

# 以人類糞便為樣本評估增菌液及選擇性培養基組合分離沙門氏菌的敏感度及特異性

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## 摘要

沙門氏菌 (*Salmonella* spp.) 是造成腹瀉常見的病原菌之一，為提高臨床檢驗分離與鑑別的敏感度及特異性，本研究評估3種商品化的培養基：沙門氏菌呈色培養基CAS (CHROMagar *Salmonella* medium)、海克通氏腸內菌培養基HE (Hektoen enteric agar)及木糖離胺酸去氧膽酸鹽培養基XLD (Xylose lysine desoxycholate agar)與3種(商品化的)增菌液：革蘭氏陰性菌增菌液GN (Gram-negative broth)、亞硒酸鹽增菌液SB (Selenite broth)及亞硒酸亮綠磺胺鹽增菌液SBG (Selenite brilliant green sulfa enrichment broth)在提高臨床檢驗分離與鑑別之可行性。本研究共收集459個臨床腹瀉病人的糞便檢體，其中304個檢體用於比較直接接種及評估GN及SB對*Salmonella* spp.菌株的增菌效果；另外155個檢體則用於比較SB及SBG增菌效果。Salmonella spp.鑑定方式包括生化反應鑑定及血清分型。研究結果共分離出109株*Salmonella* spp.，可區分為22種血清型，檢體用生理食鹽水混合均勻後再接種比肛門拭子直接塗抹接種於培養基有較多的分離菌株(前者42株，後者29株)。在未增菌的情況下，XLD的敏感度及特異性分別為53.5%及87.6%較CAS(敏感度：35.2%、特異性83.9%)及HE(敏感度：40.9%、特異性81.5%)培養基為佳。經過GN增菌後再接種於HE及XLD培養基其敏感度分別為45.1%及52.1%顯著優於CAS培養基之28.1%，特異性則三者之間無顯著差異。以SB增菌後再接種，XLD為較佳之選擇，其敏感度為86.0%，特異性為75.7%。就增菌液的增菌效果而言，SB增菌後的沙門氏菌分離檢體數為66件，明顯高於未經增菌45件及GN增菌45件(p

關鍵詞：沙門氏菌，木糖離胺酸去氧膽酸鹽培養基，海克通氏腸內菌培養基，沙門氏菌呈色培養，革蘭氏陰性菌增菌液亞硒酸鹽增菌液，亞硒酸亮綠磺胺鹽培養

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