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One hundred stool samples and fifty urine samples were obtained from volunteers between 20 - 60 years old of both sex during October to December in 2014. Out of 100 stool samples, Fifty were from patients with urinary stone disease from the Urological Lithotripsy Unit / Al Basrah General Hospital in Al Basrah province and fifty stool samples were from healthy individuals as a control, and the other fifty midstream urine samples were collected from the same patients with urolithiasis.

The bacterial growth appeared in 48 (96%) of urine samples. Out of 55 bacterial isolates, Gram – positive was (71%) while the other was Gram - negative bacteria. However, by 16SrDNA gene sequencing ,18 different species were identified as 10 (22.72%) Staphylococcus haemolyticus, 7 (15.9%) Escherechia coli, 5 (11.4%) Staphylococcus epidermidis and 3 (6.8%) Enterococcus faecalis Pseudomonas , Klebsiella whereas aeruginosa pneumonia Streptococcus agalactiae, Staphylococcus **Bacillus** hominis and cereus were 2 (4.54%) for each . Moreover, Bacillus subtilis , Enterococcus raffinosus, Staphylococcus lugdunensis, Staphylococcus warneri, Streptococcus parasanguinis, Corynebacterium amycolatum, Corynebacterium Corynebacterium aurimucosum, coyleae and Corynebacterium tuberculostearicum were 1(2.27%) for each. Four isolates (No. 9, 33, 41 and 46) were recorded as new global strains and published by National Center for Biotechnology Information (NCBI) in European Nucleotide Archive (ENA) and the GenBank Escherichia coli strain IRQBAS14, Corynebacterium as tuberculostearicum strain IRQBAS15, Corynebacterium coyleae strain

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IRQBAS16 and *Corynebacterium aurimucosum* strain IRQBAS17, respectively.

The bacterial species were more frequent in patients without surgical operation (88.6%), antibiotic use (77.3%), kidney stone and Ca - oxalate type (72.7%, for each).

Bacterial isolates had a high rate of sensitivity to imipenem (86.4%), while a high rate of resistance was against ampiclox and methicillin (100%, for each). However, high rate of multi - drug resistance was observed among all isolates.

The urolithiasis was more in males (60%). Anatomical location of stone was 74 % in kidney followed by ureter (24%) and bladder (2%). In addition, the majority of patients with urinary stone used antibiotics (74%), diuretics (70 %). The size of stone 7-13 mm was the predominant (72 %).

Specific gene – PCR for *Oxalobacter formigenes* were detected in 48 (96 %) of healthy volunteers stool samples comparing with only 18 (36 %) urolithiasis patients stool samples. Among the types of urinary stones, calcium- oxalate was 37 (74%) more than non- oxalate stones and only 9 (24.3%) of samples with calcium- oxalate stones were positive for *Oxalobacter formigenes* ,while 9(69 .2 %) from 13 stool samples with non- calcium stones were positive versus 4(30.8%) negative . The results showed the positive role of *Oxalobacter formigenes* to reduce the calcium - oxalate stones .

The bacterial species were more frequent (75%) in oxalate stone patients with the negative of *O. formigenes*, especially, *S. haemolyticus* and *S. epidermidis* (100%, for each). These results reveal the absence

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of *O. formigenes* from the intestinal microflora may indirectly increase the ability of some bacterial species to colonize and invade the urinary tract.