

Complete genome sequence of *Staphylococcus aureus* strain MD04 isolated from the foot ulcer of a patient with diabetes in rural southwestern Uganda

Danladi Makeri,¹ Emmanuel Eilu,² Martin Odoki,^{2,3} Ismail Abiola Adebayo,⁴ Reuben Maghembe,^{5,6,7} Samweli Bahati,⁵ Musoba Abubakar,⁸ Reagan Muhwezi,¹ Theophilus Pius,⁹ Priscilla Peter Dilli,¹⁰ Saheed Adekunle Akinola,¹¹ Ezera Agwu^{1,11}

AUTHOR AFFILIATIONS See affiliation list on p. 2.

ABSTRACT We report the whole-genome sequence of *Staphylococcus aureus* strain MD04, isolated from the foot ulcer of a diabetic patient in rural southwestern Uganda. The assembled genome is 2,789,538 base pairs in length, with a GC content of 32.5%. Genome completeness is 98%, with a 2.48% contamination.

KEYWORDS wound bacteria, bacterial genomics, diabetic foot infection, WGS, Illumina sequencing, Uganda, diabetic foot ulcers

Diabetic foot ulcers (DFUs) are a major public health concern, especially in low-resource settings where access to specialized care is limited (1–3). They frequently become infected with multidrug-resistant pathogens such as *Staphylococcus aureus*, contributing to poor healing, limb amputation, and mortality (4–6). This genome announcement presents the draft genome sequence of *S. aureus* strain MD04, isolated from a chronic DFU in Uganda. It provides genomic insights into resistance and virulence genes to support genomic surveillance, antimicrobial stewardship, and pathogen evolution research.

Strain MD04 was isolated from a wound swab collected from a 58-year-old diabetic patient attending Kampala International University Teaching Hospital. The isolate was cultured on Mannitol salt agar (Himedia, India) and incubated aerobically at 37°C for 24 hours. Preliminary identification was based on Gram staining (gram-positive cocci clusters) and a positive catalase and coagulase test. Antimicrobial susceptibility testing was performed using the Kirby-Bauer disk diffusion method following CLSI guidelines (7), and it revealed resistance to multiple antibiotics, including cefoxitin, indicating methicillin resistance.

A single colony of the confirmed *Staphylococcus aureus* was grown overnight in Luria-Bertani broth (Himedia, India) in a shaking incubator at 37°C and 200 rpm, and cells were harvested by centrifugation at 12,000 × *g* for 10 min. Genomic DNA was extracted using the QIAamp DNA Mini Kit (QIAGEN, Germany), following the manufacturer's protocol. The integrity of the extracted DNA was assessed by 1%, wt/vol agarose gel electrophoresis, and DNA concentration was measured using a Qubit dsDNA High Sensitivity Assay Kit (Thermo Fisher Scientific). DNA purity was evaluated using the NanoDrop ND-1000 spectrophotometer (Thermo Fisher Scientific). The whole genome sequencing was performed using the Illumina MiSeq platform with 2 × 150 bp paired-end reads. Library preparation followed the manufacturer's instructions for the MiSeq DNA High Throughput Library Prep Kit (Illumina, USA).

Reads were quality-checked using FastQC (version 0.12.1) (8). Adapter sequences and low-quality bases were trimmed using Trimmomatic (version 0.39) (9), with a minimum read length cutoff of 36 bp. *De novo* assembly was performed with SPAdes

Editor André O. Hudson, Rochester Institute of Technology, Rochester, New York, USA

Address correspondence to Danladi Makeri, makeri@kiu.ac.ug.

The authors declare no conflict of interest.

Received 11 April 2025

Accepted 22 May 2025

Published 10 June 2025

Copyright © 2025 Makeri et al. This is an open-access article distributed under the terms of the [Creative Commons Attribution 4.0 International license](https://creativecommons.org/licenses/by/4.0/).

TABLE 1 Data availability, genome statistics, and features of *Staphylococcus aureus* MD04

Parameter	Value
Genome size	2,789,538 bp
Number of scaffolds	29
Scaffold N_{50}	151.2 kb
Scaffold L_{50}	6
Number of contigs	50
Contig N_{50}	86.4 kb
Contig L_{50}	10
GC%	32.5
Genome coverage	32.67×
Completeness (%)	98
Contamination (%)	2.48
Total number of genes	2,756

(version 3.15.3) (10), resulting in 50 contigs. The genome was annotated using the NCBI Prokaryotic Genome Annotation Pipeline (11). The final assembled genome is 2,789,538 base pairs long, with a GC content of 32.5%, an estimated completeness of 98%, and a 2.48% contamination. It contains 2,756 genes, including 2,651 predicted protein-coding genes (Table 1). Default parameters were used for all software unless otherwise specified.

AUTHOR AFFILIATIONS

¹Department of Microbiology and Immunology, Kampala International University Western Campus, Ishaka, Uganda

²Department of Microbiology and Immunology, School of Medicine, King Ceasor University, Kampala, Uganda

³Department of Applied Sciences, School of Sciences, Nkumba University, Entebbe, Uganda

⁴Department of Microbiology, Parasitology, and Immunology, School of Medicine, Kabale University, Kabale, Uganda

⁵Omics and Bioinformatics Section, DABA Biotech Ltd, Dar es Salaam, Tanzania

⁶Department of Microbiology and Parasitology, Faculty of Medicine, St. Francis University College of Health and Allied Sciences, Ifakara, Tanzania

⁷Department of Immunology and Molecular Biology, College of Health Sciences, Makerere University, Kampala, Uganda

⁸Institute of Biomedical Research, Kampala International University Western Campus, Ishaka, Uganda

⁹Department of Medical Laboratory Science, Kampala International University Western Campus, Ishaka, Uganda

¹⁰Department of Public Health, Kampala International University Western Campus, Ishaka, Uganda

¹¹Department of Microbiology and Parasitology, School of Medicine and Pharmacy, College of Medicine and Health Sciences, University of Rwanda, Butare, Rwanda

AUTHOR ORCIDs

Danladi Makeri  <http://orcid.org/0000-0001-6978-3187>

Reuben Maghembe  <http://orcid.org/0000-0003-2453-5993>

Saheed Adekunle Akinola  <http://orcid.org/0000-0002-6520-8609>

AUTHOR CONTRIBUTIONS

Danladi Makeri, Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Writing – original draft | Emmanuel Eilu, Conceptualization, Methodology, Supervision, Writing – review and editing | Martin Odoki, Conceptualization,

Methodology, Supervision, Writing – review and editing | Ismail Abiola Adebayo, Formal analysis, Methodology, Resources, Software, Validation, Writing – review and editing | Reuben Maghembe, Formal analysis, Methodology, Resources, Software, Validation, Visualization, Writing – review and editing | Samweli Bahati, Formal analysis, Methodology, Resources, Software, Validation, Visualization, Writing – review and editing | Musoba Abubakar, Formal analysis, Methodology, Resources, Software, Validation, Writing – review and editing | Reagan Muhwezi, Data curation, Formal analysis, Investigation, Methodology, Resources, Software, Validation, Writing – review and editing | Theophilus Pius, Data curation, Investigation, Methodology, Validation, Writing – review and editing | Priscilla Peter Dilli, Data curation, Investigation, Methodology, Resources, Validation, Writing – review and editing | Saheed Adekunle Akinola, Methodology, Resources, Software, Validation, Writing – review and editing | Ezera Agwu, Conceptualization, Methodology, Resources, Software, Supervision, Writing – review and editing

DATA AVAILABILITY

This Whole Genome Shotgun project has been deposited in NCBI GenBank under the accession no. [JBKICB000000000](https://doi.org/10.1093/nar/gkw569) (12). Raw reads are available in the NCBI SRA database under the accession number [SRR31800042](https://doi.org/10.1093/nar/gkw569) (13). The annotated genome is accessible via the accession number [ASM4657328v1](https://doi.org/10.1093/nar/gkw569) (14), and the associated BioSample is available under accession number [SAMN45937523](https://doi.org/10.1093/nar/gkw569) (15).

ETHICS APPROVAL

The study protocol and sample collection were approved by the Research Ethics Committee of Kampala International University (KIU-2024-289) and the Ugandan National Council for Science and Technology (HS4836ES).

REFERENCES

1. Abbas ZG, Boulton AJM. 2022. Diabetic foot ulcer disease in African continent: "From clinical care to implementation" - Review of diabetic foot in last 60 years - 1960 to 2020. *Diabetes Res Clin Pract* 183:109155. <https://doi.org/10.1016/j.diabres.2021.109155>
2. Rigato M, Pizzol D, Tiago A, Putoto G, Avogaro A, Fadini GP. 2018. Characteristics, prevalence, and outcomes of diabetic foot ulcers in Africa. a systemic review and meta-analysis. *Diabetes Res Clin Pract* 142:63–73. <https://doi.org/10.1016/j.diabres.2018.05.016>
3. Makeri D, Eilu E, Odoki M, Agwu E. 2024. A systematic review of the microbial landscape of diabetic foot ulcers in Uganda. *Infect Drug Resist* 17:143–151. <https://doi.org/10.2147/IDR.S446838>
4. Makeri D, Odoki M, Eilu E, Agwu E. 2023. Update on prevalence and antimicrobial resistance of *Staphylococcus aureus* and *Pseudomonas aeruginosa* isolated from diabetic foot ulcers in Africa: a systematic review and meta-analysis. *Bull Natl Res Cent* 47. <https://doi.org/10.1186/s42269-023-01119-5>
5. Macdonald KE, Boeckh S, Stacey HJ, Jones JD. 2021. The microbiology of diabetic foot infections: a meta-analysis. *BMC Infect Dis* 21:770. <https://doi.org/10.1186/s12879-021-06516-7>
6. Wada FW, Mekonnen MF, Sawiso ED, Kolato S, Woldegiorgis L, Kera GK, El-Khatib Z, Ashuro AA, Biru M, Boltena MT. 2023. Bacterial profile and antimicrobial resistance patterns of infected diabetic foot ulcers in sub-Saharan Africa: a systematic review and meta-analysis. *Sci Rep* 13:14655. <https://doi.org/10.1038/s41598-023-41882-z>
7. CLSI. 2023. Performance standards for antimicrobial susceptibility testing. In *CLSI M100-ED33*, 33rd ed
8. Karpelowsky JS, Millar AJW, van der Graaf N, van Bogerijen G, Zar HJ. 2011. Outcome of HIV-exposed uninfected children undergoing surgery. *BMC Pediatr* 11:69. <https://doi.org/10.1186/1471-2431-11-69>
9. Sewe SO, Silva G, Sicut P, Seal SE, Visendi P. 2022. Trimming and validation of illumina short reads using trimmomatic, trinity assembly, and assessment of RNA-seq data. *Methods Mol Biol* 2443:211–232. https://doi.org/10.1007/978-1-0716-2067-0_11
10. Prjibelski A, Antipov D, Meleshko D, Lapidus A, Korobeynikov A. 2020. Using spades *de novo* assembler. *CP in Bioinformatics* 70:1–29. <https://doi.org/10.1002/cpbi.102>
11. Tatusova T, DiCuccio M, Badretdin A, Chetvernin V, Nawrocki EP, Zaslavsky L, Lomsadze A, Pruitt KD, Borodovsky M, Ostell J. 2016. NCBI prokaryotic genome annotation pipeline. *Nucleic Acids Res* 44:6614–6624. <https://doi.org/10.1093/nar/gkw569>
12. Makeri D. 2025. Data from 'Complete genome sequence of *Staphylococcus aureus* strain MD04 isolated from the foot ulcer of a patient with Diabetes in rural southwestern Uganda. NCBI, GenBank. <https://doi.org/https://www.ncbi.nlm.nih.gov/nucleotide/JBKICB000000000>
13. Makeri D. 2025. Raw Sequence Reads Data From "Complete genome sequence of *Staphylococcus aureus* strain MD04 isolated from the foot ulcer of a patient with Diabetes in rural southwestern Uganda"(Accession number SRR31800042). NCBI, Sequence Read Archive. <https://doi.org/https://trace.ncbi.nlm.nih.gov/Traces/?run=SRR31800042>
14. Makeri D. 2025. Genome Assembly Data From "Complete genome sequence of *Staphylococcus aureus* strain MD04 isolated from the foot ulcer of a patient with Diabetes in rural southwestern Uganda"(Accession number ASM4657328v1). NCBI, GenBank. https://doi.org/https://www.ncbi.nlm.nih.gov/datasets/genome/GCF_046573285.1/
15. Makeri D. 2025. BioSample Data From "Complete genome sequence of *Staphylococcus aureus* strain MD04 isolated from the foot ulcer of a patient with Diabetes in rural southwestern Uganda"(Accession Number SAMN45937523). NCBI BioSample. <https://doi.org/https://www.ncbi.nlm.nih.gov/biosample/SAMN45937523/>