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Inhibitor-Resistant TEM- and OXA-1-Producing Escherichia coli Isolates Resistant to Amoxicillin-Clavulanate Are More Clonal and Possess Lower Virulence Gene Content than Susceptible Clinical Isolates.

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3 **content than susceptible clinical isolates**

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22

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29 **Abstract**

30 In a previous prospective multicenter study in Spain, we found that OXA-1 and inhibitor resistant
31 TEM (IRT) β -lactamases constitute the most common plasmid-borne mechanisms of genuine
32 amoxicillin-clavulanate (AMC) resistance in *E. coli*. In the present study, we investigated the
33 population structure and virulence traits of clinical AMC-resistant *E. coli* expressing OXA-1 or IRT
34 and compared these traits to those in a control group of clinical AMC-susceptible *E. coli*. All OXA-
35 1- (n=67) and IRT- (n=45) producing isolates were matched by geographical and temporal origin to
36 the AMC-susceptible control set (n=56). We performed multilocus sequence typing and
37 phylogenetic groups characterization for each isolate and then studied the presence of 49 virulence
38 factors (VF) by PCR and sequencing. The most prevalent clone detected was distinct for each group:
39 C/ST88 was most common in OXA-1 producers, B2/ST131 in IRT producers, and B2/ST73 in
40 AMC-susceptible isolates. The median of isolates per sequence type (ST) were 3.72 in OXA-1
41 producers, 2.04 in IRT-producers, and 1.69 in AMC-susceptible isolates; the proportions of STs
42 represented by one unique isolate were 19.4%, 31.1%, and 48.2%, respectively. The sum of all VFs
43 detected, calculated as a virulence score, was significantly higher in AMC-susceptible isolates
44 compared with OXA-1 and IRT producers (mean, 12.5 *versus* 8.3 and 8.2 respectively). Our findings
45 suggest that IRT and OXA-1 producing *E. coli* isolates resistant to AMC have a different and less
46 diverse population structure than AMC-susceptible clinical *E. coli* isolates. The AMC-susceptible
47 population also contains more VF than AMC-resistant isolates.

48

49 **Introduction**

50 *Escherichia coli* is an important etiologic agent that causes both nosocomial- and community-
51 acquired infections (1). Amoxicillin-clavulanate (AMC) is a widely used antibiotic in many
52 countries, often to treat *E. coli* infections (2,3). According to the European Antimicrobial Resistance
53 Surveillance Network, the percentage of *E. coli* blood isolates in Spain that are non-susceptible to
54 AMC has increased from 9.3% in 2003 to 25.3% in 2012 (EARS-Net
55 [<http://ecdc.europa.eu/en/activities/surveillance/EARS-Net/database/Pages/database.aspx>]). This
56 increase in resistance coincides with a dramatic increase in community consumption of AMC (4).

57 AMC resistance in *E. coli* results from a complex epidemiological background involving
58 clonal and non-clonal spread of several resistance mechanisms (5). Production of OXA-1 and
59 inhibitor-resistant TEM (IRT) β -lactamases are the most common plasmid-borne mechanisms of
60 AMC resistance in *E. coli* that do not affect other broad spectrum β -lactam antibiotics (5). Clinical
61 data about patients infected by AMC- resistant *E. coli* have also been provided by our group (6).
62 However, there is very little information available about the population structure and virulence-
63 associated determinants of OXA-1 and IRT-producing *E. coli* compared with AMC-susceptible
64 clinical isolates.

65 Most extraintestinal pathogenic *E. coli* (ExPEC) isolates belong to phylogenetic group B2
66 and, to a lesser extent, to group D. ExPEC possess high numbers of virulence-associated factors
67 (VFs), including toxins, adhesins, polysaccharide capsules, siderophores, and invasins that may
68 enable them to evade host defenses and invade host tissues. *E. coli* isolates of phylogroups A and B1
69 are mainly found as part of the intestinal commensal population and usually possess a lower number
70 of VFs (7,8). In *E. coli* several studies have evaluated the linkage between virulence and resistance
71 to antimicrobials such as quinolones, trimethoprim/sulfamethoxazole, or cephalosporins. Most of
72 these studies have shown that antibiotic susceptible *E. coli* isolates are usually more virulent than
73 resistant ones (9-11). However, in the last few years, B2 *E. coli* clones possessing a high number of

74 VFs and resistance to several antimicrobials have emerged (i.e. ST131) (12-14). According to recent
75 data (15), eight phylo-groups are now recognized: seven (A, B1, B2, C, D, E, F) belong to *E. coli*
76 *sensu stricto*, whereas the eighth is the *Escherichia* cryptic clade I.

77 Our hypothesis was that AMC, the antibiotic most consumed by far in Spain and other
78 countries (3,4), could select not only AMC resistance but also certain specific clones carrying AMC
79 resistance (16). To clarify this subject, the population structure of both resistant and susceptible
80 isolates was studied in parallel. The objective of this study was to determine the population structure
81 and virulence traits of clinical AMC-resistant *E. coli* due to the OXA-1 or IRT-production in
82 comparison with a control group of clinical AMC-susceptible *E. coli*.

83

84 **Material and Methods**

85 *Study design and bacterial isolates*

86 As described previously (5), 257 non-duplicated, AMC-resistant *E. coli* were collected from clinical
87 samples at seven Spanish hospitals in six geographic regions between January and March of 2010.
88 Of them, all 112 (43.6%) isolates producing either OXA-1 (n=67) or IRT (n=45) were included in
89 this study. The IRT types were TEM-40 (n=15), TEM-30 (13), TEM-33 (5), TEM-32 (2), TEM-34
90 (2), TEM-35 (1), TEM-54 (1), TEM-76 (1), TEM-79 (1), and TEM-185 (4). Among the 67 OXA-1-
91 producing isolates, 25 (37.3%) were also CTX-M-15 producers.

92 Additionally, 56 AMC-susceptible (MIC<4/2 µg/mL) clinical isolates were simultaneously
93 collected at the participant hospitals to constitute the AMC-susceptible control group. These AMC-
94 susceptible isolates were matched by geographical and temporal origin and were susceptible to
95 several other β-lactam antibiotics. Susceptibility to AMC and other antibiotics including ampicillin,
96 cephalosporins, carbapenems, quinolones, aminoglycosides, and cotrimoxazole was confirmed at the
97 central reference laboratory as described previously (5).

98 In total, 168 *E. coli* isolates were included in this study: 67 producing OXA-1, 45 producing
99 IRTs, and 56 AMC-susceptible. Origin of the all *E. coli* isolates included in this study is detailed in
100 Table 1.

101
102 *Molecular epidemiology, phylogenetic groups and detection to O25b and O16 serotypes*
103 Multilocus sequence typing (MLST) and phylogenetic groups were determined in all 168 *E. coli*
104 isolates. MLST was performed according to the University College Cork (Ireland) scheme for *E. coli*
105 developed by M. Achtman et al. (<http://mlst.ucc.ie/mlst/dbs/Ecoli>). The phylogenetic relationships
106 among the different sequence types (STs) obtained were established according to the eBURST
107 program version 3 (<http://linux.mlst.net/burst.htm>; July 2013, data last accessed).

108 In addition, serotypes O25b and O16 were identified by allele-specific PCRs as described
109 (17,18).

110 Phylogenetic groups were determined both by the former and by the recently updated
111 Clermont et al. method (15, 19).

112
113 *Virulence factors*
114 In all 168 *E. coli* isolates, the presence of 49 virulence-associated genes, including 19 adhesins, four
115 siderophores, 11 toxins, six capsule synthesis-associated genes and nine miscellaneous VF genes
116 were determined by multiplex PCRs using primers described previously (20-22). Virulence scores
117 were calculated for each isolate as the sum of all VFs detected; *pap*, *sfa/foc*, and *clbB/N* were
118 counted only once regardless of the number of elements or subunits identified.

119
120 *Statistical analysis*

121 Differences in the prevalence of phylogroups and sequence types between the different
122 groups were assessed by Fisher's exact test. Associations were determined by the calculation of the

123 odds ratio (OR) with 95% confidence intervals (CIs). The null hypothesis was rejected for values of
124 $P < 0.05$. Statistical analysis was performed using GraphPad Prism, version 3.02, software (GraphPad
125 Software, Inc., San Diego, CA). Virulence scores were compared with the Mann-Whitney U test.

126

127 **Results**

128 *Phylogenetic groups*

129 Phylogenetic groups distribution is depicted in Figure 1. OXA-1 producers mostly
130 belonged to phylogroup C and B2; most IRT-producers belonged to phylogroup B2, and the vast
131 majority of susceptible isolates were of the B2 phylogroup (Table 1).

132 *E. coli* isolates producing OXA-1 but not CTX-M-15 ESBL belonged to phylogroup C, but
133 the majority of isolates (78.3%) producing OXA-1 plus CTX-M-15 belonged to phylogroup B2.

134 Of the 168 *E. coli* isolates, 55 (32.7%) belonged to the newly described phylogroups C
135 (29.1%) or F (3.6%). No phylogroup E isolates were detected.

136 By the former Clermont method (19), 49 (29.2%) isolates were classified as phylogroup A;
137 however, 45 of them (91.8%) were reclassified as phylogroup C.

138

139 *MLST results*

140 Eighteen different STs were identified among the 67 OXA-1-producing isolates (mean of isolates
141 per ST: 3.72, range: 1-25). Twenty-two different STs were identified among the 45 IRT-producing
142 isolates (mean of isolates per ST: 2.04, range: 1-8), and the 56 AMC-susceptible isolates were
143 identified as 33 different STs (mean of isolates per ST: 1.69, range: 1-12) (Table 1, Table 2). The
144 proportions of STs represented by one unique isolate were 19.4% (OXA-1 group), 31.1% (IRT
145 group), and 48.2% (AMC-susceptible group) (Table 1).

146 The most prevalent ST was different for each group. In the OXA-1-producing isolates, ST88
147 (25 isolates, 37.3%) and ST131 (22, 32.8%) were the most common. In contrast, the IRT-producing
148 isolates were most commonly ST131 (8, 17.8%), ST73 (5, 11.1%), and ST23 (5, 11.1%). Finally,

149 ST73 (12, 21.4%) and ST95 (5, 8.9%) were most common among the AMC-susceptible isolates
150 (Table 2). Four novel STs were identified: STs 3292, 3312, and 3361 in the AMC-susceptible group
151 and STs 2817 and 3312 in the IRT-producing group.

152 To determine whether a specific sequence type was significantly correlated with an AMC
153 resistance mechanism, we conducted further statistical analysis. We found that a number of sequence
154 types were significantly more prevalent in one specific group. ST131 was more prevalent in the
155 OXA-1-producing group ($P=0.0001$) and in the IRT-producing group ($P=0.06$), and in than in the
156 AMC-susceptible group (Table 1). ST88 was significantly more prevalent in the OXA-1-producing
157 group than in the IRT-producing and AMC-susceptible groups ($P<0.0001$) (Table 1). ST73 was
158 significantly more prevalent in AMC-susceptible group than in OXA-1-producing group ($P=0.0005$)
159 (Table 1). ST131 and ST73 isolates were detected in all seven participating hospitals, and ST88 was
160 detected in five of them.

161 Isolates of ST131, ST73, and ST95 belonged to the phylogroup B2, and isolates of ST88,
162 ST23, and ST10 isolates belonged to the phylogroup C.

163 Most OXA-1- and CTX-M-15- producing isolates belonged to ST131 (18/25, 72%) while
164 isolates only producing OXA-1 without CTX-M-15 belonged mainly to ST88 (25/48, 52.1%).

165 All except four B2/ST131 isolates belonged to O25b serotype, three of the non-O25b isolates
166 (two IRT-producers and one AMC-susceptible) were serotype O16 and the other one was non-O25b
167 non-O16 serotype.

168

169 *Virulence factors*

170 To determine whether there was a relationship between virulence factors and resistance mechanisms,
171 we thoroughly screened the isolates for 49 different VFs and analyzed their virulence relative to the
172 AMC resistance mechanisms present. Data showing the virulence gene content among OXA-1-
173 producing, IRT-producing, and AMC-susceptible isolates are summarized in Table 3. Most of the 49

174 VFs studied were more frequently detected in the AMC-susceptible isolates than in the OXA-1- or
175 IRT-producing isolates. Nineteen VFs were significantly associated to the AMC-susceptible group,
176 whereas only six were associated to the OXA-1 group ($P=0.005$; Table 3). Overall, the AMC-
177 susceptible group exhibited a significantly higher virulence score in comparison with the OXA-1
178 group (mean virulence score 12.5 *versus* 8.3; $P<0.0001$). In relation to the AMC-susceptible and the
179 group producing IRTs, 12 VFs were significantly associated with the AMC-susceptible group
180 whereas only one was associated to the IRT group ($P<0.001$; Table 3); AMC-susceptible group also
181 exhibited a significantly higher virulence score in comparison with the IRT group (mean score, 12.5
182 *versus* 8.2; $P<0.0001$). Overall, these data suggest that AMC-susceptible isolates may have a high
183 potential of virulence.

184

185 *Virulence factors in B2 and non-B2 isolates*

186 In order to determine whether there was a relationship between phylogroups and virulence gene
187 content, we next analyzed these data relative to each phylogroup. All isolates, whether AMC-
188 susceptible or AMC-resistant, that belonged to phylogroup B2 exhibited a higher number of VFs and
189 consequently a higher virulence score than non-B2 strains (supplementary Table A). The highest
190 virulence scores were observed in the B2-AMC-susceptible isolates, which possessed a mean VF
191 score of 13.5 in comparison with the non-B2-AMC-susceptible isolates which had a mean VF score
192 of 10.2 ($P=0.021$). The lowest virulence scores were observed in the non-B2 AMC-resistant isolates,
193 and within this group the OXA-1 and IRT producers possessed a mean virulence score of 7.7 and
194 7.3, respectively. The virulence gene content of the isolates belonging to phylogenetic groups B2
195 (53.4%) and non-B2 (46.6%) in relation to the AMC-resistance mechanism is summarized in
196 supplementary Table S1. Overall, we found that, as expected, phylogroup B2 contained the greatest
197 number of virulence factors and the highest virulence score.

198

199 *Virulence factors in isolates of the most prevalent sequence types*

200 To determine whether there was a relationship between the most prevalent clones detected and the
201 virulence traits, we next performed statistical analysis on these parameters, as shown in Table 3.
202 ST131 isolates exhibited similar virulence score and range of VF (mean: 9.1; range: 5-13) as isolates
203 belonging to ST88 (mean 9.2; range: 5-13). ST73 isolates possessed the highest virulence score
204 (mean: 13.2; range: 8-18). There were more virulence factors statistically associated to B2/non-
205 ST131 isolates than to B2/ST131 isolates (13 *versus* 6), and the virulence score was significantly
206 higher in the former (mean 12.5 and 9.1, respectively; $P<0.001$). In contrast, the analysis comparing
207 B2/ST73 and B2/non-ST73 isolates revealed that the former had a significantly higher virulence
208 score than the latter (mean 13.2 *versus* 10.7, respectively; $P=0.003$) (Table 3). In relation to ST88
209 clone, C/ST88 isolates possessed a higher virulence score in comparison with C/non-ST88 isolates
210 (mean of 9.2 *versus* 6.6, respectively; $P=0.004$) (Table 3).

211 Among ST131 isolates, serotypes O16 and O25b showed similar virulence scores and range
212 of VF [mean score 9.3 (range, 7 to 12) and 9.2 (range 5 to 13), respectively]

213

214 **Discussion**

215 To our knowledge, this is the first study comparing the population structure and virulence-associated
216 genes of AMC-resistant *E. coli* isolates, either producing IRTs or OXA-1, with AMC-susceptible
217 isolates. Historically, the population of *E. coli*, both environmental and human-associated, has been
218 genetically very diverse (23); however the emergence and dissemination of multiresistant and
219 virulent clones of ExPEC have been described recently (24,25), mainly associated to the successful
220 B2/ST131 clone (25,26). Our data suggest that AMC-resistant *E. coli* isolates have a different and
221 less diverse population structure than AMC-susceptible *E. coli*, mainly due to the OXA-1-producing
222 isolates. The mechanism by which antibiotic consumption leads to the selection of certain clones is
223 poorly understood; a recent study suggests that different clones of *E. coli* vary markedly in their

224 response to antibiotics despite comparable MICs; these results seem to support the ability of
225 antibiotics to select certain successful clones (27).

226 Association between antimicrobial resistance and virulence in *E. coli* is a controversial topic
227 (9-11,25,26). We observed an inverse relationship between resistance to AMC due to OXA-1 and
228 IRT production and virulence potential. These results are in agreement with previous studies
229 concluding that *E. coli* isolates resistant to non-fluorinated quinolones, fluoroquinolones, or
230 trimethoprim/sulfamethoxazole were associated with reductions in their virulence traits (9-11). In
231 contrast, *E. coli* multiresistant and virulent clones have been described last years (24-26).

232 The pandemic clone B2/ST131, previously associated with multiple mechanisms of antibiotic
233 resistance (25), was predominant in the isolates producing both OXA-1 and IRTs, but it was
234 uncommon in AMC-susceptible isolates. The virulence profile of B2/ST131 isolates observed in this
235 study was similar to that of other B2/ST131 isolates in Spain, producing other resistance
236 mechanisms such as an extended spectrum β -lactamase (12,13). However, the virulence score of
237 B2/ST131 isolates was lower than that other B2 isolates not belonging to ST131 (mean 9.10 *versus*.
238 12.5 respectively), which were mainly found in the AMC-susceptible group. This finding is in
239 agreement with a previous study suggesting that ST131 isolates could be less virulent than
240 previously supposed, and less virulent than other B2 non-ST131 clones (14).

241 Although the genetic diversity detected in AMC-susceptible isolates was great, the high
242 prevalence of isolates belonging to the B2/ST73 clone in this AMC-susceptible group (21.4% of all
243 susceptible isolates) is remarkable. The ST73 lineage has been recently found as one of the most
244 prevalent STs in uropathogenic isolates in England (16.6% of 300 isolates) (28) and in isolates
245 causing spontaneous bacterial peritonitis and bacteremia in patients with cirrhosis in France (8% of
246 110 isolates) (29). Most ST73 isolates were antibiotic susceptible, in accordance with previous
247 studies (28,29); however, ST73 has also been associated with the production of ESBLs of the CTX-
248 M- type in Egypt and Japan (30,31). In addition, our study showed that isolates belonging to ST73

249 exhibited the highest virulence score (mean of 13.2, Table 3), in agreement with another study
250 showing that ST73 was one of the most virulent clones detected in the UK (28). Although several
251 authors have demonstrated that the overall virulence score of an *E. coli* isolate is directly related to
252 its ability to cause invasive infections and lethality (32,33), a single, specific VF may enhance the
253 virulence potential of a defined strain (34,35) beyond the virulence score.

254 As we described previously (5), 37.3% of the OXA-1-producing isolates belonged to ST88.
255 ST88 has also been described in association with chromosomal mediated AmpC overproduction in a
256 French hospital (36), but so far its virulence profile had not been reported. Our ST88 isolates
257 belonged to the recently proposed phylogroup C and they possessed a high virulence score (mean of
258 9.2). Most of the virulence-associated traits of isolates belonging to ST88 were adhesins, protectins,
259 and siderophores that may facilitate persistence and survival in adverse circumstances. Phylogroup C
260 has been previously identified in a virulent strain causing an outbreak in a neonatal ward (37).
261 Interestingly, in this study 30% of *E. coli* isolates belonged to phylogroup C, mainly due to the
262 reclassification of prevalent clonal complexes ST10 and ST23 (Table 2) previously classified as
263 phylogroup A by the former Clermont method (19). In this study, carried out in clinical isolates,
264 phylogroup A was very uncommon (2.4%) in contrast with the 18-28% of prevalence described
265 previously in two different collections of human faecal isolates (15).

266

267

268

269 **Concluding remarks**

270 Our findings suggest that IRT- and OXA-1-producing *E. coli* isolates resistant to AMC have a
271 different and less diverse population structure than AMC-susceptible clinical *E. coli* isolates, mainly
272 due to OXA-1 producers. AMC-susceptible isolates had more VFs than AMC-resistant isolates. We

273 also provide information about the higher numbers of virulence traits in the B2/ST73 clone
274 compared with the B2/ST131 and C/ST88 clones.

275

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286

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412 Figure 1. Distribution of phylogenetic groups in 67 OXA-1-producers, 45 IRT-producers, and 56
413 susceptible *Escherichia coli* isolates.

414 Table 1. Different population markers indicating genetic and virulence variations between OXA-1-
415 producing-, IRTs-producing, and susceptible *Escherichia coli* isolates.

Table 2. The distribution of sequence type (ST) and phylogenetic group among IRT-producing-,
OXA-1-producing-, and susceptible isolates.

Table 3. Distribution of virulence determinants among IRT producing, OXA-1-producing, and AMC
susceptible isolates.