CHARACTERISATION OF ANTIBIOTIC RESISTANCE MECHANISMS IN GRAM-NEGATIVE BACTERIA FROM TRIPOLI AND BENGHAZI, LIBYA

 $\mathbf{B}\mathbf{y}$

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Summary

As very little information is known of the antibiotic resistance in Gramnegative bacteria in Libya in addition to the desperate need for insight knowledge of the antibiotic resistance in Libyan hospitals, this study was undertaken to investigate the mechanism of antibiotic resistance in isolates collected from clinical, non-clinical and environmental samples from Tripoli and Benghazi, Libya. Bacterial collection include samples taken from patients admitted to the hospitals in ICUs and other wards, they also include swabs randomly collected from hospitals environment. These swabs were from walls, bedsides, curtains, floors, toilets, workstations, mechanical ventilators, stainless steel containers and instruments used in particular ICUs. This study clearly demonstrates the emergence of MDR Gram-negative bacteria in Tripoli and Benghazi hospitals, these MDR bacteria were clinical and nonclinical revealing the long standing infection control problem in these hospitals. K. pneumoniae was found as the most frequently isolated strain being disseminated in hospitals and outside hospitals followed by E. coli. K. pneumoniae and E. coli were detected harbouring bla_{CTX-M} group1 in association with ISEcp1 the enhancer of the β -lactamase gene movement. More importantly, bla_{CTX-M-15} in association with ISEcp1 were detected carried on conjugative plasmids of different sizes and able to move via Libyan K. pneumoniae and E. coli to sensitive bacteria via conjugation. Some isolates of K. pneumoniae were clonally related and were in some cases found in

different hospital revealing the outbreak of MDR K. pneumoniae in Libyan hospitals. E. coli strains showed the emergence of more than one clone in one hospital which indicates to the lack of hospital hygiene. Three novel sequence types among K. pneumoniae were discovered in this study, one of which K. pneumoniae AES817 that assigned ST511 was collected from one of Benghazi streets and was found carrying bla_{CTX-M-15} and ISEcp1 on a plasmid of 400kb. Characterisation of P. aeruginosa showed the emergence of clonally related strains carrying bla_{VIM-2}, one was isolated from a patient admitted to Al-Jalla hospital in Benghazi and the other from a stainless steel container from the same hospital but different ward, this MBL was found on a novel integron in both strains. Interestingly, bla_{VIM-2} was found chromosomally mediated proposing that the dissemination of this MBL might be due to mobile genetic elements. Perhaps the most interesting finding of this study is bla_{TMB-1} which was detected in environmental strain swabbed from the floor of Tripoli central hospital. This MBL was unusual in terms of the similarity this gene shares with other known MBLs and also to the discovery of this MBL carried by environmental bacteria A. xylosoxidans, it is moreover the first MBL discovered in Libya.

Presentations and Publications

Presentations given from this study

- 1- Phenotypic and Genotypic Characterisation of Clinical and non-Clinical Gram-negative Bacteria from Benghazi-Libya. 49th Interscience Conference on Antimicrobial Agents and Chemotherapy, September 12-15, 2009, San Francisco.
- 2- Identification of Tn402, Class 1 integrons and *ISCR* elements among endemic multi-drug-resistant *Klebsiella pneumoniae* from Benghazi-Libya. 49th Interscience Conference on Antimicrobial Agents and Chemotherapy, September 12-15, 2009, San Francisco.
- 3- Novel subclass of a Group B1 Metallo-β-lactamase, *bla*_{TMB-1}, in Clinical and non Clinical Gram-negative Bacteria from Libya. 49th Interscience Conference on Antimicrobial Agents and Chemotherapy, September 12-15, 2009, San Francisco.
- 4- The tniC-like transposon Tn5090 is commonly found in *Klebsiella pneumoniae* isolates from Portugal and North Africa. 49th Interscience Conference on Antimicrobial Agents and Chemotherapy, September 12-15, 2009, San Francisco.

Publications and publications in collaborations

- 1- Salabi, A. E., M. A. Toleman, J. Weeks, T. Bruderer, R. Frei, and T. R. Walsh. 2010. First report of the metallo-beta-lactamase SPM-1 in Europe. Antimicrob Agents Chemother 54:582.
- 2- Chouchani, C., R. Marrakchi, and A. El Salabi. 2011. Evolution of betalactams resistance in Gram-negative bacteria in Tunisia. Crit Rev Microbiol 37:167-177.
- 3- Chouchani, C., R. Marrakchi, L. Ferchichi, A. El Salabi, and T. R. Walsh. 2011. VIM and IMP metallo-beta-lactamases and other extended-spectrum beta-lactamases in *Escherichia coli* and *Klebsiella pneumoniae* from environmental samples in a Tunisian hospital. Apmis 119:725-732.
- **4-** Chouchani, C., A. El Salabi, R. Marrakchi, L. Ferchichi, and T. R. Walsh.Characterization of IncA/C conjugative plasmid harbouring *bla*_{TEM-52} and *bla*_{CTX-M-15} extended-spectrum β-lactamases in clinical isolates of Escherichia coli in Tunisia (accepted).
- 5- Allaaeddin El Salabi, Pardha Saradhi Borra, Mark A. Toleman, Ørjan Samuelsen and Timothy R. Walsh Genetic and biochemical characterization of a novel metallo-β-lactamase, TMB-1, from a Achromobacter xylosoxidans strain isolated from Tripoli, Libya (submitted)
- 6- Allaaeddin El Salabi, Mark A. Toleman, Ahmed Matmati, Chedly Chouchani and Timothy R. Walsh *bla*_{VIM-2} positive *Pseudomonas aeruginosa* isolated from operating apparatus and patients in Tripoli, Libya (submitted)
- 7- Allaaeddin El Salabi, Mark A. Toleman, Abdulazizi Zorgani and Timothy R. Walsh. Molecular characterization of antibiotic resistance mechanisms in *K. pneumoniae* isolated from Tripoli and Benghazi hospitals (*in progress*)
- **8-** Allaaeddin El Salabi, Mark A. Toleman, Asma Alramli and Timothy R. Walsh. Molecular characterization of antibiotic resistance mechanisms in *E. coli* collected from Tripoli and Benghazi hospitals (*in progress*)

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LIST OF FIGURES

Fig.	1.1	Chemical structure of daptomycin	6
Fig.	1.2	Chemical structure of oxazolidinone radezolid	6
Fig.	1.3	Chemical structure of the fluoroquinolone delafloxacin	6
Fig.	1.4	Chemical structure of the aminoglycoside ACHN-490	7
Fig.	1.5	Chemical structure of the tetracycline omadacycline	7
Fig.	1.6	Chemical structure of the Avibactam NXL-104	7
Fig.	1.7	Cell wall envelopes of Gram-positive and Gram-negative	
		bacteria	8
Fig.	1.8	N-formimodoyl-thienamycin	15
Fig.	1.9	Inhibition of protein synthesis by aminoglycosides	19
Fig.	1.10	Inhibition of cell wall synthesis by β-lactams	20
Fig.	1.11	Inhibition of DNA synthesis by quinolones	20
Fig.	1.12	Global emergence of MBLs	32
Fig.	1.13	The emergence of CTX-M type ESBLs in Europe	33
Fig.	1.14	The occurrence of K. pneumoniae resistant to 3 rd generation	
		cephalosporins in Europe	36
Fig.	1.15	The occurrence of P. aeruginosa resistant to carbapenems	
		in Europe	37

Fig. 1.16	6 Annual rate of antimicrobial resistance among E. coli	
	isolates (4394 isolates) tested against selected agents from	
	the MYSTIC program	41
Fig. 1.17	Annual rate of antimicrobial resistance among K.	
	pneumoniae isolates (2694 isolates) tested against selected	
	against selected agents from the MYSTIC program	41
Fig. 1.18	The dissemination of β-lactamases, ESBLs and	
	carbapenemases in Tunisia	43
Fig. 1.19	Genomic island of A. baumannii AYE	46
Fig. 3.1	Multiplex PCR experiment to detected the incidence of CTX-	
	M type ESBLs groups 1, 2, 8, 9 and 26	92
Fig. 3.2	PCR experiment to detect the incidence of $bal_{\text{CTX-M-15}}$ in K .	
	pneumoniae	92
Fig. 3.3	PCR experiment to detect the incidence of bla_{CTX-M} group1 in	
	association with ISEcp1 in K. pneumoniae	93
Fig. 3.4	PCR experiment to detect disrupted ISEcp1 sequence in K.	
	pneumoniae	93
Fig. 3.5	Diagram showing the genetic environment of bla _{CTX-M-15}	
	gene	94
Fig. 3.6	Blotting of K. pneumoniae isolates (1-47) and probing with	
	bla _{TEM}	95
Fig. 3.7	Blotting of K. pneumoniae isolates (48-80) and probing with	

	bla_{TEM}	96
Fig. 3.8	Blotting of K. pneumoniae isolates (1-47) and probing with	
	bla _{SHV}	96
Fig. 3.9	Blotting of K. pneumoniae isolates (48-80) and probing with	
	bla _{SHV}	97
Fig. 3.10	Blotting of K. pneumoniae isolates (1-47) and probing with	
	bla _{CTX-M-15} /IS <i>Ecp1</i>	98
Fig. 3.11	Blotting of K. pneumoniae isolates (48-80) and probing with	
	bla _{CTX-M-15}	98
Fig. 3.12	PFGE of S1 digests of a subset of K. pneumoniae isolates	100
Fig. 3.13	Autorad after probing with bla _{CTX-M-15} /ISEcp1 of blotted	
	PFGE from fig.3.12	101
Fig. 3.14	K. pneumoniae typed by RAPD	104
•	K. pneumoniae typed by RAPD PFGE of Xba1 digests of a subset of K. pneumoniae isolates	104 106
Fig. 3.15		
Fig. 3.15 Fig. 3.16	PFGE of Xba1 digests of a subset of K. pneumoniae isolates	106
Fig. 3.15 Fig. 3.16 Fig. 3.17	PFGE of Xba1 digests of a subset of K. pneumoniae isolates PFGE of Xba1 digests of a subset of K. pneumoniae isolates	106 107
Fig. 3.15 Fig. 3.16 Fig. 3.17 Fig. 3.18	PFGE of Xba1 digests of a subset of K. pneumoniae isolates PFGE of Xba1 digests of a subset of K. pneumoniae isolates Dendrogram of PFGE gel picture from fig. 3.15	106 107 108
Fig. 3.15 Fig. 3.16 Fig. 3.17 Fig. 3.18	PFGE of Xba1 digests of a subset of K. pneumoniae isolates PFGE of Xba1 digests of a subset of K. pneumoniae isolates Dendrogram of PFGE gel picture from fig. 3.15 Dendrogram of PFGE gel picture from fig. 3.16	106 107 108
Fig. 3.15 Fig. 3.16 Fig. 3.17 Fig. 3.18 Fig. 3.19	PFGE of Xba1 digests of a subset of K. pneumoniae isolates PFGE of Xba1 digests of a subset of K. pneumoniae isolates Dendrogram of PFGE gel picture from fig. 3.15 Dendrogram of PFGE gel picture from fig. 3.16 Autorad after probing with bla _{CTX-M-15} of blotted PFGE from	106 107 108 109
Fig. 3.15 Fig. 3.16 Fig. 3.17 Fig. 3.18 Fig. 3.19	PFGE of Xba1 digests of a subset of K. pneumoniae isolates PFGE of Xba1 digests of a subset of K. pneumoniae isolates Dendrogram of PFGE gel picture from fig. 3.15 Dendrogram of PFGE gel picture from fig. 3.16 Autorad after probing with bla _{CTX-M-15} of blotted PFGE from fig. 3.15	106 107 108 109

		transconjugants of K. pneumoniae AES isolates	116
Fig. 3	3.22	Detection of the occurrence of an intact and disrupted copies	
		of ISEcp1 in GFP transconjugants of K. pneumoniae AES	
		isolates	116
Fig. 3	3.23	PFGE of S1 digests of K. pneumoniae and GFP E.coli	
		transconjugants	118
Fig. 3	3.24	Autorad after probing with $bla_{\text{CTX-M-15}}$ of blotted PFGE from	
		fig. 3.23	119
Fig. 3	3.25	PFGE of S1 digests of K. pneumoniae and GFP E. coli	
		transconjugants	120
Fig. 3	3.26	Autorad after probing with bla _{CTX-M-15} /ISEcp1 of blotted	
		PFGE from fig.3.25	121
Fig. 3	3.27	Amplification of classical class 1 integron from a subset of	
		K. pneumoniae	123
Fig. 3	3.28	Genetic context of class 1 integrons found in	
		K. pneumoniae	124
Fig. 3	3.29	Detection of transposons among a subset of K. pneumoniae	126
Fig. 3	3.30	Genetic context of Tn402transposons found in	
		K. pneumoniae	126
Fig. 3	3.31	PFGE of S1 digests of a subset of K. pneumoniae	128
Fig. 3	3.32	Autorad after probing with tniC of blotted PFGE from	
		fig 3 31	128

Fig. 3.33 PFGE of S1 digests of a subset of K. pneumoniae	129
Fig. 3.34 Autorad after probing with tniC of blotted PFGE from	
fig.3.33	129
Fig. 3.35 Probing of K. pneumoniae isolates (1-47) with ISCR2 general	e 130
Fig. 3.36 Probing of K. pneumoniae isolates (48-80) with ISCR2ger	ne 131
Fig. 4.1 Multiplex PCR to detect CTX-M groups 1, 2, 8, 9 &26 in	
E. coli isolates	144
Fig. 4.2 Multiplex PCR to detect CTX-M groups 1, 2, 8, 9 &26 in	
E. coli isolates	145
Fig. 4.3 Detection of bla _{CTX-M} group1 and ISEcp1 in E. coli	. 145
Fig. 4.4 Detection of bla _{CTX-M} group1 and ISEcp1 in E. coli	. 146
Fig. 4.5 Detection of <i>bla</i> _{CTX-M} group1 in association with an intact	
ISEcp1 in E. coli	146
Fig. 4.6 Detection of <i>bla</i> _{CTX-M} group1 in association with an intact	
ISEcp1 in E. coli	147
Fig. 4.7 PFGE of S1 digestion of E. coli parents and transconjugants	s 150
Fig. 4.8 Autorad of E. coli parents and transconjugants after probing	3
of PFGE gel from fig. 4.7 with bla _{CTX-M-15}	151
Fig. 4.9 PFGE of S1 digestion of E. coli parents and transconjugant	s 152
Fig. 4.10 Autorad of E. coli parents and transconjugants after probin	g
of PFGE gel from fig. 4.9 with bla _{CTX-M-15} /ISEcp1	153
Fig. 4.11 PFGE of XbaI digestion and separation of a subset of E. co	oli

		genomic DNA	155
Fig.	4.12	Dendrogram of PFGE gel picture from fig. 4.11	156
Fig.	4.13	PFGE of XbaI digestion and separation of a subset of E. coli	157
		genomic DNA	
Fig.	4.14	Dendrogram of PFGE gel picture from fig. 4.13	157
Fig.	4.15	Autorad of PFGE gel of fig. 4.11 after probing with	
		bla _{CTX-M-15}	159
Fig.	4.16	Autorad of PFGE gel of fig 4.13 after probing with	
		<i>bla</i> _{CTX-M-15}	160
Fig.	4.17	Genetic context of class 1 integrons found in E. coli	161
Fig.	5.1	Etest of P. aeruginosa	172
Fig.	5.2	Detection of Tn402, Tn21 and bla _{VIM-2} in P. aeruginosa	
		AES81 and AES83	173
Fig.	5.3	PFGE of Spe-1 digestion of 14 E. coli isolates	175
Fig.	5.4	Dendrogram of PFGE gel picture of fig. 5.3	176
Fig.	5.5	PFGE of S1 digestion of a subset of P. aeruginosa isolates	176
Fig.	5.6	Autorad of PFGE gel of fig. 5.5 after probing with bla _{VIM-2}	177
Fig.	5.7	PFGE of Spe1 digestion of a subset of P. aeruginosa isolates	178
Fig.	5.8	Autorad of PFGE gel of fig. 5.7 after probing with bla _{VIM-2}	179
Fig.	5.9	Amplification of class 1 integrons from a subset of	
		P. aeruginosa	181
Fig	5 10	Genetic contexts of class 1 integrons found in P. garuginosa	182

Fig. 6.1	Genetic context of class 1 integrons from A. xylosoxidans	192
Fig. 6.2	Detection of genetic location of bla _{TMB-1} in A. xylosoxidans	194
Fig. 6.3	Dendrogram of comparison of amino acid sequence of the	
	β-lactamase TMB-1 and other acquired MBLs	196
Fig. 6.4	Comparison of amino acid sequence of β-lactamase TMB-1	
	and other acquired MBLs.	197
Fig. 6.5	Secondary structure of TMB-1 compared to that of VIM-2	198
Fig. 7.1	Map of Libya	205

LIST OF TABLES

Table 1.1	History of antibiotic introductions and approval	5
Table 1.2	Main classes of antibiotics and β -lactamase inhibitors	11
Table 1.3	Longitudinal increase in multi-drug resistance in USA	39
Table 2.1	Multiplex PCR primers for CTX-M groups 1, 2, 8, 9 & 26	64
Table 2.2	Oligonucleotide sequences to detect bla_{OXA-48} and IS1999	67
Table 2.3	Oligonucleotide sequences used for PCR amplification of	
	housekeeping genes	71
Table 3.1	Dissemination of K. pneumoniae in Tripoli and Benghazi	89
Table 3.2	MIC ₅₀ and MIC ₉₀ of K. pneumoniae	90
Table 3.3	The incidence of $bla_{\text{CTX-M}}$ group1, bla_{TEM} , bla_{SHV} and $ISCR2$	95
Table 4.1	MIC50 and MIC90 of E. coli isolates	144
Table 4.2	Sensitivity profile <i>E. coli</i> parents and transconjugants	148
Table 5.1	List of P. aeruginosa used in experiments	171
Table 5.2	Antibiotic sensitivity testing of clinical and non-clinical	
	isolates of P. aeruginosa	172
Table 6.1	Steady-state kinetic constants of TMB-1 and GIM-1	200

LIST OF ABBREVIATIONS

ABC ATP binding cassette

AES Allaaeddin El Salabi

AIM-1 Australian imipenemase

AmpC ampicillin

ASP Asparagin

attC attachment site

bla β-lactamase

CAI community acquired infections

CIAI complicated intra-abdominal infection

CR common region

CSSSI complicated skin and skin structure infection

CTX-M Cefotaximase

CUTI complicated urinary tract infection

CVL Cervicovaginal Lavage

Cys Cystein

Dhfr dihydrofolate reductase

DIM Dutch imipenemase

EARSS European antimicrobial resistance surveillance system

EDTA Ethylenediaminetetraacetic acid

ESBL extended spectrum beta-lactamase

GFP green fluorescent protein

GIM-1 Germany imipenemase

HAI hospital-acquired infections

HIS Histidine

IAI intra-abdominal infection

ICARE intensive care antimicrobial resistance epidemiology

ICE Integration and conjugative element

ICU intensive care unit

IMP imipenemase

Int1 integrase gene

IPTG Isopropyl-β-D-thiogalactoside

IS insertion sequence

ISCR insertion sequence common region

Kcat catalytic rate constant

KHM-1 Kyorin Health MBL

Km The Michaelis constant

KPC Klebsiella pneumoniae carbapenemase

LPS Lipopolysaccharide

MATE multi-drug and toxic compound extrusion family

MBL Metallo-β-lactamase

MDR multi-Drug Resistant

MFS major facilitator superfamily

MIC minimum inhibitory concentration

MIC₅₀ Minimum inhibitory concentration that kills 50% of the

bacteria

MIC₉₀ Minimum inhibitory concentration that kills 90% of the

bacteria

MDR Multi-drug resistance

MLST multilocus Sequence Typing

MYSTIC meropenem yearly susceptibility test information collection

NDM-1 New-Delhi metallo-β-lactamase

NI nosocomial infections

NP nosocomial pneumoniae

OM Outer membrane

OMP outer membrane protein

ORF open reading frame

OXA oxacillinases

PBP penicillin binding protein

PFGE pulsed field gel electrophoresis

qacΔE1 quaternary ammonium compound

RAPD Random amplified polymorphic DNA

RCS recombination crossover site

RNA ribonucleic acid

RND resistance nodulation division

SHV sulfhydryl variable

SDS Sodium dodecyl sulphate

SIM-1 Seoul imipenemase

SLV single locus varian

SMR small multi-drug resistance

SPM-1 Sao Paolo metallo-β-lactamase

SSTI skin and soft tissue infection

sull sulphonamide resistance gene

SXT trimethoprim sulphamethoxazole

TEM Temoneira

TMB-1 Tripoli metallo-β-lactamase

tniC transposase gene

US united states

UTI urinary tract infection

VAP ventilator associated pneumonia

VIM Verona Imipenemase

CONTENTS

Title page		1	
Declaration		ii	
Summary		iii	
Publications		v	
Acknowledgments		vii	
Dedication		viii	
List of figures		ix	
List of tables		xvi	
List of abbreviations		xvii	
Chapter One			
General Introduction			
1.1	Antibiotics	•••••	2
1.1.1	Introduction	•••••	2
1.1.2	History of antibiotics		2
1.2	Gram-negative bacteria	••••••	4
1.3	Examples of antibiotics used in treatm	ent of	
	infections caused by bacteria	•••••	10
1.3.1	ßlactams		12

1.3.1.1	Cephalosporins	12
1.3.1.1.1	Cefotaxime	12
1.3.1.1.2	Ceftazidime	13
1.3.1.1.3	Ceftriaxone	13
1.3.1.2	Carbapenems	13
1.3.1.2.1	Imipenem	14
1.3.1.2.2	Meropenem	15
1.3.1.2.3	Ertapenem	16
1.3.1.2.4	Doripenem	17
1.4	Mode of antibiotic action	17
1.4.1	Introduction	17
1.4.1.1	Inhibition of protein synthesis	18
1.4.1.2	Inhibition of cell wall synthesis	19
1.4.1.3	Inhibition of DNA synthesis	19
1.5	Mechanism of antibiotic resistance in Gram-	
	negative bacteria	21
1.5.1	Efflux pump mediated antibiotic resistance	21
1.5.2	Outer membrane permeability and antibiotic	
	resistance	22
1.5.3	β-lactamases	24
1.5.3.1	Introduction	24
1.5.3.2	Classification of B-lactamases	25

1.5.3.3	Extended spectrum β-lactamases (ESBLs)	25
1.5.3.4	Carbapenemases	27
1.5.3.5	Class A carbapenemases	28
1.5.3.6	Class D β-lactamases	29
1.5.3.7	Metallo-β-lactamases	30
1.6	Global emergence of clinical antibiotic resistant	
	Gram-negative bacteria	32
1.6.1	Evolution of antibiotic resistance in Gram-negative	
	bacteria	37
1.7	DNA structures that spread antibiotic resistance	44
1.7.1	Plasmids in multi-resistant Gram-negative bacteria	44
1.7.2	Pathogenicity islands (Multi resistance in bacteria)	45
1.7.3	Transposons	47
1.7.4	Integrons	48
1.7.5	Insertion sequence common regions (ISCRs)	51
1.7.6	Insertion sequences	52
1.7.6.1	Integrative and conjugative elements (ICE)	53
1.8	Objectives of study	55
Chapter Two		
Methods and Materials		57
2.1	Bacterial collection	58

21.1	Ethical considerations	58
2.2	Safety considerations	59
2.3	Bacterial strains used	59
2.4	Chemicals, reagents and radioactive labels	59
2.5	Growth Media	60
2.5.1	Luria Bertani Broth	60
2.5.2	Luria Bertani Agar	60
2.5.3	Mueller-Hinton Agar	60
2.5.4	MacConkey Agar No.3	61
2.5.5	MacConkey Agar	61
2.5.6	MacConkey Agar for isolation of ESBL/MBL	
	positive isolates	61
2.5.7	S.O.C Medium	61
2.6	Sterilisation of Media	61
2.7	Isolation of Environmental strains	61
2.8	Etest experiments	62
2.9	Antimicrobial susceptibility testing and MIC	
	determination	62
2.10	Phenotypic and genotypic detection of ESBLs	62
2.10.1	Amplification of DNA sequences using PCR	62
2.10.1.1	Amplification of bla _{CTX-M type} ESBLs	62
2.10.1.2	Detection of bla _{CTX-M} group1 and ISEcp1 genes	65

2.10.1.3	Amplification of bla_{TEM} , bla_{SHV} , bla_{AMPC} , class 1	
	integrons and transposons	65
2.10.2	Phenotypic detection of MBLs	66
2.11	Detection of bla _{OXA-48} and IS1999	66
2.12	Random amplified polymorphic DNA RAPD)	
	typing	67
2.12.1	RAPD DNA extraction by Chelex prep	67
2.12.2	Random amplified polymorphic DNA (RAPD-	
	PCR)	68
2.12.3	DNA profile analysis by Agilent Bioanalzer	69
2.12.4	GelCompare analysis	69
2.13	Multilocus sequence typing	69
2.14	Plasmid identification	72
2.15	Transconjugation experiments	73
2.16	Southern hybridization	74
2.16.1	Characterization of chromosomally and plasmid	
	mediated resistance genes	74
2.16.1.1	Preparation of plugs of whole genomic DNA	74
2.16.2	Pulsed Field Gel Electrophoresis (PFGE)	76
2.16.3	Colony blotting	77
2.16.4	In gel hybridization	78
2 16 5	I abeling DNA probes	70

2.17	Cloning experiments	80
2.18	Purification of TMB-1	81
2.18.1	Expression	81
2.18.2	Periplasm isolation	82
2.18.3	Purification of the β-lactamase	82
2.18.4	Gel-filtration	83
2.19	Kinetic assay	83
Chapter Three		
3.1	Introduction	85
3.2	Results	88
3.2.1	Antimicrobial sensitivity testing	88
3.2.2	Genotypic detection of ESBLS	89
3.2.2.1	The prevalence of CTX-M groups 1, 2, 8, 9 and 26	89
3.2.2.2	Detection of CTX-M-15 genes and ISEcp1	90
3.2.2.3	Detection of TEM and SHV	94
3.2.2.4	CTX-M group1 type ESBLs	97
3.2.2.5	Detection of bla _{OXA-48} and IS1999	99
3.2.3	Characterisation of plasmids carrying bla _{CTX-M}	
	group1 and ISEcp1	99
3.2.4	Typing of K. pneumoniae by RAPD	102
3.2.5	Molecular typing of K. pneumoniae	105

3.2.6	Multilocus sequence typing	110
3.2.7	Detection of chromosomally / plasmid mediated	
	bla _{CTX-M} group1	112
3.2.8	Transconjugation experiments	113
3.2.9	Detection of plasmid mediated bla _{CTX-M} group1 in	
	parents and transconjugants	117
3.2.10	Detection of the movement of ISEcp1 from parents	
	to transconjugants	117
3.2.11	Plasmid Typing	122
3.2.12	Detection of mobile genetic elements	122
3.2.12.1	Class 1 integrons	122
3.2.12.2	Identification of transposons	125
3.2.12.3	Transposase encoding genes	127
3.2.12.3.1	PFGE of $S1$ genomic digests and probing with $tniC$	127
3.2.12.4	Detection of ISCR elements	130
3.3	Discussion	132
Chapter Four		
i. 1	Introduction	139
1.2	Results	141
4.2.1	Characterisation of E. coli isolates and	
	antimicrobial susceptibility testing	141

4.2.2	Detection of TEM, SHV and CTX-M type ESBLs	141
4.2.3	Transconjugation experiments	142
4.2.3.1	Antibiotic resistance profile of E. coli	
	transconjugants	143
4.2.4	Plasmid typing of ESBL positive E. coli	148
4.2.5	Detection of plasmid mediated bla _{CTX-M} group1 and	
	ISEcp1 in parents and transconjugants of E. coli	149
4.2.6	Typing of E. coli isolates	154
4.2.7	Detection of chromosomally mediated bla_{CTX-M}	
	group1	158
4.2.8	Detection of class 1 integrons and Tn402	
	transposons	161
4.3	Discussion	162
Chapter Five		
5.1	Introduction	168
5.2	Results	170
5.2.1	Antibiotic susceptibility testing	170
5.2.2	Detection of MBLs using Etest	170
5.2.3	Detection of MBL encoding genes	170
5.2.4	Transconjugation experiment	173
5.2.5	Typing of P. aeruginosa	174

5.2.6	Detection of chromosomally and plasmid mediated	
	bla _{VIM-2}	174
5.2.6.1	Characterisation of chromosomal /plasmid	
	mediated bla _{VIM-2}	174
5.2.7	Detection of class 1 integrons and transposons	180
5.3	Discussion	183
Chapter Six		
6.1	Introduction	188
6.2	Results	190
6.2.1	Analysis of samples from Tripoli hospitals	190
6.2.2	Genetic analysis of carbapenem resistance A.	
	xylosoxidans strains AES301	190
6.2.3	Cloning and transconjugation experiments	192
6.2.4	Genomic location of bla _{TMB-1}	193
6.2.5	Comparison of TMB-1 with other MBLs	193
6.2.6	Kinetic properties of TMB-1	199
6.3	Discussion	201
Chapter Seven		
	General Discussion	205

Chapter Eight

Appendices		216
Appendix A		217
Table A.1	Antibiotics and chemicals used in experiments	217
Table A.2	Oligonucleotides used for PCR experiments	218
Table A.3	Oligonucleotides used for PCR experiments	219
Table A.4	Oligonucleotides used for PCR experiments	220
Appendix B		221
Figure B.1	Multiplex PCR to detect CTX-M- groups 1, 2, 8, 9	
	and 26	221
Figure B.2	Multiplex PCR to detect CTX-M- groups 1, 2, 8, 9	221
	and 26	
Figure B.3	Multiplex PCR to detect CTX-M- groups 1, 2, 8, 9	222
	and 26	
Figure B.4	Multiplex PCR to detect CTX-M- groups 1, 2, 8, 9	222
	and 26	
Fig. B.5	Multiplex PCR to detect CTX-M- groups 1, 2, 8, 9	223
	and 26	
Fig. B.6	PFGE of SI digests of K. pneumoniae	224
Fig. B.7	Autorad of after probing of PFGE gel from fig.B.6	225
Fig. B.8	DNA sequence amplified from K. pneumoniae	

	AES59	226
Fig. B.9	Alignment of DNA from fig. B.8	226
Fig. B.10	DNA sequence amplified from K. pneumoniae	
	AES59	230
Fig. B.11	Alignment of DNA from fig. B.10	230
Fig. B.12	DNA sequence amplified from K. pneumoniae	
	AES8	232
Fig. B.13	Alignment of DNA from fig. B.12	232
Fig. B.14	DNA sequence amplified from K. pneumoniae	
	AES48	234
Fig. B.15	Alignment of DNA from fig. B.14	234
Fig. B.16	DNA sequence amplified from K. pneumoniae	
	AES48	237
Fig B.17	Alignment of DNA from fig. B.16	237
Fig. B.18	DNA sequence amplified from K. pneumoniae	
	AES74	240
Fig. B.19	Alignment of DNA from fig. B.18	240
Fig. B.20	DNA sequence amplified from K. pneumoniae	
	AES140	242
Fig. B.21	Alignment of DNA from fig. B.20	242
Fig. B.22	DNA sequence amplified from K. pneumoniae	
	AES140	244

Fig. B.23	Alignment of DNA from fig. B.22	244
Fig. B.24	DNA sequence amplified from K. pneumoniae	246
	AES261	
Fig. B.25	Alignment of DNA from fig. B.24	246
Fig. B.26	DNA sequence amplified from K. pneumoniae	
	AES817	247
Fig. B.27	Alignment of DNA from fig. B.26	248
Fig. B.28	DNA sequence amplified from K. pneumoniae	
	AES984	249
Fig. B.29	Alignment of DNA from fig. B.28	250
Fig. B.30	DNA sequence amplified from K. pneumoniae	
	AES1001	252
Fig. B.31	Alignment of DNA from fig. B.30	253
Fig. B.32	Alignment of RpoB gene from K. pneumoniae	
	AES817	255
Fig. B.33	Alignment of GapA gene from K. pneumoniae	
	AES817	255
Fig. B.34	Alignment of infB gene from K. pneumoniae	
	AES817	256
Fig. B.35	Alignment of Pgi gene from K. pneumoniae	
	AES817	256
Fig. B.36	Alignment of PhoE gene from K. pneumoniae	

	AES817	257
Fig. B.37	Alignment of tnoB gene from K. pneumoniae	
	AES817	257
Fig. B.38	Alignment of mdh gene from K. pneumoniae	
	AES817	258
Fig. B.39	Alignment of mdh gene from K. pneumoniae	
	AES809	258
Fig. B.40	Alignment of Pgi gene from K. pneumoniae	
	AES809	259
Fig. B.41	Alignment of GapA gene from K. pneumoniae	
	AES809	259
Fig. B.42	Alignment of PhoE gene from K. pneumoniae	
	AES809	260
Fig. B.43	Alignment of tnoB gene from K. pneumoniae	
	AES809	260
Fig. B.44	Alignment of infB gene from K. pneumoniae	
	AES809	261
Fig. B.45	Alignment of RpoB gene from K. pneumoniae	
	AES809	261
Fig. B46	Alignment of Pgi gene from K. pneumoniae	
	AES808	262
Fig. B47	Alignment of tnoB gene from K. pneumoniae	

	AES808	262
Fig. B48	Alignment of PhoE gene from K. pneumoniae	
	AES808	263
Fig. B49	Alignment of infB gene from K. pneumoniae	
	AES808	263
Fig. B 50	Alignment of RpoB gene from K. pneumoniae	
	AES808	264
Fig. B51	Alignment of mdh gene from K. pneumoniae	
	AES808	264
Fig. B52	Full sequence of AES81 integron	265
Fig. B53	Full sequence of AES83integron	266
Fig. B54	Full sequence of AES135 integron	267
Appendix C		268
Table C.1	List of E. coli isolates used in experiments	268
Fig. C.1	DNA sequence from E. coli AES226	269
Fig. C.2	Alignment of DNA from fig. C.1	270
Fig. C.3	DNA sequence from E. coli AES228	274
Fig. C.4	Alignment of DNA from fig. C.3	274
Fig. C.5	DNA sequence from E. coli AES232	277
Fig. C.6	Alignment of DNA from fig. C.5	277
Fig. C.7	DNA sequence from E. coli AES228	280
Fig. C.8	Alignment of DNA from fig. C.7	281

Ribliography		300
Chapter Nine		
Fig. D.9	Full sequence of 3kb integron from A. xylosoxidans	297
Fig. D.8	Hydrolysis of antibiotic piperacillin by TMB-1	296
Fig. D.7	Hydrolysis of antibiotic cefuroxime by TMB-1	295
Fig. D.6	Hydrolysis of antibiotic cefoxitin by TMB-1	294
Fig. D.5	Hydrolysis of antibiotic imipenem by TMB-1	293
Fig. D.4	Hydrolysis of antibiotic ampicillin by TMB-1	292
Fig. D.3	Hydrolysis of antibiotic ceftazidime by TMB-1	291
Fig. D.2	Hydrolysis of antibiotic ertapenem by TMB-1	290
Fig. D.1	Hydrolysis of antibiotic meropenem by TMB-1	289
Table D.1	Environmental isolates collected from Tripoli	287
Appendix D		287
Fig. C.12	Alignment of DNA from fig. C.11	285
Fig. C.11	DNA sequence from E. coli AES232	285
Fig. C.10	Alignment of DNA from fig. C.9	283
Fig. C.9	DNA sequence from E. coli AES226	282

Chapter One General Introduction

1.1 Antibiotics

1.1.1 Introduction

Selman Waksman was one of the most recognized investigators in the field of bacteriology in 1940's, Waksman defined the term "antibiotic" as the substance that has the ability to kill bacteria (Bush, 2010a; Waksman & Woodruff, 1942). The term was singularly used to refer to a molecule that was bacteriostatic or bactericidal; however, today, the definition has changed and expanded - it is applied to natural products and synthetic chemicals that have antibacterial and antifungal activities. (Bush, 2010).

1.1.2 History of antibiotics

Antibiotics were introduced in the 1930's as a result of the discovery of the antibiotic penicillin from the fungus *Penicillium notatum* by Alexander Fleming in 1928 and the prontosil (sulfonamidochrysoidine) discovered by Gerhard Domagk in 1932. Such discoveries had a profound impact on human health and provided rapid and effective treatment of patients suffering from bacterial infections known to have been fatal. (Butler & Cooper, 2011).

β-lactam antibiotics were introduced clinically in 1940s exemplified by the antibiotic penicillin to treat bacterial infections caused by human pathogenic bacteria after approval of Food and Drug Administration (FDA) as before this time of the antibiotic era, infections such as bacteraemia caused by *Streptococcus pneumoniae* were the causative agents of mortality (Coates *et al.*, 2002; Dineen *et al.*, 1976). The introduction of antimicrobial agents helped

to decrease the mortality rates, e.g. the subcutaneous use of sulfanilamide caused reduction of acute meningococcal meningitis from 70-90% to nearly 10% (Powers, 2004). Between the 1930s and 1960s, more than 20 new classes of antibiotics were discovered – mainly natural or semi-synthetic (Table 1.1). As a result of these antibiotics to treat severe and life-threatening infections, the story has become a successful one (Butler & Buss, 2006; Powers, 2004) and has led to an over confidence on the ability of antimicrobials to eradicate all infectious diseases.

After the 1960s, research for new and novel drugs slowed and pharmaceutical industry paid less attention to antimicrobial research (Boucher *et al.*, 2009). This in part can be explained by the difficulty in discovering new antibacterial agents with completely novel mechanisms of action and also the cost of research – particularly clinical trials. (Coates *et al.*, 2002; Powers, 2004).

Since the intensive work on antimicrobial agents in the 20^{th} century, only two new classes of antibiotics; daptomycin (Figure 1.1) and oxazolidinones (Figure 1.2) have recently been utilised to treat Gram-positive infections, whereas, innovation to address Gram-negative bacteria is still struggling and, at best, can only rely on modification of existing drugs e.g. fluoroquinolones (Figure 1.3), aminoglycosides (Figure 1.4), tetracyclines (Figure 1.5) and β -lactams. (Figure 1.6) (Bush & Pucci, 2011).

1.2 Gram-Negative Bacteria

Gram-negative bacteria are micro-organisms that are known to have an outer "cell envelope" or outer membrane (OM), which differs considerably from other bacterial strains in terms of structure and function. This "cell envelope" is composed of three envelope layers; the OM layer, the periplasm and the inner membrane or cytoplasmic membrane (Figure 1.7) (Gupta, 2011).

The structure of the OM has a unique lipid bilayer and its layers of phospholipids are confined to the inner side of the OM (Silhavy et al., 2010). Glycolipids are main components of the OM and they are principally lipopolysacharides (LPS) which are located as an outer leaflet of the Gramnegative OM and play an important role as a functional barrier. LPS comprises the core of polysaccharide, lipid A, and extended polysaccharide chain O antigen. Lipid A is also known as the endotoxin, minute amounts of which can cause fever and septic shock syndrome. (Ryan et al., 2004; Silhavy et al., 2010).

The OM contains proteins which differ to proteins of the cytoplasmic membrane. Those proteins are classified into two groups; lipoproteins and β -barrel proteins. The function of most lipoproteins are not known yet, whereas the β -barrel proteins are known as Outer Membrane Proteins (OMPs) and have different roles according to the kind of OMP, for instance the function of

OmpF and OmpC are known as porins in *E. coli* allows the passive diffusion and facilitated movement of monosaccharides, disaccharides and amino

Table 1.1 History of antibiotic introductions and approval (according to Powers, 2004)

Antibiotic	Year of Discovery
Sulfonamides	1935 (launched)
B-lactams	1941 (launched)
Aminoglycosides	1944 (introduced)
Streptomycin	1947 (launched)
Chloramphenicol	1949 (launched)
Tetracycline	1950 (launched)
Macrolides	1952 (introduced)
Glycopeptides	1956 (introduced)
Rifamycins	1957 (introduced)
Nitromidiazoles	1959 (introduced)
Quinolones	1962 (introduced)
Nalidixic acid	1964 (introduced)
Gentamicin	1967 (launched)
Trimethoprim	1968 (launched)
Oxazolidinones	2000 (launched)
Linezolid	2000 (launched)
Lipopeptides	2003 (launched)

Figure 1.1 Chemical structure of Daptomycin (according to Bush & Pucci, 2011)

Figure 1.2 Chemical structure of the oxazolidinone radezolid (according to Bush & Pucci, 2011)

Figure 1.3 Chemical structure of the fluoroquinolone delafloxacin (according to Bush & Pucci, 2011)

Figure 1.4 Chemical structure of the aminoglycoside ACHN-490 (according to Bush & Pucci, 2011)

Figure 1.5 Chemical structure of the tetracycline omadacycline (according to Bush & Pucci, 2011)

Figure 1.6 Chemical structure of the Avibactam NXL-104 (according to Bush & Pucci, 2011)

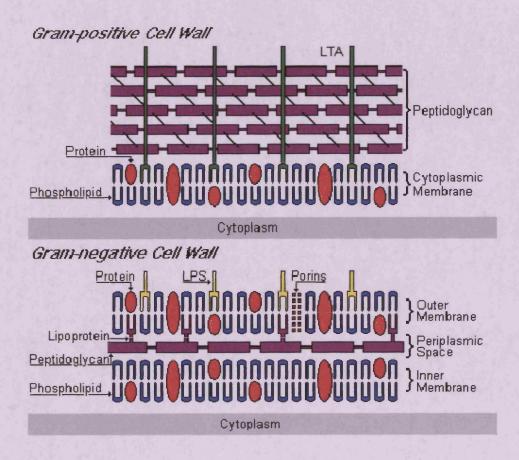


Figure 1.7 Cell wall envelopes of Gram-positive and Gram-negative bacteria (LPS: Lipopolysaccharide; LTA: Lipoteichoic acid)
(http://www.cehs.siu.edu/fix/medmicro/genmicr.htm)

acids across the OM (Sihavy et al., 2010; Greenwood, 2007; Ryan et al., 2004). The OMPs in *Klebsiella pneumoniae*; OMPK35 and OMPK36, act as a channel for antibiotics to pass through these porins to the cytoplasm and losing either has shown to facilitate resistance to cephalosporins (Tsai, et al., 2011).

The periplasm lies between the two membranes (Figure 1.7) and is filled with a fluid called the periplasmic gel and situated between the outer and the inner membranes and considered as the interior part of the cell envelope. The periplasm plays a crucial role as a transporter of sugars and amino acids and because it is densely packed with proteins, it acts to sequester of the harmful RNAse and alkaline phosphatase degradative enzymes. The periplasm is inhabited with periplasm binding proteins and chaperon like molecules, both have different functions. Periplasm binding proteins act as transporter of sugars and amino acids as well as chemotaxis, whereas chaperon like molecules function in envelope biogenesis (Silhavy et al., 2010) such as the movement of synthesised molecules e.g. LPS from the cytoplasm to across the periplasm be assembled on the outer membrane, specific transporters are required; the periplasmic protein LptA, the OM lipoprotein LptE and the βbarrel OM protein LptD. (Ruiz et al., 2009). Chromosomal, plasmid-mediated or inducible β-lactamases present in the periplasm play an important role in protecting the PBPs from β -lactam antibiotics (Sykes & Matthew, 1976).

The cell wall consists of a thin layer of peptidoglycan known as murein 5-10 (nm) linked to the outer membrane via lipoproteins. N-acetylglucosamine and N-acetylmuramic acid molecules represent the main structure of the peptidoglycan layer; moreover, they are cross-linked with penta-peptide side chains (Vollmer *et al.*, 2008). Despite the fact that the peptidoglycan in Gramnegative bacterial cell wall is greatly reduced, it plays a significant role in giving the cell its stability and rigidity and, accordingly, determines cell shape. The reason for this is the composition of glycan chains in the form of N-acetylglucosamine-N-acetylmuramic acid, which is found linked in alternative ways to form murein saculus heteropolymer. The penicillin binding proteins (PBPs) play a major role in the polymerization of the glycan strand that is called transglycosylation. PBPs are the target of β -lactam antibiotics but are protected by β -lactamases in the periplasm (Sauvage *et al.*, 2007).

1.3 Examples of antibiotics used in treatment of infection caused by bacteria

Gram-negative bacteria are a leading cause of life-threatening infections and include nosocomial infections (NI), nosocomial pneumonia (NP), urinary tract infections (UTIs), intra-abdominal infections (IAIs), pediatric bacterial meningitis, septicaemia, neutropenia, community acquired infections (CAIs), and pelvic inflammatory diseases (Lamb *et al.*, 2002; Plosker *et al.*, 1998; Chaudhuri *et al.*, 2011; Baughman, 2009). Since the discovery of antibiotics, many classes of antibiotics have been employed and derivatives of established

antibiotics trialed to overcome increasing resistance. (Table 1.2) (Coates et al., 2002).

Table 1.2 Main classes and examples of antibiotics and β -lactamase inhibitors (according to Coates *et al.*, 2002)

Class	Examples
β-lactams	
Penicillins	Penicillin G, penicillin V, methicillin, oxacillin, cloxacillin, dicloxacillin, nafcillin,
	ampicillin, amoxicillin, carbenicillin, ticarcillin, mezlocillin, piperacillin, azlocillin,
	temocillin
Cephalosporins	
First generation	Cepalothin, cephapirin, cephradine, cephaloridine, cefazolin
Second generation	Cefamandole, cefuroxime, cephalexin, cefprozil, cefaclor, loracarbef, cefoxitin,
	cefmetazole
Third generation	Cefotaxime, ceftizoxime, ceftriaxone, cefoperazone, ceftazidime, cefixime,
	cefpodoxime, ceftibuten, cefdinir
Fourth generation	Cefpirome, cefepime
Carbapenems	Imipenem, meropenem
Monobactams	Aztreonam
β-lactamase inhibitors	Clavulanate, sulbactam, tazobactam
Aminoglycosides	Streptomycin, neomycin, kanamycin, paromycin, gentamicin, tobramycin, amikacin,
	netilmicin, spectinomycin, sisomicin, dibekacin, isepamicin
Tetracyclines	Tetracycline, chlortetracycline, demeclocycline, minocycline, oxytetracycline,
	methacycline, doxycycline
Rifamycins	Rifampicin (also called rifampin), rifapentine, rifabutin, bezoxazinorifamycin,
	rifaximin
Macrolides	Erythromycin, azithromycin, clarithromycin
Lincosamides	Lincomycin, clindamycin
Glycopeptides	Vancomycin, teicoplanin
Streptogramins	Quinupristin, daflopristin
Sulphonamides	Sulphanilamide, para-aminobenzoic acid, sulfadiazine, sulfisoxazole,
	sulfamethoxazole, sulfathalidine
Oxazolidinones	Linezolid
Quinolones	Nalidixic acid, oxolinic acid, norfloxacin, pefloxacin, enoxacin,
	ofloxacin/levofloxacin, ciprofloxacin, temafloxacin, lomefloxacin, fleroxacin,
	grepafloxacin, sparfloxacin, trovafloxacin, clinafloxacin, gatifloxacin, moxifloxacin,
	sitafloxacin
Others	Metronidazole, polymyxin, trimethoprim

1.3.1 β-lactams

1.3.1.1 Cephalosporins

Cephalosporins are class of antimicrobials used to treat bacterial infections due to Gram-negative and Gram-positive bacteria. Cephalosporins are divided to 1st, 2nd, 3rd, 4th and 5th generations. The 1st generation was first introduced in 1945 as natural product derivatives to disrupt the cell wall by interrupting the synthesis of peptidoglycan causing lysis of bacteria. (Butler & Buss, 2006). Third generation cephalosporins are among the most widely used subclass of antibiotics and include cefotaxime, ceftazidime, and ceftriaxone. This class of antibiotics is administered to treat hospital acquired infections particularly to eradicate infections caused by Enterobacteriaceae e.g. *K. pneumoniae* and *Escherichia coli*.

1.3.1.1.1 Cefotaxime

Cefotaxime has a broad-spectrum of activity and plays an important role in the treatment of Gram-negative bacterial infections in adult and pediatric patients. It is administrated to treat bacterial infections due to skin and soft tissue infections, nosocomial infections, pneumonia, complicated urinary tract infections, meningitis, bone and joint infections and bacteraemia (Adu & Armour, 1995; Plosker *et al.*, 1998; Dajani, 1995).

1.3.1.1.2 Ceftazidime

Ceftazidime is an aminothiazolyl syn-methoxyimino cephalosporin, it is a β-lactam antibiotic has broad-spectrum activity against Gram-negative. Ceftazidime is administered to treat bacterial infections e.g. respiratory tract, genitourinary tract, gynecological, bone and joint, septicaemia, intra-abdominal, bacteraemia, meningitis, skin and tissue and ventilator associated pneumoniae infections (VAPs). (Buijk *et al.*, 2002; Lorente *et al.*, 2007).

1.3.1.1.3 Ceftriaxone

Ceftriaxone was introduced in 1980s and used extensively to treat bacterial infections due to its stability against β-lactamases, particularly produced by members of Enterobacteriaceae. It is used to treat broad range of infections; these include meningitis in adults and infants, acute otitis media, CAIs, uncomplicated gonorrhea, pelvic inflammatory disease, acute pyelonephritis and spontaneous bacterial peritonitis. (Lamb, *et al.*, 2002; Jones, *et al.*, 1998; Diekema, *et al.*, 1999).

1.3.1.2 Carbapenems

Carbapenems are derived from the antibiotic thienamycin which is a natural product of the Gram-positive bacterium *Streptomyces cattleya*. This class of β -lactams includes meropenem, imipenem, ertapenem, and doripenem. Carbapenems are often used as empirical therapy and to treat bacterial infections caused by Gram-negative bacteria that produce resistant

determinants against extended spectrum cephalosporins. Carbapenems are classified into two groups. Group 1 comprises antibiotics that have limited antibacterial activity against non-fermenters Gram-negative bacteria such as ertapenem. Group 2 includes antibiotics active against non-fermenters and recommended to treat nosocomial infections. (Shah & Isaacs, 2003; Livermore and Woodford, 2000; Birnbaum *et al.*, 1985; Ayalew *et al.*,2003; Zhanel *et al.*, 2007; Mohr, 2008).

1.3.1.2.1 Imipenem

Imipenem is *N*-formimodoyl-thienamycin (Figure 1.8) is not used on its own because it is rapidly degraded by dehydropeptidase produced by the human kidney and has an adverse toxic effect on the kidney, therefore imipenem should be co-administrated with cilastatin in the ratio of 1:1 to act as an inhibitor of the dehydropeptidase enzyme and to neutralize the toxic effect of the antibiotic. (Rodloff *et al.*, 2006).

Transpeptidases also known as penicillin binding proteins (PBPs) cross link the peptidoglycan and provide the bacteria with a rigid cell wall are the main targets for imipenem. Imipenem has been shown to inactivate the transpeptidase of PBP-1A, PBP-1B and PBP-2, it moreover, inhibits the Dalanine carboxypeptidase of PBP-4 and PBP-5 in *E. coli*. (Hashizume *et al.*, 1984). Imipenem is a broad-spectrum antibiotic indicated as initial empirical therapy and in treating serious bacterial infections including NI, ventilator

associated pneumonia (VAP), febrile neutropenia (Torres et al., 2000; Zanetti et al., 2003; West et al., 2003; Raad et al., 2003; Cherif et al., 2004), hospital acquired pneumonia (HAP), healthcare associated pneumonia (HCAP), patients hospitalized suffering from intra-abdominal infections, patients with skin and soft tissue infections and lower respiratory tract infections (Neu, 1983; Shah & Isaacs, 2003).

$$H_3C$$
 H_3C
 H_3C
 H_2O
 $COOH$

Figure 1.8 (N-formimodoyl-thienamycin). (Rodloff et al., 2006).

1.3.1.2.2 Meropenem

Meropenem is a member of carbapenems marketed to eradicate Gramnegative bacterial infections and was approved by the FDA in 1996 (Zhanel *et al.*, 2007; Baldwin *et al.*, 2008). Meropenem binds effectively to penicillin binding protein (PBP) with high affinity, accordingly inhibiting the growth of the micro-organism. It has high affinity to PBPs 2, 3, and 4 of *E. coli* and PBPs 1 and 2 of *Pseudomonas aeruginosa* (Baldwin *et al.*, 2008).

Meropenem is effective in the treatment of several infectious diseases caused by pathogenic bacteria, it is recommended for the treatment of NP, it can also be used as an alternative to other antibiotics such as amikacin (Alvarez Lerma, 2001) or combinations of antibiotics e.g. ceftazidime and tobramycin (Heyland et al., 2008). Meropenem is also very efficacious in treating patients with complicated intra-abdominal infections (CIAI) (Zanetti et al., 1999; Brismar et al., 1995). In one study, 153 patients with septicaemia, meropenem was effective as an empirical therapy, and as effective as ceftazidime with or without amikacin (Baldwin et al., 2008). Meropenem also displays high efficacy in treating adults and paediatric patients suffering from cancer related febrile neutropenia infected with E. coli, Klebsiella spp and P. aeruginosa (Oguz et al., 2006; Kutluk et al., 2004; Feld et al., 2000; Cometta et al., 1996), and patients with bacterial meningitis caused by K. pneumoniae and Haemophilus influenzae (Odio et al., 1999; Schmutzhard et al., 1995). It is also highly active in treating complicated urinary tract infections (CUTI) (Cox et al., 1995); complicated skin and skin structure infections (CSSSIs) (Fabian et al., 2005) and acute pulmonary infections caused by P. aeruginosa in patients with cystic fibrosis (Blumer et al., 2005).

1.3.1.2.3 Ertapenem

Ertapenem has a broad-spectrum activity against Gram-negative bacteria but not non-fermenters as it has limited antibacterial activity and it is recommended for CAIs (Keating & Perry, 2005). Ertapenem is active against

Enterobacteriaceae producing extended-spectrum β -lactamases (ESBLs) and AmpC β -lactamases. Ertapenem binds to PBPs, subsequently interferes with bacterial cell wall synthesis and due to occurrence of 1β -methyl substituent, co-administration with cilastatin with ertapenem is not required as ertapenem is stable against renal dehydropeptidase I. (Alhambra *et al.*, 2004)..

1.3.1.2.4 Doripenem

Doripenem was approved by FDA in 2007 to be used to treat CIAI and CUTIs (Paterson & Daryl, DePestel, 2009). Its activity resembles that of meropenem (Jones *et al.*, 2005a; Mushtaq *et al.*, 2004). Doripenem forms a stable acylenzymes and causing weakness bacterial cell wall and consequently lead to cell wall rupture as a result of osmotic pressure forces (Stratton, 2005). PBP2 and PBP3 in *P. aeruginosa* and *E. coli* are the prime targets for doripenem (Davies *et al.*, 2008).

Doripenem is very similar to meropenem in the treatment of post-surgical infections (Lucasti *et al.*, 2008); and can be employed to treat CUTIs, pyelonephritis and baseline bacteremia, hospital acquired pneumonia including VAP (Rea-Neto *et al.*, 2008; Chastre, *et al.*, 2008).

1.4 Mechanism of antibiotic action

1.4.1 Introduction

Antibiotics were discovered and introduced as to be used to treat bacterial infections by interrupting the physiological mechanisms inside the bacterial

envelope/cytoplasm that allow normal cellular function. Two main mechanisms of bacterial inhibition are known, bactericidal drugs induce cell death while bacteriostatic drugs act as cell growth inhibitors (Kohanski, *et al.*, 2010). Herein, I will describe the effect of antibiotics on protein synthesis, cell wall and DNA synthesis.

1.4.1.1 Inhibition of protein synthesis

Protein synthesis occurs at the ribosome of bacteria and during phases of synthesis, initiation, elongation and termination, more specifically on the 50S and 30S subunits (Figure 1.9). Inhibitors of protein synthesis differ according to the target site, inhibitors of 50S subunit of Gram-negative bacteria include lincosamide e.g clindamycin and chloramphenicol (Katz & Ashley, 2005). Aminocyclitol family and tetracyclines are among the 30S ribosome inhibitors and include kanamycin, gentamicin and streptomycin. These antibiotics inhibit the bacterial growth by interrupting the access of aminoacyl-tRNAs to the ribosome (Chopra & Roberts, 2001). Protein mistranslation can also occur as a result of the interaction between aminoglycosides and 16S rRNA, such interaction causes alteration in the complex between mRNA and aminoacyl-tRNA at the ribosome and consequently mismatching of tRNA will take place leading to protein mistranslation (Pape *et al.*, 2000).

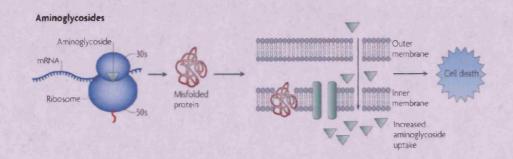


Figure 1.9 Inhibition of protein synthesis by aminoglycosides (according to Kohanski et al., 2010)

1.4.1.2 Cell wall synthesis

The bacterial envelope is enclosed by a covalently cross-linkage of peptidoglycan layers, these layers are composed of peptide β -(1-4)-N-acetyl hexosamine. (Bugg & Walsh, 1992). The integrity of the bacterial cell wall is likely to be affected by the degree of peptidoglycan cross-linking (Holtje, 1998). As mentioned previously, β -lactams are the largest group of antibiotics that target the cell wall (Figure 1.10). Glycopeptides also share this target. Carbapenems and cephalosporins are important classes of antibiotics used as a therapy, their mechanism of action is represented in blocking the cross-linking of peptidoglycan units, such blocking is achieved by the inhibition of PBP by means of transpeptidase. (Kohanski *et al.*, 2010).

1.4.1.3 Inhibition of DNA synthesis

Quinolone antibiotics are DNA synthesis inhibitors that act by targeting DNA gyrase that is known as topoisomerase II and topoisomerase IV which is

known as topoIV (Figure 1.11). These antibiotics prevent the rejoining of the DNA strand at the DNA cleavage stage and consequently affect the synthesis of DNA and cause cell death. It has been shown that quinolone antibiotics target topoisomerase II in Gram-negative bacteria e.g. *E. coli* and *Neisseria gonorrhoeae* (Drlica *et al.*, 1978; Kohanski *et al.*, 2010).

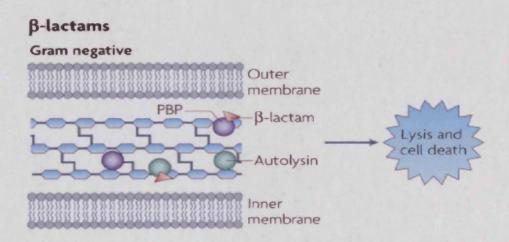


Figure 1.10 Inhibition of cell wall synthesis by β -lactams (according to Kohanski *et al.*, 2010)

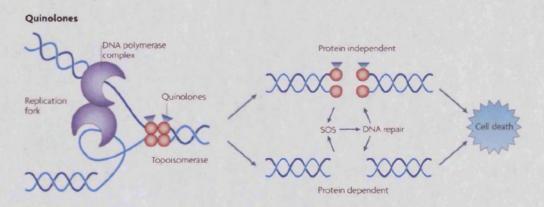


Figure 1.11 Inhibition of DNA synthesis by quinolones (according to Kohanski et al., 2010)

1.5 Mechanism of antibiotic resistance in Gram-negative bacteria

Several factors have been attributed to the ascending level of bacterial resistance to antimicrobial agents used in clinical settings and have led to the emergence of multi-drug resistant strains.

1.5.1 Efflux pump mediated antibiotic resistance

Efflux is considered one major mechanism by which bacteria can expel antimicrobials outside the cell. Efflux pumps are often chromosomally mediated; however, some plasmid mediated pumps have been reported. Five families of efflux pumps were reported, ATP binding cassette superfamily (ABC), the multi-drug and toxic compound extrusion family (MATE), the major facilitator superfamily (MFS), the small multi-drug resistance family (SMR) and the resistance nodulation division superfamily (RND). (Li & Nikaido, 2004; Li & Nikaido, 2009).

Single or multi-drug resistance in E. coli is in part attributed to the occurrence of efflux transports in addition to other resistance mechanisms. More than 37 efflux pumps were found in the genome of E. coli belonging to different families; seven RND type, seven ABC type, 1 MATE type and 19 MFS. AcrAB is known to work with the outer membrane protein TolC as the combination system shows broad substrate specificity toward β -lactams, chloramphenicol and novobiocin as well as dyes, detergents and organic solvents (Li & Nikaido, 2004). Twelve types of RND type efflux system have

been described as responsible for resistance of P. aeruginosa to antimicrobials, detergents, chemicals, molecules, dyes and antiseptics for instance MexAB-OprM, MexCD-OprJ, MexEF-OprN, MexGHI-OprD and MexXY efflux pumps. MexAB-OprM efflux provides a wide range of resistance to antibiotics, β -lactam, tetracycline, trimethoprim, chloramphenicol with intrinsic resistance toward flouroquinolones (Askoura *et al.*, 2011).

1.5.2 Outer membrane permeability and antibiotic resistance

The outer membrane in Gram-negative bacteria has already been described in (section 1.2). Antibiotics undertake two pathways to penetrate the outer membrane targeting the cytoplasmic membrane; the lipid-mediated pathway and general porin diffusion. Some antibiotics use both ways to enter the cell e.g. tetracycline and quinolones. Hydrophobic antibiotics enter the Gram-negative bacterial outer membrane via the lipid-mediated pathway whereas the hydrophilic antibiotics use porins to reach their target (Delcour, 2009). Gentamicin, kanamycin, erythromycin, rifamycin, fusidic acid and cationic peptides are known as hydrophobic antibiotics able to enter the cell through the outer membrane bilayer (Vaara, 1992; Nikaido, 2003).

Bacteria use the LPS core region as a barrier for hydrophobic antibiotics. Some antibiotics and chemicals play a major role in the sensitivity of bacteria to antimicrobials, e.g. Tris/EDTA and polymyxin B. The target of Polymyxin B is the cytoplasmic membrane; it penetrates the cell and by binding to negatively charged LPS causes destabilisation of the outer membrane, the fatty

acid tail of the antibiotic causes disruption to the membrane integrity leading to the antibacterial action. Resistance of bacteria to polymyxin B is achieved by esterification of the lipid A phosphates by the occurrence of 4 to 6 times of 4-aminoarabinose and more phosphoethanolamine, these compounds lower the negative charge of the LPS leading to more resistance to polymyxin B penetration (Cardoso, 2007; Delcour, 2009).

The term porin refers to β barrel proteins that act as a channel crossing the cell membrane. The classical porins that are known to facilitate the diffusion of molecules are OmpC and OmpC subfamilies; however, some exceptions should be taken into consideration such as PhoE in E. coli and OprD of P. aeruginosa and others. (http://www.membranetransport.org/). The porin channel provides an entry for β-lactams and fluoroquinolones but Gramnegative bacteria have developed some mechanisms to withstand antibiotics, such as changing porin type or the levels expressed, modification of the target site and synthesis of pore blocking molecules. (Pagés et al., 2008). For example, OmpK35, one of the characteristic porins of K. pneumoniae and of the OmpF porin group was replaced with OmpK36 as a result of the exposure to treatment of patients harbouring the K. pneumoniae with β -lactam antibiotics (Doménech-Sánchez et al., 2003). In vivo and in vitro evidence show that mutation occurred in OprD of P. aeruginosa causing carbapenem resistance in the presence or absence of carbapenemase production (Ochs et al., 2000; Wolter et al., 2004).

1.5.3 β-lactamases

1.5.3.1 Introduction

The term β -lactamase refers to the enzymes produced by micro-organisms that hydrolyses β -lactam molecules and thus singularly or in part enables β -lactam resistance. More than 500 β-lactamase enzymes have been reported to date (www.lahey.org/studies.webt.htm). It is considered the most common βlactam resistance mechanisms that contribute to wide spread resistance among Gram-negative bacteria (Bush & Jacoby, 2010). β-lactamases differ from one another in substrate profiles which depend on the number and types of antibacterial agents they can inactivate. They also differ in terms of their inhibitor profile. Moreover, the amino acid composition of these enzymes is another factor in distinguishing the similarities and the existence of active hydrolytic parts of the enzyme (Ambler, 1980; Bush, 2010 b). In Gramnegative bacteria, the occurrence of β-lactamase mediated resistance is either expressed chromosomally or is plasmid borne. However, the spread of βlactamases is frequently associated with plasmid encoded ESBLs, specifically the CTX-M family, and serine carbapenemases KPC and the Metallo-βlactamases (MBLs) VIM, IMP and NDM-1 (Pitout, 2010). Based on substrate specifications, four major groups of β-lactamases have been identified so far; penicillinases, AmpC-type cephalosporinases, ESBLs and carbapenemases. For the purpose of my thesis, I will primarily focus on ESBLs and carbapenemases rather than the less-extended β -lactamases.

1.5.3.2 Classification of β-lactamases

The importance of the antibiotics penicillins and cephalosporins to treat infectious diseases has led to the focus on exploring the characteristics of enzymes produced by bacteria that hydrolyze these antibiotics. Many bacteria are able to exhibit a new approach to withstand antibiotics, more specifically β-lactams. This is frequently noticed by the insertion of new nucleotide sequences in the genetic context of a particular antibiotic resistance gene or by changing of one or more nucleotides in the nucleotide sequence that lead to different amino acid sequences e.g. TEM group of β-lactamases. Consequently, this may result in a different substrate hydrolysis profile that can lead to a higher level of antibiotic resistance. However, a decrease in antibiotic hydrolysis may also be observed. By 2009 more than 500 unique protein sequences for β –lactamases had been reported (Bush & Jacoby, 2010). β-lactamases have been classified in two ways, the first classification is Ambler classification based on the classification of β-lactamases according to their primary structure (Ambler, 1980), while Bush, Jacoby, Medeiros classification is based on functional characteristics of \(\beta \)-lactamases (Bush et al., 1995).

1.5.3.3 Extended spectrum β-lactamases (ESBLs)

ESBLs are a group of enzymes able to hydrolyze and confer resistance to penicillins cephalosporins, monobactams and oxyimino-cephalosporins that include cefotaxime, ceftazidime, ceftriaxone, cefuroxime and cefepime. These enzymes do not affect some cephamycins such as cefoxitin and cefotetan. ESBLs have no or little activity towards carbapenems. They are inhibited by the classical β -lactamase inhibitors; clavulanic acid, sulbactam and tazobactam. The majority of ESBLs have been classified under Ambler class A β -lactamases, these enzymes include bla_{SHV} and bla_{TEM} that have evolved from e.g. bla_{SHV-1} and bla_{TEM-1} encoding genes. Such derivation is attributed to one or more point mutations occurring on the β -lactamase active site (Paterson & Bonomo, 2005).

ESBLs are often found carried on large plasmids. In addition, a number of antibiotic resistance genes that confer resistance to antibiotics such as aminoglycosides and trimethoprim/sulphamethoxazole are also found on the same plasmids. ESBLs are considered among the largest group of β-lactamase known to activate antibiotics such as penicillins and cephalosporins rendering carbapenems as the last choice for treating infections, this results in more pressure on carbapenems. (Bush, 2010b). CTX-M enzymes are among the wide spread ESBLs, since their first description in 1989 (Bauernfeind *et al.*, 1990), over 120 CTX-M type ESBLs have been discovered to date (http://www.lahey.org/studies/other.asp#table1). CTX-M ESBLs are grouped into five major clusters; CTX-M-1,2,8,9 and 25 (Barlow *et al.*, 2008 & Bonnet, 2004), CTX-M 1 and CTX-M 9 being the most diverse clusters with 31 and 22 variants identified respectively. CTX-M enzymes comprise a wide range of subgroups for instance; CTX-M group1 1, 2 and 9 are known to

include more members of CTX-M variants than CTX-M 8 and 25 e.g, CTX-M-1,3,10,11,12,32,36 and CTX-M-15, CTX-M group 2 encompasses CTX-M-2,20,31,5,6,56,7 and others, CTX-M-9 includes for instance; CTX-M-9,13,14,17,47,48 and CTX-M-55. CTX-M groups 8 and 25 includes only few variants (Novias *et al.*, 2010 & Harada *et al.*, 2008). The dissemination of CTX-M ESBLs is oftentimes associated with the occurrence of Insertion Sequence Common Regions (ISCRs) which are found to be located upstream of antibiotic resistance genes and can activate their transmission. The occurrence of CTX-M ESBLs in *E. coli* isolates from nine patients in Norway has been recently assessed. Six of the ESBL genes were $bla_{\text{CTX-M-15}}$ and one $bla_{\text{CTX-M-3}}$. All $bla_{\text{CTX-M-15}}$ bore resemblance to each other in terms of their sensitivity to antimicrobials used with minimum inhibitory concentrations (MICs), $\geq 256 \, \mu \text{g/ml}$ and $\geq 256 \, \mu \text{g/ml}$ for cefotaxime and ceftazidime, respectively (Naseer *et al.*, 2007).

1.5.3.4 Carbapenemases

Carbapenems are hydrolysed by carbapenemases produced by Gram-negative bacteria such as members of Enterobacteriaceae and non-fermenters. These enzymes have been classified into three classes according to Ambler classification; class A, B and D. Class A and D are known as serine carbapenemases and Class B are called metallo-β-lactamases (MBLs) (Walsh, 2010).

1.5.3.5 Class A carbapenemases

Class A carbapenemases are also known as group 2f, according to Bush *et al.*, 1995, comprises five phylogenetic groups; NMC, IMI, SME, KPC and GES and are subdivided into chromosomally and plasmid mediated groups. SME, NMC and IMI are chromosomally mediated whereas KPC and GES groups are, in most cases, plasmid mediated. These enzymes possess hydrolytic activity towards_most β-lactams including carbapenems, cephalosporins, penicillins, and aztreonam and have been found in Enterobacteriaceae and *P. aeruginosa*. SME-1, SME-2 and SME-3 were chromosomally mediated in *Serratia marcescens* whereas IMI-1, IMI-2 and NMC-A are detected on the chromosome of *Enterobacter cloacae*. GES-2 was found plasmid mediated in *P. aeruginosa*, GES-4 has been detected on a plasmid in *K. pneumoniae* isolated from a Japanese patient whereas GES-5 and GES-6 were plasmid mediated in *E. coli* and *K. pneumoniae* isolated from Greece (Queenan and Bush, 2007; Walsh, 2010).

KPC enzymes are among the plasmid encoded class A serine carbapenemases, mostly from *K. pneumoniae*, and are considered the most frequently detected class A enzymes that have a potent threat to antimicrobials used to treat infections. KPC enzymes were first discovered in *K. pneumoniae* isolated from a patient from North Carolina, USA in 1996. KPC-1 was followed by KPC-2 and, later on KPC3, KPC-4, KPC-5, KPC-6 and KPC-7 as variants of KPC-1 and KPC-2. KPC genes have been reported on plasmid in

Enterobacterial species; *E. coli*, *Salmonella cubana*, *E. cloacae*, *Proteus mirabilis*, and *K. oxytoca*. Self transferable KPC genes have been determined to be transferred to *E. coli*, they have also been detected carried on a 10kb transposon, Tn4401, and associated with the insertion sequences IS*Kpn6* and IS*Kpn7* (Nass *et al.*, 2008; Nordmann *et al.*, 2009; Walsh, 2010; Queenan and Bush, 2007).

1.5.3.6 Class D β-lactamases

This class of β-lactamases includes enzymes called oxacillinases, these enzymes hydrolyze cloxacillin, oxacillin, extended spectrum cephalosporins and carbapenems. Oxacillinases such as bla_{OXA-1} and bla_{OXA-10} are among enzymes that show increased hydrolysis of cloxacillin or oxacillin whereas bla_{OXA-11} and bla_{OXA-15} hydrolyse cloxacillin or oxacillin and even oxyimino-β-lactams less efficiently than others. Some β-lactamases can target carbapenems for instance bla_{OXA-23} and bla_{OXA-48} in addition to cloxacillin and oxacillin, these enzymes have been detected plasmid mediated in Enterobacteriaceae (Poirel *et al.*, 2004; Walther-Rasmussen and Hoiby, 2006). Four clusters of oxacillinases are responsible for carbapenem hydrolysis in Gram-negative bacteria; bla_{OXA-23} , bla_{OXA-24} , bla_{OXA-58} and bla_{OXA-48} (Walther-Rasmussen & Hoiby, 2006). bla_{OXA-23} cluster comprises two enzymes; bla_{OXA-27} and bla_{OXA-49} . The majority of these enzymes are found in *Acinetobacter* and can be chromosomally or plasmid mediated (Poirel & Nordmann, 2006).

1.5.3.7 Metallo-β-lactamases (MBLs)

MBLs are enzymes capable of readily hydrolysing all β-lactam antibiotics with the sole exception of monobactams. In addition they are not inhibited by the classical serine β-lactamase inhibitors (Walsh et al., 2005), (Jones et al., 2005b; Poirel et al., 2010a; Samuelsen et al., 2010; Walsh et al., 2005). At molecular level, MBLs are a disparate group of proteins, they are classified to three classes; B1, B2 and B3 based on sequence identity and other structural features. Classes B1 and B3 possess two zinc ions in their active sites and class B2 possesses only one zinc ion. The widely spread enzymes belong to class B1, these enzymes posses the key zinc coordinating residues of three Histidine and one cysteine such as; IMP, VIM, GIM and SPM-1, class B2 include enzymes that posse asparagine instead of Histidine (Walsh et al., 2005) Most MBL genes are located on mobile genetic elements, the majority of these MBL encoding genes are carried in the form of gene cassettes on class 1 integrons and/or Tn402-type transposons (Marchiaro et al., 2010; Poirel et al., 2010b; Borgianni et al., 2011; Lee et al., 2005; Castanheira et al., 2004; Santos et al., 2010) whereas some of these genes are associated with insertion sequences such as ISCR4 (bla_{SPM-1}), (Salabi et al., 2010; Poirel et al., 2004) and IS26/Tn3 transposon (Yong et al., 2009) which can facilitate their global spread. MBLs have been reported worldwide in non-fermenting Gramnegative bacteria (Osano et al., 1994) and more recently in Enterobacteriaceae (figure 1.12) (Kumarasamy et al., 2010)

The continuous emergence of MBLs and their association with MDR phenotypes in Gram-negative bacteria are considered major threats in the treatment of infectious diseases. To date 9 acquired MBLs have emerged worldwide (Figure 1.12); IMP (Osano *et al.*, 1994), VIM (Lauretti *et al.*, 1999), SPM-1 (Toleman *et al.*, 2002, GIM-1 (Castanheira *et al.*, 2004), SIM-1 (Lee *et al.*, 2005), AIM-1 (Gupta, 2008), KHM-1 (Sekiguchi *et al.*, 2008), NDM-1 (Yong *et al.*, 2009) and DIM-1 (Poirel *et al.*, 2010) genes in addition to the novel TMB-1 that was recently detected in Libya (see chapter 6).

The prevalence of carbapenem resistance strains of P. aeruginosa has been reported in China during the period of 2004 to 2005. P. aeruginosa strains have been collected from different cities in China including a large teaching hospital in Beijing and data shows that 10 % of all imipenem resistant P. aeruginosa carry bla_{VIM} type MBLs. 12 out of 14 strains of P. aeruginosa were positive for class 1 integrons carrying bla_{VIM-2} . These results reveal that bla_{VIM-2} type MBL genes disseminated horizontally in China between different cities, due to patients transfer among cities inside the country. (Yu et al., 2006).

Numerous strains of Gram-negative bacteria possess chromosomes that have become a mosaic as a result of the horizontal gene transfer and the vertical inheritance of genes (Waldor, 2010). Four mechanisms by which antibiotic resistance genes can horizontally be mobilised from a chromosome to a

plasmid are integrons, transposons, Integration Conjugative Elements (ICE) (Partridge, 2011) and Insertion Elements (Toleman & Walsh, 2011).

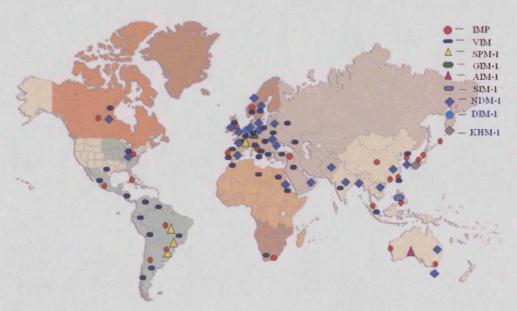


Figure 1.12 Global emergence of MBLs (modified from Walsh, 2010).

1.6 Global emergence of clinical antibiotic resistant Gram-negative bacteria

Gram-negative bacteria, more importantly those belong to Enterobacteriaceae and non-fermenters such as P. aeruginosa and Acinetobacter baumannii, are among the most causative agents of hospital and community acquired infections. Extended-spectrum cephalosporins, fluoroquinolones and carbapenems are among the main therapeutic choices. The continuous pressure of β -lactam antibiotics in hospitals has exacerbated the selection for consecutive generations of β -lactamases – ESBLs followed by carbapenemases (Chouchani et al., 2011; Coque et al., 2008). The problem

becomes worse when such resistance occurs by horizontal gene transfer or mediated by conjugative plasmids as it is the case generally for ESBLs causing resistance to extended-spectrum cephalosporins. For example, CTX-M-type ESBLs have been detected in Europe with $bla_{\text{CTX-M-15}}$, $bla_{\text{CTX-M-3}}$ and $bla_{\text{CTX-M-9}}$ carried on a variety of different Inc-type plasmids and sizes (Figure 1.13) (Livermore *et al.*, 2007).

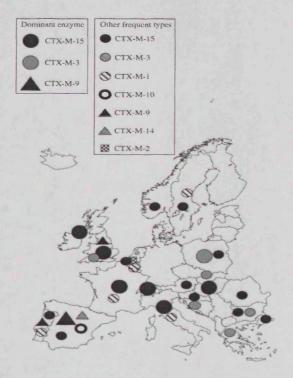


Figure 1.13 The emergence of CTX-M type ESBLs in Europe. (Livermore *et al.*, 2007)

According to the antimicrobial resistance surveillance conducted in Europe between 2006-2009, the recent global emergence of antimicrobial resistance of *K. pneumoniae*, *E. coli* and *P. aeruginosa* in Europe showed that there is an

increasing trend in the resistance of these micro-organisms to antimicrobials used. The surveillance showed that *E. coli* isolates collected from European countries exhibited high resistance to aminopencillin, extended-spectrum cephalosporins and aminoglycosides. European antimicrobial resistance surveillance (EARS-Net) data also shows a continuing increase in flouroquinolone resistance. High proportion (85-100%) of *E. coli* isolates resistant to extended-spectrum cephalosporins were due to ESBLs indicating the high prevalence of ESBL producing *E. coli* in European hospitals (http://ecdc.europa.eu/en/publications/Publications/1011_SUR_annual_EARS Net 2009.pdf).

A high proportion of resistance of *K. pneumoniae* to extended-spectrum cephalosporins, fluoroquinolones and aminoglycosides is evident. *K. pneumoniae* isolates from two countries; Greece and Cyprus in the Mediterranean Gulf also show high resistance to carbapenems. Half of the countries involved in the surveillance program reported the incidence of multi-drug resistant (MDR) *K. pneumoniae* to extended-spectrum cephalosporins (Figure 1.14), aminoglycosides and fluoroquinolones whereas northern European countries such as Denmark and Norway reported an increasing trend of resistance to specific classes of antibiotics whilst emergence of resistance in UK showed a consistent reduction (http://ecdc.europa.eu/en/publications/Publications/1011 SUR annual EARS Net 2009.pdf).

With respect to EARS-Net data on *P. aeruginosa* in Europe, data on the resistance trends from the eastern and southern parts of Europe show a higher proportion of antibiotic resistance. Overall, of 8129 *P. aeruginosa* isolates collected from the 28 countries participating in the surveillance, 1541 have shown resistance to carbapenems; imipenem and meropenem (Figure 1.15). (http://ecdc.europa.eu/en/publications /Publications /1011_SUR_ annual_ EARS Net 2009.pdf).

Carbapenems were introduced as a first line therapy to treat infections caused by non-fermenters in the 1980s, they have also been used for ESBL-producing Enterobacteriaceae after the increasing trend of resistant enterobacterial species to 3rd generation cephalosporins. Since then acquired carbapenemases started to appear and attracted increasing attention most notably MBLs and to lesser extent other carbapenemases such as class A. Since the discovery of MBLs, 9 of these enzymes with their variants have been reported in Latin America, USA, Europe, Africa, Southern Asia, India and Australia and recently TMB-1 in Libya (see chapter 6). Recently MBLs were found in *K. pneumoniae*, *E. coli* and *E. cloacae* such as *bla*NDM-1 that first emerged in India, followed by the UK, and currently has been detected in many countries worldwide (Pfeifer *et al.*, 2011; Chen *et al.*, 2011; Wu *et al.*, 2010; Perry *et al.*, 2011; Solé *et al.*, 2011; Jovcic *et al.*, 2011; Yamamoto *et al.*, 2011).

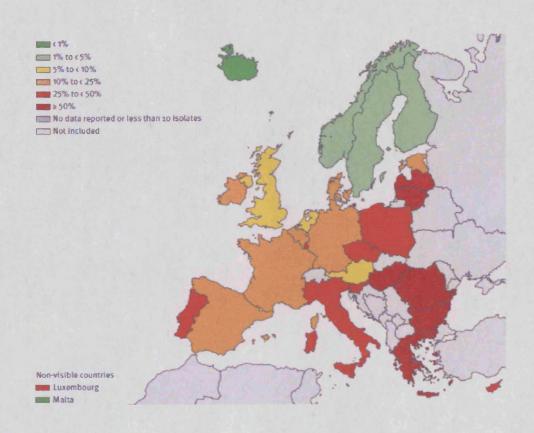


Figure 1.14 The occurrence of *K. pneumoniae* resistant to 3rd generation cephalosporins in Europe (http://ecdc.europa.eu/en/publications/Publications/1011_SUR_annual_EARS_Net_2009.pdf)

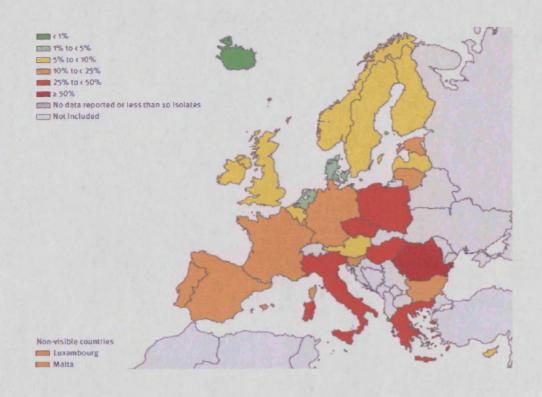


Figure 1.15 The occurrence of *P. aeruginosa* resistant to carbapenems in Europe(http://ecdc.europa.eu/en/publications/Publications/1011_SUR_annual_EARS_Net_2009.pdf)

1.6.1 Evolution of antibiotic resistance in Gram-negative bacteria

Antimicrobial resistance surveillance programs are vital and considered a longitudinal means of detecting changes in resistance to antimicrobials in clinically important pathogenic bacteria. These programs include the Meropenem Yearly Susceptibility Test Information Collection (MYSTIC) (Turner et al., 1999), SENTRY (http://www.jmilabs.com/surveillance/), Intensive Care Antimicrobial Resistance Epidemiology (ICARE) (Perasso et al., 1999), European Antimicrobial Resistance Surveillance (EARSS)

(http://www.hps.scot.nhs.uk/haiic/amr/earsurveillance.aspx) and others. The monitoring of these programs provides information on the increasing or decreasing level of antibiotic resistance rate worldwide. It moreover offers a guide for empirical treatment regimens. The massive use of antimicrobial agents is the leading cause of the prevalence of antibiotic resistant strains in community and hospital settings.

As an example, a longitudinal study was carried out from 1993 to 2004 aimed to assess the resistance rates of Gram-negative bacilli that cause infections in the intensive care units in the United States (Lockhart et al., 2007). Forty three US states in addition to Columbia were included in this study and 74,394 isolates belong to 11 species of Gram-negative bacteria were collected and tested against 17 antibiotics. The results showed that 22.2 % of all Gramnegative isolates were P. aeruginosa followed by 18.8 % E. coli and 14.2 % K. pneumonia, with additional low percentages of other Gram-negative bacteria. Furthermore, P. aeruginosa was the highest among UTIs with 29.9 %. E. coli represented the highest among urine isolates with 42.4 %, while it counted as 23.9 % in the blood. Antibiotic susceptibility testing revealed that the highest resistance rate have been recorded for ampicillin-sulbactam, with five-fold increase in the resistance of P. aeruginosa, while evaluation of the rate of multi-drug resistance between 1993 and 2004 showed that a longitudinal increase in MDR has been observed (Table 1.3). It has been noticed that there is an association between fluoroquinolone usages as a

therapy and resistance, because the prolonged use of these antibiotics have attributed to the rise of ESBL producing *E. coli* and *P. aeruginosa*. (Lockhart *et al.*, 2007). According to the CDC, MDR is defined as the resistance of bacteria to ≥ 3 classes of antibiotics.

Table 1.3 Longitudinal increase in multi-drug resistance in USA (Lockhart et al., 2007)

Organism	1993		2004	
	No. of MDR isolates/total no. of isolates	% of MDR isolates	No. of MDR isolates/total no. of isolates	% of MDR isolates
P. aeruginosa	13/769	1.7	93/1004	9.3
E. coli	0/724	0	16/808	2
K. pneumoniae	26/513	5.1	84/633	13.3
E. cloacae	13/397	3.3	24/406	5.9
Acinetobacter spp.	19/285	6.7	101/338	29.9
E. aerogenes	6/213	2.8	0/154	0
P. mirabilis	1/174	0.6	1/142	0.7
C. freundii	5/95	5.3	7/63	11.1

Another study conducted in Sierallana Hospital in Spain sought factors that may have an additional effect on patients admitted with bacteraemia. Blood samples from 15045 patients were collected to determine the causative agents of bacteraemia in the period from 1997 to 2005. Antibiotic susceptibility tests following antimicrobials; were performed using the ampicilin, amoxicillin/clavulanate, pipracillin/tazobactam, cefotaxime and trimethoprim/ sulfamethoxazole. 14.9 % of the patients had positive blood cultures, of which, 4.4 % of isolates were E. coli. It has been reported that the factors that attributed to the occurrence of bacteraemia in this hospital were; MDR E.coli, ESBL producing E. coli, age of patients, time of treating with antibiotics and the presence of severe sepsis, which collectively had a role in the morbidity due to *E. coli* infections (Peralta *et al.*, 2007).

The activity of meropenem and 11 other antimicrobial agents including third generation cephalosporins has been assessed in the USA for 10 years in the period between 1999-2008 to demonstrate any increase or decrease in the rate of antibiotic resistance. A steady increase in the resistance rate of ciprofloxacin was observed among *E. coli* (Figure 1.16), an increase in the resistance of *K. pneumoniae* strains was detected for meropenem, ceftazidime, piperacillin/tazobactam, tobramycin and ciprofloxacillin from 2004 to 2007, however the resistance rate to these drugs slightly decreased in 2008 (Figure 1.17). (Rhomberg and Jones, 2009)

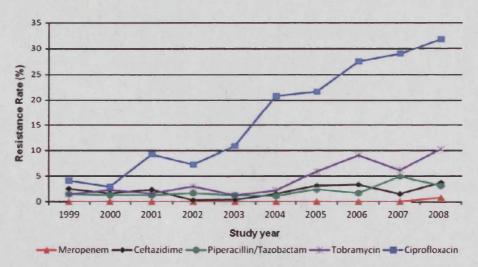


Figure. 1.16 Annual rate of antimicrobial resistance among *E. coli* isolates (4394 strains) tested against selected agents from the MYSTIC Program (1999–2008). (According to (Rhomberg and Jones, 2009)

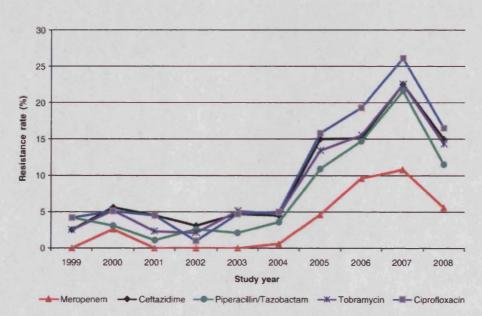


Figure. 1.17 Annual rate of antimicrobial resistance among K.

pneumoniae isolates (2694 strains) tested against selected agents from the

MYSTIC Program (1999–2008). (According to Rhomberg and Jones,
2009)

In Arabia, data on antimicrobial resistance is lacking. However, in Tunisia the appearance of bla_{CTX-M} family occurred in 2005 after the identification of bla_{CTX-M-27} associated with ISEcp1 in Salmonella enterica and continued to appear in 2006, 2009 and 2010. MBLs were only found in three isolates, bla_{VIM-2} in two isolates of P. aeruginosa and bla_{VIM-4} produced by K. pneumoniae in addition to other ESBL genes. Oxacillinases started to be reported in 2007 when bla_{OXA-18} was detected in P. aeruginosa and different OXA enzymes continued to emerge up to the discovery of bla_{OXA-48} the carbapenem hydrolysing enzyme in K. pneumoniae in 2010. (Figure 1.18) (Chouchani et al., 2011). The first report of $bla_{CTX-M-15}$ and $bla_{CTX-M-3}$ in E. coli, K. pneumoniae and E. cloacae isolated from two hospitals in Bejaja, Algeria appeared in 2006 (Touati et al., 2006) followed by detection of bla_{CTX}. M-15 in K. pneumoniae and E. coli from hospital environment (Touati et al., 2007) and in Salmonella enterica isolated from patients in Algeria (Touati et al., 2008). bla_{VIM-19} was reported as a novel MBL found in Enterobacteriaceae in Algeria (Robin et al., 2010). Mechanism of antibiotic resistance in clinical isolates of P. aeruginosa from patients admitted to the University affiliated hospital of Tlemcen in Algeria was due to the production of blaOXA-10 and bla_{TEM110} (Drissi et al., 2008). The first description of CTX-M producing Gram-negative bacteria in Egypt was from clinical isolates of E. coli in 2006 (Mohamed Al-Agamy et al., 2006) while the first report of bla_{TEM} and bla_{SHV} appeared in 2009 (Ahmed et al., 2009), showing the lack of research on this subject. bla_{NDM-2} was the only MBL detected in A. baumannii from Egypt

(Kaase *et al.*, 2011). Furthermore, work on *bla*_{OXA} enzymes from Egypt appeared only in 2011 (Ahmed and Shimamoto, 2011). Plasmid mediated *bla*_{TEM-3} has been detected in *S. typhimurium* isolated from patients admitted to the IbnRochd University hospital of Casablanca (AitMhand *et al.*, 2002), moreover, *bla*_{TEM} and *bla*_{SHV} were reported from *E. coli* and *K. pneumoniae* isolated from community acquired urinary tract infections from three Moroccan cities; Casablanca, El Jadida and Settat (Barguigua *et al.*, 2011). Research on ESBLs, oxacillinases and MBLs started to appear in 2011 showing the lack of focus on antibiotic resistance in Gram-negative bacteria (Barguigua *et al.*, 2011; Porton *et al.*, 2011 & Poirel *et al.*, 2011).



Figure 1.18 The occurrence of β-lactamases, ESBLs and carbapenemases in Tunisia (Chouchani *et al.*, 2011)

1.7 DNA structures that spread antibiotic resistance

1.7.1 Plasmids in multi-resistant Gram-negative bacteria

Plasmids are extra-chromosomal DNA found in the cytoplasm of bacteria as independent genetic moieties capable of autonomously reproducing copies of the same plasmid within the cell in the presence of mechanisms to control plasmid copy number and the stability of plasmid inheritance. Plasmids carry essential genes for establishing and directing replication. Furthermore, they do not normally have any functional contribution that is necessary for the cell or cell growth. Plasmids are circular and sometimes linear double stranded DNA segments that normally replicate without affecting the circular chromosome (Carattoli *et al.*, 2005). Plasmids are known to carry genes code for detoxification, ecological interactions, virulence and antibiotic resistance. Plasmids can confer and mobilize resistance to antimicrobials by acquiring resistance genes via horizontal gene transfer and consequently increase the genetic diversity of bacteria.

Resistance genes in Enterobacteriaceae have different constraints for host ranges depending on the plasmids that carry them. It is supposed that genes carried on IncP, IncA/C and IncQ can move to genera of Enterobacteriaceae in addition to *Pseudomonas* and even Gram-positive bacteria due to their larger host range. Other plasmids such as IncFII have a limited host range restraining the transferability of antibiotic resistance genes located on these plasmids, for instance $bla_{\text{CTX-M-15}}$ does not have the ability to move to non-fermenters such

as *Acinetobacter* and *Pseudomonas* and only limited for Enterobacteriaceae (Carattoli, 2009; Smillie *et al.*, 2010).

1.7.2 Pathogenicity islands (Multi resistance in bacteria)

The multi-resistance genotype can reflect the occurrence of resistance islands that include a considerable number of resistance markers and are known as genomic islands (Schmidt & Hensel, 2004). Several bacterial species have shown that the multi-drug resistance phenotypes were mainly attributed to the incidence of resistance islands. These isolates include; *Shigella flexneri*, *S. enerica*, *Vibrio cholera* and *Staphylococcus aureus* with genomic islands sized 20 to 60 kb (Dobrindt *et al.*, 2004).

One of the first resistance islands to be fully characterised from genomic sequencing was that by Fournier et~al. that reported an 86kb island from A. baumannii. This strain, AYE, included 45 antibiotic resistance genes, 25 of which belong to β -lactams, aminoglycosides, fluoroquinolones, tetracyclines, trimethoprim, chloramphenicol, rifampicin and sulphonamides. Several antibiotic resistance genes were previously reported in Acinetobacter spp for instance bla_{OXA-10} and bla_{VEB-1} , aac3, aadA1/B and dhfr1, were also found in this island whereas some other resistance genes had not been reported in Acinetobacter species before such as aac6, tetA, cmlA, dfrX and bla_{OXA-69} . aac6 confers resistance to aminoglycosides except gentamicin, tetA is a tetracycline resistance gene, cmlA encodes the multidrug efflux pump Cmr/MdfA, dfrX confers resistance to trimethoprim and bla_{OXA-69} is a class D

β-lactamase found to weakly hydrolyse imipenem and meropenem (Figure 1.19). The island also showed the incidence of three class 1 integrons with 14 gene cassettes embedded within these integrons (Fournier *et al.*, 2006).

Transposons and insertion sequences were detected in the island and showed the occurrence of 22 ORFs encoding transposases, 4 transposons, 2 truncated transposons Tn5393 and Tn1721 and two Tn-like transposable elements. The occurrence of this massive number of antibiotic resistance markers, antiseptics and mercury resistance genes in one strain shows how complex the genetic pool can be. (Fournier *et al.*, 2006).

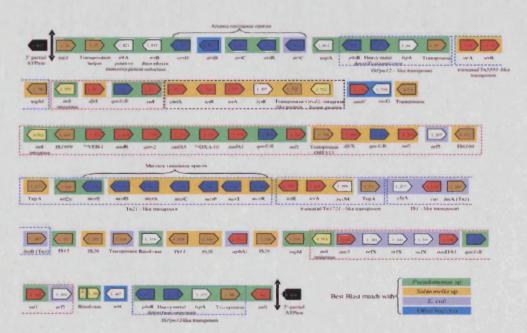


Figure 1.19 Genomic island of *A. baumannii* AYE according to (Fournier, PE. *et al.*, 2006)

1.7.3 Transposons

Some transposons contribute to the movement of antibiotic resistance genes as part of class 1 integrons. These transposons include the Tn3 family, the Tn5053 family and Tn402-like transposons. These families differ from each other in terms of structure and transposase genes carried by these transposons. The Tn3 family is composed of two subgroups; Tn3-like and Tn21-like transposons, they share the same 38bp Inverted Repeat IR, transposase gene (tnpA), a resolution site (res) and resolvase gene (tnpR). These transposons carry antibiotic resistance genes as part of class 1 integron, moreover, they carry mercury resistance genes and genes specific for transposition functions. Unlike the Tn3 family of transposons, the Tn5053 family and Tn402-like transposons are responsible for carrying and spreading antibiotic resistance genes captured by class 1 integrons. Two major steps have been proposed to elucidate the mechanism by which class 1 integron has become part of the Tn402-like transposons. The first step was by inserting the integron inside the Tn402-like transposons while the other step suggest the formation of the conserved segment (qacE\(\sigma \sigma uII \) followed by the loss of part of tni. (Toleman et al., 2007; Sajjad et al., 2011). Tn402-like differ from the Tn3 family in having three transposase genes; tniA, tniB, tniQ, the resolution site res is located between these genes and the resolvase gene tniR and sometimes called tniC gene. Tn402-like transposons are increasingly reported carrying antibiotic resistance genes in the form of gene cassettes embedded in class 1 integrons. (Partridge, 2011).

Transposons such as Tn5090/Tn402 carrying bla_{VIM-2} was detected in a clinical isolate of Indian *P. aeruginosa*. Sequencing of the full transposon, including the integron showed that this structure is very much like the American and Russian bla_{VIM-2} integron structures harbouring aacA7, bla_{VIM-2}, dhfrB5 and tniC. All three integrons had the same variable region structure and lacked the conserved segment considered a character of class 1 integrons harboured by TN5090/Tn402 transposons, resulting from excision and acquiring of gene cassettes. (Toleman et al., 2007).

1.7.4 Integrons:

Integrons are genetic elements found in most cases, plasmid mediated and recently some large integrons were detected on the chromosome. Integrons carried on plasmids are responsible for the incorporation of antibiotic resistance genes known as gene cassettes inside the integrons and as a result of this integration they enhance the expression of the gene conferring resistance to antimicrobials. (Walsh, 2006; Mazel, 2006). The first integron was detected in Gram-negative bacteria as a mechanism by which integrons in cooperation with transposons can express multi-resistance phenotype. Integrons are classified in two kinds; mobile integrons and superintegrons. Mobile integrons are always plasmid located and are divided into five classes; class 1 integrons originated from Tn402 and is found inserted in Tn21 (mazel, 2006). Class 1 integrons are largely associated with acquiring and mobilising antibiotic resistance genes and are counted as the main responsible system for such

occasion in Enterobacteriaceae. The wild-type class 1 Integron is composed of two sequences; 5 conserved sequence which is also known as (5'CS) and 3 conserved sequence (3'CS) where 5'CS represents the Intgrase gene and 3'CS comprises quaternary ammonium compound resistance gene (qacΔE1) and sulphonamide resistance gene (*sul*1), respectively. (Cambray *et al.*, 2010). This class of mobile integrons is responsible for conferring resistance to some β-lactams such as aminoglycosides, trimethoprim, rifamycin, erythromycin, streptothricin, chloramphenicol, fosofomycin, quinolones and antiseptics. The integrase (*Int*1) gene is the functional constituent of the integron; it encodes an enzyme called site-specific tyrosine recombinase and it operates to excise and integrate gene cassettes on the attachment site (*attC*). It is called recombination process (Walsh, 2006). The majority of gene cassettes are promoter-less and requires Pc promoter embedded on the integrase gene or att1 site. (Cambray *et al.*, 2010).

Class 2 Integrons are found embedded on large transposon called Tn7 and despite the fact that class 2 integrons encode for non-functional proteins due to a nonsense mutation in codon 179, they are likely to confer resistance to six antibiotics, whereas Class 3 integrons are less frequent than class 2 integrons. Class 4 and 5 are mainly related to trimethoprim resistance in *V. cholerae*. Super Integrons are larger than mobile Integrons and they have been described in *V. cholerae* and because of their location on the chromosome; alone, they

are not mobile and consequently are not capable of mobilising genes (Mazel, 2006).

Class 1 integrons in particular play an important role in disseminating carbapenemase encoding genes such as MBLs in addition to other antibiotic resistance determinants in Enterobacteriaceae and non-fermenters. The most virulent and crucial factors for high levels of resistance to carbapenems particularly MBLs were identified as carried on class 1 integrons, for instance; bla_{NDM-1} , bla_{VIM-2} , bla_{IMP} and bla_{DIM-1} (Poirel *et al.*, 2010; Yong *et al.*, 2009; Walsh *et al.*, 2005; Zhao *et al.*, 2009). Class 1 integron was also found to have contributed to dissemination of antibiotic resistance genes to unrelated clinical isolates in Brazil where it has been detected carrying bla_{IMP-1} and a new aminoglycoside resistance gene, aac(6)-31 in *P. putida*, different isolates of *A. baumannii* and *Acinetobacter* sp.(Mendes *et al.*, 2007)

Integrons have also been detected in bacterial strains collected from manured soil with increased prevalence of integrons after slurry application. Class 1 and 2 integrons were determined in *Acinetobacter*, *Aerococcus*, *Bacillus*, *Enterococcus*, *Pseudomonas* and Enterobacteriaceae (Byrne-Bailey *et al.*, 2011). Class 1 integrons were also identified in sewage treatment plants occurring at different levels in affluent water, activated sludge and effluent water. It has been shown that 57 isolates out of 189 isolates belonging to *E. coli*, *Klebsiella*, *Aeromonas salmonicida*, *A. veronii* and *A. media*, were identified carrying class 1 integrons (Ma *et al.*, 2011).

1.7.5 Insertion Sequence Common Regions (ISCRs)

Common Regions (CRs) have been discovered since the mid-1990s as being associated antibiotic resistance genes. It has a size of 2154 bp and incorporated an open reading frame, *orf513*, that was found inserted adjacent to class 1 integron and beside the *sul1* gene (Toleman *et al.*, 2006a). They comprise orf513 and 33 bp sequence of DNA and they argued that it might play a role in what is called recombination crossover site (RCS). Common regions can promote the expression of some resistance genes in *E. coli*, *K. pneumoniae* and *A. baumannii* and these genes are: *qnrA*, *bla*_{CTX-M-9}, *bla*_{CTX-M-2} and *dfr*A10 (Rodriguez-Martinez *et al.*, 2006).

Common Regions or Insertion Sequence Common Region (ISCR) have now become an established mechanism of gene movement. It is proposed that ISCR possess two ends, oriIS and terIS as insertion and termination sites of ISCR, respectively. These insertion sequences have been found as truncated parts at the right side of 3'CS of class 1 Integron and associated with two genes; qac and sul. Furthermore, this insertion sequence has been found without terIS – providing evidence that a deletion event occurred. Misreading of terIS and passing through many events of transcriptions and translocation resulted in the development of these "complex class 1 Integron", together with misreading and homologous recombination has resulted in genes qac and sul added to the end of 3'CS (Toleman et al., 2006a).

Many derivatives of ISCRs have been discovered and associated with the mobilisation of antibiotic resistance genes. These insertion elements were firstly described in In6 and In7 class 1 Integrons. ISCR1 can carry trimethoprim resistance genes such as dfrA23 and dfrA18, also they have been found to be associated with quinolones resistance (Stokes et al., 1989). ISCR1 has been detected upstream of qnrA in class 1 Integrons and virtually all isolated genes were identical in spite of their country of origin. ISCR1 plays a major role in the resistance of Gram-negative bacteria to aminoglycosides where it has been detected upstream of armA genes. Additionally, ISCR1 is associated with ESBLs that inhibit the activity of the antibiotic cefotaxime and class A β -lactamases such as bla_{VEB-3} , bla_{PER-3} , bla_{CMY-1} and bla_{CMY-9} . ISCR2 is also widely disseminated and associated with resistance islands such as SXT via orfA. Despite the fact that ISCR2 is not associated with class 1 integrons, it has been found associated with sul2 gene. ISCR3 seems to be more specific for Salmonella genomic island 1 genetic element (SGI 1 element) and erythromycin gene (erm). However, it has also been proposed that it is associated with the resistance of Stenotrophomonas maltophilia to trimethoprim/sulfamethoxazole. (Toleman et al., 2006b)

1.7.6 Insertion Sequences

Insertion sequences are considered as the simplest bacterial mobile DNA interms of their structure, they comprise more than 19 families, they have different sizes but in general they range between 600 to 3000 bp. They consist

of one or more open reading frame that code for transposase proteins flanked with short sequences of inverted repeates (Wagner *et al.*, 2007) IS*Ecp1B* is another paradigm of insertion sequences that is associated with mobilisation and expression of some antibiotic resistance genes. It is characterised by several features; it can express and mobilise as well as disseminate the cefotaxime resistance gene $bla_{CTX-M-19}$. Promoter sequences, which are located close to its inverted right repeat (IRR), can also facilitate expression of genes. IS*Ecp1B* has been found associated with $bla_{CTX-M-19}$ in a strain of *K. pneumoniae* resistant to ceftazidime (Poirel *et al.*, 2003). Lartigue and colleagues described the ability of IS*Ecp1B* to mobilise and express the β -lactamase gene, bla_{CTX-M} from a transposon, which was located on a chromosome of *Kluyvera* ascorbata and moved to a plasmid (Lartigue *et al.*, 2006).

1.7.6.1 Integrative and Conjugative Elements (ICE)

Integrative and conjugative elements (ICE) are mobile genetic elements known as self-transmissible and found in Gram-positive and negative bacteria. ICE can be transferred from one strain to another by conjugation and lateral gene transfer. Like plasmids and phages, ICEs compromise of three modules divided according to functions responsible for maintenance, dissemination and regulation. ICEs maintain their virtual inheritance by integrating into a replicon of the host either plasmid or chromosome by means of gene encoding a recombinase called Int that catalyze *attP* on the ICE and a target sequence

attB on the chromosome. ICE, on the circular form, can be integrated into the chromosome by recombination between attP and attB, creating two ICE chromosome junction sequences, aatL and attR. ICEs are excised by excisionases called Xis and require the presence of attL and attR to perform excision. Dissemination of single stranded DNA of ICE is carried out by conjugation, genes specific for synthesis of mating machinery to enable the initiation between donor and recipient cell to deliver DNA to the recipient cell. (Wozniak & Waldor, 2010; Burrus & Waldor, 2004).

1.8 Objectives of study

Libya is located in North Africa bordered by the Mediterranean Sea from the north, Egypt from the east, Sudan from the southern east, Chad and Niger from the south and Algeria and Tunisia from the west. Libya is considered a very rich country; it has one of the most important resources worldwide, oil. Compared with other Arabic, European and Asian countries, Libya should have been one of the best countries in terms of development, infrastructure, investments and education; however, the last 40 years obfuscation and perfidy have retarded this potential.

Given that there is little information known on antibiotic resistance in Gramnegative bacteria in Libya and North Africa, I took the opportunity to investigate the mechanisms of antibiotic resistance in Gram-negative bacterial isolates collected from clinical, non-clinical and environmental settings in Tripoli and Benghazi, Libya.

The study focuses on the characterisation of antibiotic resistance mechanisms of isolates collected from patients admitted to different wards, in particular Intensive Care Units (ICUs). Moreover this study investigates the spread of MDR bacteria in the hospital environment to understand the occurrence of outbreaks within an individual hospital or among different hospitals. The emergence of MDR bacteria in non-clinical samples was also investigated in this study in order to associate the spread of nosocomial pathogens among

patients, within the hospital and outside the clinical settings. This is the first molecular study conducted on antibiotic resistance on bacterial strains isolated from Libya and will hopefully provide a useful insight on the problem of antibiotic resistance in Libya and in general Arabia.

Chapter Two Methods and Materials

2.1 Bacterial collection.

Isolates used in this study were collected randomly from Tripoli and Benghazi from hospitals and environment outside the hospital during 2008-2009. Collection of the clinical samples included specimens from inpatients; outpatients and the hospital environment. Environmental swabs were collected from Tripoli and Benghazi streets, cafes etc. whereas the hospital environment samples refer to swabs collected from hospital floors, corners, toilets, walls, bedsides, sinks, curtains, trolleys, gauze containers, work tables and medical devices such as; mechanical ventilators, oxygen cylinders, baby incubators, nebulizers, anaesthesia, hypolizer, suction machine, tip of catheter. Bacterial isolates cultured from the swabs were identified by the use of Phoenix (Becton and Dickinson, USA). *E. coli* topo10 kit (Stratagene, Amsterdam, the Netherlands) was used in the cloning experiments. The swabs were transferred to the lab in transferring charcoal media (Technical Service Consultants Ltd, Heywood, UK).

2.1.1 Ethical considerations

The limited amount of information required for each specimen was such that ethical approval was not considered necessary and because there is no ethical board in Libyan hospitals.

2.2 Safety considerations

Regulations and safety were undertaken according to the Ionising Radiation Regulations, 1999.

2.3 Bacterial strains used

The following bacterial strains were used in cloning experiments

Strain	Genotype	Reference/Source
DH5α-T1 ^R	F ϕ 80lacZ Δ M15 Δ (lacZYA-argF)U19 recA1 endA1 hsdR17(r_k , m_k) phoA supE44 thi-1 gyrA19 relA1 tonA	Invitrogen Ltd
E. coli J53	-	Nordmann <i>et al.</i> , 2008
E. coli GFP	A modified <i>Escherichia coli</i> HB101 (UAB190) was used as the recipient strain [rifampicin and aminoglycoside resistant and green fluorescent protein (GFP) producing].	Mata <i>et al</i> ., 2011
Pseudomonas aeruginosa PA01	-	Barkay <i>et al.</i> , 1993

2.4 Chemicals, reagents, and Radioactive labels.

Chemicals were purchased from BDH Chemicals Ltd and Sigma. Media constituents were obtained from either Oxoid laboratories or Fisher Scientific

laboratories. Radiolabelled Phosphorus ³²P was supplied from PerkinElmer, Boston, MA02118, United State of America (USA), 800-762-4000, Random primer labelling kits were supplied from Agilent Stratagene products, USA. PCR Gel extraction kits and plasmid miniprep purification kits were supplied from QIAGEN GmbH, D-40724 Hilden, Lambda Ladder PFGE Marker was obtained from New England Biolabs.Inc. Digestive enzymes; *XbaI*, *S1* and *Spe1* were purchased from Fermentas Life Sciences company. PCR Master Mix was supplied from Thermo Fisher Scientific ABgene House, Blenheim Road, Epsom, Surrey, UK.

2.5 Growth Media.

2.5.1 Luria Bertani Broth

L.B. broth was made up according to the manufacturer's instructions (Fisher Scientific Ltd).

2.5.2 Luria Bertani Agar

L.B. Agar was made following the manufacturer's instructions (Fisher Scientific Ltd).

2.5.3 Mueller-Hinton Agar

MHA was supplied by Oxoid Ltd plate poured ready to use in Etest experiments

2.5.4 MacConkey Agar No.3

MA no.3 was used to distinguish phonotypically between *K. pneumoniae* and *E. coli* in conjugation experiments, the medium was made up according to the manufacturer's instructions (Oxoid Ltd).

2.5.5 MacConkey Agar

MA was purchased from Oxoid Ltd plate poured ready to use.

2.5.6 MacConkey Agar for isolation of ESBL/MBL positive isolates

MA was made up and supplemented with 10mg/l of ceftazidime to be used as selective media; preparation of media was carried out according to the manufacturer's instructions (Oxoid Ltd).

2.5.7 S.O.C Medium

This was used as part of the TOPO10 cloning kit purchased from Invitrogen, Life Technologies, Carlsbad, California, USA.

2.6 Sterilisation of Media.

Media was sterilised by autoclaving at 0.75kg cm⁻² for 20min at 121°C.

2.7 Isolation of environmental strains

Swabs collected from non-clinical settings and the environment outside the hospitals were cultured on MacConkey agar supplemented with 10mg/l of ceftazidime to select for isolates resistant to third generation cephalosporins.

Pure cultures were obtained by sub-culturing mixed cultures from the primary MA plates on a new selective MA plates supplemented with the same concentration of antibiotic.

2.8 Etest experiments

Etest strips containing imipenem (IP) and EDTA as MBL inhibitor (IPI) were purchased from. (BioMérieux, Paris, France). They were used to detect the occurrence of metallo-β-lactamases (MBLs) in carbapenem resistant isolates.

2.9 Antimicrobial Susceptibility Testing and MIC determination

Antibiotic resistance profile tests and minimum inhibitory concentration (MIC) determination for clinical, non-clinical and environmental isolates were performed according to the Clinical Laboratory standards Institute (CLSI) by the use of Phoenix 100 (Becton-Dickinson, Oxford, UK). MIC₅₀ and MIC₉₀ were defined as the minimal concentration that inhibited 50% and 90% of bacterial growth (Hsu *et al.*, 2011).

2.10 Phenotypic and Genotypic Detection of ESBLs

2.10.1 Amplification of DNA sequences using the Polymerase Chain Reaction (PCR)

2.10.1.1 Amplification of bla_{CTX-M} type ESBLs

K. pneumoniae and E. coli isolates were screened for the occurrence of $bla_{\text{CTX-M}}$ type ESBLs that belongs to the phylogenetic groups, 1, 2, 8, 9 and 26

using multiplex PCR primers (Table 2.1) targeting a unique region in each group. The PCR experiments were performed using a set of specific primers and PCR conditions as described by Woodford and co-workers in 2006, the PCR products were then run on 1% (w/v) agarose gel to study their number and size in accordance to each phylogenetic CTX-M group (Woodford *et al.*, 2006). Some of the PCR products were selected to represent the source of samples from Tripoli and Benghazi, the PCR products were then cut of the gel and purified using PCR purification kit (QIAGEN GmbH, D-40724 Hilden), the purified PCR products were sequenced by an automated sequencer (377, ABI, Perkin-Elmer, CT) using the same amplification primers for each group of CTX-M family.

The reaction conditions used in the Thermal Cycler were as follows:

72°C for 6min] 1 cycle

Table 2.1 Multiplex PCR for CTX-M- groups 1,2,8,9 and 26

CTX-M group	1 group DNA sequence		
Group 1	- L		
CTX-M-1 F	5-AAA AAT CAC TGC GCC		
	AGTTC-3	415	
CTX-M-1 R	5-AGC TTA TTC ATC GCC ACG TT		
Group 2			
CTX-M-2 F	5-CGACGCTAC CCCTGC TAT T-3	552	
CTX-M-2 R	5-CCAGCGTCAGATTTT TCA GG-3		
Group 8	. 1		
CTX-M-8 F	5-TCG CGT TAA GCG GAT GAT		
	GC-3	666	
CTX-M-8 R	5-AAC CCA CGA TGT GGG TAG C-		
	3		
Group 9			
CTX-M-9 F	5-CAA AGA GAG TGC AACGGA		
	TG-3	205	
CTX-M-9 R	5-ATT GGA AAG CGT TCA TCA		
	CC-3		
Group 26	1		
CTX-M-26 F	5-GCA CGA TGA CAT TCG GG-3		
CTX-M-26 R	5-AAC CCA CGA TGT GGG TAG C-	327	
	3		

2.10.1.2 Detection of bla_{CTX-M} group 1 and ISEcp1 genes

E. coli and K. pneumoniae isolates positive for CTX-M group 1 were subjected to PCR experiments to examine the incidence of bla_{CTX-M-15} encoding genes and the insertion sequence ISEcp1 gene that is located immediately upstream of the β-lactamase gene. Specific primers were designed to read and amplify the bla_{CTX-M} group 1 alone and in association with the ISEcp1 (see appendix Table A.2), PCR conditions used were as follows; 1 cycle of heating at 94°C for 5min followed by 30 cycles of heating at 94°C for 25s, 52°C for 40s and 72°C for 1min, the reaction ended with 1 cycle of heating at 72°C for 6 min, for amplification of bla_{CTX-M} group 1. The same PCR conditions were used to detect bla_{CTX-M} group 1 in association with ISEcp1 with extended annealing time to 90s. Positive controls were not used as some PCR products were sequenced. When required, new primers were designed using primer designer version 1.01, scientific and educational software.

2.10.1.3 Amplification of bla_{TEM} and bla_{SHV}, blaAmpC, class 1 integrons and transposons

K. pneumoniae and E. coli isolates that were confirmed for ESBLs production were further examined for the occurrence of TEM, SHV, bla_{ampC} , class 1 integrons transposons Tn402 and Tn21 genes by PCR using specific primers (see appendix Table A.2). The same conditions applied for $bla_{CTX-M-15}$

amplification were used in these experiments. The alleles were cut, purified and sequenced as previously described.

2.10.2 Phenotypic detection of MBLs

Carbapenem susceptibility of the positive isolates to MBLs was performed using Etest strips (AB BioMerieux, La Plane, France) and the results were interpreted in accordance with the manufacturer's guidelines. PCR was also conducted to study the occurrence of bla_{SPM-1} , bla_{VIM} , bla_{GIM} , bla_{NDM-1} , bla_{IMP} , bla_{SIM-1} , bla_{KHM-1} , bla_{AIM-1} and bla_{DIM-1} . The PCR conditions used to amplify class 1 integron(s) were the same as described in section 2.9.1.1 and for primers used (see appendix Table A.3) with a slight modification where the annealing temperature in these conditions was 53°C and the elongation temperature was 68°C. All the PCR products were run on 1% (w/v) of agarose gel and the gels were then photographed. The resultant PCR products were purified from the agarose gel and sequenced using an automated sequencer (377, AB, Perkin-Elmer, CT).

2.11 Detection of blaoxA-48 and IS1999

PCR experiments were performed on K. pneumoniae isolates to detect the occurrence of $bla_{\rm OXA-48}$ and the insertion sequence IS1999 using specific primers targeting the forward and reverse side of both genes (Table 2.2). PCR products were run in 1% of (w/v) agarose gel in TBE buffer, the electrophoresed gels were photographed.

Table 2.2 Oligonucleotide sequences to detect bla_{OXA-48} and IS1999

Gene target	Primer name	Sequence	Reference
OXA-48 A	blaOXA-48	5' TTG GTG GCA TCG ATT ATC GG '3	Poirel, L. et al., 2004
OXA-48 B	blaOXA-48	5' GAG CAC TTC TTT TGT GAT GGC '3	Poirel, L. et al., 2004
IS1999 A	IS1999	5' CAG CAA TTC TTT CTC CGT G '3	Poirel, L. et al., 2004
IS1999 B	<i>IS</i> 1999	5' CAA GCA CAA CAT CAA GCG C '3	Poirel, L. et al., 2004

2.12 Random amplified polymorphic DNA (RAPD) typing

2.12.1 RAPD DNA extraction by Chelex prep

It is a PCR-based technique used to differentiate between bacterial species by using short primers (Table 2.3) to anneal various locations of the bacterial DNA. A 24 h growth of *K. pneumoniae* isolates plated on MacConkey agar were used without selection and bacterial colonies were picked from the plate by inserting a sterile 200 µl plastic pipette tip into the colonies and dipped into 50 µl of an autoclaved solution of 5% Chelex® 100 resin (Biorad, Hertfordshire, UK).

To resuspend the mixture in the tube, it was agitated briefly. DNA extraction was carried out twice by heating the mixture to 89° C for 5 minutes on a heated block; the samples were immediately transferred to a 4° C chilled block. To sediment the chelex resin and cell debris, the samples were centrifuged for 5 minutes at 13.000 g and 2 μ l of the clear supernatant was used as a template DNA to run the PCR.

2.12.2 Random amplified polymorphic DNA (RAPD-PCR)

RAPD-PCR fingerprinting was performed on 80 isolates of *K. pneumoniae* (12 isolates per reaction) as described by Mahenthiralingam *et al.*, 1996. RAPD-PCR was conducted using primer 272 (table2.3) for all reactions. For confirmatory purposes; RAPD-PCR using primer 270 (table 2.3) was carried out on subsets of *K. pneumoniae* isolates. PCR master mix was prepared prior to each experiment (1X PCR buffer, 1X Q-solution, 3mM MgCl₂, 200 μM dNTPs mixture, 1.6 μM RAPD primer, 1 U of Taq polymerase and 2μl of Chelex template DNA. PCR was run on a Flexigene Thermal Cycler (Techne Ltd., Newcastle, UK) using the following PCR conditions; 5 minutes of heating at 94°C, 4 cycles at 36°C for 5minutes, 72°C for 5 minutes and 94°C for 1 minute, 36°C for 1 minute.

2.12.3 DNA profile analysis by Agilent Bioanalyzer

1 μl of each PCR product was run for 20 minutes on an Agilent Bioanalyzer 2100 (Agilent Technologies UK Limited, Cheshire, UK) and a DNA 7500 chip contained 13 wells was used; 12 wells filled with samples, 1 μl in each and one filled with the ladder marker. The wells were also loaded with DNA gel matrix and an internal marker according to the manufacturer's protocol. After each run the results were saved as csv files.

2.12.4 GelCompar analysis

All csv-files were converted to a format compatible to GelCompar, similarities between fingerprints were calculated to the Pearson coefficient and unweighted pair group method with arithmetic means (UPGMA) was used to construct the dendrogram.

2.13 Multilocus sequence typing (MLST)

A subset of *K. pneumoniae* isolates were selected according to the RAPD-PCR fingerprinting results and MLST analysis was carried out as described by Diancourt *et al.*, 2005 and the MLST website (http://www.pasteur.fr/recherché/genopole/PF8/mlst/Kpneumoniae.html) developed by Jolley *et al.*, 2004. Specific primers were used (Table 2.3) to amplify fragments of the following 7 housekeeping genes; β-subunit of RNA polymerase (*rpoB*), glyceraldehyde 3-phosphate dehydrogenase (*gapA*), malate dehydrogenase

(mdh), phosphoglucose isomerase (pgi), phosphorine E (phoE), translation initiation factor 2 (nfB) and periplasmic energy transducer (tonB).

The PCR conditions used for rpoB, mdh, pgi, phoE and nfB were as follows

94°C for 5min] 1 cycle
94°C for 5min	٦
50°C for 30s	30 cycles
68°C for 1min	7
68°C for 10min	l 1 cvcle

The same PCR conditions were used for *gapA* and *tnoB* apart of the annealing temperature which was 50°C for *gapA* and 60°C for *tnoB*. All PCR products were run on 1% (w/v) Agarose gel and the gels were photographed. All PCR products were sequenced using an automated sequencer (377, ABI, Perkin-Elmer, CT) and the same amplification primers apart of *inf* forward primer which was replaced with (5'- ACT AAG GTT GCC TCC GGC GAA GC -3') and *pgi* primers were replaced with pgi2F; (5'- CTG CTG GCG CTG ATC GGC AT -3') and pgi 2R (5'- TTA TAG CGG TTA ATC AGG CCG T-3').

Table 2.3. Oligonucleotides used for PCR amplification and DNA sequencing

D:	Reference
Primer sequence	Reference
5'-GGCGAAATGGCWGAGAACCA-3'	Diancourt et al., 2005
5'-GAGTCTTCGAAGTTGTAACC-3'	Diancourt et al., 2005
5'-TGAAATATGACTCCACTCACGG-3'	Diancourt et al., 2005
5'-CTTCAGAAGCGGCTTTGATGGCTT-3'	Diancourt et al., 2005
5'-CCCAACTCGCTTCAGGTTCAG-3'	Diancourt et al., 2005
5'-CCGTTTTTCCCCAGCAGCAG-3'	Diancourt et al., 2005
5'-GAGAAAAACCTGCCTGTACTGCTGGC-3'	Diancourt et al., 2005
5'-CGCGCCACGCTTTATAGCGGTTAAT-3'	Diancourt et al., 2005
5'-ACCTACCGCAACACCGACTTCTTCGG-3'	Diancourt et al., 2005
5'-TGATCAGAACTGGTAGGTGAT-3'	Diancourt et al., 2005
5'-CTCGCTGCTGGACTATATTCG-3'	Diancourt et al., 2005
5'-CGCTTTCAGCTCAAGAACTTC-3'	Diancourt et al., 2005
5'-CTTTATACCTCGGTACATCAGGTT-3'	Diancourt et al., 2005
5'-ATTCGCCGGCTGRGCRGAGAG-3'	Diancourt et al., 2005
5' GCCTGTTCGGTTCGTAAGCT 3'	
3 decidifeddifedifulder 3	
	Mahenthiralingam et al.,
5'- AGC GGG CCA A -3'	1996
	.,,,,
	Mahenthiralingam et al.,
5'- TGC GCG CGG G -3'	1996
	.,,,,
	5'-GAGTCTTCGAAGTTGTAACC-3' 5'-TGAAATATGACTCCACTCACGG-3' 5'-CTTCAGAAGCGGCTTTGATGGCTT-3' 5'-CCCAACTCGCTTCAGGTTCAG-3' 5'-CCGTTTTTCCCCAGCAGCAGCAG-3' 5'-GAGAAAAACCTGCCTGTACTGCTGGC-3' 5'-CGCGCCACGCTTTATAGCGGTTAAT-3' 5'-ACCTACCGCAACACCGACTTCTTCGG-3' 5'-TGATCAGAACTGGTAGGTGAT-3' 5'-CTCGCTGCTGGACTATATTCG-3' 5'-CTCTTCAGCTCAAGAACTTC-3' 5'-CTTTATACCTCGGTACATCAGGTT-3' 5'-ATTCGCCGGCTGRGCRGAGAG-3' 5'-AGC GGG CCA A -3'

2.14 Plasmid identification

Plasmids are circular extra-chromosomal DNA; they are known to play a role in changing the diversity of the bacterial genome by acquiring or losing genes such as antibiotic resistance genes, subsequently contribute to the movement and transfer of resistance mechanisms from bacteria to bacteria by means of horizontal gene transfer (Carattoli, A. *et al.*, 2005). PCR-based replicons typing was performed to identify plasmids contributed to the dissemination of ESBL and MBL genes among Libyan isolates using 5 multiplex and 3 simplex PCR experiments as described by Carattoli, A. *et al.*, 2005. This procedure is used to identify the major plasmids that are known as incompatible plasmids by recognizing FIA, FIB, FIC, HI1, HI2, I1, Iγ, L/M, N, P, W, T, A/C, K, B/O, X, Y, F and FIIA using eighteen pairs of primers designed to be conducted on 8 PCRs. The 5 multiplex PCRs are designed to recognize three plasmids for each reaction (see appendix Table A.4). Positive controls were used to comaper size of plasmids. The PCR conditions used to detect all plasmids apart of F simplex were as follows

94°C for 5min] 1 cycle
94°C for 1min 7
60°C for 30s | 30 cycles

72°C for 1min

72°C for 5min] 1 cycle

Whereas the conditions of F simplex PCR were almost the same with only one difference as the annealing temperature was changed to 52°C.

2.15 Transconjugation experiments

Conjugation experiments were carried using *E. coli* J53 and GFP as recipients. Fresh colonies of parents and recipients were grown separately on LB broth media (Fisher Scientific, USA Products) in 50 ml Falcon tubes and incubated overnight at 37°C for 18 h. Each isolate of parents was mated with E. coli J53 or GFP E. coli in aliquots of 1:1 in a fresh LB broth media and incubated overnight at 37°C in shaking incubator. Transconjugants were selected by culturing 100 ul of each mating mixture on LB medium (Fisher Scientific, USA Products) supplemented with 200 µl/ml of sodium azide and 10 mg/l of ceftazidime. Parents that were mated with GFP E. coli, the selection was performed on L.B agar supplemented with 50mg/l of rifampicin and 10mg/l of ceftazidime. The plates were subsequently incubated overnight at 37°C for 18 h. Pure colonies of E. coli from each plate were picked and transferred to a fresh LB broth media supplemented with 200 µl/ml of sodium azide and 10 mg/l of ceftazidime for E. coli J53 transconjugants and with 50mg/l of rifampicin and 10mg/l of ceftazidime for GFP E. coli transconjugants. The transconjugants were then plated on LB media supplemented with the same concentrations of antibiotics used for parents and incubated overnight at 37°C for 18 h. The transconjugants that were grown on LB media were stored at -80 °C for further investigation. PCR experiments were performed on transconjugants targeting bla_{CTX-M} group 1 encoding genes and ISEcp1 for K. pneumoniae and E. coli using the forward and reverse primers from table (1).

2.16 Southern hybridisation

2.16.1 Characterization of chromosomally and plasmid mediated resistance genes.

2.16.1.1 Preparation of plugs of whole genomic bacteria DNA

Whole genomic DNA of the bacteria was used to prepare plugs to detect chromosomally and plasmid mediated genes. Bacterial cultures were grown overnight at 37°C. One loop of the fresh colonies of each isolate was suspended in 3 ml of normal saline and the optical density $600 \text{ (OD}_{600})$ of each isolate was measured and the formula (1.5/measured OD Multiplied by 300) to adjust the volume of cells to the equivalent of 300 µl in accordance to the OD₆₀₀. The suspended cells were then centrifuged at 13 Kg using minicentrifuge (Minispin centrifuge, Hamburg, Germany) for 30s and the supernatant removed. Cells were then re-suspended in 300 µl of normal saline and transferred to a 50°C block heater. Cells were lysed by adding 2-3 drops of 25 mg/ml of lysozyme and a 2.5 % (w/v) of pre-warmed (50°C) low melting point agarose was quickly pipetted and gently mixed and quickly dispensed into PFGE plugs components and dried at room temperature for 30 min. 5 plugs of each set were then transferred into a 24 well plate and 2 ml of lysis buffer (10 mM Tris-Hcl, pH 7.2, 50 mM NaCl, 0.2% sodium deoxycholate, 0.5% N-Lauroylsarcosine) was added and supplemented with 80 µl of 25mg/l

of lysozyme. The plugs were then incubated at 37 °C for 1.5 hrs. The plugs at this stage were washed with 2 mls of 1X TE buffer (10 mM Tris-HCl, 50 mM EDTA pH 8.0; Bio-Rad) at 37°C for 30 mins. The TE was replaced with 2 mls of proteolysis buffer (100 mM EDTA pH 8.0, 0.2% sodium deoxycholate, 1% and N-Lauroylsarcosine; Bio-Rad) 20 µl of 10 mg/l of Proteinase K and incubated at 50°C for 18 hrs. After the proteolysis buffer was removed, the plugs were then washed five times with 1X TE buffer in shaking incubator at 37°C for 30 mins.

One plug of each set was transferred to a new 24 well plate and washed with 0.1 X TE buffer at 37 °C for 30 mins. The plugs were then washed twice with 2X S1 buffer at room temperature for 15 mins each. The 2X S1 buffer was removed and replaced with 1X S1 buffer and washing was performed at room temperature for 15 min. The S1 buffer was then removed and 1 µl of 20U of S1 endonuclease (Promega, USA) was added and the plugs were incubated at 37°C for 45 min. 100 µl of ES buffer (0.5 M EDTA, pH 8; 1% N-Lauroylsarcosine) was added to stop the digestion. PFGE gels were prepared; 0.88% (w/v) agarose in 0.5 X of TBE buffer (45mM Tris-base, 45 mM boric acid, 1 mM EDTA, pH 8.0; Bio-Rad) and 20 µl of ethidium bromide was added to stain the gels. Plugs were loaded into the gels and the gels were run in the PFGE tank (CHEF-DRIII system, Bio-Rad laboratories). Migration of DNA was performed at 9°C with initial switch time of 5 and final switch time of 45 for 20 hrs at 6 volts and 120 ° angle. Lambda Ladder was used as a DNA size marker.

2.16.2 Pulsed Field Gel Electrophoresis (PFGE) Typing

Plugs of the whole genomic DNA of the target bacterium was prepared as for Spe1 digests described by Patzer & Dzierzanowska, 2007. Each plug was washed with 0.01 x of TE buffer shaking at 37°C for 30 min, followed by washing twice with 300 µl of 2x of Xba1 fast digestive buffer (Fermentas, Sheriff Hutton Industrial Park, York, UK) for 15 min at room temperature and once with 300 µl 1x of Xba1 fast digestive buffer for 15 min. The DNA in plugs was then digested with 3.5 µl of Xba1 overnight at 37°C for K. pneumoniae and E. coli. The same steps were performed on plugs made of whole genomic DNA from P. aeruginosa but washed with Spe1 buffer and digested with 1 µl of Spe1 enzyme. Separation of Xba1 and Spe1 digested DNA was performed by using PFGE apparatus (CHEF-DRIII system, Bio-Rad laboratories) and DNA migration was conducted using the following conditions; initial switch time at 5s and final switch time at 45s, 6V/cm and 120° angle for 20h with cooling at 9°C, using TBE buffer (0.5x Tris borate, 0.5mM EDTA), Lambda ladder DNA was used as a marker to size DNA. The interpretation of similarities between bacterial species was performed as described by (Tenover et al., 1995). The resultant PFGE Gels were photographed and dried overnight on a Whatman filter paper (15 cm * 15 cm) blotting paper, the gels were then re-hydrated, denatured using a denaturing buffer (0.5M NaOH, 1.5M NaCl) for 30 min at room temperature, neutralized using a neutralizing solution (0.5M Tris-HCl, pH 7.5, 1.5M NaCl) for 30 min

at room temperature. The gels were then transferred to a hybridization tube contains pre-hybridization solution at 65°C and probed with a ³²P radio-labelled CTX-M-15 template DNA and CTX-M-15/IS*Ecp1* for *K. pneumoniae* and *E. coli* and the *P. aeruginosa* PFGE gels were probed with a ³²P radio-labelled VIM-2 as described by Patzer *et al.*, 2009.

2.16.3 Colony Blotting.

Colony blotting experiments were carried out by using a modification of the procedure of (Ivanov & Gigova, 1989). MacConkey agar plates were spotted with the isolates of interest and incubated overnight at 37°C for 18 h. MacConkey agar plates with bacterial isolates were photographed using digital camera and then overlaid with a circular membrane (HybondTM, Amersham Pharmacia, UK), for at least 2 min, so the bacterial isolates will have been transferred to it. The membranes were then removed by a sterile forceps and placed colony side up on a presoaked 15cm² Whatman blotting paper (Whatman inc. Sigma-Aldrich, Sanford, UK) with 5% of SDS (sodium dodicyl sulphate) for 5 min at room temperature. The membranes were then carefully transferred to a 15cm² Whatman blotting paper to remove any excess moisture, the membranes were then placed colony side up on 15cm² Whatman blotting paper presoaked with denaturing solution (1.5 NaCl, 0.5 M NaOH) for 5 min.

The membranes were then carefully removed and dabbed dry on 15cm² Whatman blotting paper and transferred and floated colony side up in

neutralizing solution (157 g. Tris-HCl, 174 g. NaCl in 2L of H2O pH 7.5) for 5 min. The cellular debris was then carefully removed and washed with 6X SSC (6 ml of 20X SSC in 20 mls of demonized water) and dabbed dry. The membranes were then dried at 80°C for at least 3h to fix the DNA to the membrane filters. The membrane filters were then transferred to hybridization tube provided with hybridization solution (6X SSC, 0.1 % (W/V) polyvinylpyrrolidine (PVP), 1 ml of 0.5 % (W/V) SDS, 400 µl of 0.1% (W/V) ficoll, 400 µl of Milk and 300 µl of 150 µg/ml⁻¹ denatured spermatozoid DNA). The hybridization tube was then incubated at 65°C prior to probing with gene of interest.

2.16.4 In gel hybridization

The resultant PFGE gels were photographed and dried at 50°C for 18 hrs, the gels were then hybridized as follows; rehydrated in DNA free water for 30 mins at room temperature, the DNA in gel was denatured for 30 mins using denaturing solution (NaCl, 0.5 M NaOH) and neutralized by neutralizing solution (Tris-HCl, NaCl) for 30 mins. The gels were then transferred to hybridization tubes with pre-hybridization solution (6X SSC, 0.1% (W/V) polyvinylpyrrolidine (PVP), 1 ml of 0.5% (W/V) SDS, 400 μl of 0.1% (W/V) ficoll, 400 μl of Milk and 300 μl of 150 μg/ml⁻¹ denatured spermatozoid DNA) and incubated at 65°C overnight. The hybridized gels were subsequently probed. Gels were then washed twice, once with 2X SSC (Sodium Citrate), 0.1% (W/V) SDS and once with 0.1 X SSC, 0.1% (W/V)

SDS. The gels were then wraped in cling film and transferred to a cassette and a HyperfilmTM (Amersham, GE Healthcare, Life Sciences) was firmly pressed on the gel and frozen at -80°C for 18 hrs. Developer and fixer were used to detect the appearance of any radio labeled spot on the Hyperfilm.

2.16.5 Labelling DNA Probes

To produce high specific activity probes, labeled DNA was generated using random oligonucleotides, and anneal to specific sites on the DNA template. The Klenow will use the primer-template complex as a substrate and synthesize a new DNA by incorporating monophosphates at the free 3'-OH group. Radio-labeling is performed by exchanging the nonradioactive with the radioactive in the reaction mixture. The radio-labeled gene will then serve as a sensitive hybridization probe, it is used in southern and northern blots and in Situ hybridization techniques. The genes of interest (bla_{CTX-M-15} alone and in association with ISEcp1, bla_{VIM-2}, tniC, bla_{TEM}, bla_{SHV}, ISCR2 and bla_{TMB-1}) were amplified by PCR using specific primers targeting the forward and reverse regions of the gene to be used as a template DNA to probe the hybridized membranes. 15 µl of the template DNA was mixed with 8 µl of DNA free water and 10 µl of random 9-mer primers (Agilent Technologies – Stratagene – USA Products) were added in a screw capped Eppendorf tube. The mixture was firstly boiled in a water bath for 5 min and immediately 10 µl of 5X dCTP buffer, 2,5 µl of the radioactive phosphorus ³²P and 1 µl of Exo(-) Klenow (Agilent Technologies - Stratagene - USA Products) were added to

the mixture and transferred to a jar made of lead and incubated at 37°C for 15 min to allow the production of the radio-labeled template DNA. The radio-labeled product was then pipetted into a silica gel column (NickTM columns Sephadix, G-50 DNA Grade, illustra, GE Healthcare, Life Science, UK). The column was then washed with 320 µl of washing buffer (0.1 M Tris-Hcl Buffer, PH 7.5) followed with 430 µl of the same washing buffer to an Eppendorf tube to elute the radio-labelled gene purified. The radio-labeled PCR product was then boiled in a water bath for 6 min to denature the double stranded template DNA, the probe was then added to the previously incubated membranes or gels (see sections 2.15.3 and 2.15.4) in the hybridization tube and incubated over night at 65°C.

2.17 Cloning Experiments

Cloning experiments were performed on an *A. xylosoxidans* isolate trying to obtain the full sequence of the new MBL gene. The cloning experiments were carried out by chemical transformation (Blue/White) screening test by using the plasmid vector (pCR®4-TOPO®) and *E. coli* 5DH α supplied by TOPO10 cloning kit supplied by (Invitrogen Ltd, Inchinnan Business Park, 3 Fountain Drive, Paisley, UK). The 3kb PCR products were amplified from the A. *xylosoxidans* and purified before using it in the cloning experiments. TOPO cloning reaction was performed by mixing the 3kb class 1 integron, salt solution (1.2 M NaCl 0.06 M MgCl2) and TOPO vector at room temperature and then kept on ice. To perform transformation, 2 μ l of the reaction was then transferred into a vial containing chemically-competent *E. coli* and incubated

on ice for 30 minutes. The *E. coli* was heat shocked at 42°C for 30s without shaking and immediately returned to ice and 250 μl of S.O.C broth medium then added and incubated at 37°C for 1h. A total of 50μl of the broth culture was streaked on L.B. Agar (Fisher Scientific, USA products) plates supplemented with 50 mg/l of kanamycin, X-galactose and isopropyl-β-D-thiogalactoside (IPTG) and then incubated at 37°C for 18h. The white colonies were picked up and grown overnight in L.B broth, the TOPO vector was then extracted from the cells by miniprep kit and sequenced using the primers M13 forward and reverse.

2.18 Purification of TMB-1

2.18.1 Expression

TMB-1 was purified directly from the *A. xylosoxidans* isolate grown overnight at 37°C in flasks containing 4x 50ml of Terrific broth (Sigma, St. Louis, MO, USA) supplemented with 50mcg/ml of kanamycin, the cultures were then incubated shaking at 37°C. Each flask was inoculated with 4x 1L of Terrific broth with 50ug/ml of kanamycin and flasks incubated at 37°C and 225 rpm. The production of the protein was induced by IPTG (final concentration 0.1mM) when O.D₆₀₀ is between 0.6-0.7. Cells were centrifuged at 7000 g for 10 min at 4°C. The expression of protein was confirmed using Sodium SDS-Page.

2.18.2 Periplasm isolation

To perform large scale protein preparations of periplasmic cellular extracts, it was necessary to treat cells with lysozyme. The methods used were that of Avison *et al.*, 2011 and Samuelsen *et al.*, 2008. The cell pellets were resuspended in buffer (50mM Tris-HCl, 100uM ZnCl2, 0.02% NaN3 pH 7.2). The lysozyme was then added to a concentration of 200μg/ml. The suspension was then incubated rotating at room temperature for 15-20 min. CaCl2 was then added to a concentration of 10mM, the suspension was then centrifuged at 9000xg or 18000 rpm for 20 min. at 4°C.

2.18.3 Purification of β-lactamase from crude periplasmic cell extract

The crude cell extract was loaded on to 50 ml Q-Sepharose column (Q-Sepharose HP column, Pharmacia, GE Healthcare, UK) that was previously pre-equilibrated with 100 ml of buffer (buffer (50mM Tris-HCl, 100uM ZnCl2, 0.02% NaN3 pH 7.2). The protein was then loaded and eluted using 400 ml NaCl gradient. The eluted fractions were collected and checked for β -lactamase activity using Nitrocefin. Purity of fractions that showed β -lactamase was performed on SDS-PAGE (2-14% NuPAGE Bis-Tris mini gels).

2.18.4 Gel-filtration

Column was pre-equilibrated with two column volume of washing buffer (see section 2.18.2), the protein was loaded through a super loop (flow 1ml/min) and then wash or elute the protein with (100-300) of washing buffer. Fraction were then collected and checked for β-lactamase using Nitrocefin, the active fractions were run on SDS-PAGE and stored at 4°C. TMB-1 was analysed using nitrocefin +/- EDTA and SDS-PAGE. TMB-1 was concentrated to 1.94mg/ml.

2.19 Kinetics assay:

Steady-state kinetics was performed at 25°C in a spectrophotometer (SpectramaxPlus, Molecular Devices) using 96 well plates (BD Falcon UV microplates, BD Biosciences, USA) (Samuelsen *et al.*, 2008). All substrates (ceftazidime, cefoxitin, cefuroxime, piperacillin, ampicillin, imipenem, meropenem and ertapenem) were tested as duplicates using 50mM HEPES pH 7.2, 100μM ZnCl₂, 0.02% NaN₃, and 0.1mg/ml bovine serum albumin (Sigma-Aldrich) as a buffer system. The kinetic data were analysed by non-linear regression (GraphPad Software, San Diego, CA).

Chapter Three Characterization of Multi-drug resistant *Klebsiella pneumoniae* from Tripoli & Benghazi, Libya

3.1 Introduction

K. pneumoniae can be isolated from a variety of different sites, locations and environments such as, water and soil, or from hospitalised patients or from animals. Such variation in habitats provides K. pneumoniae with the opportunity to spread quickly and as a consequence it can cause infections (Podschun & Ullmann, 1998). Infections due to MDR strains of K. pneumoniae have been reported world-wide in neonatal wards, ICUs, paediatric hospitals (Podschun & Ullmann, 1998; Bagattini et al., 2006), UTIs and lower respiratory tract infections (Gori et al., 1996; Podschun & Ullmann, 1998; Cartelle et al., 2004; Valverde et al., 2008; Kiratisin, 2008). It is increasingly reported year on year (Grobner et al., 2009; Lim et al., 2009) and thus represents a major clinical threat particularly for immunocompromised patients (Oteobet al., 2009).

The frequent use of extended-spectrum cephalosporins, particularly in ICUs is considered a leading factors contributing to epidemic and endemic outbreaks of nosocomial infection as a result of the emergence of MDR Gram-negative pathogens producing ESBLs (Gori *et al.*, 1996; Valverde *et al.*, 2008). ESBLs are the most prevalent enzymes produced by multi-resistant strains of K. *pneumoniae* and are capable of hydrolysing most β -lactams particularly third and fourth generations cephalosporins (Wei *et al.*, 2005).

Nosocomial infections caused by ESBLs producing K. pneumoniae have become a major problem in the United States, Europe, Asia (Livermore, 2009), Africa (Gori et al., 1996), Brazil and Spain (Rodriguez-Bano et al., 2010). ESBLs are often carried on plasmids of different sizes and types reflecting the frequency and epidemiology of these enzymes (Gori et al., 1996). CTX-M-type ESBLs are encoded by genes carried on plasmids of different types such as; IncF1, IncFII, IncH12 and IncI which are classified as narrow host-range types of plasmids and known to mobilize bla_{CTX-M-15} and ISEcp1. Furthermore, IncN, IncP-1-a, IncL,/M as well as Inc A/C are broad host-range plasmids and effective as transmissible elements and play important roles in the dissemination of bla_{CTX-M-15} genes (Pitout, 2010; Carattoli, 2009). Such replicons can act as major vehicles for the horizontal transfer of genes responsible for antibiotic resistance that cause CAIs and HAIs (Colinon et al., 2007). CTX-M type extended spectrum-β-lactamases are considered the most prevalent ESBLs among E. coli and K. pneumoniae. These enzymes have originally been derived from chromosomal β-lactamase from Kluyvera spp. (Dedeic-Ljubovic et al., 2010).

bla_{CTX-M-15} is one of the most important enzymes of the 120 variants of CTX-M type ESBLs found to date (http://www.lahey.org/Studies/other.asp#table1) and was first discovered in India, France and Japan in the 1980s and recently worldwide (Yu et al., 2004; Lartigue et al., 2007; Touati et al., 2006; Abbassi et al., 2008; Gonullu et al., 2008; Walsh, 2006). bla_{CTX-M-15} has a broader

substrate profile than many other CTX-Ms due to mutations around the active site (Pitout, 2010). Several reports have mentioned the occurrence of $bla_{\text{CTX-M-}}$ associated with the insertion sequence ISEcp1 located upstream of the CTX-M gene in E.~coli and K.~pneumoniae from Nigeria, Norway, Tunisia, UK and France (Touati et~al., 2006; Abbassi et~al., 2008; Eckert et~al., 2006; Kiratisin et~al., 2008; Ben Salma et~al., 2011; Younes et~al., 2011).

bla_{CTX-M-15} has also been detected in the Mediterranean area, the Middle East and the Arab Gulf region. The CTX-M-15 gene has been found in clinical isolates of *E. coli* from Cairo, Egypt and associated with the insertion sequence, IS*Ecp1* (Khalaf et al., 2008). *K. pneumoniae* and *E. coli* harbouring bla_{CTX-M-15} were found disseminated in neonatal wards and ICUs in Saudi Arabia (Al-agamy et al., 2009), Algeria (Ramadani-Bouguessa et al., 2006) and Kuwait (Dashti et al., 2010). Similarly, bla_{CTX-M-15} was found plasmid mediated in clinical isolates of *E. coli* collected from Egypt (Mohamed Al-Agamy et al., 2006).

This chapter describes the emergence of MDR *K. pneumoniae* isolates from clinical settings (patients and hospital environment) and non-hospital environmental isolates. The phenotypic characteristics and the antibiotic resistance profile of 80 *K. pneumoniae* isolates are determined and discussed.

3.2 Results

3.2.1 Antimicrobial susceptibility testing

K. pneumoniae isolates collected are listed in table 3.1. The MIC₅₀, MIC₉₀ and MIC ranges of 80 isolates of clinical, hospital environment and non-hospital environment K. pneumoniae are presented in table 3.2. These results show that MIC₅₀ and MIC₉₀ of ceftazidime was higher that of cefotaxime. The highest MIC₅₀ and MIC₉₀ were observed for piperacillin/tazobactam whereas the lowest was for the carbapenems; imipenem and meropenem. The highest level of resistance (95 %) has been observed against the antibiotics piperacillin and ampicillin. Thirty five out of eighty (43.75 %) of K. pneumoniae exhibited resistance against piperacillin/tazobactam. The results also showed that 52/80 (65%) showed resistance to amoxicillin/clavulanic acid combinations and 3 others showed intermediate resistance to amoxicillin/clavulanic acid combinations. Resistance to aminoglycosides varied; 2/80 (2.5 %) showed resistance to amikacin, whereas 49/80 (61 %) were resistant to gentamicin. 33/80 (41 %) were resistant to ciprofloxacin and another one was intermediate. Fifty six out of 80 isolates (70 %) were resistant to cefuroxime whereas 48/80 (60 %) and 49/80 (61 %) displayed resistance to ceftazidime and cefotaxime, respectively; and 46/80 (57.5 %) were indicated by Phoenix as ESBL positive. Of those that ESBL positive, resistance was are observed amoxicillin/clavulanate and piperacillin/tazobactam with 38/46 (82.6 %) and 29/46 (63%), respectively.

3.2.2 Genotypic detection of bla_{OXA-48} and ESBLs

3.2.2.1 The prevalence of CTX-M groups 1, 2, 8, 9 and 26

The results of detection of the occurrence of CTX-M groups 1, 2, 8, 9 and 26 are shown in Figure 3.1. This experiment was based on the amplification of part of the targeted gene of each group of CTX-M-type ESBLs. 50/80 (62.5 %) of the *K. pneumoniae* isolates demonstrated the presence of CTX-M group 1. None of the isolates produced any PCR products when specific primers were used for CTX-M groups 2, 8, 9 and 26.

Table 3.1 Dissemination of K. pneumoniae in Tripoli and Benghazi, RAPD clusters,

MLST and bla_{CTX-M} group1 results

WILST and bluctx-M group1 Tes	Number of	RAPD		blaCTX-M
Location	isolates	clusters	MLST	group 1
Al-Jamhoriya hospital Benghazi	n=21	1,2 & 5	ST147, ST101	16
Al-Jala hospital of Benghazi	n=8	1,2 & 6	ST101	5
7th of October hospital	n=8	2	ST15 (n=2)	7
Kwaifia hospital Benghazi	n=5	1,2 & 6	ST29	2
Benghazi Pediatric hospital	n=6	1 & 2	0	5
Tripoli medical centre	n=1	5	0	0
Tripoli Milatiry hosital	n=2	1, 2 & 4	0	1
Tripoli maternity hosital	n=11	1 & 2	ST70	6
Burn and plastic surgery centre of Tripoli	n=12	1,2,4 & 6	ST111, ST15	7
Tripoli pediatric hospital	n=1	1	0	0
Benghazi lake	n=1	1	0	0
Syria area Benghazi	n=2	6	ST506, ST486	1
Keesh area Bemghazi	n=1	6	0	0
Dollar area Benghazi	n=1	2	ST511	1

Table 3.2 MIC₅₀ and MIC₉₀ of K. pneumoniae

Antibiotic	MIC ₅₀	MIC ₉₀	Range mg/l
Ceftazidime	16	32	4 - 32
Cefotaxime	8	64	2 - 64
Imipenem	0.5	1	0.125 - 1
Meropenem	0.5	1	0.125 – 1
Aztreonam	16	32	8 – 32
Piperacillin/Tazobactam	32	128	4 – 128
Ciprofloxacin	4	8	0.5 – 8
Ampicillin	16	64	4 – 64
Gentamicin	8	16	2 – 16

3.2.2.2 Detection of CTX-M-15 genes and ISEcp1

The results of detection of the incidence of $bla_{CTX-M-15}$ in a subset of 11 K. pneumoniae isolates (AES64, AES178, AES261, AES268, AES273, AES274, AES280, AES970, AES973, AES984 and AES1001) are shown in Figure 3.2. Sequencing of some PCR products showed the occurrence of $bla_{CTX-M-15}$ genes in Libyan K. pneumoniae (B.18- B31). The results suggest that $bla_{CTX-M-15}$ is the gene responsible for the production of ESBL and mediates extended spectrum cephalosporin resistance in some Libyan K. pneumoniae. Amplification of $bla_{CTX-M-15}$ genes in association with the insertion sequence

ISEcp1 are illustrated in Figure 3.3. In addition Figure 3.4 show the association between $bla_{\text{CTX-M}}$ group1 gene with the insertion sequence ISEcp1 and the differences that are noticed due to the presence/absence of an intact copy of the insertion sequence in some of these isolates. The insertion sequence ISEcp1 is the promoter for the movement and expression of the cefotaximase encoding gene and it is more often than not located upstream of the β -lactamase gene (Poirel *et al.*, 2003). PCR products obtained by amplification of $bla_{\text{CTX-M-15}}$ genes and ISEcp1 from 11 of *K. pneumoniae* isolates using two forward primers (ISEcpu1 and ISEcpu2) targeting two different sites on the insertion sequence) and the standard reverse primer (CTX-M-15 R) produced different sized products.

The results suggest the occurrence of a deletion event in IS*Ecp1* in some of the isolates, and PCR using different primers failed to amplify the insertion sequence and $bla_{\text{CTX-M-15}}$ and consequently appeared negative (Figure 3.4). The deletion was confirmed by using the forward primer ISEcup2 with the reverse primer for the $bla_{\text{CTX-M-15}}$ gene. On the same isolates, the results of the amplification of $bla_{\text{CTX-M-15}}$ gene and IS*Ecp1* using ISEcup1 forward primer with CTX-M-15 reverse primer were able to prove the occurrence of $bla_{\text{CTX-M-15}}$ in association with partial copy of IS*Ecp1* (Figures 3.3 & 3.5).

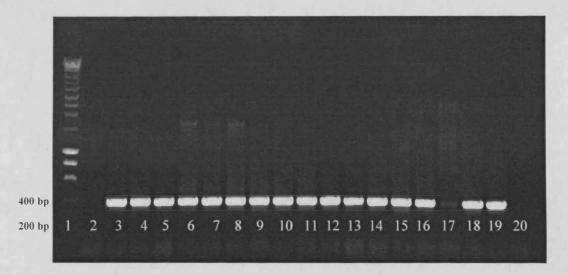
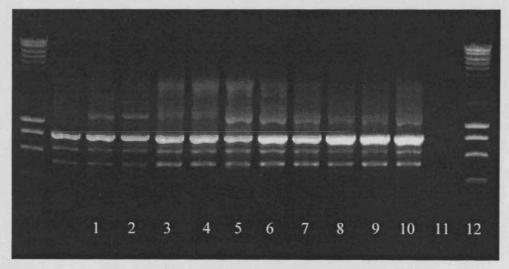


Figure 3.1 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1, 2, 8, 9 and 26. Lane1: Marker. Lane2: *K. pneumoniae* isolate AES7. Lane3: AES8. Lane4: AES48. Lane5: AES53. Lane6: AES59. Lane7: AES64. Lane8: AES66. Lane9: AES67. Lane10: AES68. Lane11: AES73. Lane12: AES74. Lane13: AES85. Lane14: AES103. Lane15: AES104. Lane16: AES135. Lane17: AES136. Lane18: AES140. Lane19: AES141. Lane20: AES145.



400 bp 200 bp

Figure 3.2 PCR experiment to detect the incidence of *bla*_{CTX-M-15} in *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES64. Lane3: AES178. Lane4: AES261. Lane5: AES268. Lane6: AES273. Lane7: AES274. Lane8: AES280. Lane9: AES970. Lane10: AES973. Lane11: AES984. Lane12: AES1001. Lane13: Negative control. Lane14: Marker

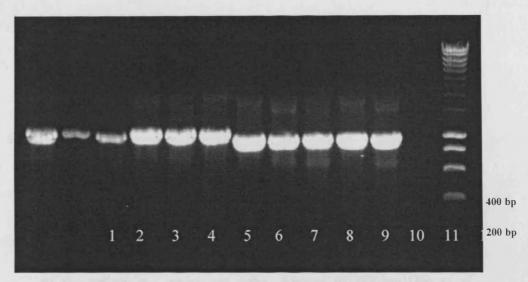


Figure 3.3 PCR experiment to detect the incidence of *bla*_{CTX-M} group1 in association with IS*Ecp1* in *K. pneumoniae* isolates. Lane1: AES64. Lane2: AES178. Lane3: AES261. Lane4: AES268. Lane5: AES273. Lane6: AES274. Lane7: AES280. Lane8: AES970. Lane9: AES973. Lane10: AES984. Lane11: AES1001. Lane12: Negative control. Lane13: Marker

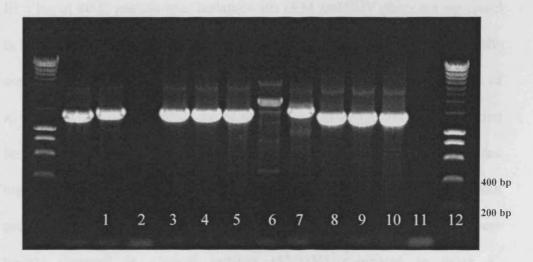


Figure 3.4 PCR experiment to detect disrupted IS*Ecp1* sequence in *K. pneumoniae* isolates. Lane1: AES64. Lane2: AES178. Lane3: AES261. Lane4: AES268. Lane5: AES273. Lane6: AES274. Lane7: AES280. Lane8: AES970. Lane9: AES973. Lane10: AES984. Lane11: AES1001. Lane12: Negative control. Lane13: Marker.

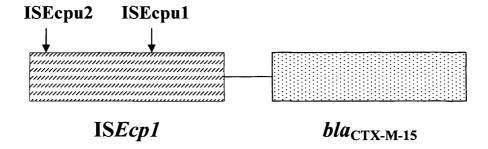


Figure 3.5 Diagram showing the genetic environment of $bla_{CTX-M-15}$ encoding gene and the insertion sequence ISEcp1 located upstream of the cefotaxime resistance gene. Arrows of ISEcpu1(Ho $et\ al.$, 2005) & ISEcpu2 (Leflon-Guibout $et\ al.$, 2004) indicates the target of each primer

3.2.2.3 Detection of TEM & SHV in K. pneumoniae isolates

Blotting of 80 K. pneumoniae isolates with TEM and SHV genes are presented in Figures 3.6A, 3.6B, 3.7A, 3.7B, 3.8A, 3.8B, 3.9A & 3.9B and the results are summarised in Table 3.3. These results showed that 52 (65%) isolates of K. pneumoniae were positive for bla_{SHV} genes and 27 (33.7%) were positive for bla_{TEM} genes. The occurrence of $bla_{CTX-M15}$, bla_{SHV} and bla_{TEM} genes together was detected in 12 isolates, whereas 16 isolates showed the both presence of bla_{SHV} and bla_{TEM} . The results also showed that bla_{SHV} genes were mostly detected in clinical settings (51.25%) compared to those K. pneumoniae isolates found in the hospital environment (10%). A low percentage of SHV genes were observed in environmental isolates collected outside the hospital. However, the incidence of bla_{TEM} among Libyan K.

pneumoniae in this study was 26.3% in clinical isolates and 7.5% in the hospital environment.

Table 3.3 The incidence of bla_{CTX-M} group1, Tn402, bla_{TEM} & bla_{SHV} encoding genes and mobile genetic elements *ISCR*2 in Libyan *K. pneumoniae* isolates

	Clinical isolates	Hospital environmental isolates	Environmental isolates	Total % 68.75% 27.5% 65%
CTX-M group 1	40 (n=80)	10	1 2 3	
Tn402	19 (n=80)	1		
SHV	41 (n=80)	8		
TEM 21 (n=80)		6	0	33.75%
ISCR2	13 (n=80)	3	1	21.25%

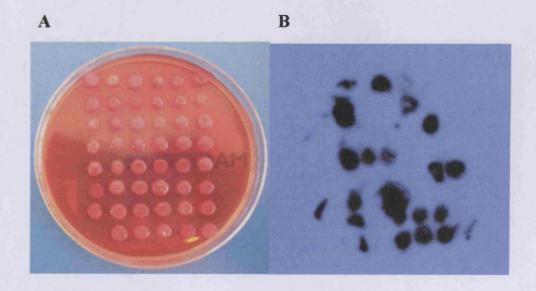


Figure 3.6 Blotting of K. *pneumoniae* isolates (1-47) and probing with bla_{TEM} . A. MacConkey Agar plate. B. Blotting and probing with radio-labelled bla_{TEM} of plate A.

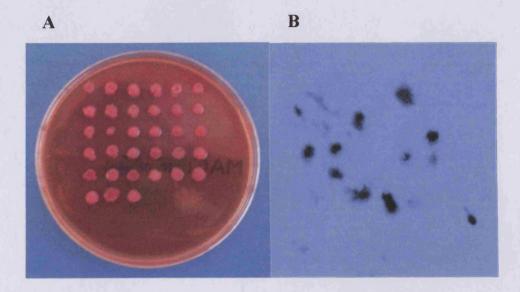


Figure 3.7 Blotting of K. *pneumoniae* isolates (48-80) and probing with bla_{TEM} . A. MacConkey Agar plate. B. Blotting and probing with radio-labelled bla_{TEM} of plate A.

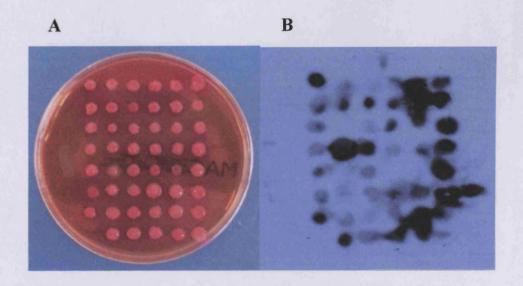


Figure 3.8 Blotting of K. *pneumoniae* isolates (1-47) and probing with bla_{SHV} . A. MacConkey Agar plate. B. Blotting and probing with radio-labelled bla_{SHV} of plate A.

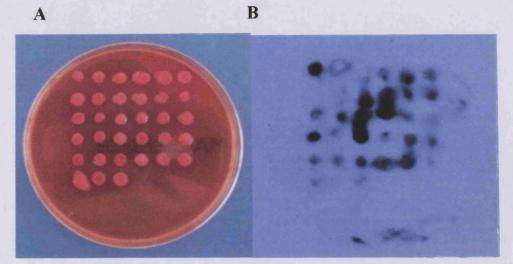


Figure 3.9 Blotting of K. pneumoniae isolates (48-80) and probing with bla_{SHV} . A. MacConkey Agar plate. B. Blotting and probing with radio-labelled bla_{SHV} gene of plate A.

3.2.2.4 CTX-M group 1 type ESBLs

Blotting and probing of 80 *K. pneumoniae* isolates with *bla*_{CTX-M-15} template DNA, labelled with radioactive phosphorus ³²P, are summarised in Table 3.3 and illustrated in Figures 3.10A, 3.10B, 3.11A & 3.11B. 51/80 (63.8 %) were positive for *bla*_{CTX-M} group 1 and 40 out of those 51 (78.4%) were isolated from blood, urine, pus, sputum, burn ward and sepsis samples collected from patients in different hospitals in Tripoli and Benghazi. The presence of *bla*_{CTX-M} group 1 positive *K. pneumoniae* in the hospital environments was 10/51 (19.6%) and reflects the incidence and prevalence of *bla*_{CTX-M} group 1 in Libyan hospitals. Thus, in total 50/51 *bla*_{CTX-M} group 1 positive *K. pneumoniae* were from patients or the hospital environment and is very high compared to the spread of *bla*_{CTX-M} group 1 genes in the community and

environment outside the hospitals. Only one isolate of *K. pneumoniae* collected from Benghazi streets was found carrying *bla_{CTX-M}* group 1 genes.

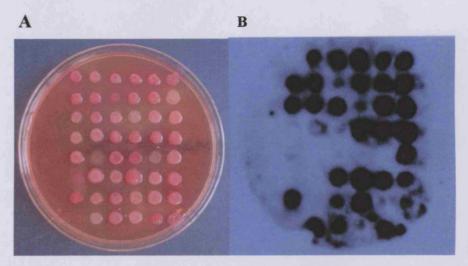


Figure 3.10 Blotting and probing of *K. pneumoniae* isolates (1-47) with *bla*_{CTX-M-15}. A: MacConkey Agar culture. B: Blotting and probing with radio-labelled *bla*_{CTX-M-15} amplicon of plate A.

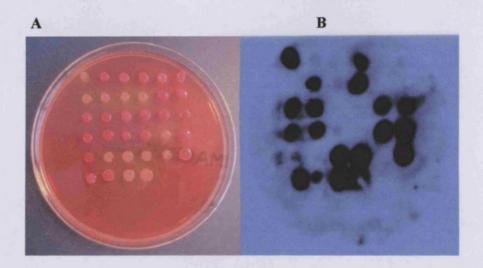


Figure 3.11 Blotting and probing of *K. pneumoniae* isolates (48-80) with *bla*_{CTX-M-15}. A: MacConkey Agar cultures. B: Blotting and probing with radio-labelled *bla*_{CTX-M-15} amplicon of plate A.

3.2.2.5 Detection of *bla*_{OXA-48} and IS*1999*

PCR experiments on K. pneumoniae failed to amplify bla_{OXA-48} and IS1999.

3.2.3 Characterisation of plasmids carrying bla_{CTX-M} group1/ISEcp1

Figure 3.12 shows S1 endonuclease digestion followed by PFGE of genomic DNA separating chromosomal DNA from plasmids in 14/28 selected K. pneumoniae isolates (#AES8, AES48, AES135, AES140, AES141, AES216, AES274, AES275, AES279, AES280, AES281, AES506, AES722, AES808b, AES809E). An additional figure showing the same application with the other 14/28 K. pneumoniae isolates (AES809, AES817, AES203, AES836, AES939, AES961, AES942, AES188, AES994, AES960, AES970, AES975, AES977 & AES982) is presented in Appendix B.6. The selection criterion was based on prevalence of clinical samples but also included hospital environmental isolates and the single K. pneumoniae found in the streets. This experiment was undertaken to examine the incidence of plasmid mediated bla_{CTX-M} group1 and ISEcp1 genes. Probing of the PFGE gel from Figure 3.12 with radio-labelled bla_{CTX-M} group1/ISEcp1 is shown in Figure 3.13. Probing of the PFGE gel from figure B.6 is presented in Appendix B (Figure B.7). These results clearly demonstrated that bla_{CTX-M} group1/ISEcp1 has been detected on plasmids in 14 isolates of K. pneumoniae on seven different plasmid sizes - 50, 75, 100, 150, 275, 300 and 425kb. Four isolates (AES8, AES135, AES140 & AES141) carry bla_{CTX-M} group1/ISEcp1 on plasmids of 300kb, 3 isolates (AES506, AES970 & AES982) carry bla_{CTX-M}

group1/IS*Ecp1* on the same size of plasmids (175kb), whereas 3 isolates (AES274, AES280 & AES281) carrying *bla*_{CTX-M} group1/IS*Ecp1* on a 75kb plasmid. *bla*_{CTX-M} group1/IS*Ecp1* were found on a 100kb plasmid in *K. pneumoniae* isolate AES275 and in the hospital environmental isolate, AES722, on a plasmid of 50kb, and on a plasmid of 275kb in a clinical isolate, AES48, that was cultured from a blood sample. The *K. pneumoniae* isolate, AES817, found in on the Benghazi streets carry *bla*_{CTX-M} group1/IS*Ecp1* on a 425kb plasmid.

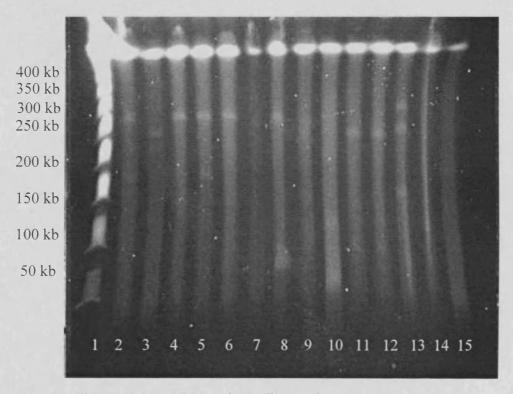


Figure 3.12 PFGE of S1 digests for K. pneumoniae AES isolates. Lane1: Marker. Lane2: AES8. Lane3: AES48. Lane4: AES135. Lane5: AES140. Lane6: AES141. Lane7: AES216. Lane8: AES274. Lane9: AES275. Lane10: AES279. Lane11: AES280. Lane12: AES281. Lane13: AES506. Lane14: AES722. Lane15: AES808B.

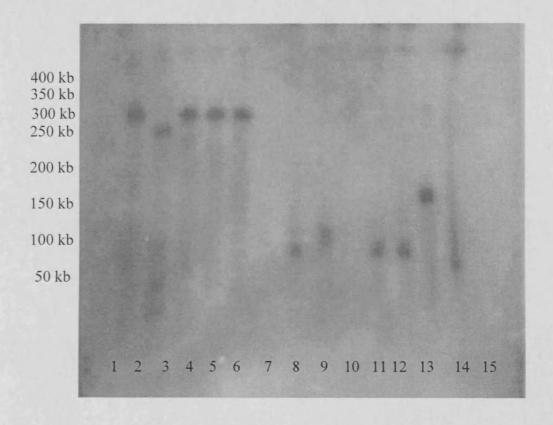
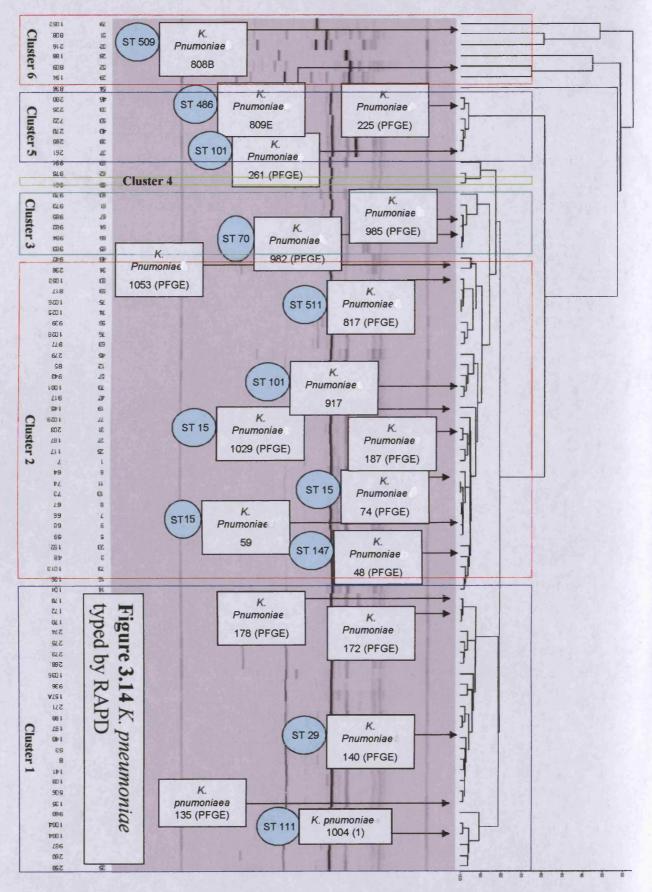


Figure 3.13 Autorad after probing with *bla*_{CTX-M-15}/IS*Ecp1* of blotted PFGE from Fig. 3.12. Lane1: Marker. Lane2: AES8. Lane3: AES48. Lane4: AES135. Lane5: AES140. Lane6: AES141. Lane7: AES216. Lane8: AES274. Lane9: AES275. Lane10: AES279. Lane11: AES280. Lane12: AES281. Lane13: AES506. Lane14: AES722. Lane15: AES808B.

3.2.4 Typing of K. pneumoniae by RAPD

Typing of 80 K. pneumoniae isolates by using RAPD technique are illustrated in Figure 3.14. The K. pneumoniae isolates can be divided into 6 clusters according to the Pearson correlation test that was performed using GelCompar software. Members of cluster 2 (n=32) displayed 85% similarity and 34/41 (82.9%) were only collected from patients in Tripoli and Benghazi and included sites such as blood, urine, sputum, pulmonary, CVL, pus samples, maternity hospital and burn and plastic surgery centre of Tripoli. Isolates of this cluster were collected as swabs from the hospital environments and also included the non-hospital environmental isolates. Cluster one included the isolates AES135 and AES140, AES172 and AES178 that appeared clonal when XbaI digestion was used (see section 3.2.5). Cluster 1 (n=26) also showed high similarity between members (90%), and 19/26 (73%) of the isolates were collected from blood, urine, sepsis and embilica samples, they were also cultured from maternity ward infections and burn ward infections. Isolates in cluster 2 were found in the hospital environments (bedsides, baby incubators, vacuum of suction machines, suction machine tubes and floor of toilets). One member of cluster 2 was isolated from the largest Benghazi Lake which is considered highly polluted. Members of cluster 4 (n=3) resembles cluster 3 as all members of this cluster were isolates collected from patients. Cluster 3 is composed of 6 members collected from a Tripoli maternity hospital and isolates AES982 and AES985 are clonal. Members of cluster 4 include two isolates (AES225 and AES261) that (by XbaI digestion of the

whole DNA) are clonal. Cluster 5 (n=6) includes isolates collected from patients and in addition to the high similarities (95%) between these members, they were also all positive for bla_{CTX-M} group1. Cluster 6 (n=7) was different from the other clusters as members of that cluster share very low similarities (30%).



3.2.5 Molecular typing of K. pneumoniae

PFGE of XbaI digests of 28 K. pneumoniae isolates is shown in Figures 3.15 & 3.16 and the corresponding dendrograms shown in Figures 3.17 & 3.18. These results show that some isolates of K. pneumoniae are clonally related (>0.95) despite the different site of collection. Isolates AES135 and AES140 are clonal despite the fact that they were collected from two different hospitals; K. pneumoniae isolate AES135 was from a blood sample from a hospital in Benghazi city whereas K. pneumoniae isolate AES140 was from a urine sample from a patient in a hospital from a village near Benghazi. Isolates AES172 and AES178 are clonal. Isolate AES172 was from a baby incubator and isolate AES178 was collected from a vacuum suction machine. These two clonal isolates were found in the neonatal ICU in Benghazi Paediatric hospital. The results also show that K. pneumoniae isolates; AES273 and AES260 share a high-level of similarities (>0.90) and were collected from blood and umbilical samples, respectively. These two samples were collected from two different patients; however, the patients were admitted to the same hospital but not the same ward revealing the potential spread of the same clone within the hospital. K. pneumoniae isolates AES506 and AES1013 also share high similarities (>80%) despite being collected from two different hospitals in Tripoli; AES506 was collected from a suction machine tube in Tripoli Paediatric hospital, while AES1013 was from a patient admitted to Tripoli burn and plastic surgery centre of Tripoli. The other isolates of K. pneumoniae

that were examined by PFGE shared low level of similarities (<75%) showing that many strains of *K. pneumoniae* in Libya played a significant role in the spread of infection and antibiotic resistance genes.

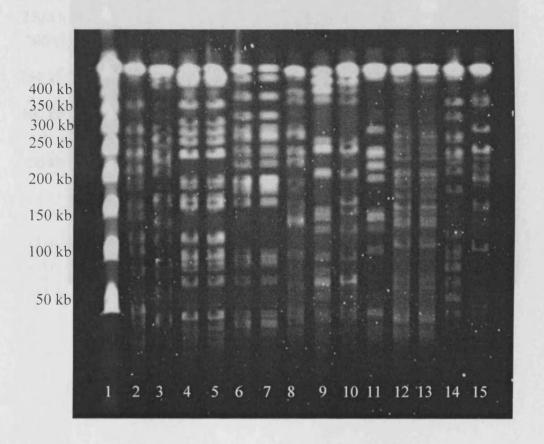


Figure 3.15 PFGE of Xba1 digests of K. pneumoniae genomic DNA. Lane1: Marker. Lane2: AES48. Lane3: AES74. Lane4: AES135. Lane5: AES140. Lane6: AES172. Lane7: AES178. Lane8: AES187. Lane9: AES225. Lane10: AES261. Lane11: AES817. Lane12: AES982. Lane13: AES985. Lane14: AES1029. Lane15: AES1053.

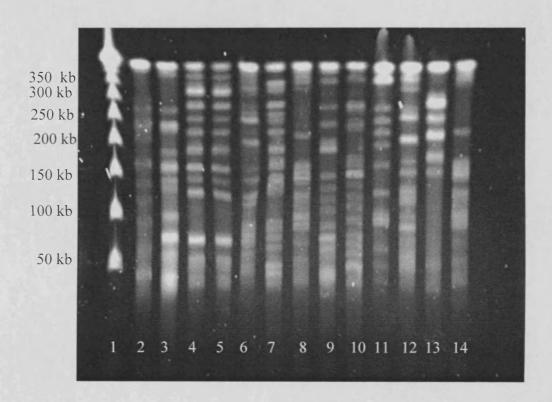


Figure 3.16 PFGE of Xba1 digests of K. pneumoniae genomic DNA. Lane1: Marker. Lane2: AES73. Lane3: AES203. Lane4: AES260. Lane5: AES273. Lane6: AES275. Lane7: AES506. Lane8: AES975. Lane9: AES977. Lane10: AES1004. Lane11: AES1013. Lane12: AES1026. Lane13: AES1028. Lane14: AES961.

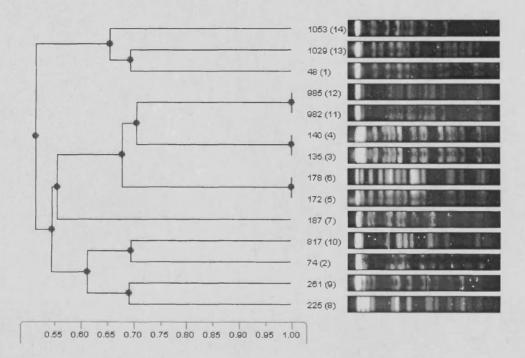


Figure 3.17 Dendrogram of PFGE gel showing *Xba*I digested DNA from *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES48. Lane3: AES74. Lane4: AES135. Lane5: AES140. Lane6: AES172. Lane7: AES178. Lane8: AES187. Lane9: AES225. Lane10: AES261. Lane11: AES817. Lane12: AES982. Lane13: AES985. Lane14: AES1029. Lane15: AES1053.

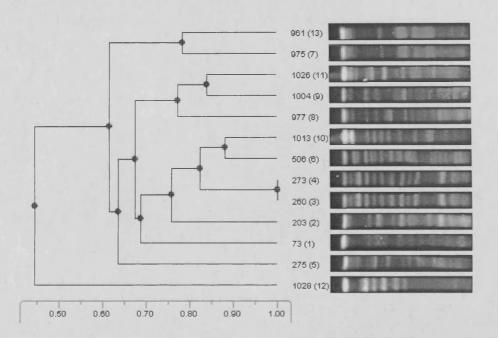


Figure 3.18 Dendrogram of PFGE gel showing *Xba*I digested DNA from *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES73. Lane3: AES203. Lane4: AES260. Lane5: AES273. Lane6: AES275. Lane7: AES506. Lane8: AES975. Lane9: AES977. Lane10: AES1004. Lane11: AES1013. Lane12: AES1026. Lane13: AES1028. Lane14: AES961.

3.2.6 Multi-locus sequence typing (MLST)

Representative isolates from RAPD-clusters were subjected to MLST. PCR experiments yielded PCR products of all housekeeping genes (see Appendix B). Generally, using RAPD fingerprinting typing method, similar RAPD-types gives similar sequence types and different RAPD-types give rise to different sequence types (STs). Sequencing of housekeeping genes of all 12 representative isolates of K. pneumoniae showed the occurrence of 9 sequence types among all isolates tested. The sequence types found were ST15, ST111, ST29, ST147, ST511, ST70, ST101, ST486 and ST509. ST15, ST111, ST29, ST147, ST70 and ST101 were among the clinical isolates whereas ST511, ST486 and ST509 were non-hospital environmental isolates from Benghazi. It is worthy of note that three isolates had ST15; AES59, AES74 and AES1029. AES Isolates 59 and 74 were collected from mechanical ventilators from an ICU ward of the 7th of October hospital in Benghazi, whereas AES1029 was a clinical isolate from a patient admitted to a Burn ward in Alkhadra hospital in Tripoli. These STs were from clusters which shared more than 90% similarities and part of one large cluster which included 17 members. One exception was observed, with ST101 being observed in two unrelated RAPDclusters sharing less than 60% similarities. The isolates that had ST101 were; AES261 which was a clinical isolate recovered from a blood sample from Al-Jamhoryia hospital in Benghazi and AES isolate 917 which was from a curtain on an ICU ward in Al-Jala hospital in Benghazi. Nevertheless, both isolates

were detected positive for bla_{CTX-M} group 1. The most frequently observed sequence type was ST15, which has earlier been described in bla_{CTX-M-15}producing K. pneumoniae (Damjanova et al., 2008). Also, ST15 is a single locus variant (SLV) of ST14, which has been described in bla_{CTX-M}, bla_{KPC} and bla_{NDM-1} producing K. pneumoniae (Hrabak et al., 2009; Oteo et al., 2009; Kitchel et al., 2009; Samuelsen et al., 2011) Two other sequence types, ST147 and ST101 have also been linked to the dissemination of bla_{CTX-M} in previous reports. (Hrabak et al., 2009; Damjanova et al., 2008). ST29 was a clinical isolate from blood and was also positive for bla_{CTX-M-15}. This ST has earlier been described in extended-spectrum cephalosporin-resistant isolates, but has not been frequently reported recently (Diancourt et al., 2005). ST70 was a clinical isolate from Tripoli maternity hospital and positive for bla_{CTX-M} group 1, while ST111 was a clinical isolate recovered from a patient in burn and plastic surgery centre of Tripoli, and was also positive for bla_{CTX} M group 1. ST70 and ST111 have not been associated with dissemination of CTX-Mproducing K. pneumoniae in previous reports, and are not closely related to of the epidemic clones. anv main The novel sequence type ST511(http://www.pasteur.fr/cgi-bin/genopole/ PF8/mlstdbnet.pl ?file=klebs profiles.xml&page=profileinfo&st=511) is an environmental isolate cultured from a swab collected from one of the Benghazi streets. This isolate carries a plasmid mediated bla_{CTX-M-15} and is a double-locus variant of ST35 and ST36 which have both recently been described in CTX-M-producers (Oteo et al., 2009). Two environmental isolates were new sequence types, ST486

(http://www.pasteur.fr/cgibin/genopole/PF8/mlstdbnet.pl?file=klebs_profiles.x ml&page=profileinfo&st=486) and ST509 (http://www.pasteur.fr/cgibin/genopole/PF8/mlstdbnepl?file=klebs_profiles.xml&page=profileinfo&st=509). These isolates were also cultured from a swab collected from two different roads in Benghazi.

3.2.7 Detection of chromosomally and plasmid mediated bla_{CTX-M} group1 Probing of PFGE of XbaI digests of K. pneumoniae (figures 3.15 & 3.16) with radio-labelled bla_{CTX-M-15} template DNA is shown in (Figures 3.19 & 3.20). K. pneumoniae AES48, AES135 and AES140 possesses four copies of bla_{CTX-M} group 1 in different locations including the various plasmids. K. pneumoniae AES74, AES172, AES178, AES225, AES1029, AES1053, AES260, AES273, AES275 and AES1026 possess two copies of bla_{CTX-M} group1 genes. Only one copy of bla_{CTX-M} group 1 gene was detected in K. pneumoniae AES261, AES817, AES982, AES985, AES73, AES506 & AES1004. The incidence of more than one copy of bla_{CTX-M} group 1 gene in some isolates of K. pneumoniae might raise the question of how can bla_{CTX-M} group 1 genes move within the genome of K. pneumoniae, Such movement could be facilitated by the active presence of IS*Ecp1* which can mobilise *bla*_{CTX-M} group 1. Digestion with XbaI does not discriminate plasmid from chromosome and therefore the bands seen in Figures 3.19 & 3.20 can only refer to the number of copies of *bla*_{CTX-M} group 1 and not their genetic location.

3.2.8 Transconjugation Experiments

Transconjugation experiments on 51 *K. pneumoniae* positive for *bla*_{CTX-M} group1 showed that successful transfer of resistance occurred in 27/51 (52.9%). PCR analysis on transconjugants confirmed the movement of *bla*_{CTX-M} group 1 and it is promoter sequence IS*Ecp1* from parents of *K. pneumoniae* to transconjugants (*E. coli*) (Figures 3.21 & 3.22). Sequencing of these alleles showed the occurrence of *bla*_{CTX-M} group1 and IS*Ecp1* in the new generation of transconjugants and further confirmed the movement capability of *bla*_{CTX-M} group1/IS*Ecp1* from parents to recipients, indicating the role of conjugative plasmids in transfer. Some transconjugation experiments failed to transfer *bla*_{CTX-M} group1 assuming the non-conjugative plasmid location of *bla*_{CTX-M} group1 and/or IS*Ecp1* or the occurrence of one copy of chromosomal located *bla*_{CTX-M} group1.

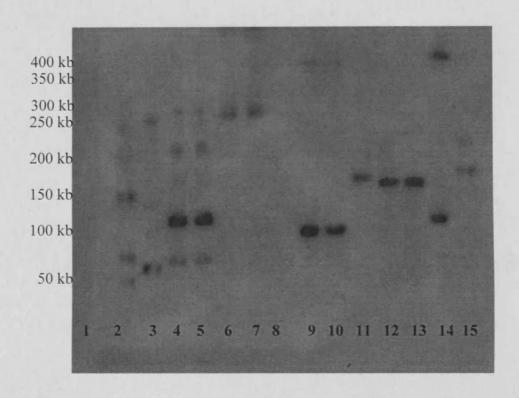


Figure 3.19 Autorad after probing with *bla*_{CTX-M-15} of blotted PFGE from Fig. 3.15. Lane1: Marker. Lane2: AES48. Lane3: AES74. Lane4: AES135. Lane5: AES140. Lane6: AES172. Lane7: AES178. Lane8: AES2187. Lane9: AES225. Lane10: AES261. Lane11: AES817. Lane12: AES982. Lane13: AES985. Lane14: AES1029. Lane15: AES1053.

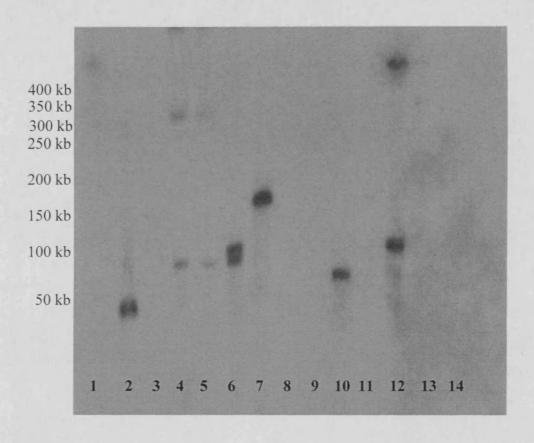


Figure 3.20 Autorad after probing with *bla*_{CTX-M-15} of blotted PFGE from Fig. 3.16. Lane1: Marker. Lane2: AES73. Lane3: AES203. Lane4: AES260. Lane5: AES273. Lane6: AES275. Lane7: AES506. Lane8: AES975. Lane9: AES977. Lane10: AES1004. Lane11: AES1013. Lane12: AES1026. Lane13: AES1028. Lane14: AES961.

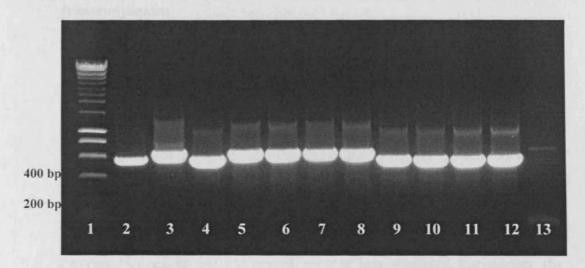


Figure 3.21 Detection of *bla*_{CTX-M} group1/IS*Ecp1* in GFP *E. coli* transconjugants of *K. pneumoniae* AES isolates. Lane1: Marker. Lane2: AES74T. Lane3: AES178T. Lane4: AES261T. Lane5: AES268T. Lane6: AES273T. Lane7: AES274T. Lane8: AES280T. Lane9: AES970T. Lane10: AES975T. Lane11: AES984T. Lane12: AES1001T. Lane13: negative control.

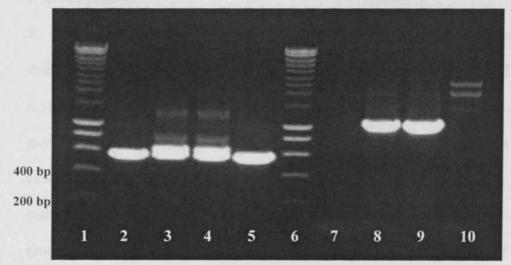


Figure 3.22 Detection of the occurrence of an intact (2-5) and disrupted (7-10) copies of IS*Ecp1* in GFP *E. coli* transconjugants of *K. pneumoniae* AES isolates. Lane1: Marker. Lane2: AES74T. Lane3: AES172T. Lane4: AES178T. Lane5: AES268. Lane6: Marker. Lane7: AES74T. Lane8: AES172T. Lane9: AES178T. Lane10: AES268T.

3.2.9 Detection of plasmid mediated bla_{CTX-M} group1 in parents and transconjugants

PFGE separation of S1 endonuclease digestion of genomic DNA from a subset of 6 parents of *K. pneumoniae* and their 6 recipients of *E. coli* are shown in Figure 3.23. The result of the probed PFGE gel with a custom made $bla_{CTX-M-15}$ probe is shown in Figure 3.24. Probing of the PFGE gel showed that $bla_{CTX-M-15}$ group1 have successfully transferred to *E. coli* as the recipient. The results clearly confirm the plasmid location and also demonstrated that the plasmid carrying bla_{CTX-M} group1 has moved, more or less, unaltered. Intriguingly, the data from Fig. 3.24 also shows that some of the copies of bla_{CTX-M} group1 are chromosomal a phenomenon not well cited in the literature.

3.2.10 Detection of the movement of ISEcp1 from parents to transconjugants

S1 endonuclease digestion and separation of genomic DNA by PFGE of a selection of parents and transconjugants are illustrated in Figure 3.25. The results of probing of the PFGE gel with radio-labelled *bla*_{CTX-M-15}1/IS*Ecp1* genes are shown in Figure 3.26. These results show the same size plasmids in parents and transconjugants. The results clearly demonstrate the capability of clinical and non-clinical isolates of Libyan *K. pneumoniae* to acquire *bla*_{CTX-M} group1/IS*Ecp1* and to confer such a resistance mechanism to recipients of *E. coli. bla*_{CTX-M} group1/IS*Ecp1* have been detected on a plasmid of 300kb in isolates AES74, AES135, AES140 and AES141 and their respective recipients. *bla*_{CTX-M} group1/IS*Ecp1* was also detected on a 100kb plasmid in

AES172T, AES178 and AES178T. AES48 demonstrates the incidence of 5 copies of *bla*_{CTX-M} group1/IS*Ecp1* on plasmids of different sizes - 50, 100, 200, 250 and 300kb.

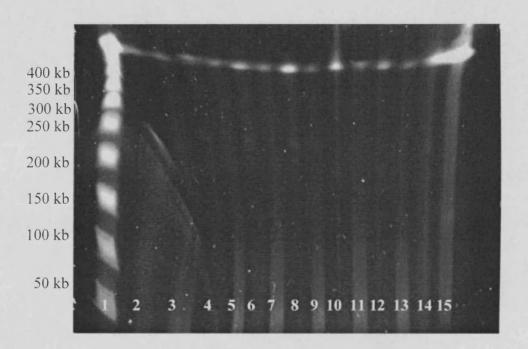


Figure 3.23 PFGE of S1 digests of K. pneumoniae and GFP transconjugants. Lane1: Marker. Lane2: AES74. Lane3: AES74T. Lane4: AES135. Lane5: AES135T. Lane6: AES140. Lane7: AES140T. Lane8: AES2141. Lane9: AES141T. Lane10: AES172. Lane11: AES172T. Lane12: AES178. Lane13: AES178T. Lane14: AES48 (positive control). Lane15: 5738 (positive control).

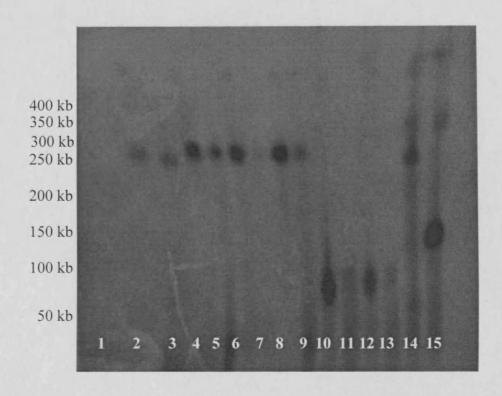


Figure 3.24 Autorad after probing with *bla*_{CTX-M-15} of blotted PFGE from Fig. 3.23. Lane1: Marker. Lane2: AES74. Lane3: AES74T. Lane4: AES135. Lane5: AES135T. Lane6: AES140. Lane7: AES140T. Lane8: AES2141. Lane9: AES141T. Lane10: AES172. Lane11: AES172T. Lane12: AES178. Lane13: AES178T. Lane14: AES48 (positive control). Lane15: 5738 (positive control).

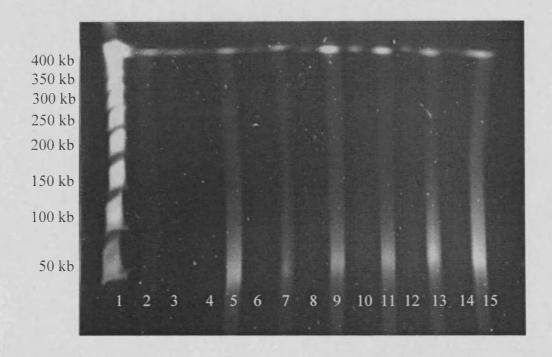


Figure 3.25 PFGE of S1 digests of K. pneumoniae and GFP transconjugants. Lane1: Marker. Lane2: AES48 (positive control). Lane3: AES1052 (Negative control). Lane4: AES74. Lane5: AES74T. Lane6: AES135. Lane7: AES135T. Lane8: AES2140. Lane9: AES140T. Lane10: AES141. Lane11: AES141T. Lane12: AES172. Lane13: AES172T. Lane14: AES178. Lane15: AES178T.

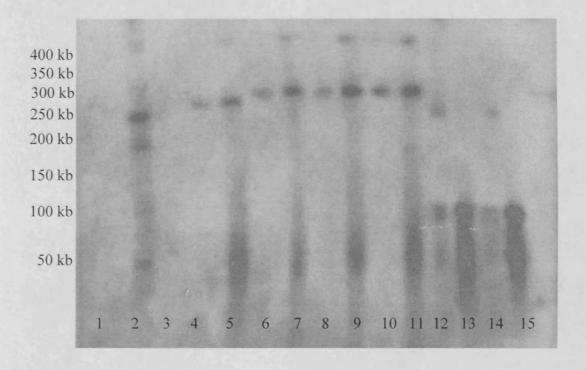


Figure 3.26 Autorad after probing with *bla*_{CTX-M-15}/IS*Ecp*1 of blotted gel from Fig. 3.25. Lane1: Marker. Lane2: AES48 (positive control). Lane3: AES1052 (Negative control). Lane4: AES74. Lane5: AES74T. Lane6: AES135. Lane7: AES135T. Lane8: AES2140. Lane9: AES140T. Lane10: AES141. Lane11: AES141T. Lane12: AES172. Lane13: AES172T. Lane14: AES178. Lane15: AES178T. (T: transconjugate of respective parent)

3.2.11 Plasmid Typing

PCR reactions failed to produce any *inc/rep* PCR products of the *K. pneumoniae* plasmids; nevertheless, *inc/rep* PCR products were detected on the positive control reference plasmids. These results suggest that these plasmids are non-typeable. They also suggest that the plasmids responsible for carrying *bla*_{CTX-M-15} and *bla*_{CTX-M} group1 are significantly different from those already characterised by Carattoli *et al.*, 2005 which to date is considered the most recent and applicable system for detecting conjugative plasmids.

3.2.12 Detection of mobile genetic elements

3.2.12.1 Class 1 integrons

The results of PCR reactions yielded PCR products of different sizes and copies in 20/22 (90.90 %) randomly selected isolates (Figure 3.27). Isolates AES8, AES85, AES179, AES198, AES271A, AES280, AES135 and AES140 produce a 1kb class 1 integrons whereas isolates AES48, AES59, AES66 and AES74 were positive for a 1.5kb integron. Two copies of class 1 integrons were found in *K. pneumoniae* isolate AES48. Sequencing of these alleles showed 4 different genetic contexts (B.8 - B.17). The differences between these integrons depend on the number and type of gene cassettes embedded in these integrons. *K. pneumoniae* isolates AES179, AES198, AES271, AES280, AES8, AES135 and AES140 share the same class 1 integron genetic context. This integron is composed of an integrase gene and dihydrofolate reductase genes that confers resistance to trimethoprim (*dfrA*30), and resistance to

sulphamethoxazole (*qac*ΕΔ/*sul*1) (Figure 3.28B). Integron of AES135 was submitted to the gene bank and assigned accession numbers; HE613850.1, HE613852.1, HE613851.1 and HE613853.1. Class 1 integrons detected in *K. pneumoniae* isolates AES59, AES66 and AES74 were found sharing the same genetic context; an integrase gene and a dihydrofolate reductase type VII (*dfrA*17) which confer resistance to trimethoprim and an aminoglycoside-3'-adenyltransferase resistance gene (*aad*A5) flanked with the conserved region *qac*EΔ/*sul*1 (Figure 3.28C). The occurrence of 3 destinct integrons was identified in *K. pneumoniae* isolates AES48 (Figure 3.28D) and AES85 (Figure 3.28A). AES48 had a class 1 integron composed of an integrase gene, *dfrA*12 and *aad*A2 which is known to confer resistance to streptomycin and spectinomycin, and *qac*EΔ/*sul*1. Only one gene cassette, *dfrA*7, was found embedded in the integron of AES85 (Figure 3.28).

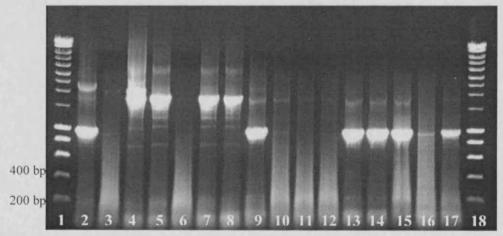


Figure 3.27 Amplification of the classical class 1 integrons. Lane1: Marker. Lane2: AES8. Lane3: AES25. Lane4: AES48. Lane5: AES59. Lane6: AES64. Lane7: AES66. Lane8: AES74. Lane9: AES85. Lane10: AES170. Lane11: AES172. Lane12: AES178. Lane13: AES179. Lane14: AS198. Lane15: AES271. Lane16: AES275. Lane17: AES280. Lane18: Marker

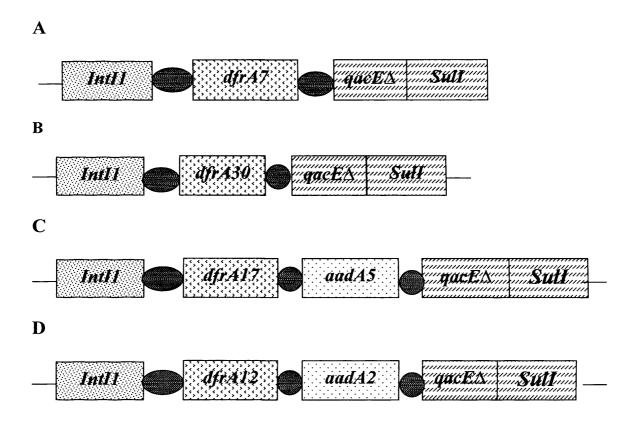


Figure 3.28 Genetic context of 6 class 1 integrons found in *K. pneumoniae* isolates. A: Class 1 integron from AES85. B: Class 1 integron from isolates; AES198, AES179, AES271, AES280, AES8, AES135 & AES140. C: Class 1 integron from isolates; AES74, AES66 & AES59. D: Class 1 integron from isolate; AES48.

3.2.12.2 Identification of Tn402 transposons

Amplification of *tni*C gene (a marker for Tn402) was detected in 14/20 (70 %) isolates randomly examined (Figure 3.29). Sequencing of PCR products of 3 isolates of *K. pneumoniae* showed the occurrence of two different types of Tn402 type transposons in three isolates of *K. pneumoniae* - AES135, AES197 and AES258. Isolate AES135 was also positive for the presence of class 1 integron (Figure 3.30). The transposon was found composed of an integrase gene, the trimethoprim resistance gene (*dfrA*30), *qac*E, and *tni*C (Figure 3.30). These results show the presence of Tn402 transposons in both clinical and non-clinical isolates of *K. pneumoniae* (listed in Table 3.3). As judged by colony blotting only 22/80 (27.5 %) were positive for *tni*C type transposons, and 16/22 (72.7 %) of these transposon positive isolates were also positive for *bla*CTX-M group1. In spite of the low occurrence of Tn402 compared with class 1 integrons, PCR data indicates that some isolates possess more than one copy of *tni*C.

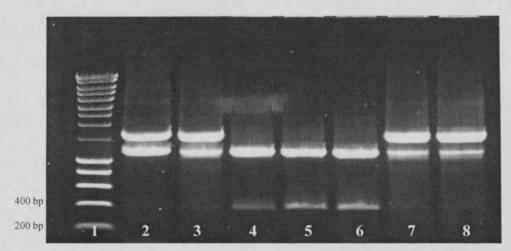


Figure 3.29 Detection of Tn402 type transposons among K. pneumoniae isolates. Lane1: Marker. Lane2: AES135. Lane3: AES140. Lane4: AES141. Lane5: AES157A. Lane6: AES170. Lane7: AES198. Lane8: AES258.

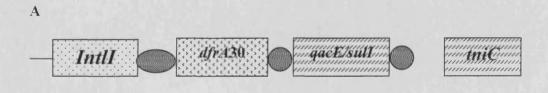


Figure 3.30 Genetic contexts of two Tn*402* type transposons found in *K. pneumoniae* isolates. A: transposon from AES135

3.2.12.3 Transposase Encoding Genes

3.2.12.3.1 PFGE of S1 genomic digests and probing with tniC

PFGE of S1 digest of genomic DNA and separation of plasmid according to size are shown in Figures 3.31 & 3.33. Probing of the PFGE gel with radio-labelled *tni*C gene is shown in Figures 3.32 & 3.34. Tn402 was detected 13 isolates of *K. pneumoniae*, 5/13 (38.5 %) carry two copies of the transposon on 6 different sizes of plasmids of approximately 10, 15, 50, 60, 75 and 100 kb. Two isolates, AES135 and AES140, carry the transposon on a plasmid of 250kb and another isolate, AES157A, carries the transposon on a plasmid of 175kb. Isolates AES179, AES198 and AES258 have a Tn402 transposon carried on a plasmid of 200kb. These transposons can act as gene capturing systems and contribute in the dissemination of antibiotic resistance genes by carrying genes responsible for conferring antibiotic resistance as part of class 1 integrons (Sajjad *et al.*, 2011).

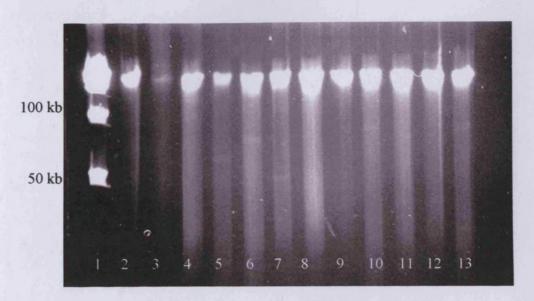


Figure 3.31 PFGE of S1 digests of K. pneumoniae. Lane1: Marker. Lane2: AES7. Lane3: AES8. Lane4: AES10. Lane5: AES25. Lane6: AES27. Lane7: AES48. Lane8: AES53. Lane9: AES59. Lane10: AES64. Lane11: AES66. Lane12: AES67. Lane13: AES68.

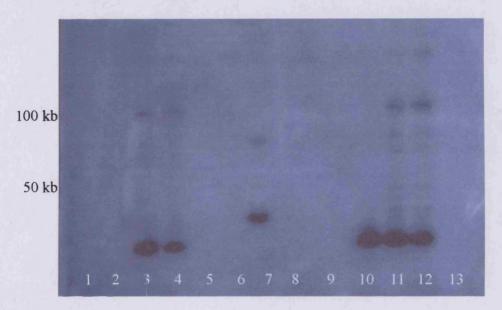


Figure 3.32 Autorad after probing with tniC of blotted gel from Fig. 3.31. Lane1: Marker. Lane2: AES7. Lane3: AES8. Lane4: AES10. Lane5: AES25. Lane6: AES27. Lane7: AES48. Lane8: AES53. Lane9: AES59. Lane10: AES64. Lane11: AES66. Lane12: AES67. Lane13: AES68.

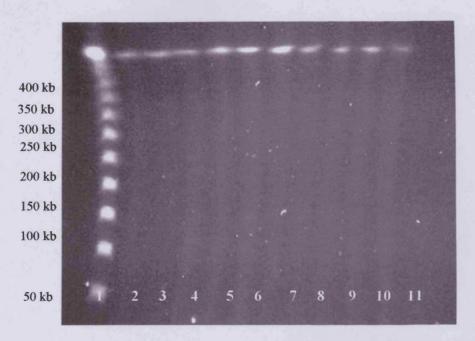


Figure 3.33 PFGE of S1 digests of K. pneumoniae genomic DNA. Lane1: Marker. Lane2: AES7. Lane3: AES135. Lane4: AES140. Lane5: AES152. Lane6: AES157. Lane7: AES172. Lane8: AES178. Lane9: AES179. Lane10: AES198. Lane11:



Figure 3.34 Autorad after probing with *tni*C of blotted PFGE gel from Fig. 3.33. Lane1: Marker. Lane2: AES7. Lane3: AES135. Lane4: AES140. Lane5: AES152. Lane6: AES157. Lane7: AES172. Lane8: AES2178. Lane9: AES179. Lane10: AES198. Lane11: AES258.

3.2.12.4 Detection of ISCR Elements

Probing of *K. pneumoniae* isolates with ISCR2 genes is presented in (Table 3.3) and (Figures 3.35A, 3.35B, 3.36A & 3.36B). 17 isolates were positive for ISCR2. Of these, 12/17 (70.5 %) were also positive for *bla*_{CTX-M} group1 5/17 (29.41 %) were also positive for Tn402. 13/17 (76.47 %) *K. pneumoniae* isolates possessing ISCR2 were from patients whereas, 3/17 (17.6 %) were isolates found in the hospital environment. Only one *K. pneumoniae* strain collected from the broader Benghazi environment was positive for *bla*_{CTX-M} group1 [SEcp1] and ISCR2 and also showed successful transconjugation.

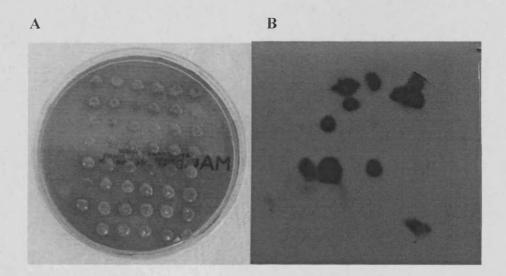


Figure 3.35 Probing of blotted *K. pneumoniae* isolates (1-47) with the ISCR2 gene. A: *K. pneumoniae* isolates on MacConkey Agar. B: Autorad of blotting after probing with ISCR2 gene.

A B

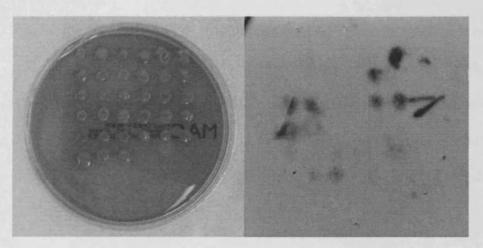


Figure 3.36 Probing of blotted *K. pneumoniae* isolates (48-80) with ISCR2 gene. A: *K. pneumoniae* isolates on MacConkey Agar. B: Autorad of northern blotting after probing blotted plate A with ISCR2 gene

3.3 Discussion

Due to the fact that there is little information on the current rate of infection and the spread of resistant strains of Gram-negative bacteria in Libya, this study was conducted to examine the resistance mechanisms (in some cases, in detail, a randomly selected subset) of *K. pneumoniae* isolates from Tripoli and Benghazi collected from the clinical settings and the environment outside the hospitals.

In addition to the fact that this study represents the first molecular analysis of antibiotic resistance on Gram-negative bacteria from Libya and in particular *K. pneumonia*, it has also major findings. The incidence of *bla*_{CTX-M} group1 type ESBLs and the prevalence of chromosomally and plasmid mediated *bla*_{CTX-M-15}/IS*Ecp1* and *bla*_{CTX-M} group1 among *K. pneumoniae* isolates are a key factor for their resistance. In addition these isolates are able to confer and express third generation cephalosporin resistance to sensitive *E. coli* via conjugative plasmids. Furthermore, the occurrence of clonally related isolates, in addition to the occurrence of new sequence types among *K. pneumoniae* is a major finding of this study. The involvement of class 1 integrons and Tn402 type transposons as genetic mobile elements in some of these isolates aid spread of antibiotic resistance genes in Libyan hospitals.

The prevalence rate of CTX-M group1 genes in this study is markedly higher than the percentage reported in Algeria, Europe, USA and Canada (Messai *et*

al., 2008). Figures 3.10, 3.11, 3.13, 3.19, 3.20, 3.24 and 3.26 clearly demonstrate the incidence of bla_{CTX-M} group1/ISEcp1 in clinical, non-clinical and environmental isolates of K. pneumoniae. It shows the dissemination of MDR K. pneumoniae in the clinical settings more in than the environment outside the hospitals. These findings are in accordance with the results of Mamlouk et al., 2006, who reported a high incidence of bla_{CTX-M} group1 in clinical specimens in Tunisia. The increasingly spread of bla_{CTX-M} group1 in Libya is likely due to the high consumption of the antibiotics cefotaxime and ceftazidime in the last ten years to treat infections in Libya. It might also be due to the lack of hygiene in hospital, such as hand hygiene, sterilisation, infection control and lack of surveillance programmes that is desperately lacking in Libya.

SHV and TEM type ESBL genes have also been found prevalent as high percentages among clinical isolates (78.8% and 77.7% respectively). *bla*_{SHV} and *bla*_{TEM} were also detected in the non-clinical isolates collected from floors, curtains, hospital equipment, and surfaces of baby incubators. SHV type ESBLs were also detected in environmental strains collected from streets. These findings illustrate the increased level of resistance in clinical isolates of *K. pneumoniae* and also highlight the depressing reality that this resistance is widespread across Libya and that resistance, in this instance, has got very little to do with the consumption of antibiotics.

bla_{CTX-M} group1 was detected carried on 7 different plasmid sizes in 14 isolates of K. pneumoniae. Ten isolates were clinical samples, 3 were from the hospital environment and one isolate was from Benghazi streets. Overall, the occurrence of plasmid mediated bla_{CTX-M} group1ISEcp1 seems to be higher in the clinical settings. bla_{CTX-M} group 1/ISEcp1 was found in 6 different hospitals in Tripoli and Benghazi on different plasmid sizes and locations. bla_{CTX-M} group I/IS Ecp1 was found on a plasmid of 300kb in 4 clinical samples, two of which were clonally related from two different hospitals in Benghazi; Jamhoryia and Kwaifia hospitals. These findings show the incidence of bla_{CTX-M} group1/ISEcp1 in clonally and non-clonally related isolates of K. pneumoniae. This group of ESBLs was also located on a plasmid of 75kb in 3 clinical isolates of K. pneumoniae (AES274, AES280 and AES281) and on plasmids of 100kb and 275kb in the clinical isolates AES275 and AES48 respectively that were collected from Jamhoryia hospital. Although the same gene, with its promoter sequence was found on a plasmid of 150kb in K. pneumoniae clinical isolates AES982 and AES970 collected from Al-Jala Maternity hospital in Tripoli, they were found on the same plasmid size in the hospital environmental isolate AES506 swabbed from Al-Jala Paediatric hospital in Tripoli. It is worth mentioning that Al-Jala Paediatric hospital is located in Tripoli city centre and next to Al-Jala Maternity hospital. This might explain the occurrence of the bla_{CTX-M} group1 in clinical isolates and the hospital environmental isolates despite being clonally unrelated according to RAPD test.

A plasmid mediated bla_{CTX-M} group 1/ISEcp1 was detected on a large plasmid, sized 425kb in a K. pneumoniae isolated from one of Benghazi streets. A possible explanation for the relatively low frequency of plasmid or chromosomally mediated bla_{CTX-M} group1 in the streets could be because of the effect of the environment conditions outside the clinical settings. The results of this work are in agreement somewhat with the findings of (Lavollay, et al., 2006) in terms of the wide range of the occurrence of bla_{CTX-M-15} on plasmids of different sizes. These results are also consistent with the findings of the spread of plasmid mediated ESBLs that have been reported in K. pneumoniae strains in Europe and USA (Gori et al., 1996) and Tunisia (Elhani et al., 2010). The work described in this section conflicts somewhat with the findings of Gonullu et al., 2008 who found that most bla_{CTX-M-15}/ISEcp1 were found in most cases located on a plasmid of the same size and type – in this cane IncN. The results of this section are also dissimilar to the work of (Messai et al., 2008) who reported the prevalence of CTX-M genes on plasmids of approximately 77kb and 85kb.

Several important clones, which were recently found associated with spread of $bla_{\text{CTX-M}}$ and/or carbapenemases were described in this study. Hence, the study provides further support to the assumption that epidemic international clones are responsible for a substantial part of dissemination of $bla_{\text{CTX-M}}$ among K. pneumoniae. Transconjugation and detection of the movement of plasmid

mediated *bla*_{CTX-M} group1 has been detected in *K. pneumoniae* ST15, ST29, ST101 and the new environmental allele ST511. Plasmid mediated *bla*_{CTX-M} group1 has also been detected in *K. pneumoniae* ST147, ST111 and ST70. The spread of *bla*_{CTX-M-15} producing *K. pneumoniae* has moreover been discovered in ST101 and ST147 in Tunisia (Elhani *et al*, 2010) and in this case Libyan patients might serve as a reservoir of such sequence types of *K. pneumoniae* as Libyans travel frequently to Tunisia in particular for medical purposes, cosmetic surgery and other medical necessities.

Determination of class 1 integrons and transposons by different methods showed the incidence of 5 genetic context forms of class 1 integrons in 12 isolates of *K. pneumoniae*. Some isolates shared the same genetic context while others had a different integron each. Isolate AES85 was found in a CVL sample and was positive for *bla*_{CTX-M} group1/IS*Ecp1* and a globally distributed class 1 integron. The integron found in this isolate contained *Int*I, *dfrA7* and *qac*EΔ/sulI. Several authors report the incidence of this integron in a number of clinical isolates - *S. typhi* serotype Typhi from Jordan, Nepal, Senegal, Uganda and South Africa (Al-Sanouri *et al.*, 2008; Tamang *et al.*, 2007; Sow *et al.*, 2007; Krauland *et al.*, 2009). An identical integron was, in addition found in clinical isolates of *E. coli* and *K. pneumoniae* from Sweden (Brolund *et al.*, 2010), in UTI clinical isolate of *E. coli* from Korea (Yu *et al.*, 2004) and in *Shigella flexneri* from Spanish patients who had visited Kenya.

Collectively, the high prevalence and abundance of $bla_{\text{CTX-M}}$ group1 and the occurrence of $bla_{\text{CTX-M-15}}$ on its own and in association with ISEcp1, bla_{SHV} , bla_{TEM} , classical class 1 integron alone or embedded in transposon Tn402, indicate that the epidemiology of K. pneumoniae in Libyan hospitals is complex and probably reflects the existence of a longstanding infection control problems in each hospital. The data also indicates that resistance outside the hospital environment and in the community is also an issue.

Chapter Four Characterisation of antibiotic resistance in *E. coli* isolates from Tripoli & Benghazi, Libya

4.1 Introduction

E. coli is a major cause of infections in humans and plays a significant role in nosocomial and CAIs particularly UTIs and bacteraemia among all ages of humans (Oteo *et al.*, 2010a; Rogers *et al.*, 2011; Oteo *et al.*, 2010b). ESBLs emerged in late 1980s causing healthcare associated infections that were now resistant to extended-spectrum β-lactamases and have spread worldwide (Apisarnthanarak *et al.*, 2008; Kiratisin *et al.*, 2008). In particular, plasmids mediated ESBLs. It is a probably the result of the extensive use of β-lactam antibiotics (Goyal *et al.*, 2009) and the selective pressure of these antibiotics which has caused the spread of plasmids from one pathogen isolate to another.

bla_{CTX-M} genes encode for CTX-M enzymes, these genes are often plasmid encoded and known as narrow-host range plasmids. CTX-M type enzymes are among the most prevalent ESBLs in Europe, North America, Asia, Latin America and Africa (Gonullu *et al.*, 2008). It has been reported in Tunisia, Algeria, Lebanon and Egypt (Khalaf *et al.*, 2009). This type of ESBLs can be moved from bacteria to bacteria by means of transferable plasmids via conjugation. These enzymes, particularly the early ones that were discovered, preferably hydrolyse cefotaxime more than ceftazidime (Dhanji *et al.*, 2011). bla_{CTX-M-15} ESBLs is the most frequently reported hydrolysing enzyme in the UK, Italy, Turkey, Spain, Australia, Kuwait, Lebanon, Algeria and Tunisia (Randall *et al.*, 2011; Cerquetti *et al.*, 2010; Gonullu *et al.*, 2008; Diaz *et al.*, 2010; Ensor *et al.*, 2009; Sidjabat *et al.*, 2010; Abbassi *et al.*, 2008; Mohamed-

Al-Agmy *et al.*, 2006). The outbreak of clonally related strains of *E. coli* has been reported in association with the incidence of ESBLs (Abbassi *et al.*, 2008; Woodford *et al.*, 2004). In view of the increasing world wide emergence of ESBLs and because there is no detailed information on the occurrence of ESBLs in Libya this study was carried out to study the prevalence of antibiotic resistance in 39 clinical and non-clinical isolates of *E. coli* collected in 2009 from Tripoli and Benghazi hospitals. This study was also conducted to asses the incidence of bla_{CTX-M} group1 encoding gene along with the mobile genetic element IS*Ecp1* that facilitates its movement and expression.

The results of this section describe the incidence of *E. coli* collected from clinical settings from Tripoli and Benghazi, it also demonstrates the prevalence of ESBLs among these isolates, particularly of CTX-M group1 type. This section provides an evidence of the occurrence of chromosomally and plasmid mediated CTX-M-15 and CTX-M-3 in association with the insertion sequence IS*Ecp1*.

4.2 Results

4.2.1 Characterisation of *E. coli* isolates and antimicrobial susceptibility testing

Thirty nine isolates of *E. coli* were collected in a 4 week period in 2009 from patients admitted to different wards and ICUs from 10 hospitals in Tripoli and Benghazi (Table C.1). Some of the isolates were also from hospital environments such as mechanical ventilators, floors, walls, bedsides and other parts of the hospitals (see Appendix C). The MIC₅₀ and MIC₉₀ values are shown in table 4.1. Ceftazidime showed higher MIC₅₀ and MIC₉₀ than that of cefotaxime, low MIC₅₀ and MIC₉₀ was observed for carbapenems whereas high range was shown for piperacillin/tazobactam and ampicillin. In general, high-level of resistance was observed towards 3rd generation cephalosporins. Twenty four out of 39 (61.5 %) were resistant to cefotaxime, 16/39 (41%) resistant to cefuroxime and 17/39 (43.5%) were resistant to ceftazidime. Few of the isolates (7/39) (17.9%) were resistant to ciprofloxacin and 2/39 (5%) and to piperacillin-tazobactam. Those isolates displaying resistance to 3rd generation cephalosporins also showed resistance to aztreonam, trimethoprim sulphamethoxazole - 53.8%, and 35.8% respectively.

4.2.2 Detection of TEM, SHV and CTX-M type ESBL genes

Amplification of bla_{TEM} and bla_{SHV} has shown the occurrence of bla_{TEM} in 7 isolates and bla_{SHV} in 8 E. coli isolates tested. Amplification of the major CTX-M groups (1, 2, 8, 9 and 26) showed that 23 out of 39 (58.9%) were

positive for CTX-M group 1 and only one E. coli isolate gave PCR product for the CTX-M group 9 (Figures 4.1&4.2). The other CTX-M groups were negative. The association of the insertion sequence, ISEcp1, with bla_{CTX-M-15} occurred in all cases where CTX-M group 1 was present (Figures 4.3&4.4). Moreover, three isolates; AES226, AES228 & AES232 showed the occurrence of an additional CTX-M group 1 gene. Sequencing these PCR products showed the association of bla_{CTX-M} group1 with ISEcp1 in 22/26 (84.62%). The sequencing results of the three different PCR products obtained at 620bp (isolates; AES226, AES228 & AES232) were positive for CTX-M-3 in association with ISEcp1 in addition to the CTX-M-15/ISEcp1 also carried by these strains. Sequencing results of the single PCR product from the CTX-M group 9 showed the occurrence of CTX-M-19. Interestingly, a deletion event has been detected in the insertion sequence located adjacent to bla_{CTX-M-15}. This deletion event has been found in some insertion sequences, it shows that the IS*Ecp1* is occasionally not intact and probably played a role in the movement of bla_{CTX-M} group1 with some E. coli isolates (Figure 4.5 & 4.6).

4.2.3 Transconjugation experiments

A subset (n=20) of the CTX-M positive *E. coli* were used to study the plasmids carrying the CTX-M-15 genes. The results of the transconjugation experiments using the GFP *E. coli* as a recipient showed that transconjugation was observed in 19 out of 20 (95%). Antibiotic resistance profile of *E. coli* transconjugants, AES224T, AES226T, AES228T and AES231 showed the

occurrence of virtually the same resistance profile from parents to transconjugants (Table 4.2). Ceftazidime resistant transformants were confirmed by PCR. Transconjugation was also conducted on the $E.\ coli$ isolate positive for CTX-M-19. The plasmid carrying $bla_{\text{CTX-M-19}}$ was able to move to the recipient $E.\ coli$ conferring ceftazidime which was further confirmed by PCR.

4.2.3.1 Antibiotic Resistance profile of *E. coli* CTX-M transconjugants

Antibiotic resistance profile of $E.\ coli$ transconjugants; AES224T, AES226T, AES228T, and AES231T are virtually the same as their donor strains. The original GFP $E.\ coli$ strain is fully sensitive a part of rifampicin; subsequently mating $E.\ coli$ with GFP $E.\ coli$ (recipient) indicates the movement of antibiotic resistance mechanism from parents to transconjugants via conjugative plasmids. The resultant GFP $E.\ coli$ were resistant to aminoglycosides, aztreonam, ampicilin, amoxicillin/clavulanate, β -lactam antibiotics such as cephalosporins, and third generation cephalosporins, they were sensitive to carbapenems and monobactams. (Table 4.2).

Table 4.1. MIC₅₀ and MIC90 of *E. coli* isolates

16		
	32	4 – 32
8	64	2 – 64
0.5	1	0.125 – 1
0.5	1	0.125 – 1
16	16	8 – 16
8	128	4 – 128
2	4	0.5 - 8
16	64	4 – 64
16	16	2 – 16
	0.5 0.5 16 8 2 16	0.5 1 0.5 1 16 16 8 128 2 4 16 64

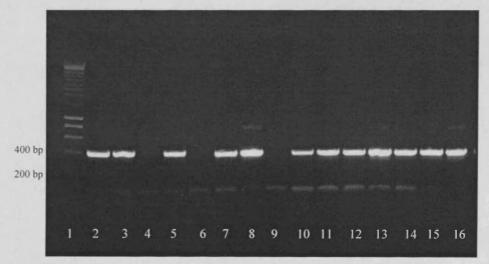


Figure 4.1 Multiplex PCR to detect CTX-M groups; 1, 2, 8, 9 & 26 in E. coli. Lane1: Marker. Lane2: E. coli AES11. Lane3: E. coli AES35. Lane4: E. coli AES58. Lane5: E. coli AES120. Lnae6: E. coli AES128. Lane7: E. coli AES195. Lane8: E. coli AES202. Lane9: E. coli AES212. Lane10: E. coli AES224. Lne11: E. coli AES226. Lane12: E. coli AES227. Lane13: E. coli AES228. Lnae14: E. coli AES230. Lnae15: E. coli AES231. Lane16: E. coli AES232.

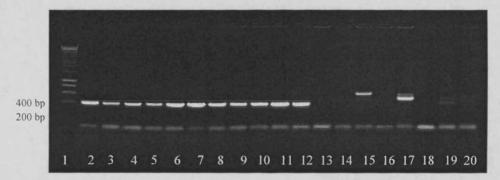


Figure 4.2 Multiplex PCR to detect CTX-M groups; 1, 2, 8, 9 & 26 in E. coli. Lane1: Marker. Lane2: E. coli AES237. Lane3: E. coli AES239. Lane4: E. coli AES240. Lane5: E. coli AES243. Lane6: E. coli AES244. Lnae7: E. coli AES245. Lnae8: E. coli AES246. Lane9: E. coli AES247. Lane10: E. coli AES248. Lane11: E. coli AES262. Lane12: E. coli AES101. Lane13: E. coli AES922. Lane14: E. coli AES932. Lane15: E. coli AES937. Lane16: E. coli AES938. Lane17: E. coli AES941. Lane18: E. coli AES944. Lnae19: E. coli AES962. Lane20: E. coli AES964



Figure 4.3 Detection of bla_{CTX-M} group1 and ISEcp1 in E. coli. Lane1: Marker. Lane2: E. coli AES11. Lane3: E. coliAES35. Lnae4: E. coli AES120. Lane5: E. coli AES195. Lnae6: E. coli AES202. Lane7: E. coli AES224. Lane8: E. coli AES226. Lane9: E. coli AES227. Lane10: E. coli AES228. Lne11: E. coli AES230. Lane12: E. coli AES231. Lane13: E. coli AES232. Lnae14: E. coli AES237. Lnae15: E. coli AES239. Lane16: E. coli AES240. Lane17: E. coli AES243. Lane18: E. coli AES244. Lane19: E. coli AES245. Lane20: E. coli AES246.



Figure 4.4 Detection of *bla*_{CTX-M} group1 and IS*Ecp1* in *E. coli*. Lane1: Marker. Lane2: *E. coli* AES247. Lane3: *E. coli* AES248. Lnae4: *E. coli* AES262. Lane5: *E. coli* AES101. Lnae6: *E. coli* AES937. Lane7: *E. coli* AES941. Lane8: *E. coli* AES1006.

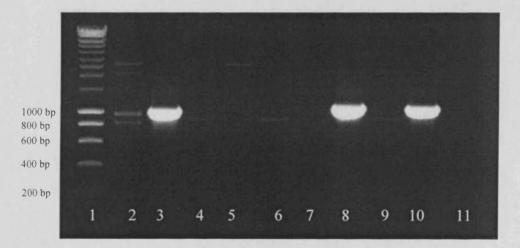


Figure 4.5 Detection of *bla*_{CTX-M} group1 in association with an intact copy of IS*Ecp1* in *E. coli*. Lane1: Marker. Lane2: *E. coli* AES11. Lane3: *E. coli* AES35. Lnae4: *E. coli* AES120. Lane5: *E. coli* AES195. Lnae6: *E. coli* AES202. Lane7: *E. coli* AES224. Lane8: *E. coli* AES226. Lane9: *E. coli* AES227. Lane10: *E. coli* AES228. Lne11: *E. coli* AES230.



Figure 4.6 Detection of *bla*_{CTX-M} group1 in association with IS*Ecp1* in *E. coli*. Lane1: Marker. Lane2: *E. coli* AES231. Lane3: *E. coli* AES232. Lane4: *E. coli* AES237. Lane5: *E. coli* AES239. Lane6: *E. coli* AES240. Lnae7: *E. coli* AES243. Lane8: *E. coli* AES244. Lnae9: *E. coli* AES245. Lane10: *E. coli* AES246. Lane11: *E. coli* AES247. Lane12: *E. coli* AES248. Lane13: *E. coli* AES262. Lane14: *E. coli* AES101A. Lane15: *E. coli* AES937. Lane16: *E. coli* AES941

The results of the amplification of $bla_{\text{CTX-M}}$ group1 and ISEcp1 to detect the occurrence of the full sequence of the insertion sequence ISEcp1 showed that in 12 out of 22 (54.5%) of isolates a deletion event is occurred in the insertion sequence, The results also demonstrated that 10 out 22 (45.4%) had the full sequence of ISEcp1. Amplification of $bla_{\text{CTX-M}}$ group1 and ISEcp1 genes in the transconjugants GFP showed that 18 out of 20 (90%) showed the occurrence of both genes.

Table 4.2 Sensitivity profile of *E. coli* parents and transconjugants

Antibiotic	AES224	AES224T	AES226	AES226T	AES228	AES228T	AES231	AES231T
Amikacin	S	16	S	16	S	16	S	16
Ampicillin	>8	>8	>8	>8	>8	>8	>8	>8
Aztreonam	>16	>16	>16	>16	>16	>16	>16	>16
Cefotaxime	>4	>4	>4	>4	>4	>4	>4	>4
Ceftazidime	>16	>8	16	>8	16	>8	16	>8
Cefuroxime	>16	>8	>16	>8	>16	>8	>16	>8
Ciprofloxacin	>2	S	S	S	S	S	S	S
Gentamicin	S	>4	>8	>4	>8	>4	>8	>4
Imipenem	S	S	S	S	S	S	S	S
Meropenem	S	S	S	S	S	S	S	S
Nitrofurantoin	S	S	S	S	S	S	S	S
Piperacillin/ Tazobactam	S	S	S	S	S	S	S .	S
Trimethoprim	-	S	-	S	-	S	-	S
Trimethopri/ Sulphamethoxazole	S	S	S	S	S	S	S	S
Amoxicillin/ clavulanate	16	16	16	16	16	16	16	16

T: Transconjugants

4.2.4 Plasmid typing of ESBL positive E. coli isolates

Typing of a subset of *bla*_{CTX-M} group1 positive *E. coli* isolates by PCR to identify the plasmids responsible for the carriage and movement of CTX-M group1 and IS*Ecp1* showed that more than one type of plasmids has been detected in some these isolates. AES224 was positive for incFIA, AES226, and its transconjugant were found positive for IncFII. AES237 and its

transconjugant AES237T were carrying *bla*_{CTX-M} group1 on IncI plasmid. AES243 was detected positive for IncF plasmid.

4.2.5 Detection of plasmid mediated *bla*_{CTX-M} group1 and IS*Ecp1* genes in parents and transconjugants of *E. coli*

PFGE of S1 digests of a subset of the whole genomic DNA of parents and transconjugants of E. coli are shown in figures (4.7&4.9). Probing of PFGE gels of figures 4.7&4.9 with $bla_{CTX-M-15}$ is illustrated in figures (4.8&4.10). These results demonstrated the incidence of one copy of bla_{CTX-M} group1 in parents of E. coli isolates; the results of probing provide an evidence of the movement of bla_{CTX-M-15} and bla_{CTX-M} group1 from parents to transconjugants. During conjugation, on occasions the plasmid carrying bla_{CTX-M-15} changed in size. bla_{CTX-M-15} has been detected on a plasmid with a size of 100 kb in three of the parents; AES226, AES228 & AES232 and on 100 kb in bla_{CTX-M} group1, AES35, AES227, and AES231; however, during conjugation bla_{CTX-M} group1 was detected on two plasmids (100 and 350 kb) in 3 of the transconjugants (AES226T, AES228T & AES232T) and on 100 and 350 kb of the transconjugants AES227T and AES231T and on a plasmid of 300kb in transconjugant AES35T. These data show that bla_{CTX-M-15} and bla_{CTX-M} group1 genes have moved either from one plasmid to another larger plasmid during conjugation or that during the conjugation process the plasmid has acquired chromosomal DNA or two plasmids (one containing bla_{CTX-M} group1 gene) have become co-integrative. bla_{CTX-M} group1 was also located on a 125kb

plasmid in the donor AES237 as well as its corresponding transconjugant, in one donor (AES224) and its transconjugants bla_{CTX-M} group1 is present on a 175kb plasmid.

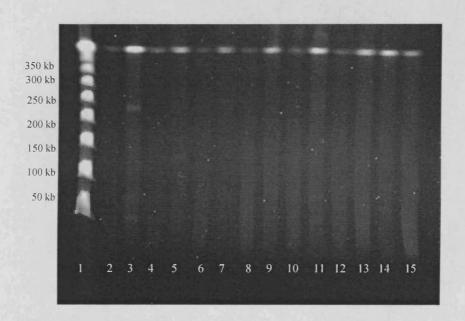


Figure 4.7 PFGE of S1 digestion of E. coli parents and transconjugants. Lane1: Marker, Lane2: E. coli isolate AES35. Lane3: E. coli AES35T. Lane4: E. coli AES224. Lane5: E. coli AES224T. Lane6: E. coli AES226. Lane7: E. coli AES226T. Lane8: E. coli AES227. Lane9: E. coli AES227T. Lane10: E. coli AES228. Lane11: E. coli AES228T. Lane12: E. coli AES231. Lane13: E. coli AES231T. Lane14: E. coli AES237. Lane15: E. coli AES237T.

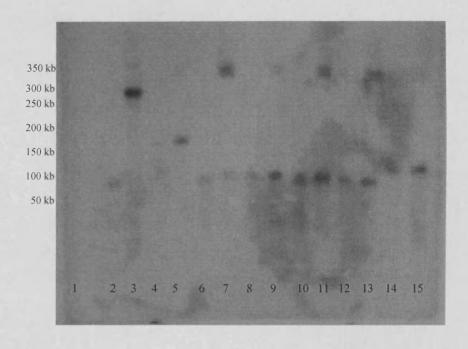


Figure 4.8 Autorad of *E.coli* parents and transconjugants after probing of PFGE gel from fig.4.7 with *bla*_{CTX-M-15}. Lane1: Marker, Lane2: *E. coli* AES35. Lane3: *E. coli* AES35T. Lane4: *E. coli* AES224. Lane5: *E. coli* AES224T. Lane6: *E. coli* AES226. Lane7: *E. coli* AES226T. Lane8: *E. coli* AES227. Lane9: *E. coli* AES227T. Lane10: *E. coli* AES228. Lane11: *E. coli* AES228T. Lane12: *E. coli* AES231. Lane13: *E. coli* AES231T. Lane14: *E. coli* AES237. Lane15: *E. coli* AES237T.

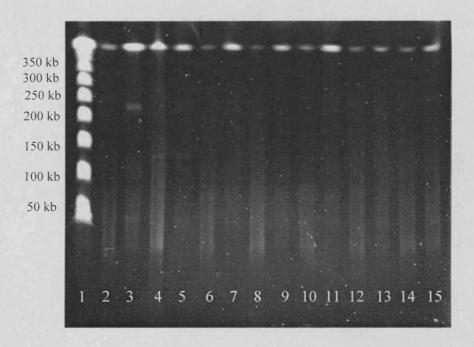


Figure 4.9 PFGE of S1 digestion of E. coli parents and transconjugants. Lane1: Marker, Lane2: E. coli isolate AES35. Lane3: E. coli AES35T. Lane4: E. coli AES224. Lane5: E. coli AES224T. Lane6: E. coli AES226. Lane7: E. coli AES226T. Lane8: E. coli AES227. Lane9: E. coli AES227T. Lane10: E. coli AES228. Lane11: E. coli AES228T. Lane12: E. coli AES231. Lane13: E. coli AES231T. Lane14: E. coli AES232. Lane15: E. coli AES232T.

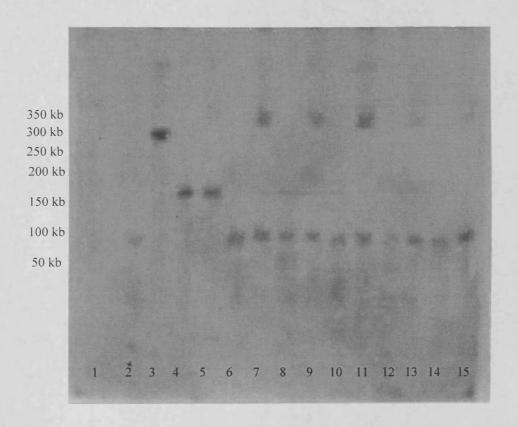


Figure 4.10 Autorad of *E.coli* parents and transconjugants after probing of the PFGE gel from fig. 4.9 with $bla_{CTX-M-15}/ISEcp1$. Lane1: Marker, Lane2: *E. coli* AES35. Lane3: *E. coli* AES35T. Lane4: *E. coli* AES224. Lane5: *E. coli* AES224T. Lane6: *E. coli* AES226. Lane7: *E. coli* AES226T. Lane8: *E. coli* AES227T. Lane10: *E. coli* AES228. Lane11: *E. coli* AES228T. Lane12: *E. coli* AES231. Lane13: *E. coli* AES231T. Lane14: *E. coli* AES232. Lane15: *E. coli* AES232T.

4.2.6 Typing of *E. coli* isolates

PFGE of Xba1 digests of E. coli isolates; AES35, AES224, AES228, AES231, AES232, AES237, AES240, AES243, AES245, AES246, AES247, AES226, AES227, AES11, AES202, AES230, AES239, AES244, AES248 & AES262 are shown in (Figures 4.11 and 4.13). The dendrogram of the PFGE pictures analysis are illustrated in (Figures 4.12 and 4.14). These results showed the incidence of 3 groups of clones among the 20 E. coli isolates examined. One clonal group, isolates AES226, AES227, AES228, AES232 and AES231, were clinical and hospital environmental isolates from an ICU as part of a screen from the ICU of the Paediatric hospital in Benghazi, these isolates were slightly different with computer analysis. AES226 and AES232 were urine samples cultured from two patients admitted to Benghazi peadiatric hospital whereas, AES227, AES228 and AES231 were cultured from non-clinical swabs collected from the ICU of the same hospital. E. coli isolates; AES243 and AES245 were also clonal and found in urine samples from two different patients suggesting either a dominat Libyan clone or cross-infection. Another two isolates, AES237, AES240, AES246 and AES247 were also clonal despite being dissimilar by dendrogram. Isolates AES237 and AES 246 were from urine samples, while isolates AES240 and AES247 were collected from the corridor and floor of the ICU at the same hospital, this clone (AES237/ AES240) shared more than 90% similarity with isolate AES247 that was cultured from the floor of the same ICU. Isolate AES35 was unrelated to the

other strains isolated from environmental swabs of the same ICU at the Al-Jamhoryia hospital, Benghazi.

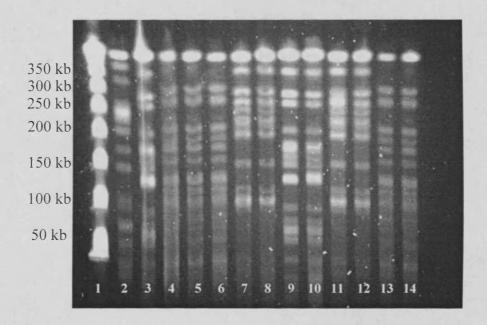


Figure 4.11 PFGE of XbaI digestion and separation of genomic DNA according to size. Lane 1: Marker. Lane 2: E. coli AES35. Lane 3: E. coli AES224. Lane 4: E. coli AES228. Lane 5: E. coli AES231. Lane 6: E. coli AES232. Lane 7: E. coli AES237. Lane 8: E. coli AES240. Lane 9: E. coli AES243. Lane 10: E. coli AES245. Lane 11: E. coli AES246. Lane 12: E. coli AES247. Lane 13: E. coli AES226. Lane 12: E. coli AES227

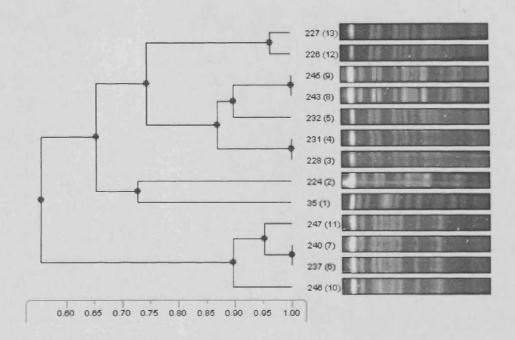
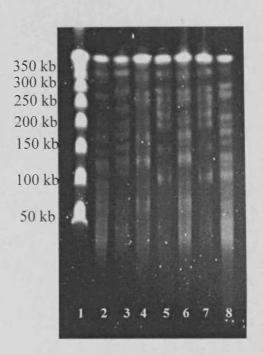


Figure 4.12 Dendrogram of PFGE picture of *E. coli* isolates fig (4.11). Lane 1: Marker. Lane 2: *E. coli* AES35. Lane 3: *E. coli* AES224. Lane 4: *E. coli* AES228. Lane 5: *E. coli* AES231. Lane 6: *E. coli* AES232. Lane 7: *E. coli* AES237. Lane 8: *E. coli* AES240. Lane 9: *E. coli* AES243. Lane 10: *E. coli* AES245. Lane 11: *E. coli* AES246. Lane 12: *E. coli* AES247. Lane 13: *E. coli* AES226. Lane 12: *E. coli* AES227

Figure 4.13 PFGE of *Xba*I digestion and separation of genomic DNA according to size. Lane 1: Marker. Lane 2: *E. coli* AES11. Lane 3: *E. coli* iAES202. Lane 4: *E. coli* AES230. Lane 5: *E. coli* AES239. Lane 6: *E. coli* AES244. Lane 7: *E. coli* AES248. Lane 8: *E. coli* AES262.



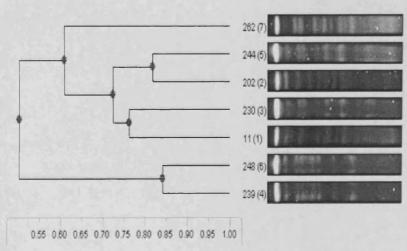


Figure 4.14 Dendrogram of PFGE picture of fig. (4.13). Lane 1: Marker. Lane 2: *E. coli* AES11. Lane 3: *E. coli* iAES202. Lane 4: *E. coli* AES230. Lane 5: *E. coli* AES239. Lane 6: *E. coli* AES244. Lane 7: *E. coli* AES248. Lane 8: *E. coli* AES262.

4.2.7 Detection of chromosomally mediated *bla*_{CTX-M} group1 encoding gene

Probing of the PFGE gels from Figures 4.11 & 4.13 with the radio-labelled bla_{CTX-M-15} DNA probe is demonstrated in Figures 4.15 and 4.16. These results show that two copies of the bla_{CTX-M} group1 were detected in isolate 11 but only one copy of bla_{CTX-M} group1 gene was detected in the other 19 isolates. bla_{CTX-M} group1 was found on a 50kb plasmid in 6 isolates (AES35, AES228, AES231, AES232, AES226 and AES227), whereas bla_{CTX-M} group1 was 100kb in isolates; AES237, AES240, AES246, AES247, carried on a AES239 and AES248. Four isolates (AES11, AES224, AES243, AES245 and AES230) carry bla_{CTX-M} group1 on a plasmid of 125kb. The results in Figures 4.11 and 4.13 showed that isolates; AES35, AES224, AES227, AES231 and AES237 were confirmed to express plasmid mediated CTX-M group1 genes at different plasmid sizes; 50, 125, 50, 50 and 100kb, respectively while isolates AES226, AES228 and AES232 showed plasmid mediated CTX-M group1 genes at 50 kb. The results of probing the PFGE gel of XbaI digests provide another evidence of the occurrence of the CTX-M group1 genes on plasmids detected in (Figures 4.8 and 4.10).

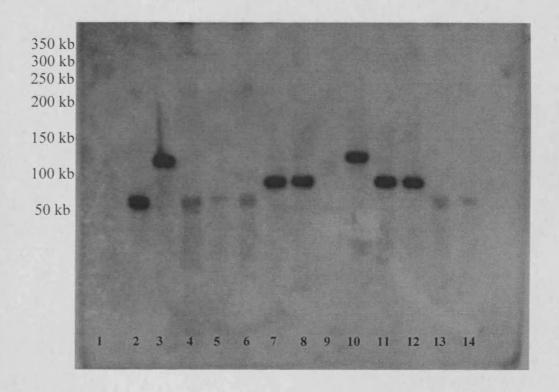


Figure 4.15 Autorad of PFGE gel of fig (4.11) after probing with CTX-M-15. Lane 1: Marker. Lane 2: *E. coli* AES35. Lane 3: *E. coli* AES224. Lane 4: *E. coli* AES228. Lane 5: *E. coli* AES231. Lane 6: *E. coli* AES232. Lane 7: *E. coli* AES237. Lane 8: *E. coli* AES240. Lane 9: *E. coli* AES243. Lane 10: *E. coli* AES245. Lane 11: *E. coli* AES246. Lane 12: *E. coli* AES247. Lane 13: *E. coli* AES226. Lane 14: *E. coli* AES227

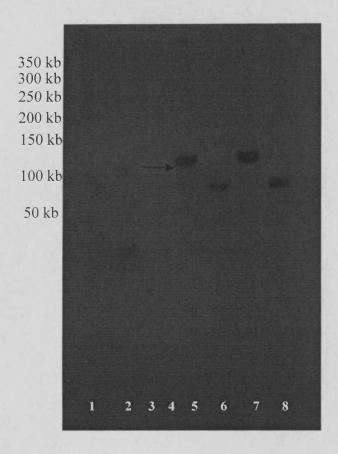


Figure 4.16 Autorad of PFGE gel of fig. (4.13) after probing with CTX-M-15. Lane 1: Marker. Lane 2: *E. coli* AES11. Lane 3: *E. coli* iAES202. Lane 4: *E. coli* AES230. Lane 5: *E. coli* AES239. Lane 6: *E. coli* AES244. Lane 7: *E. coli* AES248. Lane 8: *E. coli* AES262.

4.2.8 Detection of class 1 integrons & Tn402 type transposons

The results of amplification of class 1 integrons from a subset of 14 isolates of *E. coli* isolates selected according to their resistance to aminoglycosides and trimethoprim, demonstrated that 7 isolates; AES11, AES237, AES240, AES243, AES245, AES246 and AES247 out of 15 yielded PCR products of approx. 2kb. Sequencing of the 2 kb PCR products obtained from isolates; AES11, AES245 and AES247 revealed the presence of a classical class 1 integron. The genetic context of the three integrons were exactly the same containing two gene cassettes; *dfrA*17 and *aadA*5 flanked with the integrase gene (*IntII*) and the quaternary ammonium compound gene (*qacAE*), (Figure 4.17). The integron-positive strains were collected from different sources. Isolates AES11 and AES245 were from urine samples from patients admitted to Al-Jamhoriya hospital and Paediatric hospital in Benghazi, whereas isolate AES247 was from an ICU surface in the Benghazi Paediatric hospital. PCR experiments performed on these isolates to detect the occurrence of Tn402 type transposons did not detect the desired amplicons.



Figure 4.17 Genetic context of class 1 integrons found in Libyan *E. coli* isolates. IntI1: Integrase gene. dfrA17: Trimethoprim resistance gene. *aadA*5: Aminoglycoside resistance gene. QacEΔ/SuII: Quaternary ammonium compound resistance gene and sulphonamides' resistance gene.

4.3 Discussion

This section describes the molecular characterisation of antibiotic resistance in a random collection of $E.\ coli$ from Libyan hospitals. Data from this collection indicate that the spread of $bla_{\text{CTX-M}}$ group1 along with ISEcp1 is well established in Libyan health institutions. The results moreover demonstrate the occurrence of $bla_{\text{CTX-M-15}}$, $bla_{\text{CTX-M-3}}$ and $bla_{\text{CTX-M-19}}$ among the clinical isolates in addition to bla_{SHV} and bla_{TEM} .

E. coli isolates collected from both Tripoli and Benghazi hospitals in Libya showed that multi-antibiotic resistant isolates were found in Benghazi hospitals, particularly in the Benghazi Paediatric Hospital. Isolates collected from inpatients (urine, blood and pus samples) and hospital environments (mechanical ventilators, baby incubators, surfaces, and bed sites) showed marginally higher rate of resistance to antibiotics, more specifically to third generation cephalosporins. There was no observable difference in the resistance rates of E. coli isolates cultured from samples collected from patients and isolates cultured from the hospital environment. MICs of 13 isolates showed marginally higher MIC values toward ceftazidime than cefotaxime, this would argue that there is more than one ESBL has contributed to the resistance mechanism of these isolates. Only 3 isolates displayed higher MICs values against cefotaxime compared with that of ceftazidime, this may be attributed to the occurrence of CTX-M type ESBLs, these findings support the report of (Yu & Cheng, 2004; Abassi et al., 2008).

E. coli isolates screened for the occurrence of ESBLs showed the prevalence of CTX-X-M group 1 and CTX-M group 9 among these isolates. Detailed investigation on this group of CTX-M showed the incidence of *bla*_{CTX-M} group1 as the most prevalent ESBL in these isolates. Three isolates demonstrated the occurrence of *bla*_{CTX-M-15} and *bla*_{CTX-M-3}, whereas AES1006 demonstrated the presence of *bla*_{CTX-M-19} type ESBLs. *bla*_{CTX-M-3} has been detected in three isolates; AES226, AES228 and AES232 in addition to *bla*_{CTX-M-15}.

IS*Ecp1* gene was determined for $bla_{CTX-M-15}$ positive *E. coli*; however, a deletion event has been observed by PCR in 12 out of 22 positive isolates to IS*Ecp1*. According to the findings of this work, this deletion event does not seem to affect the movement of CTX-M group1 gene from donor cells to recipients, moreover the IS*Ecp1* either intact or with a deletion event moved with the β-lactamase gene by transconjugation experiments. It is likely to responsible for the movement of bla_{CTX-M} group1 within the same strain but to different plasmid size as shown in *E. coli* isolates AES226, AES227, AES228, AES230, AES231 and AES232 (Figures 4.8 and 4.10) The mobility and expression of CTX-M type ESBLs by IS*Ecp1* has been proposed by Poirel *et al.*, 2003; Abbassi et *al.*, 2008.

 $bla_{\text{CTX-M}}$ group1 and ISEcp1 have been detected in donors and transconjugants of $E.\ coli$ on five different plasmid sizes; 100, 175, 300 and 350kb. $E.\ coli$ donors showed the occurrence of $bla_{\text{CTX-M}}$ group1 and ISEcp1 on one plasmid for each isolate. In $E.\ coli$ isolates; AES35, AES226, AES227, AES228, AES231 and AES232, $bla_{\text{CTX-M}}$ group1 and ISEcp1 were detected on two different plasmid sizes in recipients whereas they were found in one plasmid location in donors. Interestingly, the data from this study shows the fluidity of $bla_{\text{CTX-M}}$ group1 and ISEcp1 by mobilising to another plasmid during conjugation. Such events are rarely reported.

Three plasmid types have been detected by PCR in *E. coli* isolates, IncI in AES237, IncFII in AES226 and IncFIA in AES224. Several reports have shown that IncF plasmids (IncFII and IncFIA) are responsible for carrying and facilitating the movement of *bla*_{CTX-M} group1 and IS*Ecp1* element. (Gonullu *et al.*, 2008; Villa *et al.*, 2010; Lavollay *et al.*, 2006; Partridge *et al.*, 2011).

Amongst all tested isolates for class 1 integrons, one integron composed of two gene cassettes; *dfr*A17 and *aad*A5 and has been previously described reported from patient suffered from UTI in Australia. The same integron was also reported in Spain and China among *E. coli* isolates (Vinue *et al.*, 2008; Tang *et al.*, 2011).

Typing of *E. coli* isolates was performed on the basis of the incidence of ESBLs more specifically bla_{CTX-M} group1 among these isolates, this typing resulted in the occurrence of 3 clonal groups clone 1 (AES226, AES227, AES228, AES231 and AES232), clone 2 (AES243 and AES245 and clone 3 (AES237, AES240, AES246 and AES247). Members of clone 1 were collected from patients and the hospital environment, members of clone 2 were from urine samples from two different patients admitted to the same hospital whereas members of clone 3 from two different locations; isolate AES237 and AES246 were from a urine samples while isolate AES240 and AES247 were from the hospital environment of the same hospital. These findings would suggest that the inter-dissemination of clonal isolates of *E. coli*

in the same hospital is due to longstanding problem and propose earlier establishment of the gene pool in this hospital. Clonal dissemination of bla_{CTX} - $_{\text{M}}$ group1 in E. coli has grasped the attention of many investigators to understand the epidemiology of antibiotic resistance in the clinical settings and even outside the hospitals to study the contribution of clonal isolates in the community (Lavollay $et\ al.$, 2006; Mashana $et\ al.$, 2011). The findings of this section are in accordance to somewhat with clonally spread of E. coli strains harbouring plasmid mediated $bla_{\text{CTX-M-15}}$ genes reported by (Coque $et\ al.$, 2008).

Chapter Five

Detection of blavim-2 in

P. aeruginosa from Benghazi

5.1 Introduction

P. aeruginosa is capable of causing internal and external infections to humans and largely linked with CAIs and HAIs. It contributes by 10 % among all other bacterial infections in hospitals and is considered as the leading cause of cross infections; VAP and wound infections (Enoch et al., 2007). P. aeruginosa antimicrobial resistance is continuing to rise and this is likely elucidated by the ability of this micro-organism to live in diverse environments and share genetic information with numerous species of bacteria that results in withstanding the effect of antimicrobials by means of antibiotic hydrolysing enzymes in particular MBLs (Walsh et al., 2005), (Gales, et al., 2003). The acquisition of MBLs by P. aeruginosa is of particular concern due to the fact that this enzyme confers resistance to all β-lactams with the sole exception of aztreonam. Furthermore, MBL-producing Gram-negative bacteria are resistant to nearly all antibiotics and have become pan-resistant resulting in the wide spread of treatment failure (Pournaras et al., 2003; Yu et al., 2006).

Section 5 deals with the spread of multi-drug resistant isolates of *P. aeruginosa* collected from hospitalised patients, hospital environment swabs in Tripoli and Benghazi. This work focuses on the spread of mobile genetic elements; class 1 integrons and transposons associated with MBLs in 14 *P. aeruginosa* isolates from Libya. The results show the incidence of multi-drug resistant *P. aeruginosa* from clinical and no-clinical sources.

 bla_{VIM-2} has been detected in two isolates of P. aeruginosa collected from two patients admitted to Al-Jalla hospital in Benghazi. Transconjugation experiments using E. coli J53 and P. aeruginosa PA01 failed to produce any ceftazidime resistant transformants. bla_{VIM-2} has been shown to be chromosomally located in two isolates of P. aeruginosa. The investigation did not show the presence of Tn402 that is usually associated with class 1 integrons to facilitate their mobility. The results also showed the incidence of 3 types of class 1 integrons among 7 isolates of P. aeruginosa. Novel integron were submitted to the gene bank and assigned the accession numbers; HE583392.2 and HE583391.2.

5.2 Results

P. aeruginosa collected from clinical and non-clinical samples are illustrated in Table 5.1.

5.2.1 Antibiotic susceptibility testing

Antimicrobial sensitivity testing of 14 clinical and non-clinical isolates of *P. aeruginosa* is shown in Table 5.2. These results show high-level resistance to gentamicin, imipenem, aztreonam, cefotaxime, ceftazidime, ciprofloxacin, piperacillin/tazobactam, trimethoprim/sulphamethoxazole, amoxicillin and ampicillin. *P. aeruginosa* isolates AES30, AES81 AES83 and AES93 had MICs above 8 mg/l. Susceptibility of 10 isolates against amikacin and meropenem was recorded for the other isolates.

5.2.2 Detection of MBLs using Etest

All isolates were subjected to Etest (see section 2.7) using imipenem and imipenem plus inhibitor (IP/IPI) to identify the presence of any MBLs. The results showed that *P. aeruginosa* isolates AES81 and AES83 had high levels of resistance to imipenem yet was sensitive to the presence of EDTA (IPI) and thus indicating the presence MICs higher than 16 mg/l proposing the production of a MBL (Figure 5.1).

5.2.3 Detection of MBL encoding genes

PCR experiments were conducted using primers specific for previously reported MBLs. Data showed the occurrence of 700 bp amplicons from *P*.

aeruginosa isolates AES81 and AES83 (Figure 5.2). The two amplicons resulted from primers designed to amplify bla_{VIM} genes. Both sequences displayed 100% homology to bla_{VIM-2} that is disseminated worldwide (Walsh, et al., 2003).

Table 5.1 List of *P. aeruginosa* used in experiments

P. aeruginosa	Site of collection	Place of collection
AES30	Urine	Al Jamhoryia hospital Benghazi
AES81	Stainless steel container (Chest ward)	Al-Jala hospital Benghazi
AES83	Tip of catheter (ICU)	Al-Jala hospital Benghazi
AES89	Floor of toilet (ICU)	Al-Jala hospital Benghazi
AES91	Suction machine tube (ICU)	Al-Jala hospital Benghazi
AES93	Suction machine outlet	Al-Jala hospital Benghazi
AES146	Floor of toilet (ICU)	Al-Jala hospital Benghazi
AES182	Pus sample	Al-Jala hospital Benghazi
AES273A	Blood sample	Al Jamhoryia hospital Benghazi
AES284	Blood sample	Al Jamhoryia hospital Benghazi
AES287	Urine sample	Al Jamhoryia hospital Benghazi
AES934	Wound infection	Burn and plastic surgery centre Tripoli
AES988	Wound infection	Burn and plastic surgery centre Tripoli
AES998	Wound infection	Burn and plastic surgery centre Tripoli
AES1010	Wound infection	Burn and plastic surgery centre Tripoli

Table 5.2 : Antibiotic sensitivity testing of clinical and non-clinical

P. aeruginosa

Antibiotic	Sensitive	Resistant	
Amikacin	10/15	6/15	
Gentamycin	5/15	11/15	
Imipenem	7/15	9/15	
Meropenem	10/15	6/15	
Cefotaxime	2/15	14/15	
Ceftazidime	6/15	10/15	
Aztreonam	2/15	14/15	
Trimethoprime sulphamethoxazole	1/15	15/15	
Piperacillin tazobactam	7/15	9/15	
Ciprofloxacin	6/15	10/15	
Amoxicillin	0/15	15/15	
Ampicillin	1/15	15/15	
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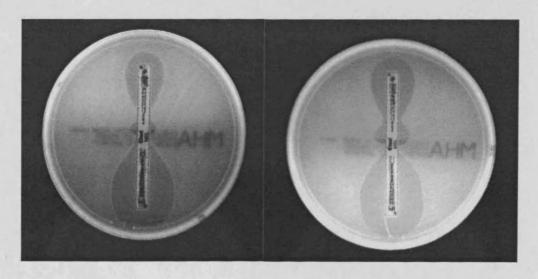


Figure 5.1 Etest of *P. aeruginosa* isolates. A. *P. aeruginosa* AES81. B. *P. aeruginosa* AES83



Figure 5.2 Detection of Tn402 type transposon, Tn21 and bla_{VIM-2} in P. aeruginosa isolates AES81 and AES83. Lane1: Marker. Lane2: Tn402 in isolate AES81. Lane3: negative control. Lane4: Tn402 in isolate AES83. Lane5: negative control. Lane6: Tn21 in isolate AES81. Lane7: negative control. Lane8: bla_{VIM-2} in isolate AES81. Lane9: negative control. Lane10: Tn21 in isolate AES83. Lane11: negative control. Lane12: bla_{VIM-2} in isolate AES83. Lane13: negative control.

5.2.4 Transconjugation experiments

Transconjugation experiments using J53 and PA01 as recipients were performed to detect the possible occurrence of bla_{VIM-2} on a transferable plasmid. The mating experiments did not produce any ceftazidime resistant E. $coli \ or \ P$. aeruginosa transconjugants suggesting that bla_{VIM-2} in these clinical isolates of P. aeruginosa is chromosomally located.

5.2.5 Typing of P. aeruginosa

PFGE of *Spe-1* digestion of isolates of *P. aeruginosa* is shown in Figure 5.3. Dendrogram of Figure 5.3&5.7; in particular isolates AES30, AES81, AES83, AES89, AES91, AES146, AES182, AES273, AES284 and AES287 are illustrated in Figure 5.4. Typing of *P. aeruginosa* showed that isolates; AES89, AES91, AES93, AES146 and AES182 are clonal despite being collected from two geographically distant places. AES81 was collected from stainless steel container in Chest ward in Al-Jalla hospital in Benghazi whereas AES83 was from a clinical sample from tip of catheter from a patient admitted to the ICU of the same hospital. Isolate AES182 is from a pus sample and isolate 146 is from the floor of an ICU toilet. *P. aeruginosa* isolates AES81 and AES83 are clonal despite the fact that they were from clinical and non-clinical samples.

5.2.6 Detection of chromosomally and plasmid mediated blaVIM-2

5.2.6.1 Characterization of chromosomally and plasmid mediated $bla_{ m VIM-2}$

genes

PFEG of S1 genomic DNA digestion of *Pseudomonas* aeruginosa isolates is illustrated in Figure 5.5. Probed PFGE gel of Figures 5.5&5.7 with a custom made probe of bla_{VIM-2} is shown in Figure 5.6&5.8. These results show that bla_{VIM-2} is chromosomally mediated in both isolates positive for the MBL encoding gene, the results of probing of the PFGE gel of *Spe*1 digestion

demonstrate that three copies of bla_{VIM-2} were detected carried by both isolates of P. aeruginosa revealing the occurrence of more than one copy on class 1 integrons in each isolate, The bla_{VIM-2} positive isolates were negative for Tn402 type transposons that might facilitate the mobility of class 1 integrons within the chromosome, intracellular or intercellular but the mechanism of movement of bla_{VIM-2} cannot be attributed to insertion sequences.

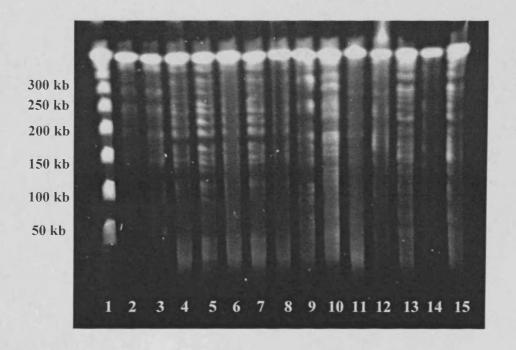


Figure 5.3 PFGE of *Spe-*1 digestion of 14 isolates of *P. aeruginosa*. Lane1: Marker, Lane2: AES81, Lane3: AES83, Lane4: AES89, Lane5: AES91, Lane6: AES93, Lane7: AES146, Lane8: AES182, Lane9: AES273A, Lane10: AES284, Lane11: AES287, Lane12: AES934, Lane13: AES988, Lane14: AES998, Lnae15: AES1010.

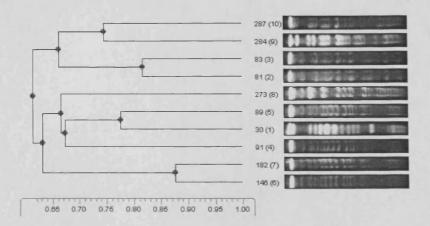


Figure 5.4 Dendrogram of PFGE picture of fig. 5.3: Lane1: isolate no. 30, Lane2: AES81, Lane3: AES83, Lane4: AES91, Lane5: AES89, Lane6: AES146, Lane7: AES182, Lane8: AES273, Lane9: AES284, Lane10: AES287

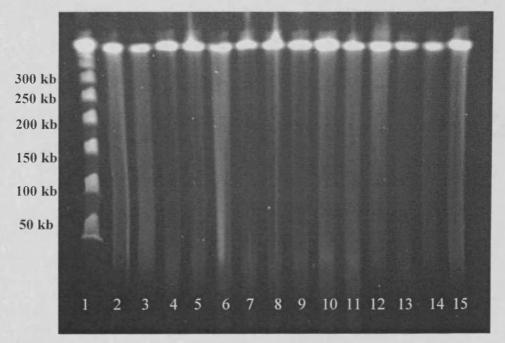


Figure 5.5 PFGE of S1 digestion of 14 isolates of P. aeruginosa. Lane1: Marker, Lane2: AES81, Lane3: AES83, Lane4: AES89, Lane5: AES91, Lane6: AES93, Lane7: AES146, Lane8: AES182, Lane9: AES273A, Lane10: AES284, Lane11: AES287, Lane12: AES934, Lane13: AES988, Lane14: AES998, Lnae15: AES1010.

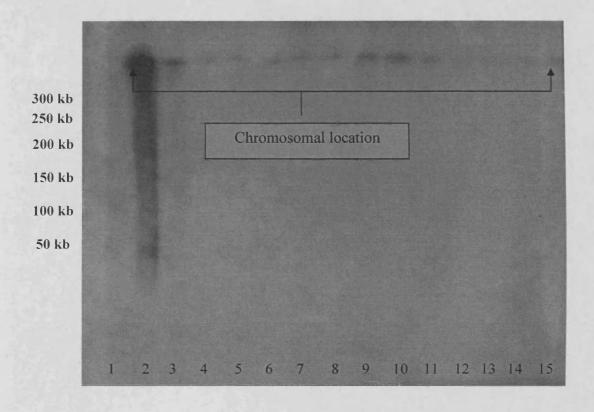


Figure 5.6 Autorad of PFGE of fig. 5.5 after probing wth radio-labelled *bla*_{VIM-2} encoding gene. Lane1: Marker, Lane2: AES81, Lane3: AES83, Lane4: AES89, Lane5: AES91, Lane6: AES93, Lane7: AES146, Lane8: AES182, Lane9: AES273A, Lane10: AES284, Lane11: AES287, Lane12: AES934, Lane13: AES988, Lane14: AES998, Lane15: AES1010.

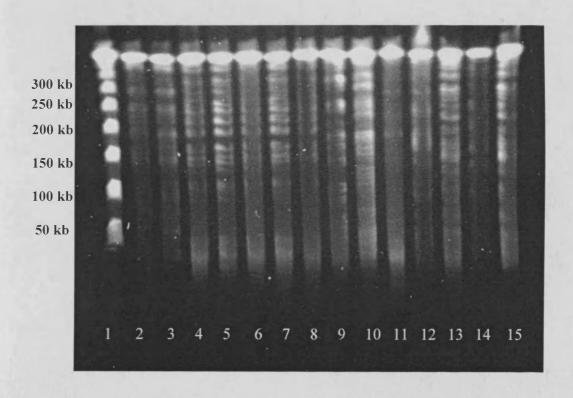


Figure 5.7 PFGE of *Spe*1 digestion of 14 isolates of *P. aeruginosa*. Lane1: Marker, Lane2: AES81, Lane3: AES83, Lane4: AES89, Lane5: AES91, Lane6: AES93, Lane7: AES146, Lane8: AES182, Lane9: AES273A, Lane10: AES284, Lane11: AES287, Lane12: AES934, Lane13: AES988, Lane14: AES998, Lnae15: AES1010.

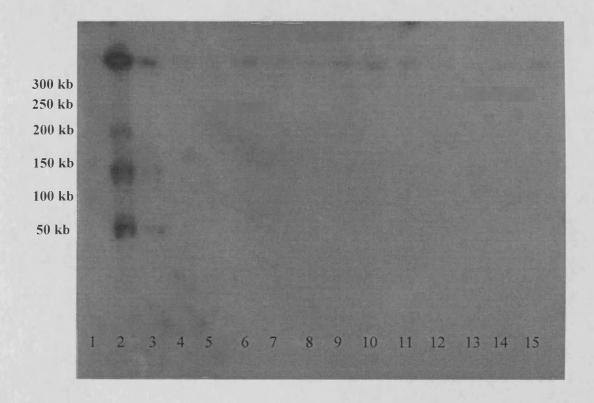


Figure 5.8 Autorad of PFGE of *Spe1* digestions from fig. 5.7 after probing with radio-labelled *bla*_{VIM-2} gene. Lane1: Marker, Lane2: AES81, Lane3: AES83, Lane4: AES89, Lane5: AES91, Lane6: AES93, Lane7: AES146, Lane8: AES182, Lane9: AES273A, Lane10: AES284, Lane11: AES287, Lane12: AES934, Lane13: AES988, Lane14: AES998, Lnae15: AES1010.

5.2.7 Detection of class 1 integrons and transposons

Amplification of class 1 integrons and transposons from clinical and nonclinical P. aeruginosa isolates; AES30, AES81, AES83, AES89, AES91, AES93, AES146, AES182, AES273, AES284, AES287, AES934, AES988 and AES1010 showed that 7 out of 15 yielded PCR products for class 1 integrons; moreover, the size of the integrons amplified suggest that more than one gene cassette is involved in each of the integrons. Specifically, PCR amplicons integrons from P. aeruginosa isolates AES81, AES83, AES89 and AES182 (Table 5.2) revealed products of sizes 3kb, 2.5kb, 1.5kb and 1.5kb respectively (Figure 5.9). The same integron was found in the two clonal P. aeruginosa isolates; AES89 and AES182 and composed of the gene cassette sequence: intI1, aadA6, ORF, qacE\(\Delta\)sul1 (Figures 5.10C\(\Delta\)D) in spite of the different site of collections of these isolates (Table 5.1). Class 1 integrons from AES81 displayed the gene cassette sequence intI1, aadB, blavIM-2, dhfrA1 aac6-II, qacE∆/sul1) (Figure 5.10A). Isolate AES83 possessed the gene cassette sequence intII, aadB1761, dfrA1, aac6-II and quacEΔ/sul1 (Figure 5.10B). PCR on AES83 revealed the occurrence of the same genetic context of the integron detected in AES81 in addition to another novel integron (Figure 5.10B).

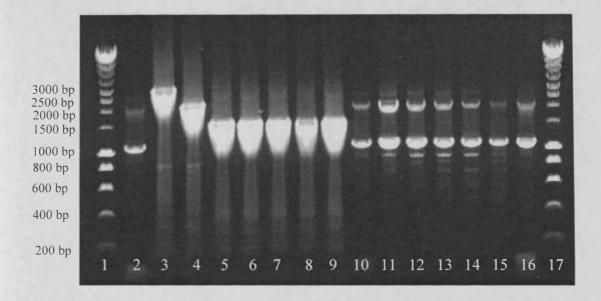


Figure 5.9 Amplification of class 1 integrons from *P. aeruginosa* isolates. Lane1: Marker. Lane2: AES30. Lane3: AES81. Lane4: AES83. Lane5: AES89. Lane6: AES91. Lane7: AES93. Lane8: AES146. Lane9: AES182. Lane10: AES273A. Lane11: AES284. Lane12: AES287. Lane13: AES934. Lane14: AES988. Lane15: AES998. Lane16: AES1010. Lane17: Marker

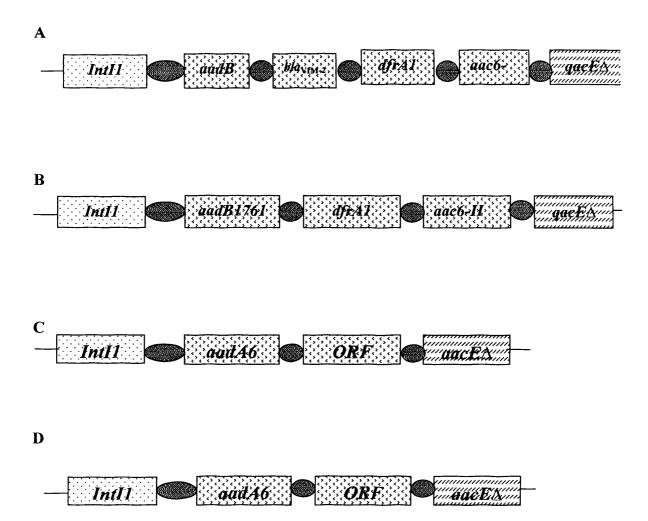


Figure 5.10 Genetic context of class 1 integrons found in Libyan *P. aeruginosa* isolates. A: Class 1 integrons in AES81. B: Class 1 integrons in AES83. C: Class 1 integrons in AES89. D: Class 1 integrons in. AES182. *Int11*: Integrase gene. aadB: gentamicin resistance gene.. *bla*_{VIM-2}: Carbapenem resistance MBL gene. *Aac6-II*: aminoglycoside resistance gene, *aadB1761*: gentamicin resistance gene, *dfrA*: trimethoprim resistance gene, *aadA6*: aminoglycoside resistance gene. QacEΔ/SuII: Quaternary ammonium compound resistance gene and sulphonamides' resistance gene.

5.3 Discussion

This section showed the resistance mechanism of some *P. aeruginosa* isolates randomly collected from Tripoli and Benghazi hospitals, the isolates were from clinical and non-clinical samples. Non-clinical samples were taken as there is very little, if any, infection control in these hospitals and it was of interest to see if isolates from environmental swabs matched those causing infections. The Al-Jalla hospital showed the clonal incidence of multi-drug resistant *P. aeruginosa*, these isolates exhibited the occurrence of different class 1 integrons and in some MBL encoding genes.

The overall mechanism of antibiotic resistance in *P. aeruginosa* utilises many antibiotic resistance determinants (Walsh; 2005; Toleman *et al.*, 2007), efflux pumps (Morero *et al.*, 2011; Cabot *et al.*, 2011) and porin alterations (Muller *et al.*, 2011; Tomas *et al.*, 2010). Specific antibiotic resistance determinants can include MBL encoding genes and serine carbapenemases often linked to mobile genetic elements, the former is exemplified by class 1 integrons sometimes associated with Tn402-like transposons (Tato *et al.*, 2010; Stokes *et al.*, 2006).

bla_{VIM-2} has been found as gene cassette carried by class 1 integron in *P. aeruginosa* worldwide, in Poland (Toleman *et al.*, 2003), Germany (Valenza *et al.*, 2010), Spain, (Rojo-Bezares *et al.*, 2011), Venezuela (Guevara, A. *et al.*, 2009), United States of America (Aboufaycal *et al.*, 2007) and Ireland (Walsh

& Rogers, 2008). It is also emerging Saudi Arabia (Guerin *et al.*, 2005), Japan (Yatsuyanagi *et al.*, 2004), India and Russia (Toleman *et al.*, 2007) Eastern Europe (Bosnjak *et al.*, 2011; Jovcic *et al.*, 2011) and herein I report the first detection of *P. aeruginosa* positive for *bla*_{VIM-2} in Libya.

Probing of PFGE gel of Spe1 digestion with radio-labelled bla_{VIM-2} indicated that the two clonal isolates positive for the MBL gene had the same gene on the same size DNA fragment. Nevertheless, analysis of the PFGE and subsequent dendrogram demonstrated that the strains are not clonal and share less than 85%. the results of this work are consistent with the studies of Lagatolla $et\ al.$, 2006 who described the incidence of high-level endemicity of clonally related $P.\ aeruginosa\ carrying\ bla_{VIM-2}$. These finding are dissimilar to the work of Nho $et\ al.$, 2008 who reported the dissemination of genetically unrelated isolates of $P.\ aeruginosa\ carrying\ blaVIM-2$ in Korea. The results are also conflicts somewhat with the findings of Aboufaycal $et\ al.$, 2007 on the emergence of different ribotypes of $P.\ aeruginosa\ positive$ for bla_{VIM-2} genes.

Acquired class 1 integrons are considered major contributors of the multiresistance phenotype expressed by bacteria due the capability of integrons to capture gene cassettes and accommodate them within the variable region of the integron by means of the integrase gene (*int*) and the site specific recombination site (*att1*) and consequently an impressive gene array may result from this fluid capturing machine from the gene pool surrounding the bacteria. (Bennett, 2008). Gene cassettes include genes encoding functions such as aminoglycoside (Lagatolla *et al.*, 2006; Naas *et al.*, 2006) and trimethoprim modification (Hu *et al.*, 2011). It also comprise major members of the class B β-lactamases family (Jeong *et al.*, 2009; Walsh *et al.*, 2005; Castanheira *et al.*, 2004) and some members of class A and D β-lactamases (Juan *et al.*, 2009).

The detailed characterisation of four Libyan isolates of P. aeruginosa indicated the incidence of three different genetic contexts of class 1 integrons. The bla_{VIM-2} positive isolates showed the occurrence of the same integron structures composed of MBL encoding gene blaviM-2 and two aminoglycoside resistance genes; aadB and aac6-II genes. Similar findings were reported from (Lagatolla et al., 2006; Rojo-Bezares et al., 2011). A novel class 1 integron was detected in P. aeruginosa AES83, the integron contained two aminoglycoside resistance genes and one trimethoprim resistance gene. It is composed of the genetic array aadB1761 and dfrA1 and aac6-II. P. aeruginosa isolates AES89 and AES182 showed the incidence of the same integron with exactly the same genetic context; aadA6 and ORF in the variable region of the integrons. The occurrence of this integron has been documented in P. aeruginosa by several authors, Naas, et al., reported an In51 class 1 integron composed of aadA6 as a novel aminoglycoside adenylyltransferase gene cassettes and an ORF which was the first description of the structure of this variable region. (Naas et al., 1999). Similar findings were reported by Shahcheraghi et al., who reported the incidence of 4 integrons with different

gene cassettes arrays acquired by 41 clinical isolates of MDR *P. aeruginosa* in Tehran, Iran, one of the isolates contained a class 1 integron with a variable region of *aadA6* and *ORF* (Shahcheraghi *et al.*, 2010). Some reports described the incidence of this integron as part of complex genetic structure found in *P. aeruginosa* (Nemec *et al.*, 2010), other reports showed the occurrence of this integron as part of complex structure (Naas *et al.*, 2006). It seems that *aadA6* and *ORF* containing integron first discovered in 1999 is the common ancestor and is now found in different geographical areas such France, Iran and now Libya.

Multi-resistant isolates P. aeruginosa has been found in different parts of Libyan hospitals, it has been found in ICUs, Chest wards, patients or hospital facilities, and even from the floors of some toilettes in the ICUs. Such emergence of the resistant isolates is a worrisome subject and reveals the lack of a proper hygiene and infection control programs currently operating in Libya. bla_{VIM-2} was identified in one isolate of P. aeruginosa, that was collected from stainless steel containers used to keep forceps and other surgical tools in the Chest ward of Aljalla hospital, whereas the other isolate was from a tip of catheter from patient admitted to the ICU of the same hospital in Benghazi.

Chapter Six

Genetic & biochemical characterization of a novel metallo-β-lactamase, TMB-1, from a *Achromobacter xylosoxidans* strain isolated from Tripoli, Libya

6.1 Introduction

The results in this section follow on from the determination of class 1 integrons in *Achromobacter xylosoxidans* (two integrons one at 3kb and one at 2.5kb), one in *Stenotrophomonas maltophilia* (2.5kb) and two isolates of *Citrobacter freundii* each positive for a class integron of 1kb. The isolates were from non-clinical sources from the major hospitals in Tripoli, Libya.

Mobile MBL genes are becoming increasingly frequent and pose a significant challenge to the treatment of Gram-negative infections world-wide such that most MBL-producing organisms are only sensitive to colistin (Cornaglia *et al.*, 2007). These enzymes efficiently hydrolyze all β-lactams, including carbapenems (with the exception of aztreonam), and are located on transferable genetic platforms; namely, either ISCR elements or class 1 integrons. The class 1 integrons are sometimes embedded in Tn21 or Tn402-like transposons (Tato *et al.*, 2010). However, several recently characterised MBL genes have been flanked or associated with ISCR elements namely, *blaspm-1* with ISCR4, *blandm-1* with ISCR1 and *bla*AIM-1 with ISCR16 (Kumarasamy *et al.*, 2010; Poirel *et al.*, 2004; Toleman *et al.*, 2006).

Several different MBL-type enzymes have been described, among them NDM-1, IMP and VIM derivatives being the most widespread (Bush, 2010). The *bla*IMP-like (Senda *et al.*, 1996) and *bla*VIM-like (Cornaglia *et al.*, 2000) genes have been identified in clinically relevant bacteria belonging to the Enterobacteriaceae

family, in *Pseudomonas* spp., and in *Acinetobacter* spp. Whilst *bla*NDM-1 has mainly been found in Enterobacteriaceae (Bush & Fisher, 2010; Kumarasamy *et al.*, 2010). Several other MBLs have been identified in specific geographical locations, including SIM-1 from *A. baumannii* in Korea (Lee *et al.*, 2005), KHM-1 from *C freundii* in Japan (Sekiguchi *et al.*, 2008), SPM-1 in Brazil (Picao *et al.*, 2009; Toleman *et al.*, 2002), GIM-1 in Germany (Castanheira *et al.*, 2004), and AIM-1 in Australia (Walsh, unpublished data) were all identified in *P. aeruginosa*. As hospitalized patients are subject to infections by Gram-negative bacteria and, in Libya adherence to internationally accepted infection control policies are not optimal, the hospital wards and immediate hospital environment were examined for resistance to extended-spectrum cephalosporins. This study reports these findings and further describes the genetic and biochemical characterization of a novel MBL, TMB-1, from Tripoli, Libya.

6.2 Results

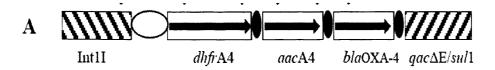
6.2.1 Analysis of samples from Tripoli hospitals

Thirty eight Gram-negative bacteria were able to grow on 10mg/l of ceftazidime (Table D.1 in appendix D). It lists the non-clinical swabs from major hospitals in Tripoli, Libya. All swabs yielded isolates capable of growing on 10mg/l of ceftazidime. The results demonstrate that the environmental isolates collected from the wider Tripoli environment and hospital environment show a high level of resistance to third generation of aminoglycosides and β-lactams. For example, one isolate of *A. xylosoxidans*, AES301, displayed MICs of, 8mg/l, 2mg/l, 4mg/l, 16mg/l, 10mg/l, 32mg/l, and 16mg/l to gentamicin, imipenem, meropenem, cefepime, ceftazidime, cefotaxime, and aztreonam, respectively. Indeed AES301 was sensitive to amikacin and ciprofloxacin (1mg/l) and colistin (0.5mg/l). All isolates grew on media containing ceftazidime and were subsequently screened by the MBL Etest strip to detect the presence of MBL. AES301 gave a positive Etest MBL result and together with the fact it possessed a class 1 integron, was investigated further.

6.2.2 Genetic analysis of carbapenem resistance in A. xylosoxidans strain AES301

All isolates were screened for class 1 integrons and mobile genetic elements (Tn21, Tn402, and ISCR elements) and 4 out of 38 isolates were positive for class 1 integrons: one A. xylosoxidans (two integrons of one at 3kb and one at

2.5kb), one S. maltophilia (2.5kb) and two isolates of C. freundii each positive for a class integron of 1kb. None of the isolates were positive for Tn21, Tn402, and ISCR elements. Sequencing analysis of the class 1 integron PCR products from A. xylosoxidans AES301, Lasergene package (DNAStar, Madlison, WI) was used to study the nucleotide sequences and the deduced amino acids. The nucleotide sequences were subsequently analysed (http://www.ebi.ac.uk/Tools/sss/fasta/nucleotide.html). The two integrons from A. xylosoxidans AES301 revealed two near identical integrons; the first possessing the gene cassettes dhfrA4-aacA4-bla_{OXA-4}, and the second integron-containing the gene cassettes bla_{TMB-1} -aacA4- bla_{OXA-4} (Figure 6.1) (Appendix E). The carbapenem resistance could not be mated to either E. coli DH5α or P. aeruginosa PA01 recipients suggesting the integrons are chromosomally located. This inference was supported by Southern hybridisation data using the bla_{TMB-1}gene as a probe which back-blotted to the A. xylosoxidans AES301 chromosome even though it possessed several plasmids.



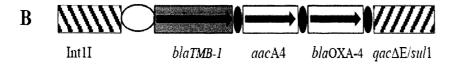


Figure 6.1 Genetic context of two class 1 integrons found in *A. xylosoxidans* AES301 and the primers used to sequence the structures. A. Class 1 integron consisting of the gene cassettes: dhfrA4 gene, aacA4 gene, bla0XA-4 and the qacE Δ/sul 1 fusion. B. Class 1 integron consisting of the gene cassettes: blaTMB-1, aacA4, bla0XA-4 and qacE Δ/sul 1 genes. The white ellipse represents the hybrid promoter from IntI1. The black ellipse represents the 59bp elements at the start of each gene cassette.

6.2.3 Cloning and transconjugation experiments

The results of cloning of the class 1 integron into *E. coli* DH5α produced 3 types of colonies when 50μl of the broth culture was streaked onto L.B. agar plates supplemented with 50 mg/l of Kanamycin, X-galactose and IPTG; white colonies, white colonies with blue spot in the middle and dark blue colonies. Amplification of the class 1 integron from these colonies showed that some white colonies and dark blue colonies produced 2kb and 4kb PCR products which were different from the expected size of class 1 integron used in the cloning experiments. Sequencing of these PCR products did not give

any readable sequences revealing the miss-priming of the oligonucleotides. These results did not produce any cells positive for bla_{TMB-1} . The results of transconjugation experiments showed that the GFP E. coli was not able to grow on L.B agar supplemented with 50 mg/l of rifampicin and 4 mg/l of cefotaxime revealing that the bla_{TMB-1} failed to transfer to the GFP E. coli and thus is probably chromosomally mediated.

6.2.4 Genomic location of bla_{TMB-1}

The results of PFGE separation of S1 digestion of the whole genomic DNA of A. xylosoxidans and selected environmental isolates is shown in figure 6.2A. Probing of the PFGE gel of S1 digested genomic DNA with radio-labelled bla_{TMB-1} is illustrated in (Figure 6.2B). These results showed that bla_{TMB-1} is located on the chromosome. These results are also in accordance with the cloning and transconjugation experiments that failed to detect any movement of bla_{TMB-1} from parents to recipients predicting the chromosomal location of this bla_{TMB-1} . The results also showed an additional TMB-1 positive isolate of A. xylosoxidans which was found in the ICU male surgery ward in Tripoli central hospital.

6.2.5 Comparison of TMB-1 with other MBLs

bla_{TMB-1} contains 735 nucleotides encoding a protein of 245 amino acids and possessing all the key motifs of Ambler class B β-lactamase, SDS gel electrophoresis showed an approximate molecular mass of 25 KDa. At amino acid level, TMB-1 was most closely related to DIM-1 (62%) and GIM-1

(51%), and showed only 48%, 31%, and 29% identity to IMP-1, VIM-2, and NDM-1, respectively (Figure 6.3) (Koh *et al.*, 2004; Poirel *et al.*, 2010; Castanheira *et al.*, 2004; Yong *et al.*, 2009; Garcia-Saez *et al.*, 2008). TMB-1 also possesses virtually the same key residues as DIM-1 that make up the zinc binding residues and the secondary residues supporting the active sites including the putative loop used to facilitating binding of β-lactams during hydrolysis (Figure 6.4). The secondary structural comparison of TMB-1 with VIM-2, (Garcia-Saez *et al.*, 2008) shows that TMB-1 possesses the key zinc binding residues for B1 MBLs; His116, His118, and His196 (zinc 1) and Asp120, Cys221, and His263 (zinc 2) (Figure 6.4).

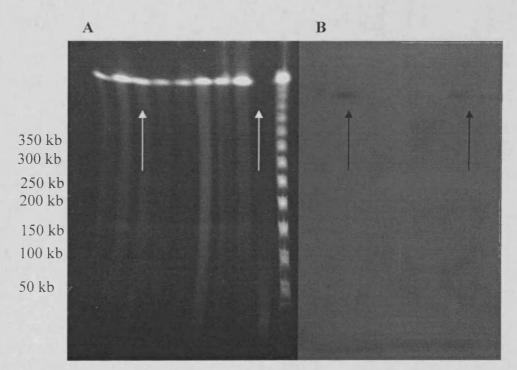


Figure 6.2 Detection of genetic location of bla_{TMB-1} in A. xylosoxidans. A. PFGE of S1 digested DNA. Lane1: AES301. Lane2: AES302. Lane3: AES303. Lnae4: AES304. Lane5: AES305. Lane6: AES306. Lane7: AES307. Lane8: AES309. Lane9: Marker. B. Autorad after probing with a radio-labelled bla_{TMB-1} of PFGE gel from fig. 6.2A.

The most noticeable difference between TMB-1 and VIM-2 is a gap in the N-terminus of the TMB-1 protein just before the beginning of the first β-sheet (β1, Figure 6.5). This gap in TMB-1 is situated just prior to the "flapping loop" of VIM-2, (Garcia-Saez *et al.*, 2008) further, there are several amino acid differences in this region; namely, (VIM-2 to TMB-1) Q60S, S61R, F62V, D63E, A66G, V67L, and a gap at position 65. This region is also diverse between VIM-2 and VIM-7 where it has been suggested that this contributes to a more flexible "flapping loop" (Borra *et al.*, 2011). Interestingly, DIM-1 possesses the same sequence as TMB-1 in this region with the exception of the gap and the amino acid changes N63E and F65W (DIM-1 to TMB-1) (Poirel *et al.*, 2010). An additional gap in TMB-1 between β7 and β8 compared to VIM-2 is also observed (Garcia-Saez *et al.*, 2008) (Figure. 6.5).

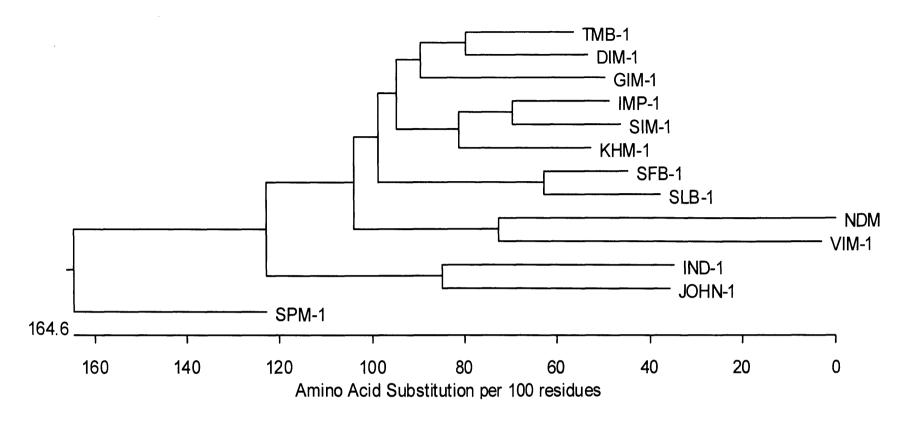


Figure **6.3** Dendrogram of Comparison of amino acid sequence of the β-lactamase TMB-1 and those of other acquired MBLs (DIM-1, GIM-1, IMP-1, <u>KHM-1</u>, NDM-1, VIM-1, SPM-1 and SIM-1) and several naturally occurring MBLs (IND-1 from *Chryseobacterium indologenes*; JOHN-1 from *Flavobacterium johnsoniae*; SLB-1 from *Shewanella livingstonensis*; and SFB-1 from *Shewanella figidimarina*) (Koh *et al.*, 2004; Poirel *et al.*, 2010; Castanaheira *et al.*, 2004; Sekiguchi *et al.*, 2008; Yong *et al.*, 2009; Lee *et al.*, 2005; Toleman *et al.*, 2002; Tato *et al.*, 2010; Naas *et al.*, 2003; Poirel *et al.*, 2005; Lin *et al.*, 2005



Figure **6.4** Comparison of amino acid sequence of the β-lactamase TMB-1 and those of other acquired MBLs (DIM-1, GIM-1, IMP-1, KMH-1, NDM-1, VIM-1, SPM-1 and SIM-1) and several naturally occurring MBLs (IND-1 from *Chryseobacterium indologenes*; JOHN-1 from *Flavobacterium johnsoniae*; SLB-1 from *Shewanella livingstonensis*; and SFB-1 from *Shewanella figidimarina*) (Koh *et al.*, 2004; Poirel *et al.*, 2010; Castanaheira *et al.*, 2004; Sekiguchi *et al.*, 2008; Yong *et al.*, 2009; Lee *et al.*, 2005; Toleman *et al.*, 2002; Tato *et al.*, 2010; Naas *et al.*,2003; Poirel *et al.*, 2005; Lin *et al.*, 2005). Shaded amino acids are those conserved with TMB-1. β-Lactamase numbering was according to the BBL nomenclature (Galleni *et al.*, 2001).

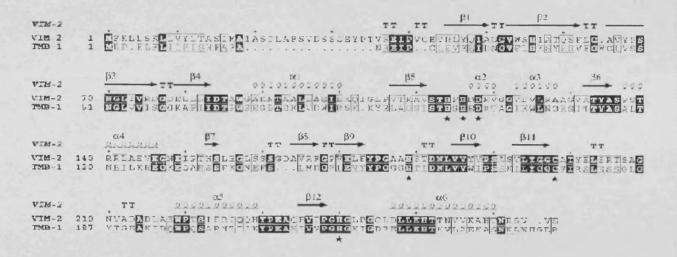


Figure 6.5 Secondary structure of TMB-1 compared to that of VIM-2 (Garcia-Saez *et al.*, 2008). The β - strands and β -helixes are indicated above the TMB-1 sequence. The conserved residues are indicated in black. The conservative amino acid substitutions are boxed. The figure was obtained with ESPript software (http://espript.ibcp.fr/ESPript/ESPript/).

6.2.6 Kinetic properties of TMB-1.

The kinetic properties of TMB-1 were compared with that of DIM-1 and GIM-1 (Table 6.1) and were broadly similar with the exception for the rate of turnover of substrates (Kcat values) (Table 6.1). The Km values for TMB-1 were similar to DIM-1 and GIM-1 for the penicillins and cephalosporins but were higher for meropenem indicating that meropenem is not a "natural" substrate for TMB-1. The Kcat values for TMB-1 were similar for the pencillins compared to GIM-1 but were significantly less (20 to 500-fold) than both DIM-1 and GIM-1 for cefoxitin, cefuroxime and ceftazidime (Poirel et al., 2010; Castanheira et al., 2004) (Table 6.1). TMB-1 also possessed lower Kcat values for the carbapenems (3 to 30-fold) compared to DIM-1 and GIM-1. These data further showed that the efficiency of the enzyme (Kcat/Km) was significantly lower for the cephalosporins and carbapenems (Table 6.2). Such differences in kinetic values is interesting given that TMB-1 and DIM-1 are similar and that their sequence over the "VIM-2 flapping loop" is nearly identical, further suggesting that the reasons for these kinetic differences could lie elsewhere in the TMB-1 structure (Figure 6.5).

Table 6.1 Steady-state kinetic constants of TMB-1, DIM-1 and GIM-1 (Poirel et al., 2010; Castanheira et al., 2004)

Compound .	TMB-I			DIM-1 ^a			GIM-1 ^b		
	k _{cat} (s ⁻¹)	<i>K</i> _m (μM)	k_{cat} / K_m $(s^{-1}/\mu M)$	k _{cat} (s ⁻¹)	<i>K</i> _m (μM)	k_{cat} / K_m $(s^{-1}/\mu M)$	k _{cat} (s ⁻¹)	<i>K</i> _m (μM)	k_{cat} / K_m $(s^{-1}/\mu M)$
Piperacillin	3.3	72	0.046	NR	NR	NR	6.9	69	0.1
Cefoxitin	0.3	69	0.004	8	20	0.4	8.3	206	0.04
Cefuroxime	0.1	9	0.011	NR	NR	NR	5.9	7	0.843
Ceftazidime	0.07	31	0.002	3	50	0.06	18	31	0.58
Ertapenem	0.4	31	0.013	NR	NR	NR	NR	NR	NR
Imipenem	1.7	200	0.009	35	80	0.438	27	287	0.094
Meropenem	1.4	75	0.019	50	10	5	2.7	25	0.108
Aztreonam	< 0.01	ND	ND	< 0.01	ND	ND	ND	ND	ND

^aPoirel et al., 2010

cNR: Not Reported

dND: Not Detected

^bCastanheira et al.,2004

6.3 Discussion

Non-clinical isolates collected from the major Tripoli hospitals were able to grow on media containing ceftazidime. MDR Gram-negative bacteria e.g *A. xylosoxidans*, *P. aeruginosa*, *A. baumannii*, *E. cloacae* and *C. freundii* were detected in the hospital environment inside and around the hospitals. The occurrence of MDR strains in the clinical setting of Tripoli hospitals reveals the lack of hospital hygiene in these hospitals.

Investigation into the incidence of antibiotic resistance genes embedded in class 1 integrons was surprising. Two class 1 integrons were detected in A. xylosoxidans, the 3kb integron had a novel MBL gene (bla_{TMB-1}) in the first position followed by two antibiotic resistance genes aacA4 and bla_{OXA-4} , whereas the 2kb composed of dhfrA4, aacA4 and bla_{OXA-4} . The occurrence of such integrons is unusual in terms of their genetic context and more importantly the discovery of a novel MBL in a non-clinical isolate because of the rarity of environmental MBLs whose genes are shown to be mobile.

The occurrence of A. xylosoxidans in the non-clinical settings of Tripoli hospitals may perhaps indicate the dissemination of bla_{TMB-1} in Tripoli and across Libya. The occurrence of bla_{TMB-1} in an environmental strain may raise the question of whether MBLs are originated from environmental bacteria as

the case of origin of *bla*_{CTX-M-3} form *Kluyvera ascorbata* proposed by (Rodriquez *et al.*, 2004).

TMB-1 has all the key motifs of Ambler class B β-lactamases; it shares 62% similarity with DIM-1 (Poirel *et al.*, 2010) and 51% with GIM-1 (Castanheira *et al.*, 2004). TMB-1 and DIM share the same key residues that facilitate binding of these enzymes to β-lactam antibiotics during hydrolysis. Secondary structure of TMB-1 showed that these enzymes posses all the key zinc binding residues (His116, His118 and His196) required for zinc1 activity and (Asp120 and His263 for zinc 2 activities) as reported for all class B1 MBLs (Osano *et al.*, 1994; Lauretti *et al.*, 1999; Toleman *et al.*, 2002; Castanheira *et al.*, 2004; Lee *et al.*, 2005; Gupta, 2008; Sekiguchi *et al.*, 2008; Yong *et al.*, 2009; Poirel *et al.*, 2010).

Achromobacter is not a key pathogen although a growing number reports indicate that it is capable of causing UTIs (Tena et al., 2008), ocular infections (Reddy et al., 2009), contamination of dialysis (Turgutalp et al., 2011) and ultrasound equipment (Olshtain-Pops et al., 2011) and can cause additional complications in cystic fibrosis patients (Lambiase et al., 2011; Ridderberg et al., 2011). Interestingly, although AES301 carrying TMB-1 was found from a ward surface swab, the same strain could not be identified from a clinical source although in Libya clinical diagnostic microbiology may not normally scrutinize strains to species level. To date only two cases of MBL genes (both

bla_{VIM-2}) have been reported from *Achromobacter* spp. – from Greece (Sofianou *et al.*, 2005) and Korea (Shin *et al.*, 2005) and both carried in class 1 integrons. All other MBLs discovered IMP; VIM; SPM-1; GIM-1; SIM-1; AIM; KHM-1; NDM-1 and DIM-1 were detected in clinical isolates from patients suffered from serious infections. (Osano *et al.*, 1994; Lauretti *et al.*, 1999; Toleman *et al.*, 2002; Castanheira *et al.*, 2004; Lee *et al.*, 2005; Gupta, 2008; Sekiguchi *et al.*, 2008; Yong *et al.*, 2009; Poirel *et al.*, 2010).

This is the first MBL reported from Libya and being a new MBL subclass B1 provides further evidence of the structural heterogeneity of this group of β -lactamases.

Chapter Seven General Discussion

This study investigated the mechanism of antibiotic resistance in randomly collected isolates of Gram-negative bacteria in Tripoli and Benghazi (Figure 7.1). The isolates were from clinical samples recovered from patients admitted to the hospitals and from the hospital environment and for the purpose of my thesis these are regarded as non-clinical samples. These swabs were from floors, walls, bedsides, toilets, workstation tables, mechanical ventilators, oxygen suppliers, stainless steel containers, curtains, baby incubators, trolleys and other instruments used in the hospitals in particular ICUs. The non-hospital environmental isolates were swabs collected from streets in Tripoli and Benghazi; the samples were from floors and dusty areas in the streets.

Figure 7.1 Map of Libya showing the important cities and their locations (http://www.google.co.uk/imgres?q=libyan+map&hl=en&gbv=2&tbm=isch



The data in my thesis clearly demonstrates the emergence of MDR Gramnegative bacteria in hospital settings that include clinical and non-clinical isolates. In total, 171 isolates were recovered for this study. Enterobacteriaceae represent the most numerous of the Gram-negative with K. pneumoniae as the most frequently isolated bacteria. High prevalence of ESBLs was detected among K. pneumoniae and E. coli, more importantly bla_{CTX-M} group1 were found widely disseminated in association with ISEcp1 being located immediately upstream of most of the ESBL encoding gene.

The highest incidence of $bla_{\text{CTX-M}}$ group1 was detected among clinical and non-clinical isolates collected from hospitals. *K. pneumoniae* and *E. coli* isolates tested for the occurrence of conjugative plasmids responsible for the movement of $bla_{\text{CTX-M}}$ group1/ISEcp1. The study showed that these plasmids can move $bla_{\text{CTX-M-15}}$ /ISEcp1 genes from the resistant isolates to sensitive *E. coli*, leading to *E. coli* transconjugants expressing an MDR phenotype. It is worth mentioning that plasmid mediated $bla_{\text{CTX-M-15}}$ associated with ISEcp1 has been detected in an environmental isolate of *K. pneumoniae* AES817 (ST511) cultured from one of Benghazi streets – this isolate clearly has not been recently exposed to antibiotics. These findings are an alarmingly indication that an outbreak of MDR *K. pneumoniae* and *E. coli* isolates can occur in different hospitals that provide different services to patients; these hospitals are maternity hospitals, pediatric hospitals, surgical hospitals and general hospital in Tripoli and Benghazi.

The occurrence of K. pneumoniae and E. coli in Libyan hospitals is interesting in terms of the prevalence of clonally and non-clonally related $bla_{CTX-M-15}$

positive isolates (Lee *et al.*, 2011; Webster *et al.*, 2011; Alfaresi *et al.*, 2011; Fam *et al.*, 2011; Al Sweih *et al.*, 2011). The collection of isolates being clinical, non-clinical or environmental was non-representative seeking the occurrence of any resistance mechanism in these isolates. Among all the isolates positive for *bla*_{CTX-M} group1, 4 pairs of *K. pneumoniae* isolates were found clonally related. One pair represented two isolates that were found in two different hospitals in Benghazi - isolates AES135 and AES140 that were cultured from urine and blood samples, respectively.

The occurrence of several clonally related *K. pneumoniae* and *E. coli* that resulted from the non-representative sample collection reflected the total lack of appropriate infection control programs in Libyan hospitals. Lack of hospital hygiene is another reason that has contributed to the emergence and spread of multi-drug resistant isolates of *K. pneumoniae* and *E. coli* in Libyan hospitals. The overuse of extended- spectrum cephalosporins to treat infections in Libya may be another significant factor for the appearance of clonally and non-clonally related isolates of *K. pneumoniae* and *E. coli* in Libya. (Ito & Kamimura, 2011; Wang *et al.*, 2011)

The occurrence of bla_{CTX-M} group 1/ISEcp1 on different plasmid sizes in K. pneumoniae and E. coli isolates suggest the movement of these genes by conjugative plasmids (Lavollay, et al., 2006) as shown from data on mating studies in a subset of these isolates. The ability of these isolates to mobilize

and facilitate the spread of antibiotic resistance genes may explain the frequency of bla_{CTX-M} group1/IS*Ecp1* in non-clonally related species of *K. pneumoniae* and *E. coli* (Woodford *et al.*, 2004; Gonullu *et al.*, 2008; Lavollay *et al.*, 2006, Yu & K. Cheng, 2004; Ramdani-Bouguessa, *et al.*, 2006; Abbassi et *al.*, 2008). A possible explanation for the different plasmid location of *bla*_{CTX-M} group1 is due to the presence of the insertion sequence, IS*Ecp1* that is known to move and promote the expression of the ESBL gene. Two suggested mechanisms of *bla*_{CTX-M} group1 acquisition are proposed: the movement of *bla*_{CTX-M} group1 by conjugative plasmids and the role of the insertion sequence IS*Ecp1* in mobilizing *bla*_{CTX-M} group1 within the strains (Abbassi et *al.*, 2008; Poirel *et al.*, 2003; Naseer & Sundsfjord, 2011; Younes *et al.*, 2011; Gonullu *et al.*, 2008; Villa *et al.*, 2010; Partridge *et al.*, 2011).

Data on Libyan $E.\ coli$ give evidence of the occurrence of both mechanisms in the movement of antibiotic resistance determinants for two reasons. bla_{CTX-M} group1 and ISEcp1 were detected on two different plasmid locations in parent and recipients which suggests the role of ISEcp1 in mobilizing bla_{CTX-M} group1 (Rejiba et al., 2011; Smet et al., 2010) to a different size plasmid in recipient. An alternative suggestion is the creation of a co-integrative plasmid during conjugation. Similar resistance profiles were detected in parents of K. pneumoniae and the $E.\ coli$ transconjugants (GFP $E.\ coli$ and $E.\ coli$ J53) suggesting that many of the antibiotic resistance determinants expressed by

the Libyan isolates of *K. pneumoniae* and *E. coli* are located on conjugative plasmids (Mnif *et al.*, 2010; Cullik *et al.*, 2010; Partridge *et al.*, 2011).

In addition to previously reported *K. pneumoniae* clones known to carry $bla_{CTX-M-15}$ e.g. ST15, ST29, ST101 and ST147, this study provided new MLST groups - *K. pneumoniae* ST509 and ST486 and, additionally, a novel environmental allele ST511 was found carrying $bla_{CTX-M-15}$ on different plasmid sizes. The results of MLST data provided further evidence of the incidence of $bla_{CTX-M-15}$ in different clones of *K. pneumoniae* and also shows novel sequence types are involved in the carriage of $bla_{CTX-M-15}$ in Libya (Nielsen *et al.*, 2011; Pitart *et al.*, 2011; Papagiannitsis *et al.*, 2011; Hrabak *et al.*, 2009; Damjanova *et al.*, 2008).

RAPD and MLST techniques used in this study show that they are similar in detecting the strain relatedness between *K. pneumoniae* isolates; however, they still are less discriminatory than PFGE which is based on genomic DNA separation rather than amplification of specific fragments or housekeeping genes. This study supports the application of RAPD technique to correlate the relation of bacterial species to each other but not in determining the detailed clonality within a species. Unsurprisingly, RAPD and MLST when compared with PFGE demonstrated quite different results - some isolates appeared very similar by RAPD but distinctly different with PFGE. Other isolates e.g. *K. pneumoniae* AES74, AES59 and AES1029 that belong to ST15 were

comparable by RAPD and MLST, but by PFGE demonstrated a low-level of similarity. However, RAPD may help in the general assessment to determine the broad similarity among bacterial species and it is rapid and inexpensive. The MLST method is reliable but depends upon sequence stability among housekeeping genes. PFGE can provide very detailed information on the differences between species or subspecies; but it is specialized, temperamental and quite expensive compared to MLST (Hotchkiss *et al.*, 2011).

Class 1 integrons, whether alone or in association with Tn402-type or Tn21 transposons are among the most represented mobile genetic elements responsible for capturing genes in the form of gene cassettes. Among the Libyan isolates tested, 11 different type of class 1 integrons were detected in 21 isolates of Enterobacteriaceae and non-fermenters. Twelve class 1 integrons were detected in *K. pneumoniae*, 3 in *E. coli*, 3 in *P. aeruginosa* and 2 in *A. xylosoxidans*. Most integrons detected in this study carried trimethoprim and aminoglycoside resistance genes which are typically found as gene cassettes. Six different integrons were found in *K. pneumoniae* isolates, two of which were embedded on Tn402-type transposons, of these 6 integrons, 5 integrons have been previously reported from different geographical areas. One of these integrons (*Int1*, *dfrA17*, *aadA5*, *qacEA*) was also found in *K. pneumoniae* and *E. coli* isolates examined in this study (Vinue *et al.*, 2008; Tang *et al.*, 2011). Another integron harbouring *dfrA*12 and *aadA*2 was detected in *K. pneumoniae* clinical isolate AES48. This isolate

was identified in this study as ST147 which is known as a world wide ST contributing to the emergence of $bla_{\text{CTX-M-15}}$ genes. The genetic context of this integron has been reported in clinical isolates of *E. coli* in Asia and Europe (Yu *et al.*, 2004; Tang *et al.*, 2001; Saenz *et al.*, 2009; Vinue *et al.*, 2008)

These findings show that the same resistance mechanisms are disseminated worldwide, and also show that the Libyan isolates share the same genetic pool with bacterial species worldwide.

Class 1 integrons detected in non-fermenters included in addition to trimethoprim and aminoglycoside resistance genes, antibiotic resistance genes responsible for conferring resistance to broad-spectrum β-lactams. *bla*_{VIM-2} was detected in two clonal isolates of *P. aeruginosa* collected from different places in the same hospital, AES81 was non-clinical sample found in a stainless steel container and AES83 was recovered from a clinical sample cultured from a tip of a catheter. These findings show the potential of *P. aeruginosa* to acquire class 1 integrons in Libya and that it is widespread both in clinical and environmental isolates as have been reported worldwide (Valenza *et al.*, 2010; Rojo-Bezares *et al.*, 2011; Guevara, A. *et al.*, 2009; Van der Bij *et al.*, 2011; Piyakul *et al.*, 2011).

Perhaps the most surprising finding from this study was bla_{TMB-1} , a novel MBL gene discovered in A. xylosoxidans cultured from Tripoli central

hospital. $bla_{\text{TMB-1}}$ has been detected as a gene cassette embedded in the first position of class 1 integron followed by an aminoglycoside resistance gene (aacA4) and oxacillinases gene ($bla_{\text{OXA-4}}$). The same A. xylosoxidans isolate possessed a second near-identical integron composed of aacA4, $bla_{\text{OXA-4}}$ but with $bla_{\text{TMB-1}}$ being replaced by dhfrA4 that confers resistance to trimethoprim. A. xylosoxidans was detected in the environmental settings and hospital environments suggesting that $bla_{\text{TMB-1}}$ is likely disseminated in the Tripoli clinical setting and thus this work requires more studies and surveillance to detect any further occurrence of $bla_{\text{TMB-1}}$ and other MBL genes. The occurrence of $bla_{\text{TMB-1}}$ in the environment is worrisome as it has the potential to colonise/infect patients and like other MBL genes; bla_{VIM} , bla_{IMP} , $bla_{\text{NDM-1}}$, bla_{GIM} , $bla_{\text{SPM-1}}$, $bla_{\text{SIM-1}}$, $bla_{\text{AIM-1}}$, $bla_{\text{KHM-1}}$ and $bla_{\text{DIM-1}}$ (Osano et al., 1994; Lauretti et al., 1999; Toleman et al., 2002; Castanheira et al., 2004; Lee et al., 2005; Gupta, 2008; Sekiguchi et al., 2008; Yong et al., 2009; Poirel et al., 2010) has first appeared in non-fermenters.

The *Km* values for TMB-1 are similar to DIM-1 and GIM-1 for penicillins and cephalosporins but are larger for meropenem indicating that meropenem is not a "natural" substrate for TMB-1. Rather like many other MBLs, the origin of TMB-1 will never be known. Any MBL should be regarded important even if the kinetics are less impressive than previously reported MBLs, particularly those encoded by mobile genes via IS*CR*s, transposons, ICEs or integrons carried on plasmids. For example, *bla*_{NDM-1} has appeared in *K. pneumoniae*,

E. coli and other Enterobacteriaceae in the clinical setting as well as the environment outside the hospitals and carried on a variety of different plasmids with the immediate environment surrounding bla_{NDM-1} highly variable (Walsh et al., 2011; Poirel et al., 2011). It is the same scenario for the dissemination of MBL encoding genes in environmental strains that share very large genetic pool with numerous strains of bacteria possibly leading to the emergence of MBLs in clinical strains originating from the environment.

The findings of this study show the presence of several antibiotic resistance mechanisms among Enterobacteriaceae and non-fermenters in Libya as shown by the incidence of clonally and non-clonally related *K. pneumoniae* and *E. coli* carrying *bla*_{CTX-M-15}/IS*Ecp1*, the dissemination of class 1 integrons that carry MBL genes and other β-lactamase genes as well as aminoglycoside and trimethoprim resistance genes. This study, moreover, tried to associate the emergence of ESBLs and other resistance mechanisms with clonality to further our understanding on how the transmission of antimicrobial resistance in Libyan hospitals occurs. The study also determined the MBLs, VIM-2 and TMB-1, as responsible for high-level β-lactam resistance in non-fermenters, *P. aeruginosa* and *A. xylosoxidans* shown in the clinical and non-clinical settings and health care facilities in Tripoli and Benghazi.

It is worth mentioning that acute care facilities are among the most common sites for the development of antimicrobial resistance. The intensive uses of

antimicrobial agents as well as suboptimal infection control policies are major factors affecting the emergence and transmission of antibiotic resistance bacteria in Libvan hospitals. Antibiotic resistance genes can be used as a genetic marker for bacterial outbreaks and help in the early detection of outbreaks bacterial infections and thus might effectively reduce the cost of managing outbreaks, decrease morbidity and mortality by eliminating the nosocomial pathogens and consequently enhance the application of infection control programs. In contrast Libya has few of these capabilities even before the civil war and the data produced in this thesis are the first studies of this kind to be undertaken. Prior to my research, there were no reports of resistance genes, mobile elements. Libyan hospitals lack a systematic approach to patient for hospitals Benghazi management example. in can get ampicillin/sulbactum but hospitals in Tripoli could not. Microbiology laboratories were also desperately inadequate with no standardization of media or susceptibility testing. Infection control programs were also absent with no instructions to clinical staff on decreasing infections and, hand-washes and disposal towels are completely absent.

Thus, it is hoped that the data from this thesis together with a new political beginning for Libya can help build an awareness of resistance and how the monitoring of resistance genes and mobile genetic elements can aid and enhance patient outcome. The potential to improve the laboratory and clinical infra-structure in Libya is enormous and, with an awareness of operating

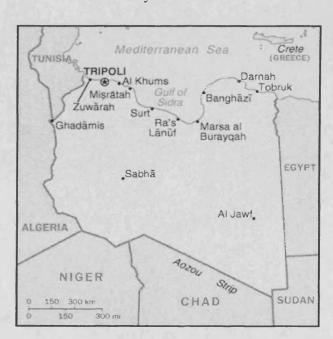
systems in laboratories in other countries, together with a desire to be more transparent in implementing them, patient outcome will hopefully be dramatically improved.

I trust and hope the data from my thesis is merely the beginning.

Chapter Seven General Discussion

This study investigated the mechanism of antibiotic resistance in randomly collected isolates of Gram-negative bacteria in Tripoli and Benghazi (Figure 7.1). The isolates were from clinical samples recovered from patients admitted to the hospitals and from the hospital environment and for the purpose of my thesis these are regarded as non-clinical samples. These swabs were from floors, walls, bedsides, toilets, workstation tables, mechanical ventilators, oxygen suppliers, stainless steel containers, curtains, baby incubators, trolleys and other instruments used in the hospitals in particular ICUs. The non-hospital environmental isolates were swabs collected from streets in Tripoli and Benghazi; the samples were from floors and dusty areas in the streets.

Figure 7.1 Map of Libya showing the important cities and their locations (http://www.google.co.uk/imgres?q=libyan+map&hl=en&gbv=2&tbm=isch



The data in my thesis clearly demonstrates the emergence of MDR Gramnegative bacteria in hospital settings that include clinical and non-clinical isolates. In total, 171 isolates were recovered for this study. Enterobacteriaceae represent the most numerous of the Gram-negative with K. pneumoniae as the most frequently isolated bacteria. High prevalence of ESBLs was detected among K. pneumoniae and E. coli, more importantly bla_{CTX-M} group1 were found widely disseminated in association with ISEcp1 being located immediately upstream of most of the ESBL encoding gene.

The highest incidence of $bla_{\text{CTX-M}}$ group1 was detected among clinical and non-clinical isolates collected from hospitals. K. pneumoniae and E. coli isolates tested for the occurrence of conjugative plasmids responsible for the movement of $bla_{\text{CTX-M}}$ group1/ISEcp1. The study showed that these plasmids can move $bla_{\text{CTX-M-15}}$ /ISEcp1 genes from the resistant isolates to sensitive E. coli, leading to E. coli transconjugants expressing an MDR phenotype. It is worth mentioning that plasmid mediated $bla_{\text{CTX-M-15}}$ associated with ISEcp1 has been detected in an environmental isolate of K. pneumoniae AES817 (ST511) cultured from one of Benghazi streets – this isolate clearly has not been recently exposed to antibiotics. These findings are an alarmingly indication that an outbreak of MDR K. pneumoniae and E. coli isolates can occur in different hospitals that provide different services to patients; these hospitals are maternity hospitals, pediatric hospitals, surgical hospitals and general hospital in Tripoli and Benghazi.

The occurrence of K. pneumoniae and E. coli in Libyan hospitals is interesting in terms of the prevalence of clonally and non-clonally related $bla_{CTX-M-15}$

positive isolates (Lee *et al.*, 2011; Webster *et al.*, 2011; Alfaresi *et al.*, 2011; Fam *et al.*, 2011; Al Sweih *et al.*, 2011). The collection of isolates being clinical, non-clinical or environmental was non-representative seeking the occurrence of any resistance mechanism in these isolates. Among all the isolates positive for *bla*_{CTX-M} group1, 4 pairs of *K. pneumoniae* isolates were found clonally related. One pair represented two isolates that were found in two different hospitals in Benghazi - isolates AES135 and AES140 that were cultured from urine and blood samples, respectively.

The occurrence of several clonally related *K. pneumoniae* and *E. coli* that resulted from the non-representative sample collection reflected the total lack of appropriate infection control programs in Libyan hospitals. Lack of hospital hygiene is another reason that has contributed to the emergence and spread of multi-drug resistant isolates of *K. pneumoniae* and *E. coli* in Libyan hospitals. The overuse of extended- spectrum cephalosporins to treat infections in Libya may be another significant factor for the appearance of clonally and non-clonally related isolates of *K. pneumoniae* and *E. coli* in Libya. (Ito & Kamimura, 2011; Wang *et al.*, 2011)

The occurrence of bla_{CTX-M} group 1/ISEcp1 on different plasmid sizes in K. pneumoniae and E. coli isolates suggest the movement of these genes by conjugative plasmids (Lavollay, et al., 2006) as shown from data on mating studies in a subset of these isolates. The ability of these isolates to mobilize

and facilitate the spread of antibiotic resistance genes may explain the frequency of bla_{CTX-M} group1/ISEcp1 in non-clonally related species of K. pneumoniae and E. coli (Woodford et al., 2004; Gonullu et al., 2008; Lavollay et al., 2006, Yu & K. Cheng, 2004; Ramdani-Bouguessa, et al., 2006; Abbassi et al., 2008). A possible explanation for the different plasmid location of bla_{CTX-M} group1 is due to the presence of the insertion sequence, ISEcp1 that is known to move and promote the expression of the ESBL gene. Two suggested mechanisms of bla_{CTX-M} group1 acquisition are proposed: the movement of bla_{CTX-M} group1 by conjugative plasmids and the role of the insertion sequence ISEcp1 in mobilizing bla_{CTX-M} group1 within the strains (Abbassi et al., 2008; Poirel et al., 2003; Naseer & Sundsfjord, 2011; Younes et al., 2011; Gonullu et al., 2008; Villa et al., 2010; Partridge et al., 2011).

Data on Libyan $E.\ coli$ give evidence of the occurrence of both mechanisms in the movement of antibiotic resistance determinants for two reasons. bla_{CTX-M} group1 and ISEcp1 were detected on two different plasmid locations in parent and recipients which suggests the role of ISEcp1 in mobilizing bla_{CTX-M} group1 (Rejiba et al., 2011; Smet et al., 2010) to a different size plasmid in recipient. An alternative suggestion is the creation of a co-integrative plasmid during conjugation. Similar resistance profiles were detected in parents of K. pneumoniae and the $E.\ coli$ transconjugants (GFP $E.\ coli$ and $E.\ coli$ J53) suggesting that many of the antibiotic resistance determinants expressed by

the Libyan isolates of *K. pneumoniae* and *E. coli* are located on conjugative plasmids (Mnif *et al.*, 2010; Cullik *et al.*, 2010; Partridge *et al.*, 2011).

In addition to previously reported *K. pneumoniae* clones known to carry $bla_{\text{CTX-M-15}}$ e.g. ST15, ST29, ST101 and ST147, this study provided new MLST groups - *K. pneumoniae* ST509 and ST486 and, additionally, a novel environmental allele ST511 was found carrying $bla_{\text{CTX-M-15}}$ on different plasmid sizes. The results of MLST data provided further evidence of the incidence of $bla_{\text{CTX-M-15}}$ in different clones of *K. pneumoniae* and also shows novel sequence types are involved in the carriage of $bla_{\text{CTX-M-15}}$ in Libya (Nielsen *et al.*, 2011; Pitart *et al.*, 2011; Papagiannitsis *et al.*, 2011; Hrabak *et al.*, 2009; Damjanova *et al.*, 2008).

RAPD and MLST techniques used in this study show that they are similar in detecting the strain relatedness between *K. pneumoniae* isolates; however, they still are less discriminatory than PFGE which is based on genomic DNA separation rather than amplification of specific fragments or housekeeping genes. This study supports the application of RAPD technique to correlate the relation of bacterial species to each other but not in determining the detailed clonality within a species. Unsurprisingly, RAPD and MLST when compared with PFGE demonstrated quite different results - some isolates appeared very similar by RAPD but distinctly different with PFGE. Other isolates e.g. *K. pneumoniae* AES74, AES59 and AES1029 that belong to ST15 were

comparable by RAPD and MLST, but by PFGE demonstrated a low-level of similarity. However, RAPD may help in the general assessment to determine the broad similarity among bacterial species and it is rapid and inexpensive. The MLST method is reliable but depends upon sequence stability among housekeeping genes. PFGE can provide very detailed information on the differences between species or subspecies; but it is specialized, temperamental and quite expensive compared to MLST (Hotchkiss *et al.*, 2011).

Class 1 integrons, whether alone or in association with Tn402-type or Tn21 transposons are among the most represented mobile genetic elements responsible for capturing genes in the form of gene cassettes. Among the Libyan isolates tested, 11 different type of class 1 integrons were detected in 21 isolates of Enterobacteriaceae and non-fermenters. Twelve class 1 integrons were detected in *K. pneumoniae*, 3 in *E. coli*, 3 in *P. aeruginosa* and 2 in *A. xylosoxidans*. Most integrons detected in this study carried trimethoprim and aminoglycoside resistance genes which are typically found as gene cassettes. Six different integrons were found in *K. pneumoniae* isolates, two of which were embedded on Tn402-type transposons, of these 6 integrons, 5 integrons have been previously reported from different geographical areas. One of these integrons (*Int1*, *dfrA17*, *aadA5*, *qacEΔ*) was also found in *K. pneumoniae* and *E. coli* isolates examined in this study (Vinue *et al.*, 2008; Tang *et al.*, 2011). Another integron harbouring *dfrA*12 and *aadA*2 was detected in *K. pneumoniae* clinical isolate AES48. This isolate

was identified in this study as ST147 which is known as a world wide ST contributing to the emergence of $bla_{\text{CTX-M-15}}$ genes. The genetic context of this integron has been reported in clinical isolates of E. coli in Asia and Europe (Yu et al., 2004; Tang et al., 2001; Saenz et al., 2009; Vinue et al., 2008)

These findings show that the same resistance mechanisms are disseminated worldwide, and also show that the Libyan isolates share the same genetic pool with bacterial species worldwide.

Class 1 integrons detected in non-fermenters included in addition to trimethoprim and aminoglycoside resistance genes, antibiotic resistance genes responsible for conferring resistance to broad-spectrum β -lactams. bla_{VIM-2} was detected in two clonal isolates of P. aeruginosa collected from different places in the same hospital, AES81 was non-clinical sample found in a stainless steel container and AES83 was recovered from a clinical sample cultured from a tip of a catheter. These findings show the potential of P. aeruginosa to acquire class 1 integrons in Libya and that it is widespread both in clinical and environmental isolates as have been reported worldwide (Valenza et al., 2010; Rojo-Bezares et al., 2011; Guevara, A. et al., 2009; Van der Bij et al., 2011; Piyakul et al., 2011).

Perhaps the most surprising finding from this study was bla_{TMB-1} , a novel MBL gene discovered in A. xylosoxidans cultured from Tripoli central

hospital. $bla_{\text{TMB-1}}$ has been detected as a gene cassette embedded in the first position of class 1 integron followed by an aminoglycoside resistance gene (aacA4) and oxacillinases gene ($bla_{\text{OXA-4}}$). The same A. xylosoxidans isolate possessed a second near-identical integron composed of aacA4, $bla_{\text{OXA-4}}$ but with $bla_{\text{TMB-1}}$ being replaced by dhfrA4 that confers resistance to trimethoprim. A. xylosoxidans was detected in the environmental settings and hospital environments suggesting that $bla_{\text{TMB-1}}$ is likely disseminated in the Tripoli clinical setting and thus this work requires more studies and surveillance to detect any further occurrence of $bla_{\text{TMB-1}}$ and other MBL genes. The occurrence of $bla_{\text{TMB-1}}$ in the environment is worrisome as it has the potential to colonise/infect patients and like other MBL genes; bla_{VIM} , bla_{IMP} , $bla_{\text{NDM-1}}$, bla_{GIM} , $bla_{\text{SPM-1}}$, $bla_{\text{SIM-1}}$, $bla_{\text{AIM-1}}$, $bla_{\text{KHM-1}}$ and $bla_{\text{DIM-1}}$ (Osano et al., 1994; Lauretti et al., 1999; Toleman et al., 2002; Castanheira et al., 2004; Lee et al., 2005; Gupta, 2008; Sekiguchi et al., 2008; Yong et al., 2009; Poirel et al., 2010) has first appeared in non-fermenters.

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systems in laboratories in other countries, together with a desire to be more transparent in implementing them, patient outcome will hopefully be dramatically improved.

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Chapter Eight Appendices

Appendix A

Table A.1 Antibiotics and chemicals used in selection of antibiotic resistant strains experiments

Antibiotic	Source
Ceftazidime	SIGMA-ALDRICH
Rifampicin	SIGMA-ALDRICH
Meropenem	SIGMA-ALDRICH
Ertapenem	SIGMA-ALDRICH
Imipenem	SIGMA-ALDRICH
Cefoxitin	SIGMA-ALDRICH
Cefuroxone	SIGMA-ALDRICH
Ampicillin	SIGMA-ALDRICH
Piperacillin	SIGMA-ALDRICH
Sodium azide	SIGMA-ALDRICH
Kanamycin	SIGMA-ALDRICH

Appendix A

Table A.2 Oligonucleotides used for PCR amplification and DNA sequencing

Gene target	Primer name	Primer sequence	Reference
blaCTX-M15	CTX-M-15 F	5'GTTCACGCTGATGGCGACGGC'3	This study
blaCTX-M-15	CTX-M-15 R	5'GACGCTAATACATCGCGACGGC'3	This study
Beginning of ISEcp1	ISEcpu2	5' AATACTACCTTGCTTTCTGA '3	Leflon-Guibout et al., 2004
The end of ISEcp1	ISEcpu1	5'AAAAATGATTGAAAGGTGGT'3	Ho et al., 2005
Integrase gene	VAF	5'GCCTGTTCGGTTCGTAAGCT'3	Levesque et al., 1994
Transposase gene	tniC	5'CGATCTCTGCGAAGAACTCG'3	Toleman et al., 2007
Quaternary Ammonium Compound	QacR	5'CGGATGTTGCGATTACTTCG'3	Levesque, C. et al., 1994
Transposon	TniC	5'CGATCTCTGCGAAGAACTCG'3	Mammeri, H. <i>et al.</i> , 2003
blaTEM	тем ғ	5'TCCGCTCATGAGACAATAACC'3	Kiratisin <i>et al.</i> , 2008
<i>bla</i> TEM	TEM R	5'TTGGTCTGACAGTTACCAATGC'3	Kiratisin <i>et al.</i> , 2008
<i>bla</i> SHV	SHV F	5'TGGTTATGCGTTATATTCGCC'3	Kiratisin <i>et al.</i> , 2008
<i>bla</i> SHV	SHV R	5'GGTTAGCGTTGCCAGTGCT'3	Kiratisin <i>et al.</i> , 2008
ISCR1	ISCR1 F	5'GGT TGC AAC GAC TCA AGCG'3	Lee, K. et al., 2005
ISCR1	ISCR1 R	5'CAC TCG TTT ACC GCT CAA GC'3	Lee, K. et al., 2005
blaampC MOX	MOX F	5'GCT GCT CAA GGA GCA CAG GAT'3	Brolund et al., 2010
blaampC MOX	MOX R	5'CAC ATT GAC ATA GGT GTG GTG C'3	Brolund et al., 2010
blaampC CITM	CITM F	5'TGG CCA GAA CTG ACA GGC AAA	Brolund et al., 2010
blaampC CITM	CITM R	5'TTT CTC CTG AAC GTG GCT GGC'3	Brolund et al., 2010
blaampC DHAM	DHAM F	5'AAC TTT CAC AGG TGT GCT GGGT'3	Brolund et al., 2010
<i>blaampC</i> DHAM	DHAM R	5'CCG TAC GCA TAC TGG CTT TGC'3	Brolund et al., 2010
blaampC ACCM	ACCM F	5'AAC AGC CTC AGC AGC CGG TTA'3	Brolund et al., 2010
blaampC ACCM	ACCM R	5'TTC GCC GCA ATC ATC CCT AGC'3	Brolund et al., 2010
blaampC EBCM	EBCM F	5'TCG GTA AAG CCG ATG TTG CGG '3	Brolund et al., 2010
blaampC EBCM	EBCM R	5'CTT CCA CTG CGG CTG CCA GTT'3	Brolund et al., 2010
blaampC FOXM	FOXM F	5'AAC ATG GGG TAT CAG GGA GAT G'3	Brolund et al., 2010
blaampC FOXM	FOXM R	5'CAA AGC GCG TAA CCG GAT TGG'3	Brolund et al., 2010

Table A.3. Oligonucleotides used for PCR amplification and DNA sequencing

Gene target	Primer name	Primer sequence	Reference
TMB-1	Trip-1F61	5'GCC AAC GAA GAA ATA CCC GC'3	This study
TMB-1	Trip2-10	5'TGG GCT AGG TTA CAC TGG TG'3	This study
TMB-1	Trip617R	5'TTC TAG CGG ATT GTG GCC AC'3	This study
TMB-1	Trip2	5'CAA GGA GCT CAT TCA AAGG'3	This study
TMB-1	Trip1	5'GGA GCA GGC AAG GAG CT'3	This study
TMB-1	Trip4	5'AAG GGT TAA CAA GTG GCA GC'3	This study
TMB-1	Trip75	5'ACC CGG ATT GGA AGT TGA GG'3	This study
TMB-1	Trip1 FF	5'TGA TCA GTG GCC ACA ATC CG'3	This study
TMB-1	Trip1 F	5'CGG ATT GTG GCC ACT GAT CA'3	This study
TMB-1	Trip3	5'GGC CAT ACT AAT GAT AAC'3	This study
dhfrA	dhfrA 1FR	5'CCC GAT AAC TCC ATT CTT CG'3	This study
dhfrA	dhfrA 1F	5'CGA AGA ATG GAG TTA TCG GG'3	This study
dhfrA	dhfrA 1R	5'GTT AGA GGC GAA GTC TTG GG'3	This study
dhfrA	dhfrA 1FF	5'CCC AAG ACT TCG CCT CTA AC'3	This study
aac6II	aac6II R	5'GGC GTC GGC TTG AAT GAG TT'3	This study
aac6II	aac6II F	5'AAG TGG CAG CAA CGG ATT CG'3	This study
aac6II	aac6II FR	5'GAA TCC GTT GCT GCC ACT TG'3	This study
aac6II	aac6II FF	5'CAA CTC ATT CAA GCC GAC GC'3	This study
aac6II	aac6II FR	5'GTG CTC GCG GAC ATG AAA TG'3	This study
Oxa-4	Oxa-4-FR	5'CAC TTA TGG CAT TTG ATG CG'3	This study
Oxa-4	Oxa-4-F	5'CGC ATC AAA TGC CAT AAG TG'3	This study
SPM-1D F	blaSPM-1	5'CCT ACA ATC TAA CGG CGA CC'3	Zavascki et al., 2005
SDPM-1D R	blaSPM-1	5'TCG CCG TGT CCA GGT ATA AC'3	Zavascki et al., 2005
IMP-2 F	blaIMP-2	5'GGC AGT CGC CCT AAA ACA AA'3	Wu et al., 2007
IMP2 R	blaIMP-2	5'TAG TTA CTT GGC TGT GAT GG'3	Wu et al., 2007
IMP-1 R	blaIMP-1	5'TTA GTT GCT TGG TTT TGA TG'3	Queenan & Bush, 2007
IMP-1 F	blaIMP-1	5'TGA GCA AGT TAT CTG TAT TC'3	Queenan & Bush, 2007
VIM- F	blaVIM	5'GTC TAT TTG ACC GCG TC'3	Cezario et al., 2009
VIM- R	blaVIM	5'CTA CTC AAC GAC TGA GCG'3	Cezario et al., 2009
GIM- F	blaGIM-1	5'AGA ACC TTG ACC GAA CGC AG'3	Queenan & Bush, 2007
GIM-R	blaGIM-1	5'ACTCATGACTCCTCACGAGG'3	Queenan & Bush, 2007
NDM F	blaNDM-1	5'GAA GCT GAG CAC CGC ATTA G'3	Sidjabat et al., 2010
NDM R	blaNDM-1	5'TGC GGG CCG TAT GAG TGA TT'3	Sidjabat et al., 2010
DIM-1 F	blaDIM-1	5' GCT TGT CTT CGC TTG CTA ACG '3	Poirel et al., 2011
DIM-1 R	blaDIM-1	5' CGT TCG GCT GGA TTG ATT TG '3	Poirel et al., 2011
SIM-1 F	blaSIM-1	5' TAC AAG GGA TTC GGC ATC G '3	Poirel et al., 2011
SIM-1 R	blaSIM-1	5' TAA TGG CCT GTT CCC ATG TG '3	Poirel et al., 2011
KHM-1 F	blaKHM-1	5' GGT ATG CGC TGA CGA TTC '3	Sekiguchi et al., 2008
KHM-1 R	blaKHM-I	5' TTT ATT TGG TGG CTG TTT TGT C '3	Sekiguchi et al., 2008
AIM-1 F	blaAIM-1	5' CTG AAG GTG TAC GGA AAC AC '3	Poirel et al., 2011
AlM-1 R	blaSIM-1	5' GTT CGG CCA CCT CGA ATT G '3	Poirel et al., 2011

Table A.4. Primers, target site and size of replicons tested

Plasmid	DNA sequence	Target site	Gene size (bp)		
Multiplex 1					
HII FW	5'-gga gcg atg gat tac ttc agt ac 3	A D	471		
HII RV	5'-tgc cgt ttc acc tcg tga gta 3	parA-parB	471		
HI2 FW	5'-tttc tcc tga gtc acc tgt taa cac 3	T4	(44		
HI2 RV	5'-ggc tcac tac cgt tgt cat cct 3	Iterons	644		
II FW	5'-cga aag ccg gac ggc agaa 3	DNIAI	120		
II RV	5'-tcg tcgt tcc gcc aag ttc gt 3	RNA1	139		
Multiplex 2					
XFW	5'-aac ctt aga ggc tat tta agt tgc tgat '3		276		
X RV	5'-tga gag tca att ttt atc tca tgt ttt agc '3	ori γ	376		
L/M FW	5'-gga tga aaa cta tca gca tct gaa g '3	repA,B,C	785		
L/M RV	5'-ctg cag ggg cga ttc ttt agg '3				
NFW	5V-gtc taa cga gct tac cga ag '3		550		
N RV	5'-gtt tca act ctg cca agt tc '3	repA	559		
Multiplex 3		<u></u>			
FIA FW	5'-cca tgct ggt tct aga gaa ggtg '3		462		
FIA RV	5'-gta tat cct tac tgg ctt ccg cag '3	Iterons	462		
FIB FW	5'-gga gtt ctg aca cac gat ttt ctg '3		702		
FIB RV	5'-ctc ccg tcg ctt cag ggc att '3	repA	702		
W FW	5'-cct aag aac aac aaa gcc cccg '3		242		
WRV	5'-ggt gcg cgg cat aga acc gt '3	repA	242		
Multiplex 4					
YFW	5'-aat tca aac aac act gtg cag cctg '3				
YRV	5'-gcg aga atg gac gat tac aaa act tt '3	repA	765		
PFW	5'-cta tgg ccc tgc aaa cgc gcc aga aa '3	Iterons	534		
PRV	5'-tca cgc gcc agg gcg cag cc '3				
FIC FW	5'-gtg aac tgg cag atg agg aagg '3	A 2	262		
FIC RV	5'-ttc tcc tcg tcg cca aac tag at '3	repA2			
Multiplex 5					
A/C FW	5'-gag aac caa aga caa aga cct gga 3'	repA	465		
A/C RV	5'-acg aca aac ctg aat tgc ctc ctt '3	_			
TFW	5'-ttg gcc tgt ttg tgc cta aac cat '3	-a-A	750		
TRV	5'-cgt tga tta cac tta gct ttg gac '3	repA	750		
FIIs FW	5'-ctg tcg taa gct gat ggc '3	4	270		
FIIs RV	5'-ctc tgc cac aaa ctt cagc'3	repA	270		
Simplex 1					
F ^{rep} FW	5'-tga tcg ttt aag gaa ttt tg '3	DNIA 1/ran A	270		
F ^{rep} RV	5'-gaa gat cag tca cac cat cc '3	RNA1/repA	270		
Simplexs 2 and 3					
K/B FW	5'-gcg gtc cgg aaa gcc aga aaac '3	RNA1	160		
K/B RV	5'-tet tte acg age ceg cea aa '3	KIMI	100		
B/O RV	5'-tct gcg ttc cgc caa gtt cga '3	RNA1	159		

Appendix B

Figures of multiplex PCR to detect the occurrence of CTX-M type ESBLs in *K. pneumoniae* (Figures B.1-B.5 in the next three pages)

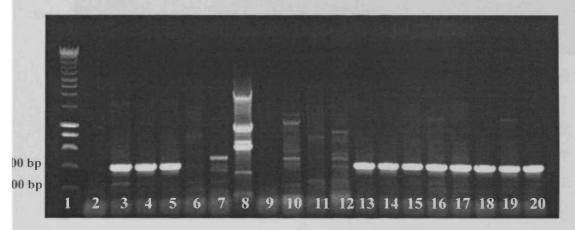


Figure B.1 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1,2,8,9 and 26 in *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES152. Lane3: AES170. Lane4: AES172. Lane5: AES178. Lane6: AES117. Lane7: AES197. Lane8: AES187. Lane9: AES188. Lane10: AES194. Lane11: AES 203. Lane12: AES216. Lane13: AES225. Lane14: AES236. Lane15: AES258. Lane16: AES260. Lane17: AES261. Lane18: AES265. Lane19: AES268. Lane20: AES270.

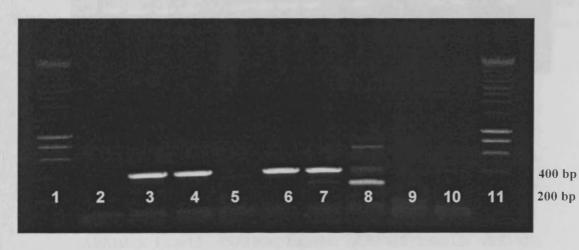


Figure B.2 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1,2,8,9 and 26 in *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES271. Lane3: AE273. Lane4: AES274. Lane5: AES275. Lane6: AES279. Lane7: AES280. Lane8: AES917. Lane9: AES942. Lane10: H2O. Lane11: Marker.

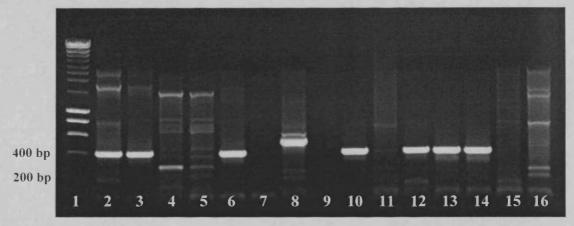


Figure B.3 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1,2,8,9 and 26 in *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES506. Lane3: AES722. Lane4: AES808. Lane5: AES809. Lane6: AES817. Lane7: AES836. Lane8: AES936. Lane9: AES939. Lane10: AES943. Lane11: AES960. Lane12: AES961. Lane13: AES970. Lane14: AES973. Lane15: AES975. Lane16: AES977.

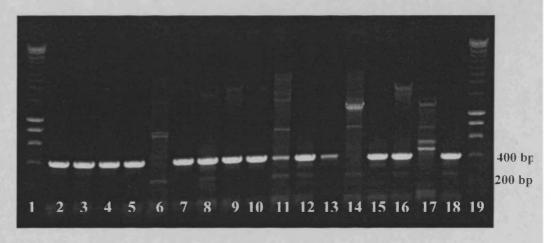


Figure B.4 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1,2,8,9 and 26 in *K. pneumoniae* isolates. Lane1: Marker. Lane2: AES982. Lane3: AES983. Lane4: AES984. Lane5: AES985. Lane6: AES987. Lane7: AES994. Lane8: AES1001. Lane9: AES1004. Lane10: AES1004(1). Lane11: AES1013. Lane12: AES1025. Lane13: AES1026. Lane14: AES1028, Lane15: AES1029. Lane16: AES1036. Lane17: AES1052. Lane18: AES1053. Lane19. Lane19: Marker.

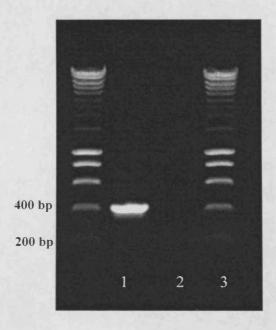


Figure B.5 Multiplex PCR experiment to detect the incidence of CTX-M type ESBLs groups 1,2,8,9 and 26 in *K. pneumoniae* isolates. Lane1: Marker. Lane2: Positive control AES140). Lane3: Negative control (H2O). Lane4: Marker

PFGE of S1 digestion of some isolates of K. pneumoniae and probing with bla_{CTX-M-15} (Figures B.6 and B.7, next two pages)

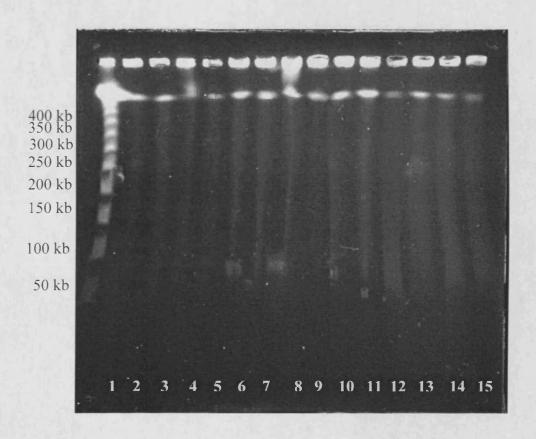


Figure B.6 PFGE of S1 digests for K. pneumoniae AES isolates. Lane1: Marker. Lane2: AES809. Lane3: AES817. Lane4: AES203. Lane5: AES836. Lane6: AES939. Lane7: AES961. Lane8: AES942. Lane9: AES188. Lane10: AES994. Lane11: AES960. Lane12: AES970. Lane13: AES975. Lane14: AES977. Lane15: AES982.

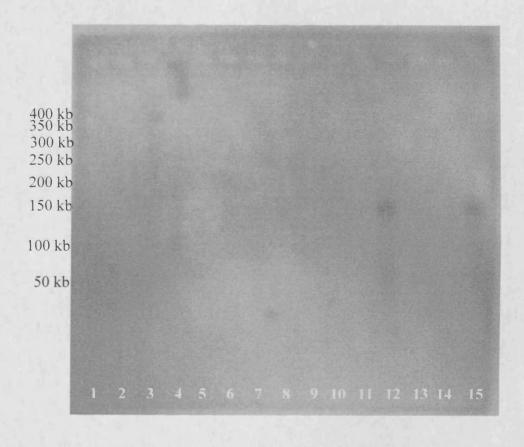


Figure B.7 Autorad after probing with *bla*_{CTX-M-15}/IS*Ecp1* of blotted PFGE from fig B6. Lane1: Marker. Lane2: AES809. Lane3: AES817. Lane4: AES203. Lane5: AES836. Lane6: AES939. Lane7: AES961. Lane8: AES942. Lane9: AES188. Lane10: AES994. Lane11: AES960. Lane12: AES970. Lane13: AES975. Lane14: AES977. Lane15: AES982.

DNA sequences from class 1 integrons of some of *K. pneumoniae* Figure legend is above the figure.

Figure B.8 DNA sequence of *K. pneumoniae* AES59 amplified by VAF primer.

AACCTTGACCGAACGCAGCGGTGGTAACGGCGCAG

TGGCGGTTTTCATGGCTTGTTATGACTGTTTTTTTTGTACAGTCTATGCCTCGGGCATCCA

AGCAGCAAGCGCGTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAGCAACGATGTTA

CGCAGCAGGGCAGTCGCCCTAAAACAAAGTTAGCCATTAAGGGAGTTAAATTGA AAATAT

CATTGATTTCTGCAGTGTCAGAAAATGGCGTAATCGGTAGTGGTCCTGATATCCCGTGGT

CAGTAAAAGGTGAGCAACTACTCTTTAAAGCGCTCACATATAATCAATGGCTCCTTGTCG

GAAGAAAACATTTGACTCTATGGGTGTTCTTCCAAATCGCAAATATGCAGTAGTGTCAA

AGAACGGAATTTCAAGCTCAAATGAAA

Figure B.9 Alignment of DNA from figure B.8 with DNA from gene bank Matched withDfrA17

```
>>EM PRO:FJ895301 FJ895301.1 Shigella flexneri plasmid
unknown
clone 05100 class 1 integron DNA integrase intI1 (intI1),
dihydrofolate reductase DfrA17 (dfrA17), and
aminoglycoside-3'-adenylyltransferase (aadA5) genes,
complete cds. (2813 nt)
initn: 2110 init1: 2110 opt: 2110 Z-score: 2178.0 bits:
414.8 E(142439246): 7.8e-112
banded Smith-Waterman score: 2110; 100.0% identity (100.0%
similar) in 422 nt overlap (1-422:1063-1484)
10 20 30
EMBOSS AACCTTGACCGAACGCAGCGGTGGTAACGG
EM PRO
GTAGCGTATGCGCTCACGCAACTGGTCCAGAACCTTGACCGAACGCAGCGGTGGTAAC
1040 1050 1060 1070 1080 1090
40 50 60 70 80 90
EMBOSS
::
EM PRO
```

CGCAGTGGCGGTTTTCATGGCTTGTTATGACTGTTTTTTTT
GC 1100 1110 1120 1130 1140 1150
100 110 120 130 140 150 EMBOSS
ATCCAAGCAGCAAGCGCGTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAGCAACGA
:::::::::::::::::::::::::::::::::::::::
EM_PRO ATCCAAGCAGCAAGCGCGTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAGCAAC GA
1160 1170 1180 1190 1200 1210
160 170 180 190 200 210 EMBOSS
TGTTACGCAGCAGGGCAGTCGCCCTAAAACAAAGTTAGCCATTAAGGGAGTTAAATTG AA
::
EM_PRO TGTTACGCAGCAGGGCAGTCGCCCTAAAACAAAGTTAGCCATTAAGGGAGTTAAATTG AA
1220 1230 1240 1250 1260 1270
220 230 240 250 260 270 EMBOSS
AATATCATTGATTTCTGCAGTGTCAGAAAATGGCGTAATCGGTAGTGGTCCTGATATC
EM_PRO AATATCATTGATTTCTGCAGTGTCAGAAAATGGCGTAATCGGTAGTGGTCCTGATATC CC
1280 1290 1300 1310 1320 1330
280 290 300 310 320 330
EMBOSS GTGGTCAGTAAAAGGTGAGCAACTACTCTTTAAAGCGCTCACATATAATCAATGGCTC CT
EM_PRO GTGGTCAGTAAAAGGTGAGCAACTACTCTTTAAAGCGCTCACATATAATCAATGGCTC
CT 1340 1350 1360 1370 1380 1390
340 350 360 370 380 390
EMBOSS TGTCGGAAGAAAACATTTGACTCTATGGGTGTTCTTCCAAATCGCAAATATGCAGTA
GT ::::::::::::::::::::::::::::::::::::
:: EM_PRO
TGTCGGAAGAAAACATTTGACTCTATGGGTGTTCTTCCAAATCGCAAATATGCAGTA GT
1400 1410 1420 1430 1440 1450
400 410 420 EMBOSS GTCAAAGAACGGAATTTCAAGCTCAAATGAAA

EM PRO GTCAAAGAACGGAATTTCAAGCTCAAATGAAAACGTCCTAGTTTTTCCTTCAATAGAA ΔΑ 1460 1470 1480 1490 1500 1510 EM PRO TGCTTTGAAAGGCTATCAAAAGTTACAGATCATGTATATGTCTCTGGCGGGGGTCAA 1520 1530 1540 1550 1560 1570 EM PRO:FN568 Kluyvera georgiana 1087 211 100, 100, 1 V conjugative IncFII plasmid 351 0 2 pTC10 (partial) harboring a class 1 integron (dfrA17 and aadA5 gene cassettes), Tn3bla(TEM-1b)-IS26 and Tn21 (partial) Cross-references and related information in: Nucleotide Sequence **Protein Families Ontologies** Protein Sequences >>EM_PRO:FN568351 FN568351.1 Kluyvera georgiana conjugative IncFII plasmid pTC10 (partial) harboring a class 1 integron (dfrA17 and aadA5 gene cassettes), Tn3-bla(TEM-1b)-IS26 and Tn21 (partial) (10872 nt) initn: 2110 init1: 2110 opt: 2110 Z-score: 2165.2 bits: 414.3 E(142439246): le-111 banded Smith-Waterman score: 2110; 100.0% identity (100.0% similar) in 422 nt overlap (1-422:6602-7023) 10 20 30 EMBOSS AACCTTGACCGAACGCAGCGGTGGTAACGG EM PRO GTAGCGTATGCGCTCACGCAACTGGTCCAGAACCTTGACCGAACGCAGCGGTGG TAACGG 6580 6590 6600 6610 6620 6630 40 50 60 70 80 90 **EMBOSS** TCGGGC ::::: EM PRO TCGGGC 6640 6650 6660 6670 6680 6690 100 110 120 130 140 150 **EMBOSS**

ATCCAAGCAGCAGCGCGTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAG

CAACGA

```
::::::
EM PRO
ATCCAAGCAGCAGCGCTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAG
CAACGA
6700 6710 6720 6730 6740 6750
160 170 180 190 200 210
EMBOSS
TGTTACGCAGCAGGCAGTCGCCCTAAAACAAAGTTAGCCATTAAGGGAGTTAA
::::::
EM PRO
TGTTACGCAGCAGGCAGTCGCCCTAAAACAAAGTTAGCCATTAAGGGAGTTAA
ATTGAA
6760 6770 6780 6790 6800 6810
220 230 240 250 260 270
EMBOSS
AATATCATTGATTTCTGCAGTGTCAGAAAATGGCGTAATCGGTAGTGGTCCTGA
::::::
EM PRO
AATATCATTGATTTCTGCAGTGTCAGAAAATGGCGTAATCGGTAGTGGTCCTGA
TATCCC
6820 6830 6840 6850 6860 6870
280 290 300 310 320 330
GTGGTCAGTAAAAGGTGAGCAACTACTCTTTAAAGCGCTCACATATAATCAATG
GCTCCT
:::::
EM PRO
GTGGTCAGTAAAAGGTGAGCAACTACTCTTTAAAGCGCTCACATATAATCAATG
GCTCCT
6880 6890 6900 6910 6920 6930
340 350 360 370 380 390
EMBOSS
TGTCGGAAGAAAACATTTGACTCTATGGGTGTTCTTCCAAATCGCAAATATGC
AGTAGT
::::::
EM PRO
TGTCGGAAGAAAACATTTGACTCTATGGGTGTTCTTCCAAATCGCAAATATGC
AGTAGT
6940 6950 6960 6970 6980 6990
400 410 420
EMBOSS GTCAAAGAACGGAATTTCAAGCTCAAATGAAA
EM PRO
GTCAAAGAACGGAATTTCAAGCTCAAATGAAAACGTCCTAGTTTTTCCTTCAAT
AGAAAA
7000 7010 7020 7030 7040 7050
EM PRO
TGCTTTGAAAGAGCTATCAAAAGTTACAGATCATGTATATGTCTCTGGCGGGGG
```

TCAAAT 7060 7070 7080 7090 7100 7110

Figure B. 10 DNA sequence of *K. pneumoniae* AES59 1.5 kb amplified by QacR primer

AGCCNGCCTTTCTGATATATCTCCCAATTTGTGTAGGGCTTATTATG CACGCTTAAAAATAAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAATT ATGTG

CTTAGTGCATCTAACGCATAGTTGAGCGGCGGGCGCAGCCCGTCCGCTTGAACGCCGAGT

TAGGCATCAGATGCCCTCGGCGGGGTCGATGCACTTTTCGCACATGCCGCTCAA

GATTCTCTCAATCGTTGCTTTGGCATATCGAACGAACGCGGCCGTCTCTTCGACGCGCAT

TGCTAGGTCGTCCTCGCTACCCAGGTACGCCGCGCGTGCCTTGCAGATGAGG GGCCG

ATGCTCGGCAGCAAACGCTCCGATACCCATGCGGCAGCAACGTCCTTAGGAGCAATGAG

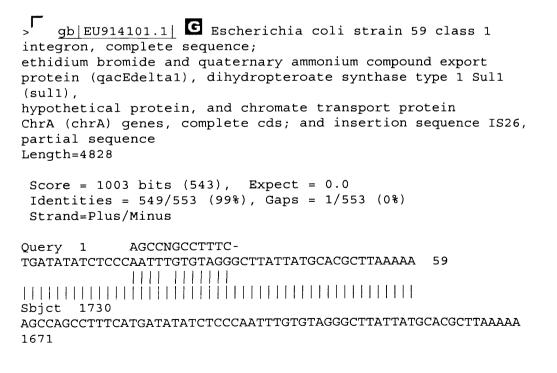
ACCAGTTGAAGCGCTGTACCAAATGCGAGCAAGAGCAAGAACGACGTTCCGCTCGTCACC

CTTCCAATCCGACTCTGCATTCCACTGGGCAATAGTGTCGAAAAGCGCCTTGGAN AAATG

CTCCTTCGGCNCCGGCTCGAAAAAC

Figure B.11 Alignment of DNA sequence from figure B.10 with DNA from gene bank.

Matched with aadA5



Query 60 FAATAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCT 119
Query 120 AACGCATAGTTGAGCGGCGGGCGCAGCCCGTCCGCTTGAACGCCGAGTTAGGCATCAGAT 179
Query 180 GCCCTCGGCGCGGGTCGATGCACTTTTCGCACATGCCGCTCAACGCAAGATTCTCTCAAT 239
Query 240 CGTTGCTTTGGCATATCGAACGAACGCGGCCGTCTCTTCGACGCGCATTGCTAGGTCGTC 299
Query 300 GTCCTCGCTACCCAGGTACGCCGCGCGTGCCTTGCAGATGAGGGGCCGATGCTCGGCAGG 359
Query 360 CAAACGCTCCGATACCCATGCGGCAGCAACGTCCTTAGGAGCAATGAGACCAGTTGAAGC 419
Query 420 GCTGTACCAAATGCGAGCAAGAGCAAGAACGACGTTCCGCTCGTCACCCTTCCAATCCGA 479

Sbjct 1310
GCTGTACCAAATGCGAGCAAGAGCAAGAACGACGTTCCGCTCGTCACCCTTCCAATCCGA
1251

Query 480
CTCTGCATTCCACTGGGCAATAGTGTCGAAAAGCGCCTTGGANAAATGCTCCTTCGGCNC
539

||||||||||||||||||
Sbjct 1250
CTCTGCATTCCACTGGGCAATAGTGTCGAAAAGCGCCTTGGAGAAATGCTCCTTCGGCAC
1191

Query 540 CGGCTCGAAAAAC 552
||||||||||||||
Sbjct 1190 CGGCTCGAAAAAC 1178

Figure B.12 DNA sequence from *K. pneumoniae* AES135 (1kb) amplified VAF and QacR primer

CNGCCTTTCNGATATATCTCCCAATTTGTGTAGGGCTTATTAT GCACGCTTAAAAATAATAAAAACAGACTTGACCTGATAGTTTGGCTGTGAGCAAT TATGT

GCTTAGTGCATCTAACGCCGCTATCAATTGCGGTAAAAAGCGTAGTGAGCGCGGCGAACG

AAGCTTTTTGCCGTCAATTGCATAGCTTTGTTAACCCTTTTTCCAAATTTGATAGC AATA

 ${\tt GTTAATGTTTGAACTAAAATGTTGCTCAAAAACAACTTCNAAGAAGTTGGGAATA} \\ {\tt TTCGG}$

 ${\tt GAAGAAACATCCCCTTCTGGCTCAATGTCNATCGTCGATACNTGGAGCGTAGAGGCCAT}$

GGGCAACGTTTCTCTGTAAATCTCCCCGCCACCAGACACTATAACGTGACCGGNG ANNNN

 ${\tt NNNTAGACCGCCCATGGCCTCTTCGATCGACGGGAATNCTACTACGTTGTCNTTATTGGC}$

 ${\tt CGNCCANGCTGANCGAGTAACNNCCGNNNATTTCCTATTGGGGAGNGCCCCCNNTGATNN}$

NNANNNTTGCGGNCNNNCAN

Figure B.13 Alignment of DNA sequence from fig. B12with DNA from gene bank

Matched with dfrA30

> gb|JN121384.1| Acinetobacter baumannii strain RUH875
antibiotic resistance island
AbaR21, partial sequence
Length=1789

Score = 534 bits (289), Expect = 2e-148
Identities = 351/386 (91%), Gaps = 5/386 (1%)
Strand=Plus/Minus

Query 13 AGCCNGCCTTTC-
TGATATATCTCCCAATTTGTGTAGGGCTTATTATGCACGCTTAAAAA 71
AGCCAGCCTTTCATGATATATCTCCCAATTTGTGTAGGGCTTATTATGCACGCTTAAAAA 985
Query 72 TAATAAAAACAGACTTGACCTGATAGTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCT 131
TAATAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCT 925
Query 132 AACGCCGCTATCAATTGCGGTAAAAAGCGTAGTGAGCGCGGCGAACGAA
Sbjct 924 AACGCCGTTATCAATTGCGGTAAGAAGCGTAGCAAGCGAAGCGAACGAA
Query 192 TCAATTGCATAGCTTTGTTAACCCTTTTTCCAAATTTGATAGCAATAGTTAATGTTTGAA 251
TCAATTGCATAGCTTTGTTAACCCTTTTGCCAAATTTGATAGCAATAGTTAATGTTTGAG 805
Query 252 CTAAAATGTTGCTCAAAAACAACTTCGAAGA- ANTTGGGAATATTCGGGAAGAAAACATC 310
Sbjet 804 CTAAAGTGTTGCTCAAAAACAACTTCGAAGGTA- TTGGGAATATTCGGAAAGAAACATC 746
Query 311 CCCTTCTGGCTCAATGTCGATCGNNNATACATGNANCGTANAGGNCC- TGGNNAACGTTT 369
Sbjct 745 TCCTTCCGGCTCAATATCAATCGTCGATATATGGAGCGTAGAGG- CCATGGGCAATGTTT 687
Query 370 CTCTGNAAATCTCCCCGCCNCCAGAC 395
Sbjct 686 CTCTGTAAATCTCCCCGCCACCAGAC 661

Figure B.14 DNA sequence from *K. pneumoniae* AES48 amplified by QacR primer

(1.5 kb)

GCCNGCCTTTCNGATATATCTCCCNATTTGTGTAGGGCTTATTAT

GCACGCTTAAAAATAATAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAAT TATGT

GCTTAGTGCATCTAACGCCGGAGTTAAGCCGCCGCGCGTAGCGCGGTCGGCTTGA ACGAA

TTGTTAGACATCATTTACCAACTGACTTGATGATCTCGCCTTTCACAAAGCGAATA AATT

CTTCCAAGTGATCTGCGCGTGAGGCCAAGTGATCTTCTTTTTGTCCCAGATAAGCT TGCT

TAGCTTCAAGTAAGACGGGCTGATACTGGGCAGGTAGGCGTTTTATTGCCCAGTC GGCAG

CGACATCCTTCGGCGCGATTTTGCCGGNTATTGCGCTGTACCAAATGCGGGACAA CGTAA

GCACTACATTTCGCTCATCGCCGGCCCAGTCGGGCTGCGAGTTCCATAGCTTCAA GGTTT

 ${\tt CCCTCANCGCCTCNAATANATCCTGTTCAGGAANCGGGTCAAAGAATTCCTCCGN} \\ {\tt TGCCG}$

GACCTACCNAGG

Figure B.15 Alignment of DNA sequence from fig. B.14 with DNA from gene bank.

Matched with aadA2

> dbj AP012208.1
<pre>Score = 950 bits (514), Expect = 0.0 Identities = 527/538 (98%), Gaps = 1/538 (0%) Strand=Plus/Minus</pre>
Query 1 GCCNGCCTTTC- NGATATATCTCCCNATTTGTGTAGGGCTTATTATGCACGCTTAAAAAT 59
Query 60 AATAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCTA 119
Query 120 ACGCCGGAGTTAAGCCGCCGCGCGTAGCGCGGTCGGCTTGAACGAATTGTTAGACATCAT 179

Sbjct 114930 ACGCCGGAGTTAAGCCGCCGCGCGTAGCGCGGTCGGCTTGAACGAATTGTTAGACATCAT 114871
Query 180 TTACCAACTGACTTGATGATCTCGCCTTTCACAAAGCGAATAAATTCTTCCAAGTGATCT 239
Query 240 GCGCGTGAGGCCAAGTGATCTTCTTTTTGTCCCAGATAAGCTTGCTT
Query 300 ACGGGCTGATACTGGGCAGGTAGGCGTTTTATTGCCCAGTCGGCAGCGACATCCTTCGGC 359
Query 360 GCGATTTTGCCGGNTATTGCGCTGTACCAAATGCGGGACAACGTAAGCACTACATTTCGC 419
Query 420 TCATCGCCGGCCCAGTCGGGCTGCGAGTTCCATAGCTTCAAGGTTTCCCTCANCGCCTCN 479
Query 480 AATANATCCTGTTCAGGAANCGGGTCAAAGAATTCCTCCGNTGCCGGACCTACCNAGG 537
gb HQ730120.1 G Escherichia coli strain WM31a01 insertion sequence IS26, resolvase

(tnpR) gene, and transposon Tn1721, complete sequence; TnpM gene, complete cds; and class 1 integron, partial sequence Length=4988 Score = 950 bits (514), Expect = 0.0Identities = 527/538 (98%), Gaps = 1/538 (0%) Strand=Plus/Minus Query 1 GCCNGCCTTTC-NGATATATCTCCCNATTTGTGTAGGGCTTATTATGCACGCTTAAAAAT Sbjct 4710 GCCAGCCTTTCATGATATATCTCCCAATTTGTGTAGGGCTTATTATGCACGCTTAAAAAT 4651 Query 60 AATAAAAGCAGACTTGACCTGATAGTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCTA 119 Sbjct 4650 AATAAAAGCAGACTTGACCTGATAGTTTTGGCTGTGAGCAATTATGTGCTTAGTGCATCTA 4591 Query 120 ACGCCGGAGTTAAGCCGCCGCGCGTAGCGCGGTCGGCTTGAACGAATTGTTAGACATCAT 179 ACGCCGGAGTTAAGCCGCCGCGCGTAGCGCGGTCGGCTTGAACGAATTGTTAGACATCAT 4531 Query 180 TTACCAACTGACTTGATGATCTCGCCTTTCACAAAGCGAATAAATTCTTCCAAGTGATCT 239 Sbjct 4530 TTACCAACTGACTTGATGATCTCGCCTTTCACAAAGCGAATAAATTCTTCCAAGTGATCT 4471 Query 240 Sbjct 4470 4411 Query 300 ACGGGCTGATACTGGGCAGGTAGGCGTTTTATTGCCCAGTCGGCAGCGACATCCTTCGGC 359 Sbjct ACGGGCTGATACTGGGCAGGTAGGCGTTTTATTGCCCAGTCGGCAGCGACATCCTTCGGC

4351

Query 360 GCGATTTTGCCGGNTATTGCGCTGTACCAAATGCGGGACAACGTAAGCACTACATTTCGC Sbict 4350 GCGATTTTGCCGGTTATTGCGCTGTACCAAATGCGGGACAACGTAAGCACTACATTTCGC 4291 Query 420 TCATCGCCGGCCCAGTCGGGCTGCGAGTTCCATAGCTTCAAGGTTTCCCTCANCGCCTCN 479 Sbjct 4290 TCATCGCCGGCCCAGTCGGGCTGCGAGTTCCATAGCTTCAAGGTTTCCCTCAGCGCCTCG 4231 Query 480 AATANATCCTGTTCAGGAANCGGGTCAAAGAATTCCTCCGNTGCCGGACCTACCNAGG 537 Sbjct 4230 AATAGATCCTGTTCAGGAACCGGGTCAAAGAATTCCTCCGCTGCCGGACCTACCAAGG 4173

Figure B.16 DNA sequence from *K. pneumoniae* AES48 amplified by VAF primer (1.5 kb)

NNNNNNNNNNNNNCACTGNNNNNNNCTTGACCGAACGCAGCGGTGGTAACGGCGCAG

TGGCGGTTTTCATGGCTTGTTATGACTGTTTTTTTTGTACAGTCTATGCCTCGGGCATCCA

 ${\tt AGCAGCAAGCGCGTTACGCCGTGGGTCGATGTTTGATGTTATGGAGCAGCAACGATGTTA}$

 ${\tt CGCAGCAGGGCAGTCGCCCTAAAACAAAGTTAGCCATATGAACTCGGAATCAGTACGCAT}$

TTATCTCGTTGCTGCGATGGGAGCCAATCGGGTTATTGGCAATGGTCCTAATATCCCCTG

 ${\tt GAAAATTCCGGGTGAGCAGAAGATTTTTCGCAGACTCACTGAGGGAAAAGTCGTT} \\ {\tt GTCAT}$

GGGGCGAAAGACCTTTGAGTCTATCGGCAAGCCTCTACCGAACCGTCACACATTG GTAAT

CTCACGCCAAGCTAANTACCGCGCCACTGGNTGCGTAGTTGTTTCAACGCTGTCGCACGC

TATCGCTTTGGCATCCGAACTCGGNAATGAANTCTNCGTCNNGGGNGGAGCNGAG NNANA

NACTCTGGCACTACCT

Figure B.17 Alignment of DNA sequence from fig. B.16 with DNA sequences from gene bank. Matched with dfrA12 dihydrofolate reductase

>>EM_PRO:DQ390454; DQ390454 Escherichia coli strain 517- (63946 nt) rev-comp initn: 2562 init1: 2562 opt: 2562 Z-score: 2828.1 bits: 540.0

E(): 7	7.4e-151	
banded	d Smith-Waterman score: 2562; 97.5% identity (97.5% similerlap (556-29:25146-25673)	ar) in 5:
Seque-		30 IGCTCC
EM_PRO	::::::::::::::::::::::::::::::::::::::	GCTCC
Seque-	- NCCCNNGACGNAGANTTCATTNCCGAGTTCGGATGCCAAAGCGATAGCGTGCGAC	
EM_PRO	::: ::::::::::::::::::::::::::::::::::	CAGCGT
Seque-	TGAAACAACTACGCANCCAGTGGCGCGGTANTTAGCTTGGCGTGAGATTACCAAT	
M_PRO	::::::::::::::::::::::::::::::::::::::	rgtgtg
Seque-	ACGGTTCGGTAGAGGCTTGCCGATAGACTCAAAGGTCTTTCGCCCCATGACAACC	
M_PRO	::::::::::::::::::::::::::::::::::::::	SACTTT
	340 330 320 310 300 2 TCCCTCAGTGAGTCTGCGAAAAATCTTCTGCTCACCCGGAATTTTCCAGGGGATA :::::::::::::::::::::::::::::::	::::: ATTAGG
eque-	ACCATTGCCAATAACCCGATTGGCTCCCATCGCAGCAACGAGATAAATGCGTACT	
M_PRO	::::::::::::::::::::::::::::::::::::::	GATTC
eque-	CGAGTTCATATGGCTAACTTTGTTTTAGGGCGACTGCCCTGCTGCGTAACATCGT	
M_PRO	CGAGTTCATATGGCTAACTTTGTTTTAGGGCGACTGCCCTGCTGCGTAACATCGT 25480 25490 25500 25510 25520 25530	TGCTG
eque-	CTCCATAACATCAAACATCGACCCACGGCGTAACGCGCTTGCTGGCTTGGATGCCC	
M_PRO	CTCCATAACATCAAACATCGACCCACGGCGTAACGCGCTTGCTGGATGCCC 25540 25550 25560 25570 25580 25590	GAGGC
eque-	ATAGACTGTACAAAAAAACAGTCATAACAAGCCATGAAAACCGCCACTGCGCCGT	
	ATAGACTGTACAAAAAAACAGTCATAACAAGCCATGAAAAACCGCCACTGCGCCGT 25600 25610 25620 25630 25640 25650	
eque-	40 30 20 10 CCGCTGCGTTCGGTCAAGNNNNNNNCAGTGNNNNNNNNNN	

EM_PRO	CCGCTGCG 25660	TTCGG 256		TTCT(2568		GTTGC 2569		CGCAT 2570		ACTT(2571		С	
initn: 8.1e-15		it1:	2562 o	pt: 2	2562	Z-scc	ore: 2	831.4	4 bit	s: 53	39.8 E	():	
	Smith-Warlap (29-				562; 9	7.5%	ident	ity	(97.5%	sim	ilar)	in 52	:8
Sequen	NNNNNN	10 NNNCN	NNNNNC		NNNNN	NCTT							
EM_PRO	GCGTATGC	GCTCA	CGCAAC 8330		CCAGAA 8340	CCTT	GACCGA				:::::: ACGGCG 8370		
Sequen	60 AGTGGCGG	70 TTTTC	ATGGCT	80 TGTT	ATGACI	90 GTTT:	rttgi	100 CACAG	TCTATO	110 CCTC	GGCAT	'C	
EM_PRO	AGTGGCGG		ATGGCT	TGTTA		GTTT:	TTTGT						
	120 CAAGCAGC ::::::		CGTTAC	GCCG1	rgggtc		TTGAT		TGGAGC				
EM_PRO	CAAGCAGCA 8440	AAGCG		GCCGT	rgggtc	GATG:							
Sequen	180 TACGCAGCA	AGGGC2	AGTCGC ::::::	CCTAI	AAACAA	::::	AGCCAT	::::	ACTCGG	::::	:::::	:	
	TACGCAGCA 8500		8510		8520		8530		8540		AGTACG 8550	С	
	240 ATTTATCTO		CTGCGA	TGGG <i>F</i>	AGCCAA		TTATT		ATGGTC				
EM_PRO	:::::::: ATTTATCT0 8560	CGTTG		TGGGA	AGCCAA	TCGGG	TTATT	'GGCAF	ATGGTC	CTAAT			
	300 TGGAAAATT		GTGAGC.	AGAAG	SATTTT	TCGCA	GACTC		AGGGAA				
EM_PRO	TGGAAAATT 8620	CCGGC		AGAAG	ATTTT	TCGCA	GACTC	ACTGA	AGGGAA				
	860 ATGGGGCG <i>A</i>	AAAGA		AGTCI	ATCGG	CAAGO	CTCTA		ACCGTC.				
EM_PRO	ATGGGGCGA 8680	AAGAC	CCTTTG	AGTCT	'ATCGG		CTCTA		CCGTC.				
	ATCTCACGO	CAAGO		ACCGC	GCCAC'	TGGNT	GCGTA		TTCAA				
EM_PRO	:::::::: ATCTCACGO 8740	CAAGO	TAACT	ACCGC	GCCAC'		GCGTA	GTTGT					
	80 GCTATCGCT		ATCCG	AACTC	GGNAA'		TCTNC		GGGNG				

8800 8810 8820 8830 8840 8850 540 550 Sequen NANACTCTGGCACTACCT EM PRO TACACTCTGGCACTACCTCACGCCCACGGCGTGTTTCTATCTGAGGTACATCAAACCTTC 8860 8870 8880 8890 8900 8910

Figure B.18 DNA sequence from *K. pneumoniae* AES74 amplified by CTX-M-15 F primer

AATTAGAGCGCAGTCGGGAGGCAGACTGGGTGTGGCATTGATTAACACAGCAGATAATT

CGCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCACCAGTAAAGT GATGG

CCGCGGCCGCGGTGCTGAAGAAAGTGAAAGCGAACCGAATCTGTTAAATCAGC NAGTTG

AGATCAAAAAATCTGACCTTGTTAACTATAATCCGATTGCGGAAAANNACGTCNN TGGGA

CNATGTCNCTGGCTGANCTTANCGCGGCCGCGCTACAGTACANNNATAACGTGNN GATGA

NNAAGCTGATTGCTCACGTTGGCGGCCCGGCTAGCGTCACCGCGTTCGCCCGACN GCTGG

GANANNAANNGNTCCNNCNCGACCGNACCNAGCCNACNTTAANNNNNGNNNTTC CGGGCG

ATCCGNGTGNTACNANTTCNGCTCGAGTAATGGAGCNCACTCCGCGGATTNNGNN NATGG

 ${\tt GTATCGCNTTTNNNTGACNTCCAACGGNCNCNNCTGGNGAATTGNNTNANNGGTG} \\ {\tt NTNNN}$

NNTNNTNNAGCGNNCATNNNNNCNGNNNNGNNNNCNNC

Figure B.19 Alignment of DNA sequence from fig. B.18 with DNA sequence from gene bank

>>EM PRO:EU935739; EU935739 Escherichia coli strain A pl (117536 nt) initn: 3785 init1: 3785 opt: 3785 Z-score: 3796.6 bits: 720.5 E(): 6.3e-205 banded Smith-Waterman score: 3785; 100.0% identity (100.0% similar) in 757 nt overlap (1-757:63040-63796) 10 20 30 GACCAGAATCAGCGGCGCACGATCTTTTGG Sequen EM PRO TGCCTTAGGTTGAGGCTGGGTGAAGTAAGTGACCAGAATCAGCGGCGCACGATCTTTTGG 63010 63020 63030 63040 63050 70 40 50 60 80 90 Sequen CCAGATCACCGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCAC EM PRO CCAGATCACCGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCAC 63070 63080 63090 63100 63110 63120 100 110 120 130 140 Sequen AACCCAGGAAGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCTTTCAT

			·····	·····	~ ~~~	······································	
EM_PRO 631:	AACCC	::::::::::::::::::::::::::::::::::::::	CAGTCCAGCC	rgaatgeteg	CTGCACCGGT	GGTATTGCCTT	
631.	30	63140	63150	63160	63170	63180	
Sequen	CCATG'	160 FCACCAGCTGO	170 CGCCCGTTGG	180 CTGTCGCCCA	190 ATGCTTTACC	200 CAGCGTCAGAT	210 TTCCG
-	:::::						:::::
6319		FCACCAGCTG0 63200		63220		63240	rrccg
		220	230	240	250	260	270
Sequen		TTTGCGCCATT					
EM_PRO		:::::::::: FTTGCGCCATT					
632	50	63260	63270	63280	63290	63300	
Seguen	GTTTA	280 ACGTCGGCTC	290 GTACGGTCG			320 CAGCTGTCGG	330 GCGAA
*	:::::	: : : : : : : : : :		: : : : : : : : :	::::::::	::::::::	::::
EM_PRO 633:		ACGTCGGCTCG 63320		AGACGGAACG 63340		CAGCTGTCGGG 63360	GCGAA
		340	350	360	370	380	390
Sequen		rgacgctagcc	CGGGCCGCCA	ACGTGAGCAA	TCAGCTTATT	CATCGCCACG'	TTATC
EM PRO		: : : : : : : : : : : : : : : : : : :					
_633.	70	63380	63390	63400	63410	63420	
Seguen	ССТСТ	400 ACTGTAGCGCG	410	420 AGCTCAGCCA	430 GTGACATCGT	440 CCCATTGACG	450 rgctt
_	:::::		:::::::::		:::::::::	::::::::::	::::
EM_PRO 6343		ACTGTAGCGCG 63440	GCCGCGCTA 63450		GTGACATCGT 63470	CCCATTGACGT 63480	rgctt
101		460		480		500	510
Sequen		CAATCGGATTA					
· —	TTCCG	CAATCGGATTA	TAGTTAACA	AGGTCAGATT	TTTTGATCTC	AACTCGCTGAT	
6349	90	63500	63510	63520	63530	63540	
Seguen	Сമലമന്ദ	520 CCGGTTCGCTT	530 ''T'C'	540	550 ceeccecee	560 Catcacttac	570 TGGT
Sequen		:::::::::					
EM_PRO 6355		rCGGTTCGCTT 63560		TTCAGCACCG	CGGCCGCGGC 63590	CATCACTTTAC 63600	TGGT
0331	,0						
Sequen		580 ACATCGCAAAG					
EM PRO		::::::::: \CATCGCAAAG					
6361			63630			63660	
		640	650	660	670	680	690
Sequen		ATGCCACACCC					
EM_PRO 6367		ATGCCACACCC 63680		CCGACTGCC 63700	GCTCTAATTC 63710	GCAAGTTTTI 63720	GCTG
		700	710	720	730	740	750
Sequen		CGCCGTTTGC					
EM_PRO 6373	TACGTO	CGCCGTTTGC	GCATACAGCG	GCACACTTC			
Sequen	CGCCAT	rc					
***************************************	:::::						······

EM_PRO CGCCATCAGCGTGAACTGGCGCAGTGATTTTTTAACCATGGGATTCCTTATTCTGGAAGA 63790 63800 63810 63820 63830 63840

Figure B.20 DNA sequence from *K. pneumoniae* AES140 amplified by CTX-M-15 F primer

NNNNNNNNNNNNNTGTGCCGCTGTATGCGCAACGGCGGACGTACAGCAAAAAC TTGCCG

AATTAGAGCGGCAGTCGGGAGGCAGACTGGGTGTGGCATTGATTAACACAGCAGATAATT

CGCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCACCAGTAAAGT

CCGCGGCCGGTGCTGAAGAAAAGTGAAAGCGAACCGAATCTGTTAAATCAGCGAGTTG

AGATCAAAAAATCTGACCTTGTTAACTATAATCCGATTGCGGAAAAGCACGTCAA TGGGA

CGATGTCACTGGCTGAGCTTAGCGCGGCCGCGCTACAGTACAGCGATAACGTGGCGATGA

ATAAGCTGATTGCTCACGTTGGCGGCCCGGCTAGCGTCACCGCGTTCGCCCGACAGCTGG

GAGACGAAACGTTCCNTCTCGACCGTACCGAGCCGACGTTAANNACCGCCNNNN NGGGCG

 $\label{eq:atcomposition} \textbf{ATCCGCGTGATACCNNTTCNNCTCGGGCANTGGCNCAAACTCTGCGGANNNTGACGCTGG}$

NNNNNNCATTNNNCGN

Figure B.21 Alignment of *bla*_{CTX-M-15} gene from fig. B.20 with DNA sequences from gene bank

>>EM PRO:EU935739; EU935739 Escherichia coli strain A pl (117536 nt) initn: 3790 init1: 3790 opt: 3790 Z-score: 3815.4 bits: 724.0 E(): 5.6e-206 banded Smith-Waterman score: 3790; 100.0% identity (100.0% similar) in 758 nt overlap (1-758:63040-63797) 10 20 30 GACCAGAATCAGCGGCGCACGATCTTTTGG Sequen EM PRO TGCCTTAGGTTGAGGCTGAGTGAAGTAAGTGACCAGAATCAGCGGCGCACGATCTTTTGG 63020 63030 63040 63050 63060 63010 70 40 50 60 80 90 Sequen CCAGATCACCGCGATATCGTTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCAC EM PRO CCAGATCACCGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCAC 63070 63080 63090 63100 63110 63120 100 110 120 130 Sequen AACCCAGGAAGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCTTTCAT EM PRO AACCCAGGAAGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCTTTCAT 63130 63140 63150 63160 63170 63180 160 170 180 190 200 Sequen CCATGTCACCAGCTGCGCCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTCAGATTCCG EM PRO CCATGTCACCAGCTGCGCCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTCAGATTCCG 63190 63200 63210 63220 63230

yaaraanaan							
_		220	230	240	250	260	270
Sequen						CGCCCGGAATG	
EM PRO						GCCCGGAATG	
632				63280		63300	
0	Ommm »	280	290	300		320	330
sequen						CCAGCTGTCGG	
EM PRO						CCAGCTGTCGG	
633				63340		63360	
_		340	350	360	370	380	390
Sequen						CATCGCCACG	
EM DDO						::::::::: CATCGCCACG	
633				63400		63420	TIAIC
033	, 0	03300	03370	03400	03410	03420	
***		400	410	420	430	440	450
Sequen						CCCATTGACG	
						: : : : : : : : : : :	
: -						CCCATTGACG	TGCTT
634	30	63440	63450	63460	634/0	63480	
		460	470	480	490	500	510
Sequen	TTCCG					CAACTCGCTGA	TTTAA
_							
, <u> </u>						CAACTCGCTGA	TTTAA
634	90	63500	63510	63520	63530	63540	
		520	530	540	EEO	560	570
Semien	САСАТ					CATCACTTTA	_
bequen						::::::::::	
EM PRO						CCATCACTTTA	
635	50	63560	63570	63580	63590	63600	
	aamaa	580		600		620	630
Sequen						ATTATCTGCT	
EM PRO						ATTATCTGCT	
636				63640		63660	
		640		660		680	690
Sequen						GGCAAGTTTT'	
EM DDO						::::::::::::::::::::::::::::::::::::::	
636				63700	63710	63720	16016
050	, 0	03000	03070	03700	03710	03720	
		700	710	720	730	740	750
Sequen	TACGT	CCGCCGTTTG	CGCATACAGC	GGCACACTTC	CTAACAACAG	CGTGACGGTT	GCCGT
						:::::::::	
· —						CGTGACGGTT	GCCGT
6373	30	63740	63750	63760	63770	63780	
Sequen	CGCCA.	ГСА					
-	:::::						
. –						CCTTATTCTG	GAAGA
6379	90	63800	63810	63820	63830	63840	
1							

Figure B.22 DNA sequence of ISEcp1 from K. pneumoniae AES140

AAACACACGTGGAATTTAGGTTTCATTCTGGCGACGTCCGTATTNGCCTTTCGGAAGCAT

AAAATCGGACGCGTTGTGGCTCGCTTCAGGTAAAATATTGACTATTCNNGTTGTT GTTAT

TTCGTCTCTCCAGAATAAGGAATCCCATGGTTAAAAAAATCACTGCGCCAGTTCACGCTG

ATGGCGACGCCAACCGTCACGCTGTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACCGCG

GACGTACAGCAAAAACTTGCCGAATTAGAGCGGCAGTCGGGAGGCAGACTGGGTGTGGCA

TTGATTAACACAGCAGATAATTCGCAAATACTTTATCGTGCTGATGAGCGCTTTGC GATG

 ${\tt TGCAGCACCAGTAAAGTGATGGCCGCGGCCGCGGTGCTGAAGAAAAGTGAAAGCGAACCG}$

AATCTGTTAAATCAGCGAGTTGAGATCAAAAAATCTGACCTTGTTAACTATAATCCGATT

GCGGAAAAGCACGTCAATGGGACGATGTCACTGGCTGAGCTTAGCGCGGCCGCGCTACAG

Figure B.23 Alignment of DNA sequence from fig. B.22 with DNA from gene bank Matched with IS*Ecp1*

£								
>>EM_P	RO:EU9357	740; EU93574	0 Escheric	hia coli :	strain C pl	. (93732 ni	t)	
rev-co	mp initn:	: 4018 init1	: 3840 opt	: 4197 Z	-score: 388	5.7 bits:	736.9 E():
7.1e-2	_		-					
		aterman scor	e: 4197: 9	6.8% ident	tity (96.8%	similar)	in 893 nt	
		:7081-7967)	,	o.oo racii	2227 (20.00	DIMILIAL,	0,0	
Overra	p (0)3 3.	. 7001 75077						
			900	890	880	870		
Seque-						TGANTTCCTT	NT.	
Seque-			IAII	: : :::		::: ::::::	•	
EM DDO	መረመመመረ እ ፣	\	יייייירי א ייי א ייי א א ריי				_	
EM_PRO		AATGATGATGCT					-	
	/(060 707	0 /08	0 709	90 710	0		
	0.00	050	040	020	020	010		
_	860	850		830	820	810	_	
Seque-		TTTCAGAATACA						
		:::::::::::::::::::::::::::::::::::::::						
		-TTCAGAATACA					Γ	
7:	110	7120	7130	7140	7150	7160		
	800	790	780	770	760	750		
Seque-	TGCAGCA	\AAAATAATCAA	AACCGCAAGA	TATGTAATCA	ATGAAGTTGTC	GGAAAACTAT	7	
		: : : : : : : : : : : : : : : : : : :						
EM_PRO	TGCAGC-A	AAAATAATCAA	AACCGCAAGA'	TATGTAATCA	ATGAAGTTGTC	GGAAAACTAT	3	
	7170	7180	7190	7200	7210	7220		
	740	730	720	710	700	690		
Seque-	CGTACAAG	GGAGTGTATGA	AAAATGTCTG	GTATAATAAG	SAATATCATCA	ATAAAATTGAG	3	
-	:::::::						!	
EM PRO	CGTACAAG	GGAGTGTATGA	AAAATGTCTG	GTATAATAAG	AATATCATCA	ATAAAATTGAG	3	
_	7230	7240	7250	7260	7270	7280		
		. =						
	680	670	660	650	640	630		
			······································					

Seque-	TGTTGCTCTGTGGATAACTTGCAGAGTTTATTAAGTATCATTGCAGCAAAGATGAAATCA
EM PRO	TGTTGCTCTGTGGATAACTTGCAGAGTTTATTAAGTATCATTGCAGCAAAGATGAAATCA
2	7290 7300 7310 7320 7330 7340
	620 610 600 590 580 570
Seque-	ATGATTTATCAAAAATGATTGAAAGGTGGTTGTAAATAATGTTACAATGTGTGAGAAGCA
EM PRO	::::::::::::::::::::::::::::::::::::::
_	7350 7360 7370 7380 7390 7400
Virginia and American	560 550 540 530 520 510
Seque-	$\tt GTCTAAATTCTTCGTGAAATAGTGATTTTTGAAGCTAATAAAAAACACACGTGGAATTTA$
EM PRO	GTCTAAATTCTTCGTGAAATAGTGATTTTTGAAGCTAATAAAAAACACACGTGGAATTTA
_	7410 7420 7430 7440 7450 7460
**************************************	500 490 480 470 460 450
Seque-	${\tt GGTTTCATTCTGGCGACGTCCGTATTTGCCTTTCGGAAGCATAAAATCGGACGCGTTGTG}$
EM PRO	GGTTTCATTCTGGCGACGTCCGTATTTGCCTTTCGGAAGCATAAAATCGGACGCGTTGTG
_	7470 7480 7490 7500 7510 7520
W work or an indicate of	440 430 420 410 400 390
Seque-	${\tt GCTCGCTTCAGGTAAAATATTGACTATTCATGTTGTTGTTATTTCGTCTCTTCCAGAATA}$
EM PRO	GCTCGCTTCAGGTAAAATATTGACTATTCATGTTGTTGTTATTTCGTCTCTTCCAGAATA
-	7530 7540 7550 7560 7570 7580
	380 370 360 350 340 330
Seque-	AGGAATCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGATGGCGACGGCAACCGTC
EM_PRO	AGGAATCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGATGGCGACGGCAACCGTC
_	7590 7600 7610 7620 7630 7640
	320 310 300 290 280 270
Seque-	ACGCTGTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACGGCGGACGTACAGCAAAAACTT
EM_PRO	${\tt ACGCTGTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACGGCGGACGTACAGCAAAAACTT}$
0.000	7650 7660 7670 7680 7690 7700
T 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	260 250 240 230 220 210
Seque-	GCCGAATTAGAGCNNNNGTCGGGAGGCAGACTGGGTGTGGCATTGATTAACACAGCAGAT
EM_PRO	${\tt GCCGAATTAGAGCGGCAGTCGGGAGGCAGACTGGGTGTGGCATTGATTAACACAGCAGAT}$
	7710 7720 7730 7740 7750 7760
***	200 190 180 170 160 150
Seque-	AATTCGCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCNNNNNTAAAGTG
EM_PRO	${\tt AATTCGCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCACCAGTAAAGTG}$
	7770 7780 7790 7800 7810 7820
0	140 130 120 110 100 90
seque-	ATGGCCGCGGCCGCGTGCTGAAGAAAAGTGAAAGCGAACCGAATCTGTTAAATCAGCGA
EM_PRO	ATGGCCGCGGCGGGTGCTGAAGAAAAGTGAAAGCGAACCGAATCTGTTAAATCAGCGA
	7830
0	80 70 60 50 40 30
seque-	GTTGAGATCAAAAAATCTGACCTTGTTAACTATAATCCGATTGCGGAAAAGCACGTCAAN
EM_PRO	$\tt GTTGAGATCAAAAAATCTGACCTTGTTAACTATAATCCGATTGCGGAAAAGCACGTCAAT$
***	7890
Comin	20 10
seque-	GGGACGANGTCACNGGCNGAGCTAG

EM PRO GGGACGATGTCACTGGCTGAGCTTAGCGCGGCCGCGCTACAGTACAGCGATAACGTGGCG 7960 7970 7980 7990 Figure B.24 DNA sequence from K. pneumoniae AES261 amplified by CTX-M-15 primer GGGAGTGCGCGCGCTAGCTCAGCCAGTGACATCGTCCCATTGA CGTGCTTTTCCGCA ATCGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTG ATTTAACAGATTC GGTTCGCTTTCACTTTCTTCAGCACCGCGGCCGCCGCCATCACTTT ACTGGTGCTGCAC ATCGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTG CTGTGTTAATCAAT GCCACACCCAGTCTGCCTCCGACTGCCGCTCTAATTCGGCAAGTT TTTGCTGTACGTCC GCCGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGG TTGCCGTCGCCATC AGCGTGAACTGGCGAGCTGATTTTA Figure B.25 Alignment of DNA sequence from fig. B.24 with DNA from gene bank Matched with bla_{CTX-M-15} emb|FR828676.1| Escherichia coli plasmid pCTX913 tnpA gene, blaCTX-M-15 gene and delta tnpA gene (partial), isolate 913 Length=2656 Score = 678 bits (367), Expect = 0.0Identities = 377/381 (99%), Gaps = 4/381 (1%) Strand=Plus/Minus Query 7 GCGCGG-CGCGCT-AGCTCAGCCAGTGACATCGTCCCATTGACGTGCTTTTCCGCAATCG 64 GCGCGCCGCGCTAAGCTCAGCCAGTGACATCGTCCCATTGACGTGCTTTTCCGCAATCG 1253 Query 65 GATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGATTTAACAGATTCGGTT 124 Sbict GATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGATTTAACAGATTCGGTT 1193

CGCTTTCACTTTTCTTCAGCACCGCGGCCGCCGCCATCACTTTACTGGTGCTGCACATCG

Query 125

Sbjct 1192 CGCTTTCACTTTCTCAGCACCGCGGCCGCCGCCATCACTTTACTGGTGCTGCACATCG 1133 Query 185 CAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCTGTTTAATCAATGCCA Sbjct 1132 CAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCTGTTTAATCAATGCCA 1073 Query 245 CACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTTGCTGTACGTCCGCCG 304 Sbjct 1072 CACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTTTGCTGTACGTCCGCCG 1013 Query 305 TTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTTGCCGTCGCCATCAGCG Sbjct 1012 TTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTTGCCGTCGCCATCAGCG 953 TGAACTGGCG-AGCTGATTTT Query 365 384 TGAACTGGCGCAG-TGATTTT Sbjct 952 933

Figure B.26 DNA sequence from *K. pneumoniae* AES817 amplified by CTX-M-15 primers

TGTTCTGTAGCGCGCGCGCTAGCTCAGCCAGTGACATCGTCCCAT TGACGTGCTTTTCC

GCAATCGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTC GCTGATTTAACAGA

TTCGGTTCGCTTTCACTTTTCTTCAGCACCGCGGCCGCGCCATCAC
TTTACTGGTGCTG

CACATCGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTAT CTGCTGTTTAATC

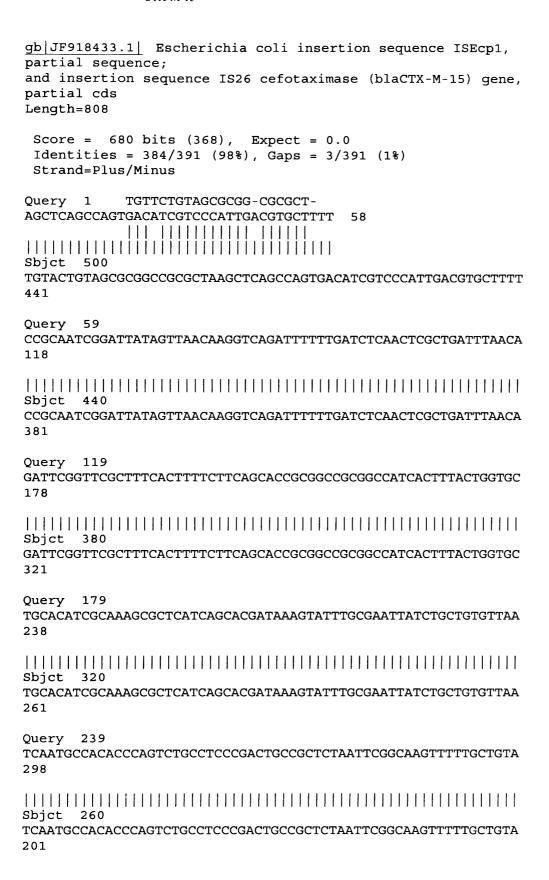
AATGCCACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTTGCTGTACG

TCCGCCGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGA CGGTTGCCGTCGCC

ATCAGCGTGAACTGGCAAAAATGATTTTTA

Figure B.27 Alignment of DNA sequence from fig. B.26 with DNA from gene bank

Matched with bla_{CTX-M-15}



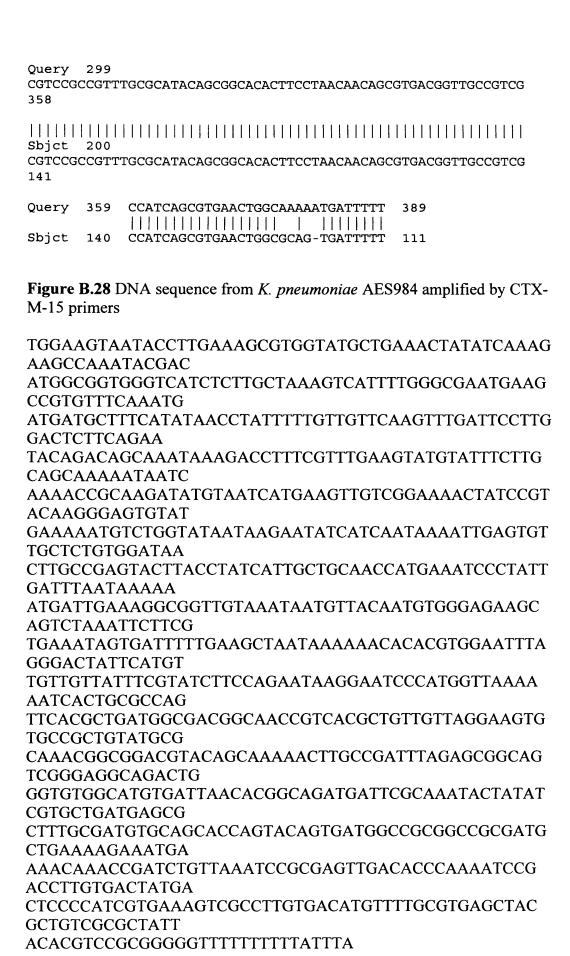


Figure B.29 Alignment of DNA sequence from fig. B.28 with DNA from gene bank

Matched with bla_{CTX-M-15}

```
Klebsiella pneumoniae strain C1865 TEM-1 beta-lactamase
(blaTEM-1)
gene, partial cds; TnpR (tnpR) gene, complete cds; insertion
sequence ISEcp1, complete sequence; CTX-M-15 extended-spectrum
beta-lactamase (blaCTX-M-15) and hypothetical protein
genes, complete cds; insertion sequence IS26, complete
sequence;
fluoroquinolone acetylating aminoglycoside-(6')-N-
acetyltransferase
(aac(6')-Ib-cr) gene, complete cds; and OXA-1
beta-lactamase (blaOXA-1) gene, partial cds
Length=8378
Score = 1408 bits (762), Expect = 0.0
Identities = 850/890 (96%), Gaps = 15/890 (2%)
Strand=Plus/Plus
Query 17
          AAAGCGTGGT-ATGCTG-
AAACTATATCAAAGAAGCCAAATACGACATGGCGGTGGGTCA
          111111111
Sbjct 2486
AAAGCGTGGTAATGCTGAAAACTATATCAAAGAAGCCAAATACGACATGGCGGTGGGTCA
Query
    75
TCTCTTGCTAAAGTCATTTTGGGCGAATGAAGCCGTGTTTCAAATGATGATGCTTTCATA
Sbjct 2546
{\tt TCTCTTGCTAAAGTCATTTTGGGCGAATGAAGCCGTGTTTCAAATGATGATGCTTTCATA}
2605
Query 135
194
Sbjct 2606
2665
Query 195
AAAGACCTTTCGTTTGAAGTATGTATTTCTTGCAGCAAAAATAATCAAAACCGCAAGATA
254
Sbict 2666
AAAGACCTTTCGTTTGAAGTATGTATTTCTTGCAGCAAAAATAATCAAAACCGCAAGATA
2725
Query 255
TGTAATCATGAAGTTGTCGGAAAACTATCCGTACAAGGGAGTGTATGAAAAATGTCTGGT
```

TGTAATCATGAAGTTGTCGGAAAACTATCCGTACAAGGGAGTGTATGAAAAATGTCTGGT 2785
Query 315 ATAATAAGAATATCATCAATAAAATTGAGTGTTGCTCTGTGGATAACTTGCCGAGTAC 372
Query 373 ITACCTATCATTGCTGCAACCATGAAATCCCTATTGATTAATAAAAATGATTGAAAGG 432
Sbjct 2845 TTAAGTATCATTGCAGCAAAGATGAAATC-AATGATTT- ATCAAAAATGATTGAAAGG 2900
Query 433 CGGTTGTAAATAATGTTACAATGTGGGAGAAGCAGTCTAAATTCTTCGTGAAATAGTGAT 492
Query 493 ITTTGAAGCTAATAAAAAACACACGTGGAATTTAGGGACTATTCATGTTGTTGTTATTTC 552
Query 553 GTATCTTCCAGAATAAGGAATCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGATG 512
Query 613 GCGACGGCAACCGTCACGCTGTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACGGCGGAC 572
HILLING SUBSTANCE OF THE STATE

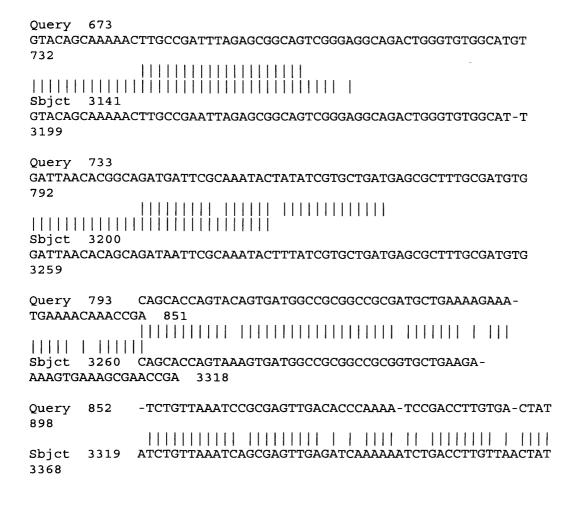


Figure B.30 DNA sequence from *K. pneumoniae* AES1001 amplified by CTX-M-15 primers

TAAATGTTATGTGAGAGCAGTCTAAATTCTTCGTGAAATAGTGA TTTTTGAAGCTAAT

AAAAAACACACGTGGAATTTAGGGACTATTCATGTTGTTATTT CGTATCTTCCAGAA

TAAGGAATCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGAT GGCGACGCAACCG

TCACGCTGTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACGGCGGA CGTACAGCAAAAAC

TTGCCGAATTAGAGCGGCAGTCGGGAGGCAGACTGGGTGTGGCAT TGATTAACACAGCAG

ATAATTCGCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCACCAGTAAAG

TGATGGCCGCGCGCGGTGCTGAAGAAAAGTGAAAGCGAACCGA ATCTGTTAAATCAGC

GAGTTGAGATCAAAAATCTGACCTTGTTAACTATAATCCGATTGC GGAAAAGCACGTCA

CTGGTTAAATAAGCTTGTCTTTTGACCTTTCCATTGACGGGTTTTCC ACCCGACTAAAAT TTCAAGCGCAATATTTTTACTCCAACGATTTACGAGTAGTTCTTTCC

TTTTTCAAACAA CGCCGGGTCGGCCTTCATGGCGCTCCCACCCAATTGCCCACAAACT ACCAAAAATTCGAA

TTTTTACCCGTTTAACAATGAAGCCAACTGCCCATCCCCCATTTTC TACTGATGTTTTT

TCTACCATCTCTTTCCTCACGCTGCTTTTTTTA

Figure B.31 Alignment of DNA sequence from fig. B.30 with DNA from gene bank

Matched with blactx-M-15

Acinetobacter baumannii strain H1 hydroxyisourate hydrolase gene, complete cds; disrupted pyrimidine utilization transporter gene, partial sequence; insertion sequence ISEcp1 transposase (tnpA) gene, complete cds; CTX-M15 (blaCTX-M15) gene, complete cds; disrupted orf477 gene, partial sequence; transposon Tn3 tnpA gene, partial sequence; and hypothetical protein gene, complete cds Length=5224

Score = 981 bits (531), Expect = 0.0
Identities = 543/548 (99%), Gaps = 3/548 (1%)
Strand=Plus/Plus

Query 68 ACACGTGGAATTTAGGGACTATTCATGTTGTTGTTATTTCGTATCTTCCAGAATAAGGAA 127

ACACGTGGAATTTAGGGACTATTCATGTTGTTGTTATTTCGTATCTTCCAGAATAAGGAA 2734

Query 128 TCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGATGGCGACGGCAACCGTCACGCT 187

TCCCATGGTTAAAAAATCACTGCGCCAGTTCACGCTGATGGCGACGGCAACCGTCACGCT 2794

Query 188 GTTGTTAGGAAGTGTGCCGCTGTATGCGCAAACGGCGGACGTACAGCAAAAACTTGCCGA 247
Query 248 ATTAGAGCGGCAGTCGGGAGGCAGACTGGGTGTGGCATTGATTAACACAGCAGATAATTC 307
Query 308 GCAAATACTTTATCGTGCTGATGAGCGCTTTGCGATGTGCAGCACCAGTAAAGTGATGGC 367
Query 368 CGCGGCCGCGGTGCTGAAGAAAGTGAAAGCGAACCGAATCTGTTAAATCAGCGAGTTGA 427
Query 428 GATCAAAAAATCTGACCTTGTTAACTATAATCCGATTGCGGAAAAGCACGTCAATGGGAC 487
Query 488 GATGTCACTGGCTGAGCTTAGCGCGGCCGCCTACAGTACAGCGATAACGTGGCTGGTTA 547
Query 548 AATAAGCT 555 Sbjct 3154 A-TAAGCT 3160

Figure B.32 Alignment of RpoB from K. pneumoniae AES817 sequence type as ST 511 with gene bank



Figure B.33 Alignment of GapA from K. pneumoniae AES817 sequence type as ST 511 with gene bank

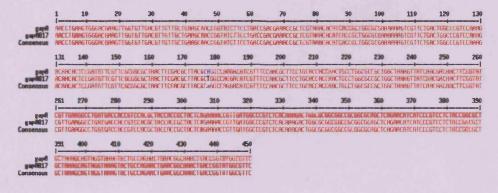


Figure B.34 Alignment of infB from K. pneumoniae AES817 sequence type as ST 511 with gene bank

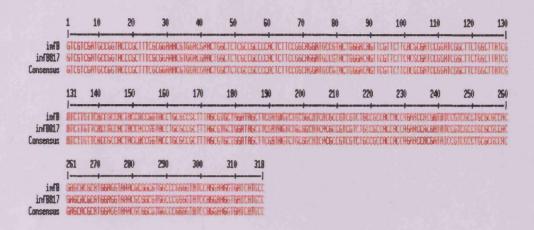


Figure B.35 Alignment of Pgi from K. pneumoniae AES817 sequence type as ST 511 with gene bank

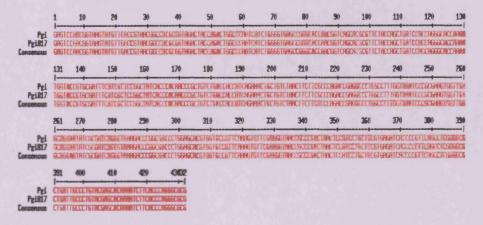


Figure B.36 Alignment of PhoE from *K. pneumoniae* AES817 sequence type as ST 511 with gene bank



Figure B.37 Alignment of tnoB from *K. pneumoniae* AES817 sequence type as ST 511 with gene bank

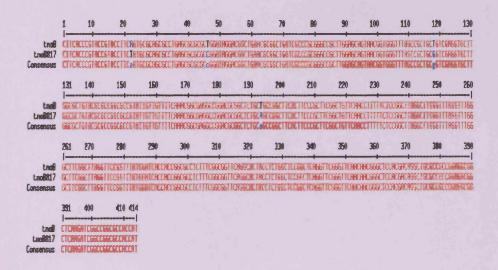


Figure B.38 Alignment of MDH from K. pneumoniae AES817 sequence type as ST 511 with gene bank

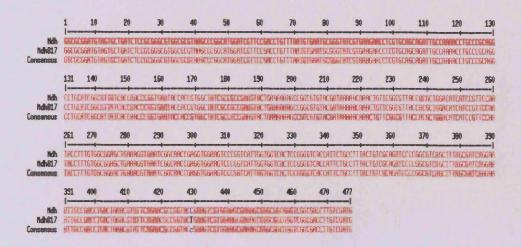


Figure B.39 Alignment of mdh from *K. pneumoniae* AES809 sequence type as ST 486 with gene bank

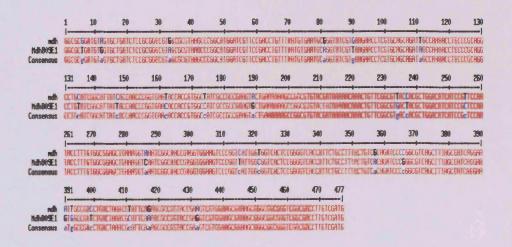


Figure B.40 Alignment of Pgi from K. pneumoniae AES809 sequence type as ST 486 with gene bank



Figure B.41 Alignment of GapA from K. pneumoniae AES809 sequence type as ST 486 with gene bank

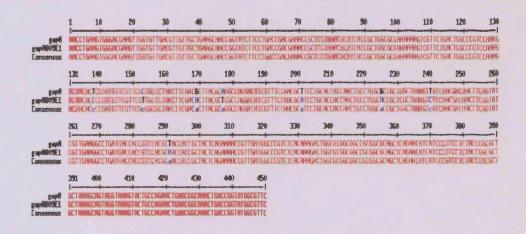


Figure B.42 Alignment of PhoE from K. pneumoniae AES809 sequence type as ST 486 with gene bank

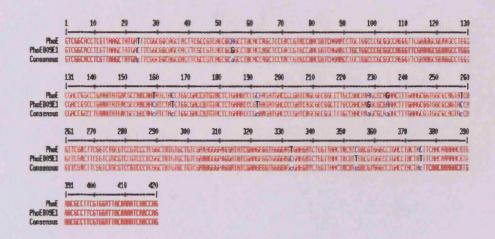


Figure B.43 Alignment of tnoB from K. pneumoniae AES809 sequence type as ST 486 with gene bank

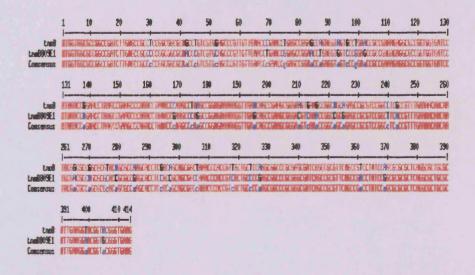


Figure B.44 Alignment of infB from K. pneumoniae AES809 sequence type as ST 486 with gene bank

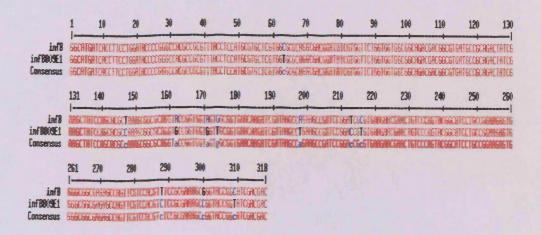


Figure B.45 Alignment of RpoB from K. pneumoniae AES809 sequence type as ST 486 with gene bank

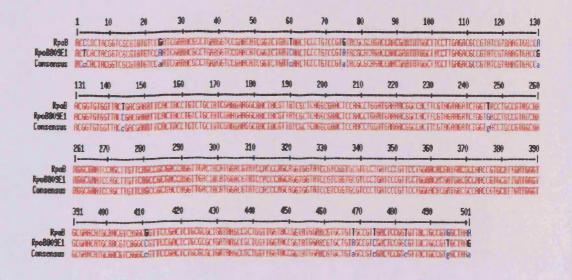


Figure B.46 Alignment of Pgi from K. pneumoniae AES808 sequence type as ST 509 with gene bank

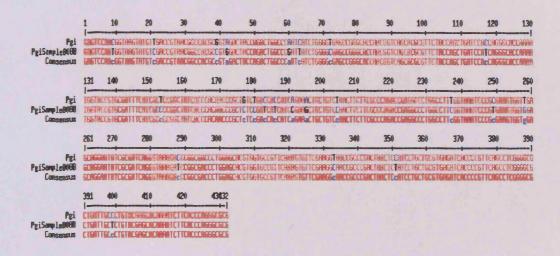


Figure B.47 Alignment of tnoB from K. pneumoniae AES808 sequence type as ST 509 with gene bank

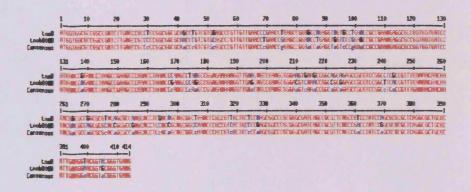


Figure B.48 Alignment of PhoE from K. pneumoniae AES808 sequence type as ST 509 with gene bank

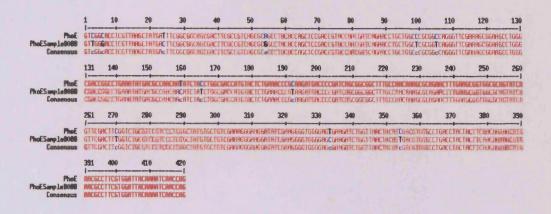


Figure B.49 Alignment of infB from K. pneumoniae AES808 sequence type as ST 509 with gene bank

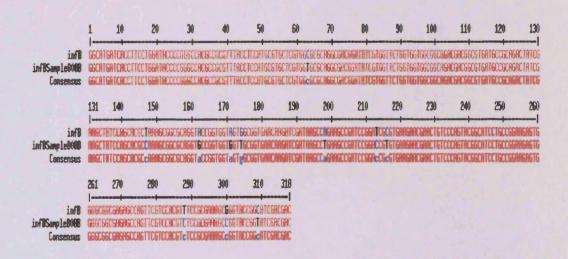


Figure B.50 Alignment of RpoB from K. pneumoniae AES808 sequence type as ST 509 with gene bank

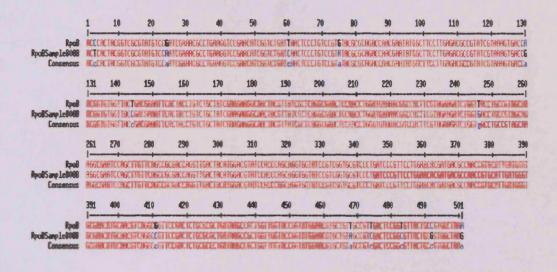


Figure B.51 Alignment of mdh from K. pneumoniae AES808 sequence type as ST 509 with gene bank

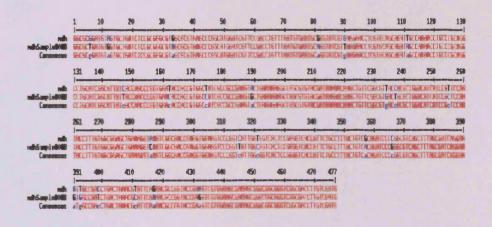


Figure B.52 Full sequence of AES81 integron

cttgaccgaacgcagcggtggtaacggcgcagtggcggttttcatggctt gttatgactgtttttttggggtacagtctatgcctcgggcatccaagcag caagcgcgttacgccgtgggtcgatgtttgatgttatggagcagcaacga tgttacgcagcaggcagtcgccctaaaacaaagttaggccgcatggaca caacgcaggtcacattgatacacaaaattctagctgcggcagatgagcga $\verb"aatctgccgctctggatcggtgggggctgggcgatcgatgcacggctagg"$ gcgtgtaacacgcaagcacgatgatattgatctgacgtttcccggcgaga gaggagttggactatggattcttagcggagatcggggatgagttacttga $\verb|ctgcgaacctgcttggtgggcagacgaagcgtatgaaatcgcggaggctc|\\$ cgcagggctcgtgcccagaggcggctgaggcgtcatcgccgggcggcca $\tt gtccgttgtaacagctgggaggcgatcatctgggattacttttactatgc$ cgatgaagtaccaccagtggactggcctacaaagcacatagagtcctaca ggctcgcatgcacctcactcggggcggaaaaggttgaggtcttgcgtgcc gctttcaggtcgcgatatgcggcctaacaattcgtccaagccgacgccgc ttcgcggcgcggcttaactcaggtgttatgccgcactcacccccatggag $\verb|tttgatgttcaaacttttgagtaagttattggtctatttgaccgcgtct|\\$ atcatggctattgcgagtccgctcgctttttccgtagattctagcggtga gtatccgacagtcagcgaaattccggtcggggaggtccggctttaccaga $\verb|ttgccgatggtgtttggtcgcatatcgcaacgcagtcgtttgatggcgca|$ gtctacccgtccaatggtctcattgtccgtgatggtgatgagttgctttt gattgatacagcgtggggtgcgaaaaacacagcggcacttctcgcggaga $\verb|ttgagaagcaaattggacttcctgtaacgcgtgcagtctccacgcacttt|\\$ catgacgaccgcgtcggcggcgttgatgtccttcgggcggctgggtggc aacgtacgcatcaccgtcgacacgccggctagccgaggtagaggggaacg agattcccacgcactctctagaaggactctcatcgagcggggacgcagtg cgcttcggtccagtagaactcttctatcctggtgctgcgcattcgaccga $\verb|caacttagttgtgtacgtcccgtctgcgagtgtgctctatggtggttgtg|\\$ cgatttatgagttgtcacgcacgtctgcggggaacgtggccgatgccgat ctggctgaatggcccacctccattgagcggattcaacaacactacccgga ${\tt agcacagttcgtcattccggggcacggcctgccgggcggtctagacttgc}$ tcaagcacacaacgaaatgttgtaaaagcgcacacaaatcgctcagtcgt tgagtagcaggcagatgcggcataacatgaagttgcagccgaccatcact ccgctgcgctccgttctggcggctgaacttcggcgttaacctctgaggaa gaattgtgaaactatcactaatggtagctatatcgaagaatggagttatc gggaatggccctgatattccatggagtgccaaaggtgaacagctcctgtt taaagctattacctataaccaatggctgttggttggacgcaagacttttg aatcaatgggagcattacccaaccgaaagtatgcggtcgtaacacgttca agttttacatctgacaatgagaacgtattgatctttccatcaattaaaga tgctttaaccaacctaaagaaaataacggatcatgtcattgtttcaggtg gtggggagatatacaaaagcctgatcgatcaagtagatacactacatata $\verb|tctacaatagacatcgagccggaaggtgatgtttactttcctgaaatccc|$ ${\tt cagcaattttaggccagtttttacccaagacttcgcctctaacataaatt}$ atagttaccaaatctggcaaaagggttaacaagtggcagcaacggattcg caaacctgtcacgccttttgataccaaagagccgcgccaggtttgcgatc cgctgtgccaggcgttaggcagcacagttagcgaccatttcaatgtccgc gagcacccccccataactcttcgcctcatgaccgagcgcgacctgccga gacgaagagcgaccgactcttgatgaagtgctggaacactacctgcccag agcgatggcggaagagtccgtaacaccgtacatcgcaatgctgggcgagg aaccqatcqgctatgctcagtcgtacgtcgcgctcggaagcggtgatggc tggtgggaagatgaaactgatccaggagtgcgaggaatagaccagtctct ggctgacccgacacagttgaacaaaggcctaggaacaaggcttgtccgcg $\verb|ctctcgttgaactactgttctcggacccaaccgtgacgaagattcagacc|\\$ gacccgactccgaacaaccatcgagccatacgctgctatgagaaggcagg $\verb|attcgtgcgggagaagatcatcaccacgcctgacgggccggcggtttaca|\\$ tggttcaaacacgacaagccttcgagagaaagcgcggtgttgcctaatgc

cgttagatgcactaagcacataattgctcacagccaaactatcaggtcaa gtctgcttttattatttttaagcgtgcataataagccctacacaaattgg gagatatatcatgaaaggctgcgt

Figure B.53 Full sequence of AES83 integron

gaaccttgaccgaacgcagcggtggtaacggcgcagtggcggttttcatg gcttgttatgactgtttttttggggtacagtctatgcctcgggcatccaa gcagcaagcgcgttacgccgtgggtcgatgtttgatgttatggagcagca acgatgttacgcagcagggcagtcgccctaaaacaaagttaggccgcatg gacacaacgcaggtcacattgatacacaaaattctagctgcggcagatga tagggcgtgtaacacgcaagcacgatgatattgatctgacgtttcccggc catggaggagttggactatggattcttagcggagatcggggatgagttac ttgactgcgaacctgcttggtgggcagacgaagcgtatgaaatcgcggag gctccgcagggctcgtgcccagaggcggctgagggcgtcatcgccgggcg gccagtccgttgtaacagctgggaggcgatcatctqqgattacttttact atgccgatqaagtaccaccagtqqactqqcctacaaaqcacataqaqtcc tacaggctcgcatgcacctcactcgggggcggaaaaggttgaggtcttgc gtgccgctttcaggtcgcgatatgcggcctaacaattcgtccaagccgac gccgcttcgcggcgcgcttaactcaggtgttaacctctgaggaagaatt gtgaaactatcactaatggtagctatatcgaagaatggagttatcgggaa tggccctgatattccatggagtgccaaaggtgaacagctcctgtttaaag ctattacctataaccaatggctgttggttggacgcaagacttttgaatca atgggagcattacccaaccgaaagtatgcggtcgtaacacgttcaagttt tacatctgacaatgagaacgtattgatctttccatcaattaaagatgctt taaccaacctaaagaaaataacggatcatgtcattgtttcaggtggtggg gagatatacaaaagcctgatcgatcaagtagatacactacatatatctac aatagacatcgagccggaaggtgatgtttactttcctgaaatccccagca attttaggccagtttttacccaagacttcgcctctaacataaattatagt taccaaatctggcaaaagggttaacaagtggcagcaacggattcgcaaac ctgtcacgccttttgtaccaaaaagccgcgccaggtttgcgatccgctgt gccaggcgttaggcagcacagagcgaccatttcatgtccgcgagcacccc ccccataactcttcgcctcatgaccgagcgcgacctgccgatgctccatgactggctcaaccggccgcacatcgttgagtggtgggtggtgacgaagag $\verb|cgaccgactcttgatgaagtgctggaacactacctgcccagagcgatggc|\\$ ggaagagtccgtaacaccgtacatcgcaatgctgggcgaggaaccgatcg gctatgctcagtcgtacgtcgcgctcggaagcggtgatggctggtgggaa gatgaaactgatccaggagtgcgaggaatagaccagtctctggctgaccc gacacagttgaacaaaggcctaggaacaaggcttgtccgcgctctcgttg ccgaacaaccatcgagccatacgctgctatgagaaggcaggattcgtgcg qqaqaaqatcatcaccacgcctgacgggccggcggtttacatggttcaaa cacgacaagccttcgagagaaagcgcggtgttgcctaacaactcattcaa gccgacgccgcttcgcggcgcgcttaattcaggcgttagatgcactaag $\verb|cacata| attgctcacagccaaactatcaggtcaagtctgctttattatt|$ tttaagcgtgcataataagccctacacaaatngggagatatatcangaaa gg

Figure B.54 Full sequence of AES135 integron

cgtagctgtaatgcaaqtagcgtatgcgctcacqcaactggtccagaacc ttgaccgaacgcagcggtggtaacggcgcagtggcggttttcatggcttg ttatgactgtttttttggggtacagtctatgcctcgggcatccaagcagc aagcagcaagcgcgttacgccqtqqqtcqatqtttgatqttatqgagcag $\verb|caacgatgttacgcagcagggcagtcgccctaaaacaaagttaacccggg|$ accaaaattgtgaaagtatcattaatggctgcaagagcgagaaacggagt gatcggttgcggtccacacataccctggtccgcgaaaggagagcagctac ttcgaatcaatgggggcgctccccaataggaaatacgcggtcgttactcg $\verb|ctcagcctggacggccaata| at \verb|gacaacgtagtagtattcccgtcgatcg|$ ${\tt aagaggccatgggcggtctagctaaactcaccggtcacgttatagtgtct}$ ggtggcggggagatttacagagaaacgttgcccatggcctctacgctcca tgtatcgacgatcgacattgagccagaaggggatgttttcttcccgaata $\verb|ttcccaacttcttcgaagttgtttttgagcaacattttagttcaaacatt|\\$ aactattqctatcaaatttqqaaaaaqqqttaacaaaqctatqcaattqa cggcaaaaaagcttcgttcgccgcgctcactacgctttttaccgcaattg atagcggcgttagatgcactaagcacataattgctcacagccaaactatc aggtcaagtctgtttttattatttttaagcgtgcataataagccctacac aaattgggagatatatcatgaaaggctggctttttcttgctatctcaata gttggcgaagtaatcgcaacattcgcattaaaatctagcgagggctttac ${\tt taagcttgcccttccgccgctgtcataattggttatggcatcgcatttt}$ attttctttctctggttctgaaatccatccctgtcggtgttgcttatgca qtctqqtcqqqactcqqcqtcqtcataattacaqccattqcctggttqct tcatgggcaaaagcttgatgcgtggggctttgtaggtatggggctcatag ttagtggtgtagtagttttaaacttgctttccaaagcaagtgcccactaa taaactcaqtcatctaacaaqtcqttqcaqcaccqctccaqcacttcqtq cctgcgctggacagtttttaagtcgcggctttatggttttgctgcgcaaa agtattccataaaatcacaacttaaaaactgccgctgaactcggcgttga acqacaqctttcccaaaagctctacggctgctctgggtcgacaccggtaa tcggatcgttgccgcactgaacagcgccccgttccaggtcgcctccattt $\verb|atgcggctgaaccgagggagagcagctttacgccgtctggccgcagttcg|$ cccttgggcgac

Appendix C

Table C.1 List of E. coli isolates collected from Tripoli and Benghazi

E. coli strain	Site of collection	Place of collection
		
AES11	Urine	Al-Jamhoryia hospital
AES35	Floor of toilet	Al-Jamhoryia hospital
AFGEO	(ICU)	A17 1 1 21
AES58	Blood	Al-Jamhoryia hospital
AES120	Wall of ICU	Al-Jamhoryia hospital
AES128	Urine	Al-Jamhoryia hospital
AES195	Urine	Al-Jamhoryia hospital
AES202	Urine	Al-Jamhoryia hospital
AES212	Swab from	Benghazi Paediatric hospital
	incubator	
AES224	Floor of ICU	Benghazi Paediatric hospital
AES226	Urine	Benghazi Paediatric hospital
AES227	Wall of ICU	Benghazi Paediatric hospital
AES228	Floor of ICU	Benghazi Paediatric hospital
AES230	Bed side in ICU	Benghazi Paediatric hospital
AES231	Corner in ICU	Benghazi Paediatric hospital
AES232	Urine	Benghazi Paediatric hospital
AES237	Urine	Benghazi Paediatric hospital
AES239	Wall of ICU	Benghazi Paediatric hospital
AES240	Corridor of ICU	Benghazi Paediatric hospital
AES243	Urine	Benghazi Paediatric hospital
AES244	Urine	Benghazi Paediatric hospital
AES245	Urine	Benghazi Paediatric hospital
AES246	Urine	Benghazi Paediatric hospital
AES247	Floor of ICU	Benghazi Paediatric hospital
AES248	Blood	7 th of October hosital
AES262	Pus	7 th of October hospital
AES101	Floor of ICU	Al-Jamhoryia hospital
AES922	Urine	Al-Jalla hospital Tripoli
AES932	Urine	Maternity hospital Tripoli
AES937	Blood	Burn and plastic surgery Tripoli
AES938	Floor of ICU	Al-Jalla hospital Tripoli
AES941	Wall of ICU	Al-Jalla hospital Tripoli
AES944	Floor of toilet	Burn and plastic surgery Tripoli
AES962	Urine	Burn and plastic surgery Tripoli
AES964	Urine	Burn and plastic surgery Tripoli
AES966	Floor of ICU	Maternity hospital Tripoli
AES900 AES971	Bedside	Maternity hospital Tripoli
		Maternity hospital Tripoli
AES979	Urine	Burn and plastic surgery Tripoli
AES1006	Blood	
AES1037	Urine	Burn and plastic surgery Tripoli

Figure C.1 DNA sequence of *bla*_{CTX-M-15} amplified from *E. coli* isolate AES226

NNNNNNNNNNNNNNNNNNNGANCNGAATCNGCGGCGCACGAT CTTTTGGCCNGATCAC CGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCC CCCACAACCCAGGA AGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCT TTCATCCATGTCAC CAGCTGCGCCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTCAGA TTCCGCANAGTTTG CGCCATTGCCCGAGGTGAAGTGGTATCACGCGGATCGCCCGGAAT GGCGGTGTTTAACGT CGGCTCGGTACGGTCGAGACGGAACGTTTCGTCTCCCAGCTGTCGG GCGAACGCGGTGAC GCTAGCCGGGCCCAACGTGAGCAATCAGCTTATTCATCGCCACG **TTATCGCTGTACTG** TAGCGCGGCCGCTAAGCTCAGCCAGTGACATCGTCCCATTGACG **TGCTTTTCCGCAAT** CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGAT TTAACAGATTCGG TTCGCTTTCACTTTTCTTCAGCACCGCGGCCGCGGCCATCACTTTAC **TGGTGCTGCACAT** CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCT GTGTTAATCAATGC CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTT GCTGTACGTCCGC CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTT GCCGTCGCCATCNG CGTGAACTGGCGCAGTGATTTTTTTAACCATGGGATTCCTTATTCTG GAAGATACNAAAT

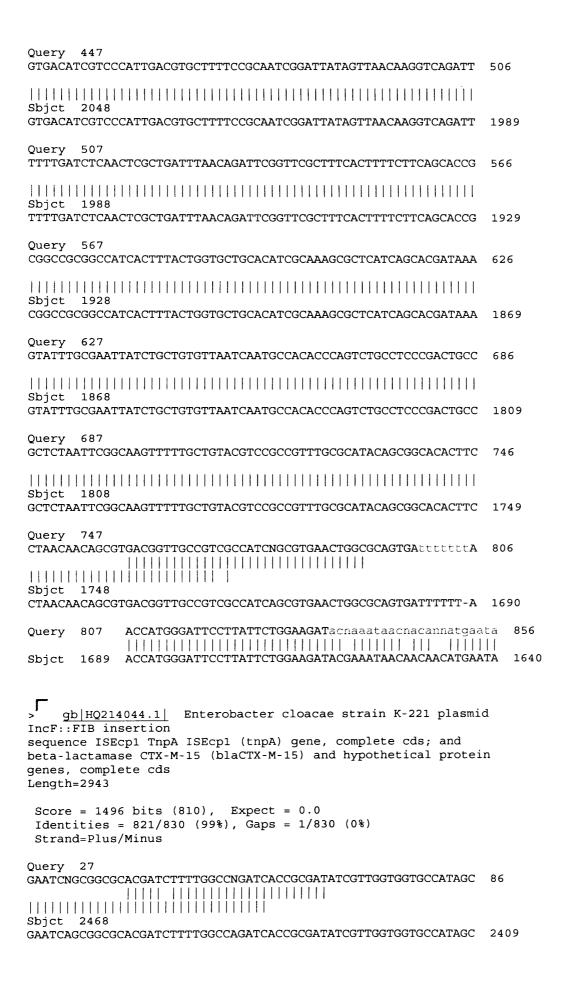
AACNACANNATGAATANNCCCCNANNNNCNCNNGNGNTTTTTNAT

NNNNNNNCAAAGNANNTNNNNNNGNNNCN

TNNNNTTCANNNNCN

Figure C.2 Alignment of DNA sequence from figure C.1 with DNA sequences from gene bank

> gb HQ214045.1 Enterobacter aerogenes strain K-307 plas insertion sequence ISEcp1 TnpA ISEcp1 (tnpA) gene, complete cds; and beta-lactam CTX-M-15 (blaCTX-M-15) and hypothetical protein genes, complete cds Length=2943	
<pre>Score = 1496 bits (810), Expect = 0.0 Identities = 821/830 (99%), Gaps = 1/830 (0%) Strand=Plus/Minus</pre>	
Query 27 GAATCNGCGGCGCACGATCTTTTGGCCNGATCACCGCGATATCGTTGGTGGTGCCATAGC	86
Sbjct 2468 GAATCAGCGGCGCACGATCTTTTGGCCAGATCACCGCGATATCGTTGGTGGTGCCATAGC	2409
Query 87 CACCGCTGCCGGTTTTATCCCCCACAACCCAGGAAGCAGGCAG	146
CACCGCTGCCGGTTTTATCCCCCACAACCCAGGAAGCAGGCAG	2349
Query 147 CTGCACCGGTGGTATTGCCTTTCATCCATGTCACCAGCTGCGCCCGTTGGCTGTCGCCCA	206
	2289
Query 207 ATGCTTTACCCAGCGTCAGATTCCGCANAGTTTGCGCCATTGCCCGAGGTGAAGTGGTAT	266
Sbjct 2288 ATGCTTTACCCAGCGTCAGATTCCGCAGAGTTTGCGCCATTGCCCGAGGTGAAGTGGTAT	2229
Query 267 CACGCGGATCGCCCGGAATGGCGGTGTTTAACGTCGGCTCGGTACGGTCGAGACGGAACG	326
CACGCGGATCGCCCGGAATGGCGGTGTTTAACGTCGGCTCGGTACGGTCGAGACGGAACG	2169
Query 327 TTTCGTCTCCCAGCTGTCGGGCGAACGCGGTGACGCTAGCCGGGCCGCCAACGTGAGCAA	386
TTTCGTCTCCCAGCTGTCGGGCGAACGCGGTGACGCTAGCCGGGCCGCCAACGTGAGCAA	2109
Query 387 TCAGCTTATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCA	446
Sbjct 2108	2042
TCAGCTTATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCA	2049



Query 87 CACCGCTGCCGGTTTTATCCCCCACAACCCAGGAAGCAGGCAG	146
	2349
Query 147	2349
CTGCACCGGTGGTATTGCCTTTCATCCATGTCACCAGCTGCGCCCGTTGGCTGTCGCCCA	206
	2289
Query 207	
ATGCTTTACCCAGCGTCAGATTCCGCANAGTTTGCGCCATTGCCCGAGGTGAAGTGGTAT	266
	2229
Query 267 CACGCGGATCGCCCGGAATGGCGGTGTTTAACGTCGGCTCGGTACGGTCGAGACGGAACG	326
Sbjct 2228 CACGCGGATCGCCCGGAATGGCGGTGTTTAACGTCGGCTCGGTACGGTCGAGACGGAACG	2169
Query 327 TTTCGTCTCCCAGCTGTCGGGCGAACGCGGTGACGCTAGCCGGGCCGCCAACGTGAGCAA	386
TTTCGTCTCCCAGCTGTCGGGCGAACGCGGTGACGCTAGCCGGGCCGCCAACGTGAGCAA	2109
Query 387 TCAGCTTATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCA	446
Sbjct 2108	2040
TCAGCTTATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCA Query 447	2049
GTGACATCGTCCCATTGACGTGCTTTTCCGCAATCGGATTATAGTTAACAAGGTCAGATT	506
	1989
Query 507 TTTTGATCTCAACTCGCTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCG	566
Sbjct 1988 TTTTGATCTCAACTCGCTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCG	1929
Query 567 CGGCCGCGGCCATCACTTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAA	626
CGGCCGCGGCCATCACTTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAA	1869
Query 627 GTATTTGCGAATTATCTGCTGTGTTAATCAATGCCACACCCAGTCTGCCTCCCGACTGCC	686

Sbjct	1868		
GTATTTC	CGAAT'	TATCTGCTGTGTTAATCAATGCCACACCCAGTCTGCCTCCCGACTGCC	1809
~ ' ' '		CAAGTTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTC	746
 Sbict	 1808		
	ATTCGG	CAAGTTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTC	1749
Query	747		
CTAACAA	ACAGCG'	TGACGGTTGCCGTCGCCATCNGCGTGAACTGGCGCAGTGAELEEEEEA	806
Sbjct	1748		
CTAACAA	ACAGCG'	TGACGGTTGCCGTCGCCATCAGCGTGAACTGGCGCAGTGATTTTTT-A	1690
Query	807	ACCATGGGATTCCTTATTCTGGAAGATacnaaataacnacannatgaa	ta 856

Figure C.3 DNA sequence of *bla*_{CTX-M-15} amplified from *E. coli* isolate AES228

GCGGCGCACGATCTTTTGGCCNGATCAC CGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTA TCCCCCACAACCCAGGA AGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTG CCTTTCATCCATGTCAC CAGCTGCGCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTC **AGATTCCGCANAGTTTG** CGCCATTGCCCGAGGTGAAGTGGTATCACGCGGATCGCCCGGA ATGGCGGTGTTTAACGT CGGCTCGGTACGGTCGAGACGGAACGTTTCGTCTCCCAGCTGT CGGGCGAACGCGGTGAC GCTAGCCGGGCCGCCAACGTGAGCAATCAGCTTATTCATCGCC ACGTTATCGCTGTACTG TAGCGCGGCCGCTAAGCTCAGCCAGTGACATCGTCCCATTG **ACGTGCTTTTCCGCAAT** CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCT **GATTTAACAGATTCGG** TTCGCTTTCACTTTTCTTCAGCACCGCGGCCGCCGCCATCACTT **TACTGGTGCTGCACAT** CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCT **GCTGTGTTAATCAATGC** CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGT **TTTTGCTGTACGTCCGC** CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACG **GTTGCCGTCGCCATCNG** CGTGAACTGGCGCAGTGATTTTTTTAACCATGGGATTCCTTATT **CTGGAAGATACNAAAT**

Figure C.4 Alignment of DNA sequence from figure C.3 with DNA sequences from gene bank

AACNACANNATGAATANNCCCCNANNNNCNCNNGNGNTTTTT

gb|JN788267.1| Acinetobacter baumannii strain H1
hydroxyisourate hydrolase gene,
complete cds; disrupted pyrimidine utilization transporter
gene, partial sequence; insertion sequence ISEcp1 transposase
(tnpA) gene, complete cds; CTX-M15 (blaCTX-M15) gene,
complete cds; disrupted orf477 gene, partial sequence;
transposon
Tn3 tnpA gene, partial sequence; and hypothetical protein
gene, complete cds
Length=5224

Score = 1489 bits (806), Expect = 0.0
Identities = 816/824 (99%), Gaps = 1/824 (0%)

Strand=Plus/Minus

Query 1 GCGGCGCACGATCTTTTGGCCNGATCACCGCGATATCGTTGGTGGTGCCATAGCCACCGC 50
GCGGCGCACGATCTTTTGGCCAGATCACCGCGATATCGTTGGTGGTGCCATAGCCACCGC
Query 61 IGCCGGTTTTATCCCCCACAACCCAGGAAGCAGGCAGTCCAGCCTGAATGCTCGCTGCAC 120
Query 121
CGGTGGTATTGCCTTTCATCCATGTCACCAGCTGCGCCCGTTGGCTGTCGCCCAATGCTT L80
Query 181 FACCCAGCGTCAGATTCCGCANAGTTTGCGCCATTGCCCGAGGTGAAGTGGTATCACGCG
Query 241 GATCGCCCGGAATGGCGGTGTTTAACGTCGGCTCGGTACGGTCGAGACGGAACGTTTCGT 800
HILLING BOTH STATES OF THE STA
Query 301 CTCCCAGCTGTCGGGCGAACGCGGTGACGCTAGCCGGGCCGCCAACGTGAGCAATCAGCT
Query 361 PATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCAGTGACA

Sbjct 3156 TATTCATCGCCACGTTATCGCTGTACTGTAGCGCGGCCGCGCTAAGCTCAGCCAGTGACA 3097
Query 421 TCGTCCCATTGACGTGCTTTTCCGCAATCGGATTATAGTTAACAAGGTCAGATTTTTTGA 480
Query 481 TCTCAACTCGCTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCGCGGCCG 540
Query 541 CGGCCATCACTTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAAGTATTT 600
Query 601 GCGAATTATCTGCTGTTTAATCAATGCCACACCCAGTCTGCCTCCCGACTGCCGCTCTA 660
Query 661 ATTCGGCAAGTTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTCCTAACA 720
Query 721 ACAGCGTGACGGTTGCCGTCGCCATCNGCGTGAACTGGCGCAGTGAttttttAACCATG 780
Query 781 GGATTCCTTATTCTGGAAGATACNAAATAACNACANNATGAATA 824
Sbjct 2737 GGATTCCTTATTCTGGAAGATACGAAATAACAACAACATGAATA 2694

Figure C.5 DNA sequence of *bla*_{CTX-M-15} amplified from *E. coli* isolate AES232

CGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCC CCCACAACCCAGGA

AGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCT TTCATCCATGTCAC

CAGCTGCGCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTCAGA TTCCGCANAGTTTG

CGCCATTGCCCGAGGTGAAGTGGTATCACGCGGGATCGCCCGGAATGGCGGTGTTTAACGT

CGGCTCGGTACGGTCGAGACGGAACGTTTCGTCTCCCAGCTGTCGG GCGAACGCGGTGAC

GCTAGCCGGGCCCAACGTGAGCAATCAGCTTATTCATCGCCACG TTATCGCTGTACTG

TAGCGCGCCCCCTAAGCTCAGCCAGTGACATCGTCCCATTGACG TGCTTTTCCGCAAT

CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGAT TTAACAGATTCGG

TTCGCTTTCACTTTTCTTCAGCACCGCGGCCGGCCGCCATCACTTTAC TGGTGCTGCACAT

 ${\tt CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCT}\\ {\tt GTGTTAATCAATGC}\\$

CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTT GCTGTACGTCCGC

CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTT GCCGTCGCCATCNG

CGTGAACTGGCGCAGTGATTTTTTTAACCATGGGATTCCTTATTCTG GAAGATACNAAAT

AACNACANNATGAATANNCCCCNANNNNCNCNNGNGNTTTTTNNN NNN

Figure C.6 Alignment of DNA sequence from figure C.5 with DNA sequences from gene bank

 $\begin{array}{c} \underline{emb|FR828676.1|} \text{ Escherichia coli plasmid pCTX913 tnpA gene,} \\ \text{blaCTX-M-15 gene} \\ \text{and delta tnpA gene (partial), isolate 913} \\ \text{Length=2656} \end{array}$

Score = 1441 bits (780), Expect = 0.0
Identities = 789/796 (99%), Gaps = 1/796 (0%)
Strand=Plus/Minus

Query 1
CGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCACAACCCAGGA
60

Sbjct 1674 CGCGATATCGTTGGTGGTGCCATAGCCACCGCTGCCGGTTTTATCCCCCACAACCCAGGA 1615
Query 61 AGCAGGCAGTCCAGCCTGAATGCTCGCTGCACCGGTGGTATTGCCTTTCATCCATGTCAC 120
Query 121 CAGCTGCGCCCGTTGGCTGTCGCCCAATGCTTTACCCAGCGTCAGATTCCGCANAGTTTG 180
Query 181 CGCCATTGCCCGAGGTGAAGTGGTATCACGCGGATCGCCCGGAATGGCGGTGTTTAACGT 240
Query 241 CGGCTCGGTACGGTCGAGACGGAACGTTTCGTCTCCCAGCTGTCGGGCGAACGCGGTGAC 300
Query 301 GCTAGCCGGGCCGCCAACGTGAGCAATCAGCTTATTCATCGCCACGTTATCGCTGTACTG 360
Query 361 TAGCGCGGCCGCTAAGCTCAGCCAGTGACATCGTCCCATTGACGTGCTTTTCCGCAAT 420
Query 421 CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGATTTAACAGATTCGG

Query 481 TTCGCTTTCACTTTTCTTCAGCACCGCGGCCGCGGCCATCACTTTACTGGTGCTGCACAT 540
Query 541 CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCTGTGTTAATCAATGC 600
Query 601 CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTTGCTGTACGTCCGC 660
Query 661 CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTTGCCGTCGCCATCNG 720
Query 721 CGTGAACTGGCGCAGTGAtttttttAACCATGGGATTCCTTATTCTGGAAGATacnaaat 780
Query 781 aacnacannatgaata 796 Sbict 895 AACAACAACATGAATA 880
JUICE UJJ RRCRRCRICKIUKIIKI UUV

Figure C.7 DNA sequence of $bla_{CTX-M-3}$ amplified from E. coli isolate AES228 amplified by CTX-M-F

NNNNNNNNNNNCNNNNGCNGTTGTTAGGAGTGTGCCGCTGTATGCGC AAACGGCGGACGTAC

AGCAAAAACTTGCCGAATTAGAGCGGCAGTCGGGAGGCAGACTGG GTGTGGCATTGATTA

ACACAGCAGATAATTCGCAAATACTTTATCGTGCTGATGAGCGCTT TGCGATGTGCAGCA

CCAGTAAAGTGATGGCCGCGGCCGCGGTGCTGAAGAAAAGTGAAA GCGAACCGAATCTGT

TAAATCAGCGAGTTGAGATCAAAAAATCTGACCTTGTTAACTATAA TCCGATTGCGGAAA

AGCACGTCAATGGGACGATGTCACTGGCTGAGCTTAGCGCGGCCGCCGCTACAGTACAGCG

ATAACGTGGCGATGAATAAGCTGATTGCTCACGTTGGCGGCCCGGC TAGCGTCACCGCGT

TCGCCCGACAGCTGGGAGACGAAACGTTCCGTCTCGACCGTACCGA GCCGACGTTAAACA

CCGCCATTCCGGGCGATCCGCGTGATACCNCTTCACCTCNGGCAAT GGCGCANANTCTGC

GGAATCTGACGCTGGGNAANGNNTNGGGCGACNNCNNACNGGCGC NNCTGGTGANN

Figure C.8 Alignment of DNA sequence from figure C.7 with DNA sequence from gene bank

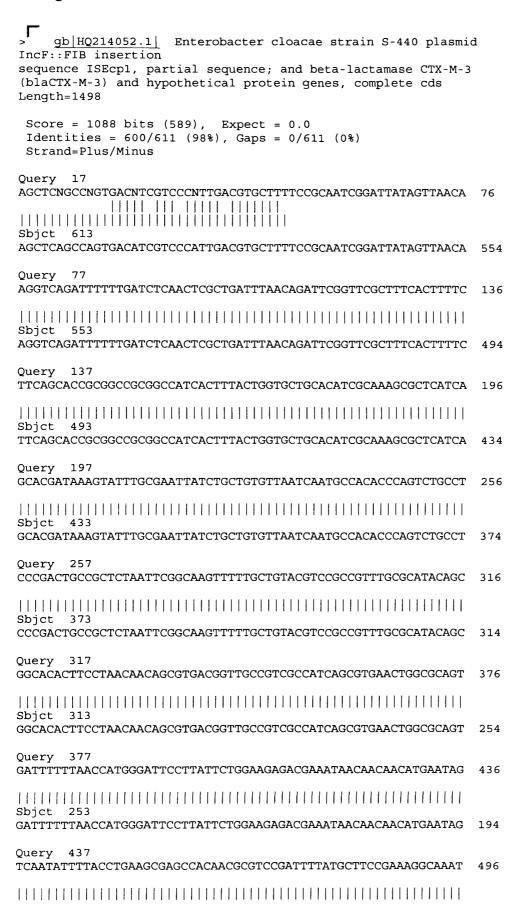




Figure C.9 DNA sequence of $bla_{CTX-M-3}$ amplified from E. coli isolate AES226 amplified by CTX-M-F

CNGTGACATCGTCCCNTTGACGTGCTTTTCCGCAAT CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGAT TTAACAGATTCGG

TTCGCTTTCACTTTTCTTCAGCACCGCGGCCGGCCGGCCATCACTTTAC TGGTGCTGCACAT

CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCT GTGTTAATCAATGC

CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTT GCTGTACGTCCGC

CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTT GCCGTCGCCATCAG

CGTGAACTGGCGCAGTGATTTTTTAACCATGGGATTCCTTATTCTGG AAGANACGAAATA

ACAACAACATGAATAGTCNATATTTTACCTGAGGGGAGNCAANNN NCNTCNNANTTNANG

CTTCCGAAAGGAAAATACAGAGNTCNNCANAANGAAANNNAATAT NNACNNGTGNNTTTN

ANNNNNTTNTAAAATCACTATTTCACGAAGAATTTAGACTGCTTC TCACACATTGTAAC

CNNNNNNNCNNCCNTTGTNNTCNTTTNCGCANNNGNNTGACNCA CTCNCNNANTANNNNANNNNNNNCNTTTCCTTTTNTNNNNNNCGN GNNCGNNN

Figure C.10 Alignment of DNA sequence from figure C.9 with DNA sequence from gene bank

Escherichia coli strain S-741 plasmid IncL/M insertion sequence ISEcp1, partial sequence; beta-lactamase CTX-M-3 (blaCTX-M-3) and hypothetical protein genes, complete cds; and MucA (mucA) gene, partial cds Length=2028 Score = 907 bits (491), Expect = 0.0Identities = 552/597 (92%), Gaps = 7/597 (1%) Strand=Plus/Minus Query 3 GTGACATCGTCCCNTTGACGTGCTTTTCCGCAATCGGATTATAGTTAACAAGGTCAGATT 62 GTGACATCGTCCCATTGACGTGCTTTTCCGCAATCGGATTATAGTTAACAAGGTCAGATT 544 Query 63 TTTTGATCTCAACTCGCTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCG Sbjct 543 TTTTGATCTCAACTCGCTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCG 484 Ouery 123 CGGCCGCGCCATCACTTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAA $\tt CGGCCGCGCCATCACTTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAA$ 424 Query 183 GTATTTGCGAATTATCTGCTGTTTAATCAATGCCACCCAGTCTGCCTCCCGACTGCC 242 Sbjct 423 GTATTTGCGAATTATCTGCTGTTTAATCAATGCCACACCCAGTCTGCCTCCCGACTGCC Query 243 $\tt GCTCTAATTCGGCAAGTTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTC$

Sbjet 363 GCTCTAATTCGGCAAGTTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTC 304
Query 303 CTAACAACAGCGTGACGGTTGCCGTCGCCATCAGCGTGAACTGGCGCAGTGATTTTTTAA 362
Query 363 CCATGGGATTCCTTATTCTGGAAGANACGAAATAACAACAACATGAATAGTCNATATTTT 422
Query 423 ACCTGAGGGGAGnca- annnncntcnnanttnangcttccgaaaggaaaatacaga-gnt 480
Query 481 cnncanaangaaannnaatatnn- acnngtgnntttnannnnnttntaaaaTCACTATT 539
Query 540 FCACGAAGAATTTAGACTGCTTCTCACACATTGTAACATTATTTACAACCACCTTTC 596

Figure C.11 DNA sequence of $bla_{CTX-M-3}$ amplified from $E.\ coli$ isolate AES232 amplified by CTX-M-F

NNNNNNNNNNGCGCNANCTNNGCCNGTGACNTCGTCCCNTTGAC GTGCTTTTCCGCAAT

CGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCGCTGAT TTAACAGATTCGG

TTCGCTTTCACTTTCTTCAGCACCGCGGCCGGCCGCCATCACTTTAC TGGTGCTGCACAT

CGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATCTGCT GTGTTAATCAATGC

CACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAGTTTTT GCTGTACGTCCGC

CGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGACGGTT GCCGTCGCCATCAG

CGTGAACTGGCGCAGTGATTTTTTAACCATGGGATTCCTTATTCTGG AAGANACGAAATA

ACAACAACATGAATAGTCNATATTTTACNTGANNGNNGNCNNNNN NCNNCNNANTTNATG

CTTCCNAAAGGAAAATANANNNTNNNCNGAANGNNNNNNANNN NNNACNNGNGNNNTTA

NNNNNNTTTNAAAATCACTATTTCACGAAGAATTTAGACTGCTTC TCACACATTGNAAC

NNNNTTNNNAACCNCCTTTNNNNNNNNTTNNNNNNANNNGGGA NCNNGNNCNNNAANN

NNNNNCNNNGNNNTCNTNCCNNTNNNNTGCTTTTCNGCAATCNGA TTATANTTTANNNGG

NCNNANTTNTTGANCNCNNTCNCNNNNNNANNNAATTNNGNNTCN NTTNCTTTTNNNTCN

NNNCNNNNCCNNNNNCNTNCTTTNNNGNNNCTNNNCATNCAANN NNCTCNTCNNNNCAT

ANTNNNGCANNNTTTTTNNNNNNNNNNNNNNNNNNNN

Figure C.12 Alignment of DNA sequence from figure C.11 with DNA sequence from gene bank

gb|GQ292713.1| Klebsiella pneumoniae strain S-334 plasmid IncL/M
insertion sequence
IS26 transposase tnpA IS26 (tnpA) gene, complete cds;
insertion sequence ISEcp1, complete sequence; beta-lactamase
CTX-M-3 (blaCTX-M-3) gene, complete cds; MucA (mucA) gene,
partial cds; and unknown gene
Length=3260

Score = 747 bits (404), Expect = 0.0Identities = 407/410 (99%), Gaps = 0/410 (0%)

Strand=Plus/Minus

Query 1 GACGTGCTTTTCCGCAATCGGATTATAGTTAACAAGGTCAGATTTTTTGATCTCAACTCG 60
Query 61 CTGATTTAACAGATTCGGTTCGCTTTCACTTTTCTTCAGCACCGCGGCCGGC
Query 121 TTTACTGGTGCTGCACATCGCAAAGCGCTCATCAGCACGATAAAGTATTTGCGAATTATC 180
Query 181 TGCTGTGTTAATCAATGCCACACCCAGTCTGCCTCCCGACTGCCGCTCTAATTCGGCAAG 240
Query 241 TTTTTGCTGTACGTCCGCCGTTTGCGCATACAGCGGCACACTTCCTAACAACAGCGTGAC 300
Query 301 GGTTGCCGTCGCCATCAGCGTGAACTGGCGCAGTGATTTTTTAACCATGGGATTCCTTAT 360
Query 361 TCTGGAAGANACGAAATAACAACAACATGAATAGTCNATATTTTACNTGa

Appendix D

TABLE D.1 Ceftazidime resistant Gram-negative bacteria isolated from Hospital environmental swabs.

Swab	Bacterial isolate	Location		
301	Achromobacter sp Tripoli central hospital			
302	Pseudomonas putida	Gergarish		
303	Aeromonas caviae	1 st of September		
304	Achromobacter sp.	Andalus		
305	Acinetobacter baumannii	Gergarish		
306	Stenotrophomonas maltophilia	Omar Mokhtar		
307	Pseudomonas pseudoalcaligenes	Omar Mokhtar		
308	Stenotrophomonas maltophilia	Seraj		
309	Achromobacter sp.	Seraj area		
310	Achromobacter sp	Siahia		
311	Pantoea agglomerans	Seraj		
312	Pseudomonas aeruginosa	Siahia		
313	Achromobacter sp Omar Mokhtar			
314	Tatumella ptyseos	Siahia		
315	Pseudomonas putida	Seraj		
316	Pseudomonas putida Omar Mokhtar			
317	Achromobacter sp Omar Mokhtar			
318	Burkholderia cepacia/Ralstonia pickettii	Seraj		
319	Achromobacter sp	Seraj		
320	Pseudomonas putida	Gergarish		
321	Pseudomonas putida	Seraj		
322	Stenotrophomonas maltophilia	Seraj		
323	Tatumella ptyseos Gergarish			
324	Achromobacter sp	Seraj		
325	Enterobacter cloacae	Omar Mokhtar		
326	Citrobacter freundii	Seraj		
327	Tatumella ptyseos	Seraj		

328	Pantoea agglomerans	Jamahiyria
329	Achromobacter sp	Jamahiyria
330	Achromobacter sp	Jamahiyria
331	Ochrobactrum anthropi	Jamahiyria
332	P. aeruginosa	Serah
333	Achromobacter sp	Seraj
334	Achromobacter sp	Seraj
335	Acinetobacter baumannii	Gergarish
336	336 Leclercia adecarboxyalata Seraj	
337	Stenotrophomonas maltophilia	Akhadra
338	Enterobacter cloacae	Alkhadra

Figure D.1 Hydrolysis of antibiotic meropenem by TMB-1

_		Vo #1	Vo	Vo #3 [E]: 100nM	
_	VMAX	6.102		26.42	
	KM	355.2		75.11	
		Merc	pen	iem	
307					- \/- 44
					■ Vo #1
			•		 Vo #3 [E]: 100nM
20-	7				
_ [
%	/•				
10-	<i>•</i>				
	7				
ľ					
0-			_		
0	100 200	300 400	500 6	00 700 800 900 1000	
		[5	δ] μ Μ		

Figure D.2 Hydrolysis of antibiotic Ertapenem by TMB-1

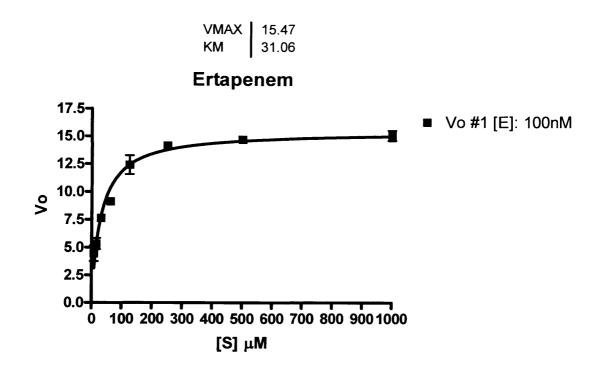


Figure D.3 Hydrolysis of antibiotic ceftazidime by TMB-1

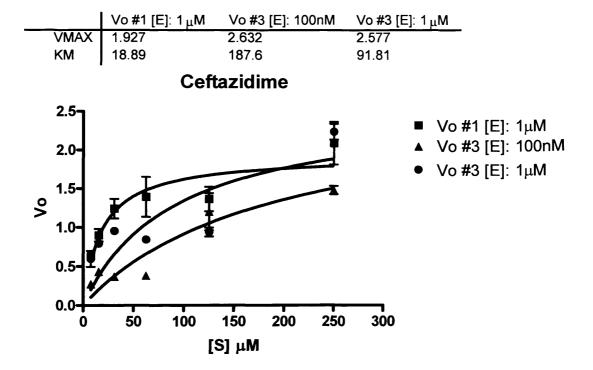


Figure D.4 Hydrolysis of antibiotic ampicilin by TMB-1

	Vo #1 [E]: 100nM	Vo #2 [E]: 100nM	
VMAX	4.490	5.822	•
KM	11.82	27.37	
5.5- 5.0- 4.5- 4.0- 3.5- 3.0- 2.5- 2.0- 1.5- 1.0- 0.5-			■ Vo #1 [E]: 100nM ▼ Vo #2 [E]: 100nM
0.0	50 75	100 125 150	
	[S] μ M		

Figure D.5 Hydrolysis of antibiotic imipenem by TMB-1

	Vo #1 [E]: 10n	M Vo #2 [E]:	10n M '	Vo #3 [E]:	:100nM
VMAX	21.07	11.60		35.30	
KM	1909	614.0	2	200.8	
	ı	mipenem			
357					■ Vo #1 [E]: 10nM
30-			-		▲ Vo #2 [E]: 10nM
25-		Ž.			• Vo #3 [E]:100nM
20-					
15-					
10-	_		=		
5-		+			
0-		, , , , , , , , , , , , , , , , , , , 	- 1		
0	250	500 750	1000	1250	

[S] μ**M**

Figure D.6 Hydrolysis of antibiotic cefoxitin by TMB-1

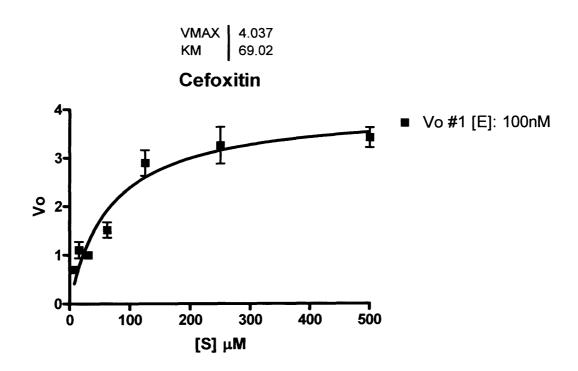


Figure D.7 Hydrolysis of antibiotic cefuroxime by TMB-1

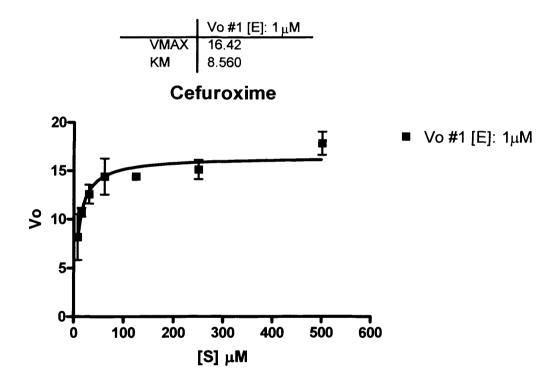


Figure D.8 Hydrolysis of antibiotic piperacillin by TMB-1

	Vo #1 [E]: 100nM
VMAX	6.831
KM	72.13

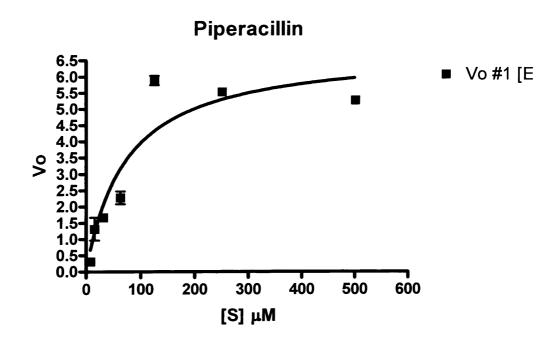


Figure D.9 full class 1 integron (3kb) bla_{TMB-1}, aac6II and bla_{OXA-4} from Achromobacter xylosoxidans AES301

TAGAGGAATAATGGAATGCGACCATTTTTATTTTTAATAATTTTTAT CAGTCATTTCGCTTTTGCCAACGAAGAAATACCCGGATTGGAAGTT GAGGAAATTGACAACGGCGTTTTTTTGCACAAGTCATACAGCCGGG TGGAAGGCTGGGCCTGGTAAGTTCAAACGGACTTGTTGTCATCAG CGGCGGAAAAGCATTCATTATTGACACTCCATGGTCGGAATCAGAT ACAGAAAAGCTTGTAGATTGGATACGATCAAAAAAGTATGAGCTG GCGGGAAGCATTCTACACATTCACACGAAGACAAGACTGCCGGT ATAAAATGGCTAAACGGCAAATCCATTACTACATATGCCTCAGCGC TGACTAATGAAATTCTAAAAAGAGAGGGTAAGGAGCAGGCAAGGA GCTCATTCAAAGGTAATGAATTTTCGCTGATGGACGGTTTTCTAGA AGTCTATTATCCCGGAGGCGGCCATACTATTGATAACTTAGTGGTA TGGATCCCTAGTTCAAAAATATTGTATGGCGGCTGTTTCATACGTA GCTTGGAATCCAGTGGGCTAGGTTACACTGGTGAAGCTAAAATTGA TCAGTGGCCACAATCCGCTAGAAATACAATTTCGAAGTATCCTGAA GCTAAGATTGTGGTGCCTGGTCATGGAAAAATTGGCGATTTCGAGT TGTTAAAACATACCAAGgTCcTTGCAGAAAaGGCCTCTAACAAGGCC AATCACGGCGACCGCTGACGCGCGCGCGTGTcgTTAGGCAGCACA

Gagegaccattteatgteegegageacccccccataactettegecteatgaeegagegegacetgeegatg etceatgattggeteaaceggeegeacategttgagtggtggtggtgaegaagagegaeegactettgatga agtgetggaacactacetgeecagagegatggeggaagagteegtaacacegtacategeaatgetgggega ggaaccgateggetatgeteagtegtgegegeteggaageggtgatggetggtggggaagatgaaactgat ecaggagtgegaggaatagaccagteetggetgaccegacacagttgaacaaaggeetaggaacaaggett gteegegetetegttgaactactgtteteggaccccacegtgaegaagatteagacegacegaceacagetgaeacaa ecategagecataegetgetatgaaaggeaggattegtgeggagaagateatcacacageetgaeggee ggeggtttacatggtteaaacacgacaagcettegagagaaaggegggtgtgeetaacaacteatteaageeg acgeegettegeggeggeggettaatteaggtgttagecaageegttaaaattaageeetttacaaaccaataca aaccaataettgttatgaaaaacacaatacatateaacttegetatttttttaataattgeaaatattatetacageeg geeagtgeatcaacagatatetetactgttgeatetecattatttgaaggaactgaaggttgtt

GTCCGCACTTACAGGAAACTTGGGGTCGAATTTAACATCAAGCATA AAAGCCAAGAAAAATGCGATCACCATTCTAAACACACTAAATTTAT AAAAAATCTAATGGCAAAATCGCCCAACCCTTCAATCAAGTCGGG ACGGCCAAAAGCAAGCTTTTGGCTCCCCTCGCTGGCGCTCGGCGCC CCTTATTTCAAACGTTAGATGCACTAAGCACATAATTGCTCACAGC CAAACTATCAGGTCAAGTCTGCTTTTATTATTTTTAAGCGTGCATAA TAAGCCCTACACAAATTGGGAGATATATCA

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