

SUPPORTING INFECTIOUS DISEASE RESEARCH

Product Information Sheet for NR-50109

Staphylococcus aureus, Strain NRS63SH

Catalog No. NR-50109

For research use only. Not for human use.

Contributor and Manufacturer:

BEI Resources

Product Description:

Bacteria Classification: Staphylococcaceae, Staphylococcus

Species: Staphylococcus aureus

Strain: NRS63SH

Original Source: Staphylococcus aureus (S. aureus), strain NRS63SH was originally deposited as part of the NARSA collection, strain NRS63. The phenotypic characteristics obtained during quality control testing did not match the reported phenotype of the deposited item; subsequently, this novel strain was deposited as NRS63SH.

<u>Comments</u>: S. aureus, strain NRS63SH is a vancomycinresistant S. aureus (VRSA) strain.

S. aureus is a Gram-positive, cluster-forming coccus that normally inhabits human nasal passages, skin and mucus membranes. It is also a human pathogen and causes a variety of pus-forming infections as well as food-poisoning and toxic shock syndrome. In 1961, two years after the introduction of methicillin, a penicillinase-resistant penicillin, S. aureus developed methicillin-resistance due to acquisition of the mecA gene. Subsequently, MRSA infections have become widespread in both hospital and community settings.1 Vancomycin has been the preferred antibiotic of choice for the treatment of MRSA infections.2 However, there have now been MRSA strains isolated that also have reduced susceptibility or resistance to vancomycin.3,4 It is believed that this decreased sensitivity primarily arises through mutations affecting the production of peptidoglycans, resulting in a thickened cell wall and a reduction of vancomycin at its site of action.5 While much rarer, resistance can also occur through the acquisition of the vancomycin resistance gene, vanA, from Enterococcus faecalis.3,5,6

Material Provided:

Each vial contains approximately 0.5 mL of bacterial culture in Tryptic Soy broth supplemented with 10% glycerol.

Note: If homogeneity is required for your intended use, please purify prior to initiating work.

Packaging/Storage:

NR-50109 was packaged aseptically in cryovials. The product is provided frozen and should be stored at -60°C or colder immediately upon arrival. For long-term storage, the vapor phase of a liquid nitrogen freezer is recommended. Freeze-thaw cycles should be avoided.

Growth Conditions:

Media:

Brain Heart Infusion broth or Tryptic Soy broth or equivalent
Brain Heart Infusion agar or Tryptic Soy agar with 5%
defibrinated sheep blood or equivalent

Incubation:

Temperature: 37°C Atmosphere: Aerobic

Propagation:

- 1. Keep vial frozen until ready for use, then thaw.
- Transfer the entire thawed aliquot into a single tube of broth.
- Use several drops of the suspension to inoculate an agar slant and/or plate.
- 4. Incubate the tube, slant and/or plate at 37°C for 1 day.

Citation:

Acknowledgment for publications should read "The following reagent was obtained through BEI Resources, NIAID, NIH: *Staphylococcus aureus*, Strain NRS63SH, NR-50109."

Biosafety Level: 2

Appropriate safety procedures should always be used with this material. Laboratory safety is discussed in the following publication: U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, and National Institutes of Health. Biosafety in Microbiological and Biomedical Laboratories. 5th ed. Washington, DC: U.S. Government Printing Office, 2009; see www.cdc.gov/biosafety/publications/bmbl5/index.htm.

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References:

- Deurenberg, R. H. and E. E. Stobberingh. "The Evolution of Staphylococcus aureus." <u>Infect. Genet. Evol.</u> 8 (2008): 747-763. PubMed: 18718557.
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- Hanaki, H., et al. "Activated Cell-Wall Synthesis is Associated with Vancomycin Resistance in Methicillin-Resistant Staphylococcus aureus Clinical Strains Mu3 and Mu50." J. Antimicrob. Chemother. 42 (1998): 199-209. Pubmed: 9738837.
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- Chang, S., et al. "Infection with Vancomycin-Resistant Staphylococcus aureus Containing the vanA Resistance Gene." N. Engl. J. Med. 3 (2003): 1342-1347. PubMed: 12672861.

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