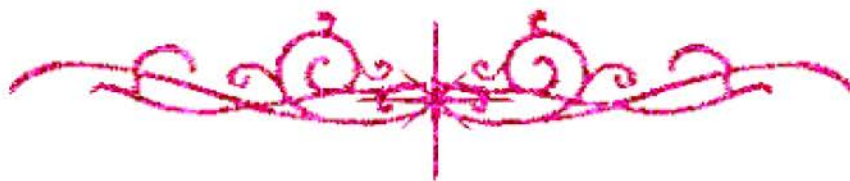


# بسم الله الرحمن الرحيم





# شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم





# جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

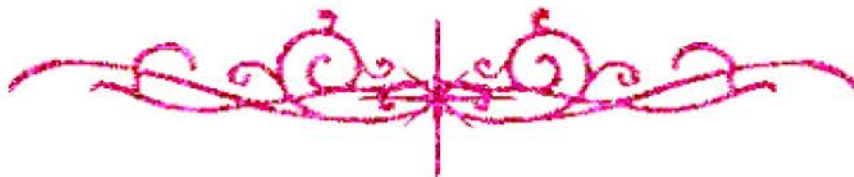
## قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها  
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



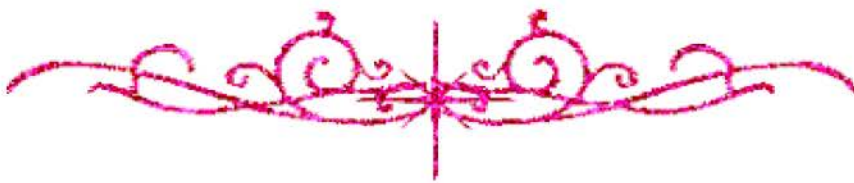
## يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار





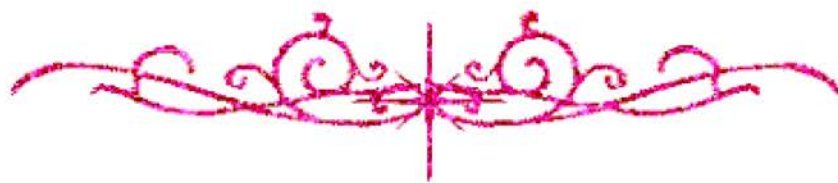
# بعض الوثائق الأصلية تالفة







بالرسالة صفحات  
لم ترد بالأصل





B12C--

*Comparative Study between the  
Conventional and Recent Methods in  
Diagnosis of Genitourinary Tuberculosis*

*Presented By*

**GHADA MOHAMED RASHAD EL-HENDAWY**

(M.B.B.ch) (M.Sc.) Microbiology

*For*

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*Faculty of Medicine  
Menoufiya University, 2002*





بسم الله الرحمن الرحيم

يرفع الله الذين آمنوا منكم  
والذين أوتوا العلم ورجات  
والله بما تعملون خبير

صدق الله العظيم

(الآية ١١ - سورة المجادلة)





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# Index

|         |                                   |
|---------|-----------------------------------|
| 1-3     | Introduction and aims of the work |
| 4-6     | Review of literature              |
| 7-9     | Materials and methods             |
| 10-12   | Results and discussion            |
| 13-15   | Conclusions                       |
| 16-18   | References                        |
| 19-21   | Appendix                          |
| 22-24   | Tables                            |
| 25-27   | Figures                           |
| 28-30   | Summary and conclusions           |
| 31-33   | References                        |
| 34-36   | Appendix                          |
| 37-39   | Tables                            |
| 40-42   | Figures                           |
| 43-45   | Summary and conclusions           |
| 46-48   | References                        |
| 49-51   | Appendix                          |
| 52-54   | Tables                            |
| 55-57   | Figures                           |
| 58-60   | Summary and conclusions           |
| 61-63   | References                        |
| 64-66   | Appendix                          |
| 67-69   | Tables                            |
| 70-72   | Figures                           |
| 73-75   | Summary and conclusions           |
| 76-78   | References                        |
| 79-81   | Appendix                          |
| 82-84   | Tables                            |
| 85-87   | Figures                           |
| 88-90   | Summary and conclusions           |
| 91-93   | References                        |
| 94-96   | Appendix                          |
| 97-99   | Tables                            |
| 100-102 | Figures                           |
| 103-105 | Summary and conclusions           |
| 106-108 | References                        |
| 109-111 | Appendix                          |
| 112-114 | Tables                            |
| 115-117 | Figures                           |
| 118-120 | Summary and conclusions           |
| 121-123 | References                        |
| 124-126 | Appendix                          |
| 127-129 | Tables                            |
| 130-132 | Figures                           |
| 133-135 | Summary and conclusions           |
| 136-138 | References                        |
| 139-141 | Appendix                          |
| 142-144 | Tables                            |
| 145-147 | Figures                           |
| 148-150 | Summary and conclusions           |
| 151-153 | References                        |
| 154-156 | Appendix                          |
| 157-159 | Tables                            |
| 160-162 | Figures                           |
| 163-165 | Summary and conclusions           |
| 166-168 | References                        |
| 169-171 | Appendix                          |
| 172-174 | Tables                            |
| 175-177 | Figures                           |
| 178-180 | Summary and conclusions           |
| 181-183 | References                        |
| 184-186 | Appendix                          |
| 187-189 | Tables                            |
| 190-192 | Figures                           |
| 193-195 | Summary and conclusions           |
| 196-198 | References                        |
| 199-201 | Appendix                          |
| 202-204 | Tables                            |
| 205-207 | Figures                           |
| 208-210 | Summary and conclusions           |
| 211-213 | References                        |
| 214-216 | Appendix                          |
| 217-219 | Tables                            |
| 220-222 | Figures                           |
| 223-225 | Summary and conclusions           |
| 226-228 | References                        |
| 229-231 | Appendix                          |
| 232-234 | Tables                            |
| 235-237 | Figures                           |
| 238-240 | Summary and conclusions           |
| 241-243 | References                        |
| 244-246 | Appendix                          |
| 247-249 | Tables                            |
| 250-252 | Figures                           |
| 253-255 | Summary and conclusions           |
| 256-258 | References                        |
| 259-261 | Appendix                          |
| 262-264 | Tables                            |
| 265-267 | Figures                           |
| 268-270 | Summary and conclusions           |
| 271-273 | References                        |
| 274-276 | Appendix                          |
| 277-279 | Tables                            |
| 280-282 | Figures                           |
| 283-285 | Summary and conclusions           |
| 286-288 | References                        |
| 289-291 | Appendix                          |
| 292-294 | Tables                            |
| 295-297 | Figures                           |
| 298-300 | Summary and conclusions           |
| 301-303 | References                        |
| 304-306 | Appendix                          |
| 307-309 | Tables                            |
| 310-312 | Figures                           |
| 313-315 | Summary and conclusions           |
| 316-318 | References                        |
| 319-321 | Appendix                          |
| 322-324 | Tables                            |
| 325-327 | Figures                           |
| 328-330 | Summary and conclusions           |
| 331-333 | References                        |
| 334-336 | Appendix                          |
| 337-339 | Tables                            |
| 340-342 | Figures                           |
| 343-345 | Summary and conclusions           |
| 346-348 | References                        |
| 349-351 | Appendix                          |
| 352-354 | Tables                            |
| 355-357 | Figures                           |
| 358-360 | Summary and conclusions           |
| 361-363 | References                        |
| 364-366 | Appendix                          |
| 367-369 | Tables                            |
| 370-372 | Figures                           |
| 373-375 | Summary and conclusions           |
| 376-378 | References                        |
| 379-381 | Appendix                          |
| 382-384 | Tables                            |
| 385-387 | Figures                           |
| 388-390 | Summary and conclusions           |
| 391-393 | References                        |
| 394-396 | Appendix                          |
| 397-399 | Tables                            |
| 400-402 | Figures                           |
| 403-405 | Summary and conclusions           |
| 406-408 | References                        |
| 409-411 | Appendix                          |
| 412-414 | Tables                            |
| 415-417 | Figures                           |
| 418-420 | Summary and conclusions           |
| 421-423 | References                        |
| 424-426 | Appendix                          |
| 427-429 | Tables                            |
| 430-432 | Figures                           |
| 433-435 | Summary and conclusions           |
| 436-438 | References                        |
| 439-441 | Appendix                          |
| 442-444 | Tables                            |
| 445-447 | Figures                           |
| 448-450 | Summary and conclusions           |
| 451-453 | References                        |
| 454-456 | Appendix                          |
| 457-459 | Tables                            |
| 460-462 | Figures                           |
| 463-465 | Summary and conclusions           |
| 466-468 | References                        |
| 469-471 | Appendix                          |
| 472-474 | Tables                            |
| 475-477 | Figures                           |
| 478-480 | Summary and conclusions           |
| 481-483 | References                        |
| 484-486 | Appendix                          |
| 487-489 | Tables                            |
| 490-492 | Figures                           |
| 493-495 | Summary and conclusions           |
| 496-498 | References                        |
| 499-501 | Appendix                          |
| 502-504 | Tables                            |
| 505-507 | Figures                           |
| 508-510 | Summary and conclusions           |
| 511-513 | References                        |
| 514-516 | Appendix                          |
| 517-519 | Tables                            |
| 520-522 | Figures                           |
| 523-525 | Summary and conclusions           |
| 526-528 | References                        |
| 529-531 | Appendix                          |
| 532-534 | Tables                            |
| 535-537 | Figures                           |
| 538-540 | Summary and conclusions           |
| 541-543 | References                        |
| 544-546 | Appendix                          |
| 547-549 | Tables                            |
| 550-552 | Figures                           |
| 553-555 | Summary and conclusions           |
| 556-558 | References                        |
| 559-561 | Appendix                          |
| 562-564 | Tables                            |
| 565-567 | Figures                           |
| 568-570 | Summary and conclusions           |
| 571-573 | References                        |
| 574-576 | Appendix                          |
| 577-579 | Tables                            |
| 580-582 | Figures                           |
| 583-585 | Summary and conclusions           |
| 586-588 | References                        |
| 589-591 | Appendix                          |
| 592-594 | Tables                            |
| 595-597 | Figures                           |
| 598-600 | Summary and conclusions           |
| 601-603 | References                        |
| 604-606 | Appendix                          |
| 607-609 | Tables                            |
| 610-612 | Figures                           |
| 613-615 | Summary and conclusions           |
| 616-618 | References                        |
| 619-621 | Appendix                          |
| 622-624 | Tables                            |
| 625-627 | Figures                           |
| 628-630 | Summary and conclusions           |
| 631-633 | References                        |
| 634-636 | Appendix                          |
| 637-639 | Tables                            |
| 640-642 | Figures                           |
| 643-645 | Summary and conclusions           |
| 646-648 | References                        |
| 649-651 | Appendix                          |
| 652-654 | Tables                            |
| 655-657 | Figures                           |
| 658-660 | Summary and conclusions           |
| 661-663 | References                        |
| 664-666 | Appendix                          |
| 667-669 | Tables                            |
| 670-672 | Figures                           |
| 673-675 | Summary and conclusions           |
| 676-678 | References                        |
| 679-681 | Appendix                          |
| 682-684 | Tables                            |
| 685-687 | Figures                           |
| 688-690 | Summary and conclusions           |
| 691-693 | References                        |
| 694-696 | Appendix                          |
| 697-699 | Tables                            |
| 700-702 | Figures                           |
| 703-705 | Summary and conclusions           |
| 706-708 | References                        |
| 709-711 | Appendix                          |
| 712-714 | Tables                            |
| 715-717 | Figures                           |
| 718-720 | Summary and conclusions           |
| 721-723 | References                        |
| 724-726 | Appendix                          |
| 727-729 | Tables                            |
| 730-732 | Figures                           |
| 733-735 | Summary and conclusions           |
| 736-738 | References                        |
| 739-741 | Appendix                          |
| 742-744 | Tables                            |
| 745-747 | Figures                           |
| 748-750 | Summary and conclusions           |
| 751-753 | References                        |
| 754-756 | Appendix                          |
| 757-759 | Tables                            |
| 760-762 | Figures                           |
| 763-765 | Summary and conclusions           |
| 766-768 | References                        |
| 769-771 | Appendix                          |
| 772-774 | Tables                            |
| 775-777 | Figures                           |
| 778-780 | Summary and conclusions           |
| 781-783 | References                        |
| 784-786 | Appendix                          |
| 787-789 | Tables                            |
| 790-792 | Figures                           |
| 793-795 | Summary and conclusions           |
| 796-798 | References                        |
| 799-801 | Appendix                          |
| 802-804 | Tables                            |
| 805-807 | Figures                           |
| 808-810 | Summary and conclusions           |
| 811-813 | References                        |
| 814-816 | Appendix                          |
| 817-819 | Tables                            |
| 820-822 | Figures                           |
| 823-825 | Summary and conclusions           |
| 826-828 | References                        |
| 829-831 | Appendix                          |
| 832-834 | Tables                            |
| 835-837 | Figures                           |
| 838-840 | Summary and conclusions           |
| 841-843 | References                        |
| 844-846 | Appendix                          |
| 847-849 | Tables                            |
| 850-852 | Figures                           |
| 853-855 | Summary and conclusions           |
| 856-858 | References                        |
| 859-861 | Appendix                          |
| 862-864 | Tables                            |
| 865-867 | Figures                           |
| 868-870 | Summary and conclusions           |
| 871-873 | References                        |
| 874-876 | Appendix                          |
| 877-879 | Tables                            |
| 880-882 | Figures                           |
| 883-885 | Summary and conclusions           |
| 886-888 | References                        |
| 889-891 | Appendix                          |
| 892-894 | Tables                            |
| 895-897 | Figures                           |
| 898-900 | Summary and conclusions           |
| 901-903 | References                        |
| 904-906 | Appendix                          |
| 907-909 | Tables                            |
| 910-912 | Figures                           |
| 913-915 | Summary and conclusions           |
| 916-918 | References                        |
| 919-921 | Appendix                          |
| 922-924 | Tables                            |
| 925-927 | Figures                           |
| 928-930 | Summary and conclusions           |
| 931-933 | References                        |
| 934-936 | Appendix                          |
| 937-939 | Tables                            |
| 940-942 | Figures                           |
| 943-945 | Summary and conclusions           |
| 946-948 | References                        |
| 949-951 | Appendix                          |
| 952-954 | Tables                            |
| 955-957 | Figures                           |
| 958-960 | Summary and conclusions           |
| 961-963 | References                        |
| 964-966 | Appendix                          |
| 967-969 | Tables                            |
| 970-972 | Figures                           |
| 973-975 | Summary and conclusions           |
| 976-978 | References                        |
| 979-981 | Appendix                          |
| 982-984 | Tables                            |
| 985-987 | Figures                           |
| 988-990 | Summary and conclusions           |
| 991-993 | References                        |
| 994-996 | Appendix                          |
| 997-999 | Tables                            |

***Introduction  
And  
Aim of the work***





## **Introduction and aim of the work**

Mycobacteria are responsible for considerable human morbidity and mortality worldwide . *Mycobacterium tuberculosis* (MTB) infects 1.7 billion people worldwide and causes 3 million deaths each year, the highest mortality rate caused by any single infectious organism (*Griethuysen et al, 1996*) .

The global incidence of tuberculosis (TB) was predicted to increase by 36% between 1990 and 2000. Notification rates of TB in some Western European and other industrialized countries have increased (*Raviglione, 1995*) . These rates may again increase in the near future because of the population growth , migration of people from regions of the world with higher incidence of TB , and the human immunodeficiency virus ( HIV ) epidemic (*Torrea et al, 1996*).

The prevalence of TB increased also among other high - risk populations like chronic alcoholics , homeless people and drug abusers (*Magdalena et al, 1998*) . In addition, the advancing age of population and the general neglect of T B c ontrol p rograms i n m any countries have a lso c ontributed to the i ncreased i ncidence o f TB (*Brudney and Dopkin, 1991*) . Also , drug resistant MTB strains have

emerged , which further complicates its control programs (*Bloch et al, 1994*) .

According to World Health Organization ( WHO) , one t hird o f the population is infected with TB and there are 8 to 10 million new TB cases every year (*Gerdes et al, 1999*) .

Because of the increased incidence of TB in many parts of the world , the need for rapid diagnosis has become paramount . An essential element in the control of TB is the rapid , sensitive and specific identification of the causative agent . Until now , diagnosis is largely based on clinical signs , radiological findings , tuberculin tests , microscopic examination and culture of samples for MTB . However , these methods have many disadvantages , tuberculin tests lack specificity and only give an indication of previous exposure to TB. Direct microscopic examination does not have enough specificity or sensitivity, while mycobacterial isolation is time - consuming (*Bergman and Woods, 1996*).

An alternative to these classical methods , new nucleic acid - based technologies may be more promising because it may be more rapid , sensitive and specific means of identification of mycobacteria . Two commercial standardized nucleic acid - based amplification techniques have been reported to yield reliable results within 5 to 7 hours of sample processing: Roche Amplicor MTB and Gen - probe AMTB . The