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The Transformation and Conjugation of Ampicillin-Resistant \textit{Escherichia coli}

William J. Gannon and Nicholas G. Stapleton

Abstract

There is growing concern regarding the development of antibiotic resistance in clinical and agricultural settings due to the prevalence of antibiotics that exist there. However, antibiotic-resistant traits are used extensively in research labs and even in undergraduate classrooms. We aimed to determine whether undergraduate laboratory transformation experiments could contribute to the spread of antibiotic resistance. Studies have been done on antibiotic resistance in large-scale hospital and waste-treatment environments; we applied similar methods to an undergraduate laboratory. We first examined whether ampicillin-resistant \textit{E. coli} were left in the laboratory after the General Biology freshmen performed a transformation lab. In addition, we tested how efficiently ampicillin-resistant bacteria could transfer their resistance to other bacterial genera. The undergraduate lab was swabbed in five highly trafficked areas; swabs of the undersides of work tables, sides of chairs, and doorknob produced no resistant cultures, while swabs of the sink and table tops contained some resistant bacteria. These \textit{E. coli} were plated with various strains of bacteria, including several other \textit{Enterobacteriaceae} as well as gram positive genera with clinical relevance. We then used selective and differential media to determine if ampicillin-resistance was transferred. The results were assessed by the colony counting plate method. Our findings could have immediate implications for the safety and cleaning procedures used by undergraduate labs and could provide incentive to test this hypothesis more thoroughly in clinical environments in the future. In addition, the results indicate the possible contamination of sewage water and the release of resistant bacteria into the environment. Further experimentation could better determine the clinical and environmental consequences of the spread of antibiotic resistance in an aquatic environment.

Through the years, resistant bacteria, specifically MRSA, have shown to be a crucial problem facing the healthcare industry. MRSA infections treated in hospitals have doubled nationwide between the years of 1999 and 2005, growing from an estimated 127,000 reported infections to 278,000 reported infections.\textsuperscript{9}
Resulting from these bacterial infections, awareness of antibiotic resistance has become a widespread issue. Bacteria are found on all surfaces in our environment, and they possess the potential to transfer resistant genetic information from one strain to another. This resistance can be transferred through mutations in the DNA of the bacteria, or through a process called horizontal gene transfer. Transformation, or the transfer of recombinant DNA between bacteria, is the primary mechanism of horizontal gene transfer in recombinant strains of bacteria, and it consists of releasing DNA into the environment, the induction of the gene of interest into competent host bacteria, interaction of cells and recombinant DNA in the host cell, and the entering of DNA into the cell, which begins expressing the recombinant gene. In conjugation, the donor colony typically uses a plasmid known as an ‘R-factor’ to transfer the genetic material directly to the target bacterium. Strains with R-factors have been shown to transfer their resistances both in nutrient broth and when found in a supportive natural environment. In order to transfer genetic information, however, the host bacteria must have competence, or the ability to take in foreign DNA into its cell. For this reason, the bacterial strain, *Escherichia coli*, is commonly used due to its competency and ease of use.

In addition to being extremely competent, *E. coli* has shown the ability to transfer resistance to ampicillin to a non-adjacent colony through intercellular signaling, as well as the ability to transfer resistance through direct horizontal transfer, allowing it to both transfer and receive resistance with other strains. Williams demonstrates that *E. coli* is able to transfer a plasmid to other strains of bacteria, such as *Enterococcus faecalis*, *Streptococcus cremoris*, and *Clostridium acetobutylicum*. Due to the possible antibiotic resistance from *E. coli* to other strains of Enterobacteria, it could pose viable clinical issues that could alter the health of those that come into contact with them. The work of Reinthaler revealed that sewage runoff of hospitals can provide a natural environment which encourages the growth and spread of antibiotic resistance, finding multiple resistant bacterial strains in sewers connected to hospitals. For these reasons, the transfer of recombinant DNA across bacterial species is relevant to biology labs across the country. This issue is compounded when General Biology students perform transformation labs without utilizing proper safety techniques.

Sniegowski and Lenski report that there are high rates of mutation in *E. coli* populations with higher mutators, or bacteria that have mutated to show resistance to a particular vice, than wild-type populations, and these populations are more likely to replicate with the mutation. If General Biology laboratories are not safety conscious about preventing *E. coli* transformation of ampicillin resistance to other species of bacteria, an outbreak of antibiotic-resistant bacteria could emerge. *Enterococcus faecalis*, for example, has been shown to be competent and capable of receiving. It was the goal of this study to determine whether or not General Biology students’ methods lead to an abundance of untreated resistant strains of bacteria, and it aimed to show the importance of minimizing the transformation of recombinant DNA in freshman laboratories.
(This model could also be applied to hospital settings to determine cleanliness of the facilities and surrounding areas.) We expect to find higher bacterial resistance transfer in cases where cleaning procedures are followed less stringently.

2. Materials and Methods

2.1 Obtaining ampicillin-resistant *Escherichia coli*:

The bacteria used in this experiment were *E. coli*, and ampicillin-resistant strains were obtained through the transformation laboratory performed by General Biology students. In order to obtain ampicillin-resistant samples for further experimentation, this experiment was replicated. It began by mixing *E. coli* with calcium chloride in a micro tube and adding pGEM plasmid DNA to the solution and setting on ice for 15 minutes. Next, the competent cells were subjected to a heat shock in a 42°C water bath for exactly two minutes, and then transferred back to the ice. The competent cells then sat for five minutes until Luria (LB) broth was added to the tube. The cells were then left alone in room temperature for 60 minutes and plated, using standard plating methods, onto ampicillin-positive agar in a petri dish. This experiment was performed using five different micro tubes. Thus, five plates of ampicillin-resistant *E. coli* were obtained and allowed to culture overnight in a 37°C incubator.

2.2 Collecting ampicillin-resistant *Escherichia coli* cultures:

Four swabs were taken from each swabbing location at Xavier University Albers Hall, Room 207, to determine whether or not ampicillin-resistant *E. coli* was present. Four swabs were used for each experimental surface. The swabs were sterile and dipped into autoclaved water before sampling each surface. The first swab was the control, and was taken from five different locations in the laboratory: the sink, the door handle, the surface of students’ lab benches, the underside of students’ lab benches, and underneath students’ chairs. Four swabs were taken for each location per trial and were plated on ampicillin-positive agar to determine if resistant strains were present in these locations. Next, three experimental trials were taken from the same locations as the control, using four different swabs for each experimental location, and after each trial the plates were placed in a 37°C incubator and left for 48 hours to allow bacterial growth.

2.3 Determining transformation of ampicillin resistance to surrounding bacteria:

In order to determine whether or not ampicillin-resistant *E. coli* had the capability to transfer its ampicillin resistance to other surrounding bacteria, resistant *E. coli* colonies were placed on a nutrient agar with various strains of Enterobacteria (*K. pneumoniae, E. cloacae, S. epidermidis, P. vulgaris, and P. mirabilis*). The colonies of Enterobacteria were then placed in LB broth and allowed to grow in a 37°C incubator for 48 hours. After 48 hours, a serial dilution was performed and the resultant plates were left to sit overnight in the 37°C
The next morning, the selective plates were observed and the number of resistant strains of Enterobacteria were measured. Those plates that showed positive ampicillin-transformation exemplified different colors on the selective media; light green dots were ampicillin-resistant *E. coli* and darker dots on the same petri dish were the resultant strains of Enterobacteria that underwent positive ampicillin-transformation. The data was recorded in the number of colonies that showed ampicillin-resistant transfer.

2.4 Data Analysis:

Swab sample data was counted by hand to determine the existence of bacterial growth and to identify different bacterial strains on the EMB plates. Plates were divided into fourths; a single quadrant was counted and multiplied by four to obtain an estimate for total number when plates exhibited high amounts of growth (greater than 200 colonies). An ANOVA test was performed in order to determine the significance of the results of the antibiotic resistance transfer experiment.

3. Results

During the duration of this research, two different experiments were performed. The first was to determine whether or not there was an abundance of ampicillin-resistant *Escherichia coli* remaining in freshman biology laboratories. We went about this by swabbing various highly trafficked locations in the laboratory and plating the swabs on ampicillin-positive agar to measure growth.

**Table 1:** Collections of ampicillin-resistant *Escherichia coli* in highly trafficked areas in a freshman biology laboratory measured in colonies (col).

<table>
<thead>
<tr>
<th>Location of swab</th>
<th>Control</th>
<th>Trial 1</th>
<th>Trial 2</th>
<th>Trial 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tabletop</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
<td>3 col</td>
</tr>
<tr>
<td>Table underside</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
<td>1 col</td>
</tr>
<tr>
<td>Sink</td>
<td>31 col</td>
<td>0 col</td>
<td>TNTC col</td>
<td>0 col</td>
</tr>
<tr>
<td>Door handle</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
</tr>
<tr>
<td>Chair underside</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
<td>0 col</td>
</tr>
</tbody>
</table>

As seen in **Table 1**, there was observed growth in three of the five swabbed locations with the sink having the most remaining ampicillin-resistant *E. coli* with measurements TNTC (too numerous to count). Although there was growth in three of five swabbed locations, the results were non-significant (p=0.43 by ANOVA).
Table 2: Number of hand-counted colonies on selective ampicillin positive plates created from serial dilutions of broth of *E. coli* and various pathogenic bacterial strains. Three strains of gram negative bacteria showed successful expression of ampicillin resistance. Lack of result from gram positive bacterial strain (*Staphylococcus epidermedis*) supports the occurrence of conjugation over transduction and translation.

<table>
<thead>
<tr>
<th>Species Name</th>
<th>Number of colonies on 10^6 dilution</th>
<th>Secondary color present</th>
</tr>
</thead>
<tbody>
<tr>
<td>Citrobacter freundii</td>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>Klebsiella pneumoniae</td>
<td>TNTC</td>
<td>Yes</td>
</tr>
<tr>
<td>Enterobacter cloacae</td>
<td>42</td>
<td>Yes</td>
</tr>
<tr>
<td>Proteus vulgaris</td>
<td>612</td>
<td>Yes</td>
</tr>
<tr>
<td>Proteus mirabilis</td>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>Staphylococcus epidermedis (+)</td>
<td>0</td>
<td>No</td>
</tr>
</tbody>
</table>

As seen in Table 2, three of the six experimental dilutions produced ampicillin-resistant *E. coli* and ampicillin-resistant colonies of the second bacteria. The differential media on those three plates successfully produced color differences for identification of both *E. coli* and non-*E. coli* colonial growth. *E. coli* was the most dominant bacteria on all the plates that exhibited growth. The highest observed rate of resistance transfer occurred on the *Klebsiella pneumoniae* experimental plate.

![Figure 1](image_url)  
*Figure 1:* Results of ampicillin resistance transfer from *Escherichia coli* to various strains of gram-negative Enterobacteria measured in colonies.
For the second part of this research, we wanted to observe whether or not ampicillin-resistant *E. coli* transferred its resistance to surrounding Enterobacteria through the process of horizontal gene transfer. As described by Figure 1, there was successful transformation of the resistant plasmid in *E. cloacae* and *P. vulgaris* with *P. vulgaris* having the highest rate of transformation.

4. Discussion

Initially, we believed that the freshman biology lab would show extremely high levels of antibiotic resistance, specifically ampicillin-resistant *Escherichia coli*, because the students wouldn’t follow the cleaning procedures properly. Although it cannot be certain that they did not follow the cleaning procedures carefully, it was determined that there was still some ampicillin-resistant residue remaining after their transformation labs. Ampicillin-resistant *E. coli* was found in the sink drain as well as on the surface and underside of the tables they were working on. It might be noteworthy to add that the controls of the experiment were taken a day after the transformation labs began, so the resistant strains could be a result of that day’s lab, or they could also be a result of the professor enacting the same experiment and leaving traces of resistant strains in the sink due to poor cleaning procedures. This could also indicate that the resistant strains found in the sink have been there for quite some time, indicating that the resistance could have been contaminating the water supply since the last year’s experiment. These resistant strains of bacteria could pose a threat to the surrounding environment and agriculture if they get into the water supply because they have the possibility of transferring their resistance to other strains of gram-negative bacteria. Specifically, since there was the highest concentration of ampicillin-resistant *E. coli* centralized in the communal sink, these bacteria could easily seep into the sewage and affect the water supply. Also, because the bacteria have shown the capability to transfer their resistance to other, surrounding species of bacteria, this could become a widespread issue. This was determined through the second experiment, which showed the transfer of ampicillin resistance from *E. coli* to *K. pneumoniae* and *P. vulgaris*, as well as *E. cloacae*.

Clinical relevance is one implication that the transformation of resistance from *E. coli* to other bacterial species is harmful. For example, the bacteria *Klebsiella pneumoniae* has clinical relevance in that it is believed to be the major pathogen involved with pyogenic liver abscess as well as one of the leading causes of pneumonia. *Klebsiella pneumoniae* can potentially be pathogenic if it is inhaled, and is a pathogen of concern in hospital environments due to multi-drug resistance phenotypes. Research has found that *K. pneumoniae* is capable of transferring this multi-drug resistance to *E. coli* bacteria. This is relevant because *K. pneumoniae* was a bacterial species that tested positive for the transformation of ampicillin resistance from *E. coli*, and if this bacterial species is capable of receiving resistance to treatments and antibacterial medications, then it could pose a significant problem to those suffering from the liver abscess that require specific treatment, or those prevalent to pneumonia.
In addition to *K. pneumoniae*, *P. vulgaris* also may have clinical implications given that it, too, received positive transformation of the ampicillin-resistant gene from *E. coli*. One of the major pathogenic capabilities of *P. vulgaris* is urinary tract infections, specifically bladder and kidney stones. Since *P. vulgaris* was observed to exhibit positive transformation of ampicillin from resistant *E. coli*, it could imply that it is competent to receive other resistant genetic material as well. Since this transformation is possible from *E. coli* to *P. vulgaris*, there could be significant health issues if the ampicillin-resistant *E. coli* spread in the environment because they could influence resistance into these more virulent strains of bacterial species.

To add, *E. cloacae* also exhibited positive transfer of ampicillin resistance from *E. coli*, and this bacterial species also possesses clinical significance. For example, in neonatal patients, *E. cloacea* was discovered to cause necrotizing enterocolitis, or the death of intestinal tissue that generally affects premature and sick babies. This is very significant because, although not typically treated with ampicillin, the transfer of antibiotic resistance to these pathogenic bacteria could pose a threat to those affected with them.

In addition to the various tested gram-negative bacterial species that showed positive transfer of resistance, it is also important that resistance was not transferred to the gram-positive *S. epidermidis*. Our result for *S. epidermidis* did not support the idea that *E. coli* is capable of transferring resistance to gram-positive bacterial strains. It did support the occurrence of conjugation within our experiment over transformation or transduction. Gram-positive bacteria have large clinical relevance, especially in hospital settings, because they are the common causes of bloodstream and other infections in hospitalized patients. One of the largest gram-negative infections occurring today is methicillin-resistant *Staphylococcus aureus* (MRSA), and the fact that transformation of resistance from a gram-negative species did not occur means that this infection is influenced in other ways. It is of large concern to minimize the transfer of MRSA and other gram-positive infections because they do not behave the same as our studied gram-negative species.

Finally, although none of these pathogenic bacteria are commonly treated with ampicillin, this research provides a model for the possible transfer of antibiotic resistance to that of virulent, harmful strains. For example, instead of using ampicillin resistance transfer to *K. pneumoniae*, researchers could use more clinically relevant strains of antibiotics, such as Carbapenem. If transfer of this resistance is not carefully observed and monitored, there could be a resultant epidemic of increasing antibiotic resistant virulent strains of bacteria that our current medication systems could not manipulate and destroy. Antibiotic resistance is of growing concern around the world today, and this research is a model of the different types of virulent strains of bacteria that can be affected if left untreated or if left in areas containing other resistant strains. Further research should be conducted, and a suggestion is to use medically relevant resistant
bacteria to determine if virulent strains can positively transfer or conjugate resistant strains of their common antibacterial. Also, our research only performed three trials in five different locations in a General Biology laboratory, which is certainly not enough data to determine whether there is a reoccurring problem with resistant E. coli residue. For future studies, researchers could increase the number of trials and locations tested in order to obtain more data. In addition, this research should be carried on through the extent of the year in order to determine if resistance is most prevalent during the transformation lab, or if it is occurring on a more significant basis.

5. Acknowledgments

The authors wish to express their appreciation to the Xavier University Biology Department for access to the research laboratory and necessary materials to conduct research, Professor Neema Nourian for allowing us to experiment in his General Biology Lab, Biology 497 peers for their continued support, and Dr. Jennifer Robbins for her guidance and advice.

6. References Cited


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7. Appendix

**Figure 2.** William Gannon, 2014, E. coli growth on ampicillin positive LB agar from General Biology laboratory communal sink drain. Colonies were too numerous to count, and growth indicates presence of antibiotic-resistant bacteria.

**Figure 3.** William Gannon, 2014, E. coli and K. pneumoniae growth on selective, differential, ampicillin positive EMB agar. EMB agar tests specifically for E. coli growth and dyes E. coli colonies green due to the lactose fermentation process. All other colonies appear pink-purple in color.

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**About the Authors**

William Gannon (Class of 2014) earned a B.S. in biology and a minor in chemistry. He was involved with Club Soccer and was the co-founder of the Xavier University Paintball Club. William is currently working as an Account Manager, managing the Asia Pacific Territory for Celsis International, and enjoys playing sports, catching up with friends, and the outdoors in his free time.

Nicholas Stapleton (Class of 2014) earned a B.S. in biology. He was a University Scholar and is an Eagle Scout. He plans to become a Physician Assistant. Nick enjoys reading, archery, and camping in his spare time. “The Transformation and Conjugation of Ampicillin-Resistant Escherichia coli” was sponsored by Dr. Jennifer Robbins, Professor of Biology.