## PCR Assay for Species-Specific Identification of Bacteroides thetaiotaomicron

LEE-JENE TENG,<sup>1,2</sup>\* PO-REN HSUEH,<sup>2</sup> JUI-CHANG TSAI,<sup>3,4</sup> FENG-LIN CHIANG,<sup>1</sup> CHING-YI CHEN,<sup>1</sup> SHEN-WU HO,<sup>1,2</sup> and KWEN-TAY LUH<sup>2</sup>

School of Medical Technology,<sup>1</sup> Laser Medicine Research Center,<sup>3</sup> and Department of Surgery (Neurosurgery),<sup>4</sup> National Taiwan University College of Medicine, and Department of Laboratory Medicine, National Taiwan University Hospital,<sup>2</sup> Taipei, Taiwan

Received 11 November 1999/Returned for modification 21 December 1999/Accepted 1 February 2000

*Bacteroides thetaiotaomicron* is the second most frequently encountered species of the anaerobes isolated from clinical specimens. We developed a PCR-based assay for the rapid identification of *B. thetaiotaomicron*. Specific primers were based on shared amplicons of about 1.2 kb generated from *B. thetaiotaomicron* by randomly amplified polymorphic DNA. This 1.2-kb fragment was sequenced and then used to design a set of PCR amplification primers. This PCR generated an amplification product of 721 bp, which was unique to all 65 isolates of *B. thetaiotaomicron* tested. There was no amplification with isolates of other bacterial species. Restriction enzyme digestion of the amplification product and dot blot hybridization further verified the specificity of the assay. These results suggest that this PCR assay targets a nucleotide sequence that is strongly conserved in *B. thetaiotaomicron* and shows promise for the detection of *B. thetaiotaomicron* in clinical samples.

Members of the Bacteroides fragilis group, which are bileresistant, anaerobic, gram-negative rods, are opportunistic pathogens commonly recovered from patients with peritonitis, septicemia, and wound infections. Of the greatest clinical importance within this group are B. fragilis and B. thetaiotaomicron. B. thetaiotaomicron is the second most commonly encountered anaerobic gram-negative bacillus (1, 5; I. Brook, Letter, J. Antimicrob. Chemother. 25:473-474, 1990). Although it is part of the indigenous microflora of the gastrointestinal tract, it is also associated with infection, such as intraabdominal sepsis and bacteremia, and is resistant to many antimicrobial agents (1, 5; Brook, Letter). It has been reported that B. fragilis group bacteremia contributes significantly to morbidity and mortality (15). In addition, B. thetaiotaomicron has been reported to be more resistant to cephalosporins and clindamycin than B. fragilis (1, 5, 15, 16, 18). These clinical characteristics of B. thetaiotaomicron infection increase the need for rapid and accurate identification of the infection in clinical specimens and for immediate and effective management of infected patients.

Conventional biochemical identification of *Bacteroides* species is complicated and time-consuming. Species identification often requires 3 to 7 days and sometimes is inconclusive (19). The automated methods currently used are sometimes unreliable at identifying *B. thetaiotaomicron* clinical isolates or other species (2, 3). The phenotypic and biochemical similarity of closely related species makes it difficult to discriminate them. Precise identifying the *B. thetaiotaomicron* strains may subsequently result in inappropriate antibiotic therapy and should be of concern to clinical laboratories. Thus, a more specific and rapid assay is needed for the identification of *B. thetaiotaomi* 

*cron.* In recent years, PCR methods have been developed to identify a variety of microorganisms including anaerobes. Yamashita et al. used the glutamine synthetase gene as a target for amplification of *B. fragilis* (20). Kuwahara et al. reported the detection of *B. fragilis* by PCR amplification of the neuraminidase-encoding gene (11). Genotypic methods for the detection of *B. thetaiotaomicron* using PCR fingerprinting or PCR hybridization have been reported (4, 10). Kreader described the use of a PCR hybridization assay based on 16S rRNA sequences to identify *B. thetaiotaomicron* and other species from fecal extracts (10). However, it is difficult to adapt this test for use in clinical laboratories because of its complexity. The aim of the present study was to develop a simple and species-specific PCR assay for the identification of *B. thetaiotaomicron*.

**Bacterial strains.** Twenty-seven reference strains obtained from the American Type Culture Collection, Rockville, Md., were used in this study. The PCR assay primers were based on the reference strain, *B. thetaiotaomicron* ATCC 29741. Other species representing 11 gram-positive and 15 gram-negative bacterial species were used as negative controls (Table 1). An additional 65 clinical isolates of *B. thetaiotaomicron* and 40 clinical isolates of *Bacteroides* species were also tested. All of the clinical isolates were collected from the Bacteriology Laboratory, National Taiwan University Hospital, a 2,000-bed teaching hospital in northern Taiwan. The *Bacteroides* species was identified by the Presumpto Plates method and sugar fermentation tests as previously described (19).

**RAPD fingerprint among** *Bacteroides* **species.** Randomly amplified polymorphic DNA (RAPD) patterns of tested strains were determined by means of arbitrarily primed PCR as described in our previous report (8). The arbitrary oligonucleotide primer OPH-9, 5'-TGTAGCTGGGG-3' (Operon Technologies, Alameda, Calif.), was used. Amplification products were analyzed by electrophoresis on a 1.5% agarose gel (FMC Bioproducts, Rockland, Me.). The RAPD fingerprint patterns obtained with the primer OPH-9 for *B. thetaiotaomicron* and

<sup>\*</sup> Corresponding author. Mailing address: School of Medical Technology, National Taiwan University College of Medicine, No. 1, Chang-Te St., Taipei 100, Taiwan. Phone: 886-2-23970800 ext. 6918. Fax: 886-2-23959794. E-mail: ljteng@ha.mc.ntu.edu.tw.

TABLE 1. Bacteria used as negative controls in this study

other *Bacteroides* species are shown in Fig. 1. One shared band of about 1.2 kb was found in the RAPD fingerprints of all five of the *B. thetaiotaomicron* isolates tested. This fragment was absent from the RAPD fingerprints of the other six species (Fig. 1).

**Extraction and sequencing of DNA from a RAPD fingerprint band.** This 1.2-kb fragment was excised, purified, and sequenced. The selected amplicon was excised from the RAPD gel and was eluted by using the Gene-Clean kit (Bio 101, Inc., La Jolla, Calif.). The DNA fragment was cloned into the vector using the TA cloning kit and transformed into *Escherichia coli*. Following thermal cycling of the sequencing reactions with fluorescent-dye-labeled primers or terminators, the nucleotide sequence was determined on an Automated DNA Sequencer (ABI prism 377A DNA sequencer; Applied Biosystems Division, Perkin-Elmer Corp., Foster City, Calif.) The partial sequence of the 1.2-kb fragment is shown in Fig. 2. No significant



FIG. 1. RAPD patterns generated from *B. thetaiotaomicron* and other *Bacteroides* species. RAPD patterns were obtained by AP-PCR amplification of genomic DNA with the primer OPA-09. Lanes M contain 100-bp DNA ladder (Gibco BRL). Lanes 1 and 8, *B. thetaiotaomicron* (Bth) ATCC 29741; lane 2, *B. ovatus* (Bo) ATCC 8483; lane 3, *B. fragilis* (Bf) ATCC 25285; lane 4, *B. distasonis* (Bd) ATCC 8503; lane 5, *B. uniformis* (Bu) ATCC 8492; lane 6, *B. vulgatus* (Bv) ATCC 8482; lane 7, *B. caccae* (Bc) ATCC 43185; lanes 9 to 15, *B. thetaiotaomicron* (bth) clinical isolates; lane 16, *B. ovatus* (bo) clinical isolates; lanes 17 to 22, *B. fragilis* (bf) clinical isolates. In lane 1, the 1.2-kb amplicon shared by *B. thetaiotaomicron* strains is indicated by the white box around the band.

ACCATTCGGG T <u>TGGAGTTTT ACTTTGAATG GAC</u> AATCTAG CGACTTGTAT	50
BTH-F primer	
GATTATGTTC CGGATGGCAG CATACTTGAT ATCGATTTGG GAAAACAAGA	100
GAATATAAAA ACTATIGCTT TACATITCTA TGAATGGTTT TATTCTTCGG	150
AAAGTGCAAG TATAGCGATA AGTAATGATG GAGAGAAATA TGAGGATCTT	200
GGTGTAGCTT CAGGATTTGC AAATAAGACA AGTTACATTC TTCTTCTTGT	250
GGCTAAACAA GCGCAATATA TAAGAGTAAC TTTCCATGGA GCTCTTTATT	300
ATTCTCCTTA TATTAATACT GTAGGTATTT ATACTGAAAC TGAATAAAAA	350
ATGGCCCAAG TITATTACTG AATGAGCITG GGCTATTIGC TGTTTATATC	400
ATGGTGTGAT CAGTTCTAAG TITTCTTTGT TAATAAAACT TAGAACTGAT	450
TTTTTTCTIG AGTATCTTAT ATTTTTGGAT TGTATTATCT AAAAACTAAT	500
TAAAGGAAAT GCTATGAGAA TCATTCGCCG TATTATTTTT CAGCTGCTTT	550
GTTTGTTGGG AGCATGTTGT TATATTCCTG CAACAGCACA AGTCGTTTTA	600
GTTGATAATG GAAAAACTAA ATCCAGGATT ATTCTATCAG AAAATGACCA	650
GATTAATCAA ATATCAGCAA ATTTATTTCA ATTGTTCCTT CAGAGAATTT	700
CACGTTGTAC ATTT <u>CCCATT GTAAAACGC AG</u> AATGCAAA AAAACGAGAT BTH-R primer	750
ATTATAATCA GTAGCAAAAC CCCAGCTACA	780

FIG. 2. Partial sequences of the specific RAPD marker. The PCR primers are underlined.

homologies were found between the sequences of this fragment and those of other genes found in the GenBank database.

Development of PCR. The primer pair BTH-F (5'-TGGAG TTTTACTTTGAATGGAC-3') and BTH-R (5'-CTGCCCTT TTACAATGGG-3') based on the sequences of the 1.2-kb fragment were designed to generate a 721-bp product upon PCR amplification of DNA from B. thetaiotaomicron ATCC 29741 (Fig. 2). The amplification reaction mixtures contained 50 µl of 10 mM Tris-HCl (pH 8.3), 50 mM KCl, 1.5 mM MgCl<sub>2</sub>, 0.001% gelatin, 1 U of *Taq* polymerase (Perkin-Elmer, Norwalk, Conn.), 200 µM each of the four deoxynucleotide triphosphates (dATP, dCTP, dGTP, and dTTP; Perkin-Elmer), 50 pmol of each primer, and 2 µl of DNA sample. PCR was performed in a DNA thermal cycler (MJ Research, Inc., Watertown, Mass.). A total of 35 cycles of PCR were done, with 1 cycle consisting of denaturation (94°C, 1 min), annealing (56°C, 1 min), and extension (72°C, 1 min) steps followed by a final extension step (72°C, 7 min). The PCR amplification products were analyzed by agarose gel electrophoresis in 1% agarose (FMC BioProducts) and stained with ethidium bromide. A visible band of the appropriate size (721 bp) was considered a positive reaction. The conserved sequence was further analyzed by digestion of the PCR products with the restriction enzymes HaeIII and HinfI (Gibco BRL, Gaithersburg, Md.). The DNA fragments were run on 1.8% agarose gels (FMC BioProducts).

After PCR, the 721-bp DNA product was obtained only from isolates of *B. thetaiotaomicron*. No amplification was detected from other species (Fig. 3).

**Specificity and sensitivity of PCR assays.** The specificity and sensitivity were further determined by testing a total of 65 isolates of *B. thetaiotaomicron* and 40 isolates of other species.



FIG. 3. Specificity of PCR amplification. Specific amplification of the 721-bp DNA fragment was detected only in *B. thetaiotaomicron* isolates. Lane, M, 100-bp DNA ladder (Gibco BRL); lanes 1 to 6, 8, 9, 12, and 14, *B. thetaiotaomicron* isolates; lane 7, *B. fragilis*; lane 10, *B. distasonis*; lane 11, *B. uniformis*; lane 13, *B. vulgatus*.

All 65 clinical isolates identified as *B. thetaiotaomicron* by conventional methods yielded the 721-bp amplicon. Moreover, the PCR amplification products from *B. thetaiotaomicron* isolates all revealed identical *Hae*III and *Hin*fI restriction patterns (Fig. 4). No amplification products were detected with 40 isolates of all other species. The sensitivity of PCR was determined by testing with serial dilutions of the DNA sample. The level of sensitivity indicates that several copies of the target DNA are needed for detection.

Dot blot assays. To confirm the specificity of this PCR assay, the 721-bp PCR product was labeled with digoxigenin and then used for hybridization to genomic DNA from various organisms. Probes were produced with the PCR method described above and simultaneously labeled by incorporation of digoxigenin-11-dUTP (Boehringer Mannheim, Mannheim, Germany). For each strain tested, 300 ng of chromosomal DNA was denatured by heating at 96°C for 10 min and spotted onto Hybond-N nylon membranes (Amersham). DNA was then fixed onto the filter by UV treatment at an intensity of 120 mJ/cm<sup>2</sup> for 3 min on a UV Crosslinker. Both the prehybridization and hybridization temperatures were 61°C. All filters were prehybridized for 1 h in  $5 \times$  SSC (1× SSC is 0.15 M NaCl plus 0.015 M sodium citrate). Hybridization was performed overnight with heat-denatured probe. Detection was performed by using an antidigoxigenin antibody conjugated to alkaline phosphatase as a substrate according to the manufacturer's instructions. Only DNA from B. thetaiotaomicron showed a strong hybridization signal. No hybridization signal



FIG. 4. PCR-restriction fragment length polymorphism analysis of *B. thetaio-taomicron*. The PCR products with primers BTH-F and BTH-R from *B. thetaio-taomicron* isolates were digested with restriction enzymes *Hae*III (lanes 1 to 6) and *Hin*fI (lanes 7 to 12). Lanes M contain 100-bp DNA ladder (Gibco BRL).



FIG. 5. Dot blot hybridization showing the specificity of PCR amplification. All positive hybridization reactions (indicated by the presence of a hybridization signal) were obtained with *B. thetaiotaomicron* isolates. All negative reactions (no hybridization signal) were from other species as follows: *B. ovatus* (1D), *B. uniformis* (2D), *B. distasonis* (3B), *B. fragilis* (3D), *B. vulgatus* (5B), *Staphylococcus aureus* (5E), *Streptococcus bovis* (6A), *Enterococcus faecalis* (6C), and *Escherichia coli* (6E).

was detected by dot blot analysis of DNA from non-*B. thetaio*taomicron strains (Fig. 5).

B. thetaiotaomicron isolates are commonly found with serious extraintestinal tract infections and are usually more resistant to antimicrobial agents than B. fragilis. Accurate identification of Bacteroides species is often problematic. Conventional identification protocols are usually laborious and time-consuming (19). It is sometimes difficult to differentiate among indolepositive Bacteroides species. For final identification, it was necessary to perform additional tests (production of acid from arabinose, trehalose, and xylane) to discriminate between B. fragilis, B. thetaiotaomicron, B. ovatus, and B. uniformis. It has been reported that misidentification of most Bacteroides species often involves B. thetaiotaomicron (2, 3). For such isolates, up to 48 h can be required for further identification assays. Phenotypic differentiation between *B. thetaiotaomicron* and *B. ovatus* is often difficult in a clinical laboratory setting (19). B. thetaiotaomicron is phylogenetically very close to B. ovatus. Although 16S rRNA has been widely used as a target for PCR primers or probes for the identification of microorganisms (6), the assay for *B. thetaiotaomicron* is less selective, since both *B.* thetaiotaomicron and B. ovatus were detected when the 16S rRNA probe of B. thetaiotaomicron was used (10). In fact, on the basis of 16S rRNA sequence comparison, these two species exhibited 96.9% sequence homology (13). Therefore, the development of rapid and sensitive DNA-based assays which are applicable for the direct detection of B. thetaiotaomicron may improve the rapidity and accuracy of the diagnosis of infections.

In the present study, we have developed a rapid PCR-based assay to improve the identification of *B. thetaiotaomicron*. Initially, RAPD analysis was performed to compare the patterns generated from *Bacteroides* species. A conserved fragment was observed with *B. thetaiotaomicron* isolates. Subsequently, the primers were designed based on the sequences of this fragment and a PCR assay was set up. RAPD analysis has been used mostly for intraspecies discrimination in epidemiological studies (8, 9). However, PCR assays based on the primers designed from conserved fragments generated by RAPD have been previously reported (7, 12, 14, 17). For some organisms, such as *Prevotella*, *Porphyromonas*, *Legionella*, and *Candida* species, this method has been successfully applied for species identification (7, 12, 14, 17). This strategy can be seen as a universal method for designing detection assays without the need for prior knowledge of the genetic characteristics of the target species.

The species specificity of this PCR assay was further tested on 65 clinical isolates identified as *B. thetaiotaomicron* by conventional methods and 11 species of gram-positive and 15 species of gram-negative clinically important bacteria tested. The specific 721-bp amplicon can be obtained only from all *B. thetaiotaomicron* isolates, not from other species. The sensitivity of this PCR assay indicates that only several copies of the target DNA are needed for detection. The sensitivity level should be sufficient for the direct detection of *B. thetaiotaomic cron* in clinical specimens.

In order to ensure the specificity of amplification and also examine the intraspecies heterogeneity, restriction digestion was performed. All of the *B. thetaiotaomicron* clinical isolates displayed identical *Hae*III and *Hin*fI restriction patterns. Therefore, no intraspecies heterogeneity was found. The conservation of target sequences was also confirmed by dot blot hybridization. Under these conditions, only DNA from *B. thetaiotaomicron* showed a strong hybridization signal. No hybridization signal was detected by dot blot analysis of DNA from non-*B. thetaiotaomicron* strains. This assay shows promise for the detection of *B. thetaiotaomicron* from clinical specimens.

The PCR-based diagnostic assay described in this study targets a nucleotide sequence that is conserved in *B. thetaiotaomicron.* No significant homologies were found between the sequence of the 721-bp amplification product and those of other genes found in the GenBank database. No probe is needed in this assay. The simple and rapid PCR assay offers an alternative to currently used methods and may lead to the early diagnosis of *B. thetaiotaomicron* infections.

**Nucleotide sequence accession number.** The partial sequence of the 1.2-kb fragment from the RAPD fingerprints of *B. thetaiotaomicron* isolates was deposited in GenBank and assigned accession no. AF182955.

## REFERENCES

- Appleman, M. D., P. N. R. Heseltine, and C. E. Cherubin. 1991. Epidemiology, antimicrobial susceptibility, pathology, and significance of *Bacteroides fragilis* group organisms isolated at Los Angeles County-University of Southern California Medical Center. Clin. Infect. Dis. 13:12–18.
- Arzese, A., R. Minisini, and G. A. Botta. 1994. Evaluation of an automated system for identification of anaerobic bacteria. Eur. J. Clin. Microbiol. Infect. Dis. 13:135–141.

- Cavallaro, J. J., L. S. Wiggs, and J. M. Miller. 1997. Evaluation of the BBL Crystal Anaerobe Identification system. J. Clin. Microbiol. 35:3186–3191.
- Claros, M. C., H. Gerardo, D. M. Citron, E. J. C. Goldstein, G. Schonian, and A. C. Rodloff. 1997. Use of polymerase chain reaction fingerprinting to compare clinical isolates of *Bacteroides fragilis* and *Bacteroides thetaiotaomicron* from Germany and the United States. Clin. Infect. Dis. 25(Suppl. 2):S295–S298.
- Goldstein, E. J. C. 1996. Anaerobic bacteremia. Clin. Infect. Dis. 23(Suppl. 1):S97–S101.
- Greisen, K., M. Loeffelholz, A. Purohit, and D. Leong. 1994. PCR primers and probes for the 16S rRNA gene of most species of pathogenic bacteria, including bacteria found in cerebrospinal fluid. J. Clin. Microbiol. 32:335– 351.
- Guillot, E., and C. Mouton. 1997. PCR-DNA probe assays for identification and detection of *Prevotella intermedia* sensu stricto and *Prevotella nigrecens*. J. Clin. Microbiol. 35:1876–1882.
- Hsueh, P.-R., L.-J. Teng, S.-W. Ho, W.-C. Hsieh, and K.-T. Luh. 1996. Clinical and microbiological characteristics of *Flavobacterium indologenes* infections associated with indwelling devices. J. Clin. Microbiol. 34:1908– 1913.
- Hsueh, P.-R., L.-J. Teng, P.-C. Yang, H.-J. Pan, Y.-C. Chen, L.-H. Wang, S.-W. Ho, and K.-T. Luh. 1999. Dissemination of two methicillin-resistant *Staphylococcus aureus* clones exhibiting negative Staphylase reactions in intensive care units. J. Clin. Microbiol. 37:504–509.
- Kreader, C. A. 1995. Design and evaluation of *Bacteroides* DNA probes for the specific detection of human fecal pollution. Appl. Environ. Microbiol. 61:1171–1179.
- Kuwahara, T., S. Akimoto, H. Ugai, T. Kamogashira, T. Kinouchi, and Y. Ohnishi. 1996. Detection of *Bacteroides fragilis* by PCR assay targeting the neuraminidase-encoding gene. Lett. Appl. Microbiol. 22:361–365.
- Menard, C., P. Gosselin, J. F. Duhaime, and C. Mouton. 1994. Polymerase chain reaction using arbitrary primer for the design and construction of a DNA probe specific for *Porphyromonas gingivalis*. Res. Microbiol. 145:595– 602.
- Paster, B. J., F. E. Dewhirst, I. Olsen, and G. J. Fraster. 1994. Phylogeny of Bacteroides, Prevotella, and Porphyromonas spp. and related bacteria. J. Bacteriol. 176:725–732.
- Presti, F. L., S. Riffard, F. Vandenesch, and J. Etienne. 1998. Identification of *Legionella* species by random amplified polymorphic DNA profiles. J. Clin. Microbiol. 36:3193–3197.
- Redondo, M. C., M. D. J. Arbo, J. Grindlinger, and D. R. Snydman. 1995. Attributable mortality of bacteremia associated with the *Bacteroides fragilis* group. Clin. Infect. Dis. 20:1492–1496.
- Snydman, D. R., L. McDermott, G. J. Cuchural, Jr., D. W. Hecht, P. B. Iannini, L. J. Harrell, S. G. Jenkins, J. P. O'Keefe, C. L. Pierson, J. D. Rihs, V. L. Yu, S. M. Finegold, and S. L. Gorbach. 1996. Analysis of trends in antimicrobial resistance patterns among clinical isolates of *Bacteroides fragilis* group species from 1990 to 1994. Clin. Infect. Dis. 23(Suppl. 1):S54–S65.
- Steffan, P., J. A. Vazquez, D. Boikov, C. Xu, J. D. Sobel, and R. A. Akins. 1997. Identification of *Candida* species by randomly amplified polymorphic DNA fingerprinting of colony lysates. J. Clin. Microbiol. 35:2031–2039.
- Tanaka-Bandoh, K., N. Kato, K. Watanabe, and K. Ueno. 1995. Antibiotic susceptibility profiles of *Bacteroides fragilis* and *Bacteroides thetaiotaomicron* in Japan from 1990 to 1992. Clin. Infect. Dis. 20(Suppl. 2):S352–S355.
- Whaley, D. N., L. S. Wiggs, P. H. Miller, P. U. Srivastava, and J. M. Miller. 1995. Use of Presumpto Plates to identify anaerobic bacteria. J. Clin. Microbiol. 33:1196–1202.
- Yamashita, Y., S. Kohno, H. Koga, K. Tomono, and M. Kaku. 1994. Detection of *Bacteroides fragilis* in clinical specimen by PCR. J. Clin. Microbiol. 32:679–683.