Abstract

This is a descriptive cross sectional study conducted during the period from February to March 2015 to determine the antibacterial activity of green tea extract against *Staphylococcus aureus* nasal carriage among health care workers in Omdurman Teaching Hospital. A total of 100 nasal swabs were collected from healthcare workers in Omdurman Teaching Hospital. These specimens were inoculated onto Manitol salt agar media and incubated aerobically at 37°C for 24 hours. The isolates were then identified using the conventional method. Nineteen out of 100 patients were found to harbour *S. aureus* (19%), of them, 8 were isolated from males and 11 from females. Age of participants range between 25-45 years. The antibiotic susceptibility testing was performed using standard disk diffusion method. The results showed that all *S. aureus* isolates were resistant to penicillin.

Out of the 19 *S. aureus* isolates, 15(79%) were susceptible to cefoxitin while the reminded 4(21%) were cefoxitin resistant. Cefoxitin resistant isolates termed to be methicillin resistant *Staphylococcus aureus* (MRSA).

The antibacterial activity of green tea against *Staphylococcus aureus* nasal carriage, MRSA and *S. auerus* ATCC 25923, was performed at different concentrations in water and methanol extracts using the agar dilution method. Both water and methanol extracts of green tea showed antibacterial activity against all the isolates of *S. aureus*, MRSA and *S. auerus* ATCC 25923, (*P*=0.001). The MIC of green tea extracts from water and methanol was obtained by agar diffusion method, they were 25 mg/ml and 12.5 mg/ml respectively for *S. aureus* isolates.

Gas chromatography analysis revealed that 23 chemical compounds of green tea and the compounds were identified qualitatively by the Retention time and quantitatively by the area under the curve.

مستخلص الاطروحة

أجريت هذه الدراسة في الفترة من فبراير, حتى مارس 2015 في ولاية الخرطوم لدراسة نشاط مستخلص الشاي الأخضر على المكورات العنقودية الذهبية المعزولة بالمسح الأنفي تم جمع مئة عينة من العاملين في مجال الرعاية الصحية في مستشفى امدر مان التعليمي.

تم تزريع هذه العينات في وسط المانيتول أقار المغذي والتحصين الهوائي لمدة 24 ساعة في درجة حرارة 37 درجة مئوية. تم استخدام الطرق التقليدية المعروفه وهي صبغة جرام والاختبارات الكيماوية الحيوية.

كانت المعزولات المتحصل عليها 19 من باكتيريا المكورات العنقودية الذهبية, 8 تم عزلها من الذكور و 11 من الاناث المشاركين في الدراسة. تراوحت اعمار المشاركين بين 25- 45 سنة.

تم قياس الحساسية للبكتيريا المعزولة لبعض المضادات البكتيرية بواسطة طريقة الانتشار الطبقي القياسي. من المكورات العنقودية الذهبيه التي عزلت من المستشفى, 15 (79%) لم تقاوم الميثيسيللين. منها 4 (21%) فقط مقاومة للميثيسيللين.

ايضا تضمنت هذة الدراسة نشاط المضاد للبكتيريا لتراكيز مختلفة لمستخلصات الشاي الاخضر في الماء والميثانول باستخدام طريقة اختبار الانتشار الطبق للآجار.أظهرت الدراسة ان مستخلصات الشاي الاخضر لها فعالية ضد كل المكورات العنقودية الذهبية المعزولة المقاومة للبنسلين والميثيسيللين.اظهرت الدراسة ايضا ان التركيز المثبط الادني لمستخلصات الشاي الاخضر من الماء كان 25 ملغ/مل والميثانول 12.5ملغ/مل.

اظهر التحليل اللوني للغاز 23 مركبا للشاي الاخضر وحددت هذه المركبات نوعيا باستخدام الوقت المحتفظ وكميا عبر المنطقة تحت المنحني.

TABLE OF CONTENT

Торіс	Page
Dedication	I
Acknowledgment	II
Abstract	III
Abstract (Arabic)	IV
Table of contents	V
List of tables	X
List of figures	XI
CHAPTER ONE	
1. INTRODUCTION	
1.1. Back ground	1
1.2. Justification (Rationale)	3
1.3. Objectives	4
1.3.1. General objectives	4
1.3.2. Specific objectives	4
CHAPTER TWO 2. LITERATURE REVIEW	
2.1. Nature and pharmacological properties of green tea	5
2.1.1. Origins and nature of tea	5
2.1.2. Chemistry of green tea	5
2.1.3. In vitro antimicrobial activity of green tea extracts	5
2.2 Genus Staphylococcus	7

2.2.1. Definition, pathogenesis and pathogenicity of <i>S. aureus</i>	7	
2.2.2. Staphylococcus aureus nasal carriage	8	
2.2.3. Methicillin Resistant Staphylococcus aureus (MRSA)	8	
CHAPTER THREE 3. MATERIALS AND METHODS		
3.1. Study design	9	
3.2. Study area	9	
3.3. Study population	9	
3.3.1. Inclusion criteria	9	
3.3.2. Exclusion criteria	9	
3.4. Sampling	9	
3.4.1. Sample size	9	
3.5. Study variables	9	
3.6. Data collection	9	
3.7. Ethical clearance	10	
3.8. Data analysis	10	

3.9.1. Sampling method	10
3.5.1. Sumpling method	10
3.9.2. Culture	10
3.9.3. Colonial morphology	10
	10
3.10. Identification technique	10
3.10.1. indirect Gram stain	10
Sitori marcet oran sann	10
3.10.2. Catalase test	11
3.10.3. Coagulase test	11
5.10.3. Coagulase test	11
3.10.4. DNase test	11
3.11. Storage	12
3.12. Green tea extraction	12
Sitzi Sitti teu Ciduction	12
3.12.1. Preparation of the methanol extract	12
3.12.2. Preparation of the aqueous (water) extract	13
2.12 Antimional in avacantibility toot	12
3.13. Antimicrobial susceptibility test	13
3.13.1. Inoculation	13
3.13.2. Applying of antibiotic disc	13

3.13.3. Preparation of green tea exract discs	13
3.13.4. Determination of minimum inhibitory concentration (MIC) by	14
disc diffusion method	
3.13.5. Interpretation of Results	14
3.14. Quality control procedure	14
3.14.1. Control of culture media	14
2142 Control of consentitiii to the time mostly d	
3.14.2. Control of susceptibility testing method	14
3.14.3. Reference strain quality control	14
• •	
3.14.4. Batch quality control	15
3.15. Phytochemical screening	15
CHAPTER FOUR	
4. RESULT	
	16
4. RESULT	16 16
4.1. Culture	
4.1. Culture	
4.1. Culture 4.2. Indirect Gram stain	16
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification	16 16
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test	16 16 16
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification	16 16
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test	16 16 16
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test 4.5. Antibacterial activity of Green tea	16 16 16 20
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test 4.5. Antibacterial activity of Green tea 4.6. Minimum inhibitory concentration (MIC) of Green tea obtained	16 16 16 20 22
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test 4.5. Antibacterial activity of Green tea 4.6. Minimum inhibitory concentration (MIC) of Green tea obtained by agar diffusion method	16 16 16 20
4.1. Culture 4.2. Indirect Gram stain 4.3. Identification 4.4. Antibacterial susceptibility test 4.5. Antibacterial activity of Green tea 4.6. Minimum inhibitory concentration (MIC) of Green tea obtained	16 16 16 20 22

CHAPTER FIVE 5. DISCUSSION	
5.1. Discussion	26
5.2. Conclusion	28
5.3. Recommendations	28
References	29
Appendices	33

List of tables

Title	Pages
Table 1 : Number of <i>S. aureus</i> carrier and non carrier health workers	17
Table2: Susceptibility of <i>S. aureus</i> isolates and <i>S. aureus</i> ATCC 25923 strain to penicillin and cefoxitin	18
Table3 : Weight and yield %s of extracts obtained by different solvents	20
Table 4: The inhibition zones of different concentrations of water extract of green tea against bacterial isolates.	21
Table 5: The inhibition zones of different concentrations of methanol extract of green tea against bacterial isolates.	21
Table 6: Minimum inhibitory concentration (MIC) of water and methanol green tea obtained by agar diffusion method.	22
Table 7: Gas chromatography analysis of green tea	24

List of figures

Title	pages
Figure 1: Percentage of <i>S. aureus</i> nasal carriage isolated from health care workers.	17
Figure 2: Growth on Manitol salt agar plate of <i>S. aureus</i> showing yellow fermentation and pink non fermented colonies.	19
Figure 3 : Antimicrobial susceptibility testing of <i>S. aureus</i> isolates to penicillin and cefoxitin using standardized disk diffusion method.	19
Figure 4: Cefoxitin susceptibility to <i>S. aureus</i> isolates from health care workers	20
Figure 5 : Activity of green tea methanol extract of different concentrations against <i>S. aureus</i> isolates.	23
Figure 6: The phytochemical compounds found in green tea	25