.J.& Farrar, J.J. (2000): A randomized controlled comparison of azithromycin and ofloxacin for treatment of multidrug-resistant or nalidixic acid-resistant enteric fever. *Anti.Agents Chemo.*; 44(7):1855-1859.
2. FDA (Food & Drug Administration) (2001) *Salmonella* Spp. [http. // vm. Cfsan . fda. gov/Nmow/chep1.html](http://vm.cfsan.fda.gov/Nmow/chep1.html).
3. Chalker, R.B. & Blaslar, M.J. (1988): A review of human salmonellosis III. Magnitude of *Salmonella* infection in the United States. *Rev. Infect. Dis.*; 10: 111-124.
4. Philips, C.A & George, J.T. (1994): Guess what's lurking in the lunch *Biologist* 41:76-80 (Abstract).
5. Thong, K.L.; Ngeow, Y.F.; Altwegg, P.N. & Pang, T. (1995): Molecular analysis of *Salmonella enteritidis* by pulsed- field gel electrophoresis and ribotyping. *JCM*; 33: 1070-1074.
6. Connerton, P.; Wain, J.; Hien, T.T.; Ali, T.; Parry, C.; Chinh, N.I.; Vinh, H.; H.O.; V.A.; Diep, T.S.; Day, N.P.J.; White, N.J.; Dongan, G. & Farrar, J.J. (2000): Epidemic typhoid in Vietnam. Molecular typing of multiple-antibiotic-resistant *S.enterica* serotype *Typhi* from four outbreaks. *JCM*; 38(2): 845-897.
7. Liu, S.L. & Sanderson, K.E. (1996): Highly plastic chromosomal organization in *S.typhi*. *Proc. Natl. Acad. Sci. USA*; 93: 10303-10308.
8. Laurence, D.R.; Bennett, P.N. & Brown, M.J. (1997): *Clinical Pharmacology*, Eight ed. Churchill Livingstone, pp.125-150.

Plasmid content studies of local isolates of Salmonella

Ass. Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

9. Mirza, S.; Kariuki, S.; Mamum, K.Z.; Beeching, N.S. & Hart, C.A. (2000): Analysis of plasmid and chromosomal DNA of multidrug-resistant *S. enterica* serovar typhi from Asia. JCM; 38(4): 1449-1452.
10. AL-Hayali, G. (1993): Salmonellosis in Iraq, five-year review 1985-1989 (Diploma). Medical Microbiology/ College of Medicine- Al-Nahran University.
11. Matloob, M.H.M. (2000): Genetic study on *S. typhimurium* (thesis). Ph.D. Biotechnology /College of Science- Baghdad University.
12. AL-Ahmer, S.D. (2000); Genetical and biochemical study for congo red binding with enteric bacteria (thesis). M.Sc. Biotechnology/ College of Science- Baghdad University.
13. Cruickshank R. J.; Dnguid, J.P.; Marmion, B.P.& Swazin, R.H.A. (1975): Medical Microbiology 12th edition. pp .409.
14. M.-S. B., Babic T., Kocic B., Stojanovic P., Ristic L. & Dinic M. (2008) Plasmid profile analysis Salmonella enteric serotype enteritidis. Acta Meica Medianae,47:54-57.
15. Jones, G.W.; Robert, D.K.; Svinarich, D.M. & Whitfield, H.J. (1982): Association of adhesive, invasive, & virulent phenotypes of *S. typhimurium* with autonomous 60-Md plasmid. Infect. Immun.; 38(2):476-486.
16. Helmuth, R.; Stephan, R.; Bunge, C.; Hoog, B.; Steinbeck, A. & Bulling, E. (1985): Epidemiology of virulence-associated plasmids and outer membrane protein patterns within seven common *Salmonella* serotypes. Infect. Immun.; 48(1): 175-182.
17. Hussein, A.S. (1995): Genetic study on *Salmonella* local isolates (thesis). M.Sc. Biotechnology/ College of Science- Baghdad University.
18. Cappuccino, J.G. & Sherman, N. (1987): Microbiology: A Laboratory Manual .The Benjamin / Cummings Publishing Company, INC. pp 383-387.
19. Brinboim, H.C. & Doly, J. (1979); Arapid alkaline extraction procedure for screening recombinant plasmid DNA. Nucleic Acid Res.; 7(6):1513-1523.
20. Popiech & Neumann (1995): Salting out procedure for the isolation of genomic DNA (cited by Niser, 2000).
21. Nasir, R.B. (2000): Bacteriological and genetically study of *Pseudomonas* spp. utilizing hydrocarbon compounds (thesis). M.Sc. Biotechnology/ College of Science- Baghdad University.
22. Sambrook, J.; Fritsch, E.F. & Manitis, T. (1989): Molecular Cloning: a Laboratory Manual, 2nd ad. Cold Spring Harbor Laboratory Press, N.Y. pp.1.21-1.30, A.1-A.6.
23. Brook, S.D. & Dunbar, E.M. (1986): Infectious Diseases. MTP press limited, PG Asian Economy edition. pp 127-129.
24. Ali, T.S. (1992); A study of Salmonella bacteria associated with infantile diarrhea and extraction of some of its antigenic compounds (thesis). M.Sc. Microbiology/ College of Science- Al-Mosul University.
25. Johnstone, T. (1981): Person-To-Person spread of *S. typhimurium*. Lancet; 13:1324.
26. Taha, R.R. (1977): Presence and distribution of *Salmonella* species in some local foods. (Thesis). M.Sc. Microbiology/ College of Science- Baghdad University.
27. CID (Committee on Infectious Diseases) (2000): Red Book. American Academy of Pediatrics. 25th edition. pp. 501-503.
28. Serbeniuk, F. (2002): Nontyphoidal *Salmonella*. [http://www.dennis.kunkel.com/public/Ht ml/n stocksearchresults](http://www.dennis.kunkel.com/public/Ht%20ml%20n%20stocksearchresults).
29. Murray, B.E.; Levine, M.M.; Cordano, A.M.; D'Ottone, K.; Jayanetra, P.; Kopecko, D.; P-Urae, R. & Preuzel, I. (1985): Survey of plasmids in *S. typhi* from Chile & Thailand. J. Infect. Dis.; 151(3):551-555.
30. Brown, D.J.; Munro, D.S. & Platt, D.J. (1986): Recognition of the cryptic plasmid, PSLT, by restriction fingerprinting and a study of its incidence in Scottish *Salmonella* isolates. Hyg. Camb.; 97:193-197.

Plasmid content studies of local isolates of Salmonella

Ass, Prof. Dr. Israa Abdul Jabbar Ibrahim , Prof. Dr. Amur Al Najjar Prof , Dr. Muhammad Abdul Kaddar

31. Morshed R. & Peighambari S. M. (2010): Drug resistance, plasmid profilr and random amplified polymorphic DNA analysis of Iranian isolates of Salmonella enteritidis. New Micro.; 33: 47- 56.
32. McConnell, M.M.; Smith, H.R.; Leonardopoulos, J. & Anderson, E.S. (1979): The value of Plasmid studies in the epidemiology of infections due to drug resistant *S.wien*. J. Infect. Dis.; 139(2):178-189.

دراسة المحتوى البلازميدي لعزلات محلية للسلامونيلا

أ.م.د. اسراء عبد الجبار ابراهيم ، أ.د. عامر النجار ، أ.د. محمد عبد القادر

كلية التربية ابن الهيثم كلية الطب كلية العلوم

جامعة بغداد الجامعة المستنصرية جامعة النهرين

الخلاصة

تم عزل وتشخيص جنس السلامونيلا من 40 عينة لبراز مرضى في مستشفيات مختلفة من بغداد للفترة من حزيران 2001- تموز 2002. وعزلت الضروب المصلية التالية: *S. typhimurium* 69% و *S. enteritidis* 10% و *S. typhi* 8% وانواع اخرى من السلامونيلا 13%. وتم دراسة حساسيتها للمضادات الحيوية ولكل من ampicillin و amoxicillin و cephataxame و ciprofloxacin و chloramphenicol و cotrimexazole و cefalexine وذلك باستخدام طريقة الانتشار القرصي، فتبين بان 80% من سلالات *S. typhimurium* قد ابدت مقاومة لستة منها. وفي مسح لمحتوى البلازميدات تبين وجود ميكا بلازميد واحد في 72.7% من عزلات السلامونيلا المقاومة لعدة عقاقير وعدد من البلازميدات الصغيرة ذات الوزن الجزيئي (1.33-1.86 Md) (2.1-2.93 kb).