



# Antibiotic susceptibility, resistance mechanisms and detection in *Mycobacterium leprae*

Emmanuelle CAMBAU

University Paris Diderot, Saint Louis-Lariboisière Hospital  
National Reference Center Mycobacteria for Mycobacteria  
and drug resistance  
Paris, France

# How to test for antibiotic susceptibility in *M. leprae*?

- *Mycobacterium leprae* does not grow in vitro
- Susceptibility testing in the mouse footpad (Shepard 1960)
  - 20 to 50 mice treated by antibiotics
  - Mice kept and fed for 1 year because of slow growth of *M. leprae*
  - doubling generation time of ~ 10-15 days

⇒ rare data on resistance
- Molecular methods developed from 1990 onwards thanks to PCR and genomics



# Shepard model of in vivo growth (1960)

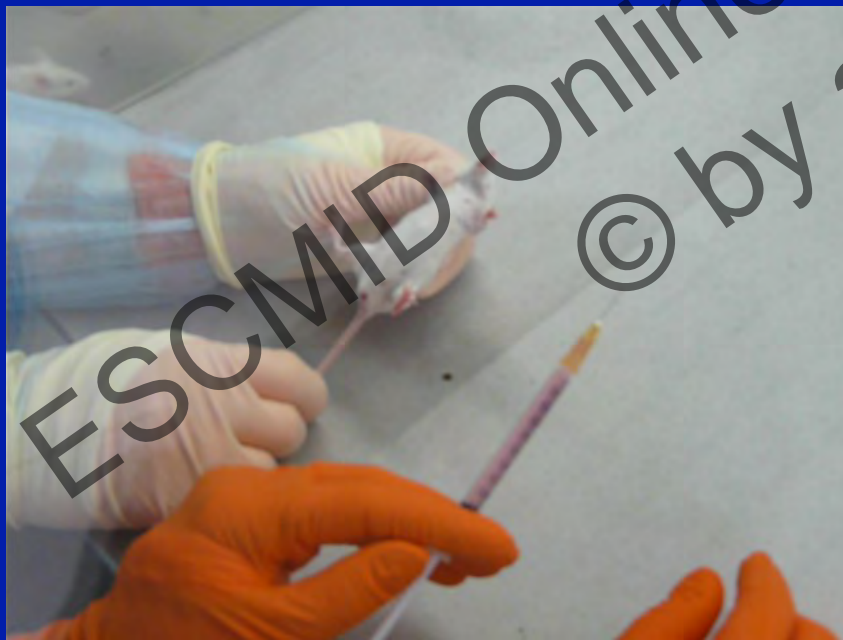
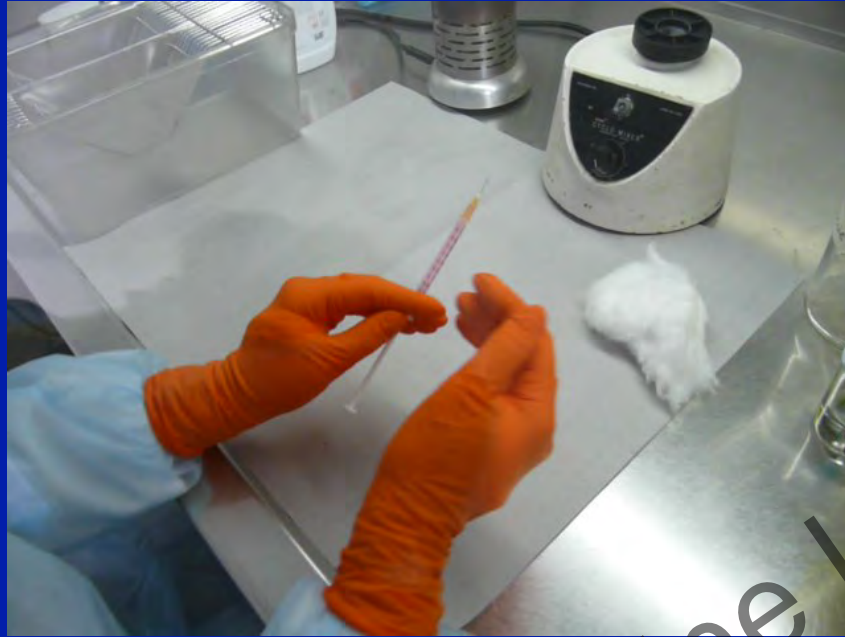
- Inoculation of 5000 bacilli in the left hind footpad of a swiss mouse
- Feed it for one year
- Mince all the tissue of the footpad
- Bacilli will multiply from 5000 (in which 10% at most are alive) to at least 100 000 (visible in microscopy) in several months

# Usefulness of the footpad model

- For the diagnosis of drug resistance
  - Phenotype: susceptible or resistant
  - Needs the bacilli alive from the skin specimen
  - Needs groups of mice treated vs. Control untreated
  - Needs to analyse the footpad growth after 7 to 12 months
- To measure the anti- *M. leprae* activity of a drug
  - Groups of mice treated with various doses
  - untreated controls
  - Inoculation with 10-fold serial amount of bacilli

# Critical points

- Alive bacilli
- Quantitation and dilutions
- Inoculation of 0.03 ml
- Animal housekeeping
- Treatment administration
  - Food containing drug
  - Gavage
  - injection



- [films leprae OMS\P1030382.MOV](#)



# Alive bacilli from skin specimens

- Quick transportation refrigerated
  - 86 biopsies transported in a cold container (4°C) by DHL
  - 55% growth in the mouse footpad
  - No difference between new cases (34) and relapse cases (49)
  - 2 days difference in the time between sampling and inoculation
  - Mean time 3.1 days for growth vs. 4.9 days for no growth ( $p < 0.03$ )
- You know that there are or are not alive only after 12 months (no macroscopic lesion)
  - Morphological index?
  - New methods to assess viability : RNA measurement, ...

# Quantitation and dilutions

- Standardized microscopic slides
- Know the surface (D and d) and the volume (v) of the specimen

$$\text{Nombre de bacilles / ml} = \frac{n}{F} \times \frac{S}{s} \times \frac{1 \text{ ml}}{100^{-2}} = \frac{n}{F} \times \frac{\pi D^2 / 4}{\pi d^2 / 4} \times \frac{1}{100^{-2}}$$

- Factor of dilution / sensitivity limit (y = number of fields)
- Dilute to inoculate 5 000 bacilli under the volume of 30  $\mu\text{l}$



# Animal housekeeping

- Temperature
- Specific room
- 10 per cage
- Water and food
- Animal housekeeper
- Automate cleaning cages
- Mortality?
- Ethics and laws for animals
- « Infectious » animal housing separate from other animal housing



# Treatment administration

- Food containing drug : dapsone
  - Not allowed in some countries
- Oral administration by gavage
  - Animal housekeeper
  - Week ends and holidays
- IV administration
  - mortality

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# Assessing results

- When to read the controls?
  - 7 months (the hurry microbiologist but might need to inoculate more control mice )
  - 12 months (the patient microbiologist but might loose time)
  - 9 months (in the middle)
- Who will read ?
  - Expertise in dissecting the footpad  
[..\..\..\films leprae OMS\P1030388.MOV](#)
  - Expertise in reading smears ( $\leq 1$  bacilli per field)



# Banking reference and other *M. leprae* strains



Reference strains



Nude mice

# Rationale and endpoints for molecular detection of drug resistance in *M. leprae*

- Knowledge of mechanisms of drug resistance => define the genotype of resistant strains
- Good correlation between genotype and phenotype of resistance (mouse footpad susceptibility testing) => genotype will predict for phenotype
- Development of molecular techniques that describe the genotype => one genotype obtained from a skin biopsy
- Molecular techniques applicable in expert and in national centers with easy implementation

# First trick for PCR efficiency : the bacterial index

**Table 1. Efficiencies of in vivo susceptibility testing in the mouse footpad (mouse test) and PCR *rpoB* amplification, according to the number of acid-fast bacilli (AFB) per milliliter in the skin biopsy suspension.**

AFB/ml	No. of biopsies tested	Mouse test		<i>rpoB</i> amplification	
		Positive	Efficiency, % <sup>a</sup>	Positive	Efficiency, % <sup>a</sup>
10 <sup>4</sup> to <10 <sup>5</sup>	3	0	0	1	30
10 <sup>5</sup> to <10 <sup>6</sup>	19	8	42	17	89
10 <sup>6</sup> to <10 <sup>7</sup>	38	20	53	38	100
>10 <sup>7</sup>	23	18	78	23	100
Total	83	46	55	79	95

<sup>a</sup> Efficiency was defined as [(no. of valid tests/no. of tests run) × 100].



# Genetic modification for acquired resistance in *M. leprae*

= genomic mutation

- Proportion of mutant resistant
  - about 1 for  $10^5$  to  $10^8$  bacteria
  - Varies depending on the nature of the drug and its in vivo concentration, i.e. dosage

- Type of genetic modification
  - Point mutation

TCG => TTG  
Serine => Leucine

- Deletion

ACGCCTAGAT ----> AC TAGAT

- Insertion

ACGCCTAG ----> ACCTTGCCTA

# Knowledge of mechanisms of drug resistance

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- Which antileprosy drugs?
  - Dapsone
  - Rifampin
  - Clofazimine
  - Ethionamide
  - Fluoroquinolones (ofloxacin, moxifloxacin)
  - Clarithromycin
  - Minocycline
  - Diarylquinolines (R207910, TMC207)

# Region determining rifampicin resistance (RDRR) in the subunit B of RNA polymerase encoding gene (*rpoB*)

Insertion							
432	433	436	438	441	451	456	458
Gly	Thr	Leu	Gln	Asp	His	Ser	Leu
Ser	Ile	Pro	Val	Asn Tyr	Asp Tyr	Leu Met Phe Trp	Val

\*Numbering system of *M. leprae* genome strain TN  
 RDRR = 432 – 458 = 507-533 in *E. coli*  
 Position 456 in *M. leprae* = 531 in *E. coli*  
 Position 456 = previous position 425 in *M. leprae*

70% of strains tested : S456L

Ala411Thr, Arg505Trp need to be validated (Nora Cordona, Cotonou 2012)

Honore 1993, Maeda 1999, Maeda 2001, Cole 2001, Cambau 2002, Zhang 2004, Cambau 2012

# Dapsone resistance in *M. leprae*

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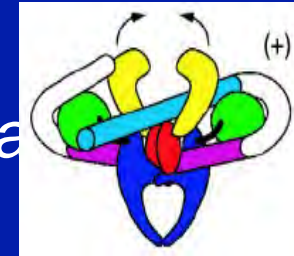
- Diamino-diphenyl-sulfone (DDS)
  - Sulfonamide derivative
  - Competitive inhibitor of dihydropteroate synthase (DHPS)
- Mechanism of dapsone resistance
  - Mutations in *folP1* encoding DHPS
  - at positions 53\* and 55\*
  - Thr53 => Ile, Arg or Ala
  - Pro55 => Arg, Leu

\*Numbering system in *M. leprae*, positions 62 and 64 in *E. coli*

Kai 1999, Gillis, 2000, Cambau 2006

# Quinolone resistance in *M. leprae*

- Only one type II topoisomerase in *M. leprae* (no topoisomerase IV)
- Mutation in the genes encoding DNA gyrase
- *gyrA* A91V\* is the main mutation described
- *gyrA* G89C was described
- Confer a 5 to 10-fold lower inhibition of DNA gyrase by ofloxacin (DNA supercoiling experiments)



\* Corresponds to 83 in *E. coli* and 90 in *M. tuberculosis*

Kim 2003 ; Maeda 2001, Cambau 1997, Matsuoka 2007 ; Matrat 2008

# Knowledge of mechanisms of drug resistance

- Which mechanisms are known?
  - Dapsone : mutation of *folP1* (Williams and Gillis 2000)
  - Rifampin: mutation of *rpoB* (Honoré and Cole 1993)
  - Clofazimine: multiple targets, potassium channel (Cholo 2006, Ren 2009)
  - Fluoroquinolones (ofloxacin, moxifloxacin): mutation of *gyrA* (Cambau 1997) or *gyrB* (Matrat 2009)
  - Clarithromycin: no resistant strain so far but mutation in *rrl* (23SrDNA) in other mycobacteria (Meier 1994, Wallace 1996)
  - Minocycline: no resistant strain so far but mutation in *rrs* (16SrDNA) in other bacteria
  - Quinolines (R207910): no resistant strain so far but mutation in *atpE* in other mycobacteria (Petrella 2006)

# Endpoints in molecular detection of drug resistance in *M. leprae*

2. Good correlation between genotype and phenotype of resistance (mouse footpad susceptibility testing)

=> genotype will predict for phenotype



# Concordance of genotype (*rpoB* mutations) and phenotype (mouse footpad susceptibility testing) for rifampin resistance

Results for NRC Paris, France 1989-2006, 123 biopsies

genotype result	Susceptibility result		
	Rif-R	Rif-S	No growth
<i>rpoB</i> mutation	23	1*	1
WT	1**	46	51
Total	24	47	52

\*Ser522Cys, 0 /5 mice

\*\*2/7 mice

**Concordance = 69/71 = 97%**

Updated Cambau 2002 , Honore 1993

# Concordance of genotype (*rpoB* mutations) and phenotype (mouse footpad susceptibility testing) for dapsons resistance

Results for NRC Paris, France 1989-2006

Level of résistance	N	Mutation <i>foIP1</i> at 53 or 55	
		Yes	No
R-100	6	6	0
R-10	4	3	1
R-1	6	1	5
Total strains DDS-R	16	10	6
Strains DDS S	22	0	22

**Overall sensitivity = 62.5 % (10/16 ) and Specificity = 100% (22/22)**

**Sensitivity for clinical resistance (R-10 or R-100) = 90% (9/10)**

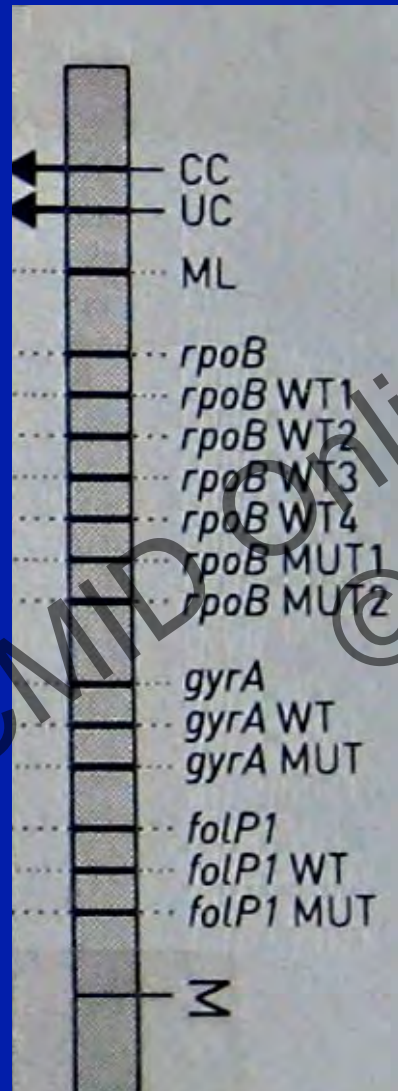
**Sensitivity for clinical resistance in relapse cases = 100% (7/7)**

Matsuoka 2007, Cambau 2006

# Genotypic methods for detection of drug resistance

- Usually start by gene amplification
- Followed by:
  - DNA fragment analysis without determination of the nucleotide sequence (heteroduplexes): DGGE, DHPLC, SSCP, Touch-Down
  - Determination of the nucleotide sequence: PCR-sequencing, DNA chip, pyrosequencing
  - Hybridization with oligonucleotide probes for mutation and WT sequence: Real time PCR, Reverse hybridation, Microarray, FISH...

# GenoType LepraeDR DNA strip



Control probes

Presence of *M leprae* DNA

Rifampicin resistance

MUT1 : His451Tyr (His526Tyr)

MUT2 : Ser456Leu (Ser531Leu)

Fluoroquinolone resistance

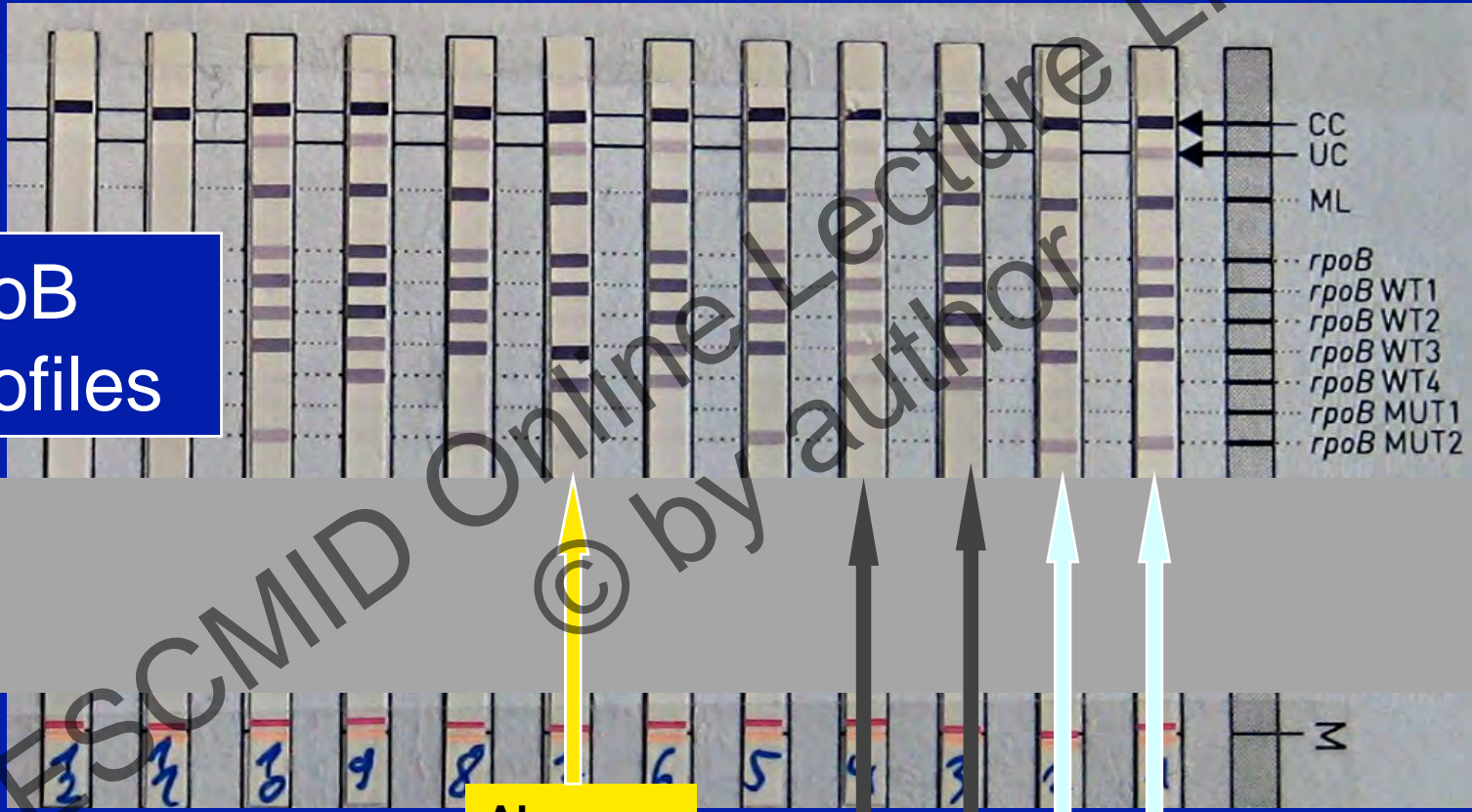
gyrA MUT : Ala91Val

Dapsone resistance

folP1 MUT : Pro55Leu

# Exemples of strips (test GenoType Leprae DR)

rpoB  
profiles

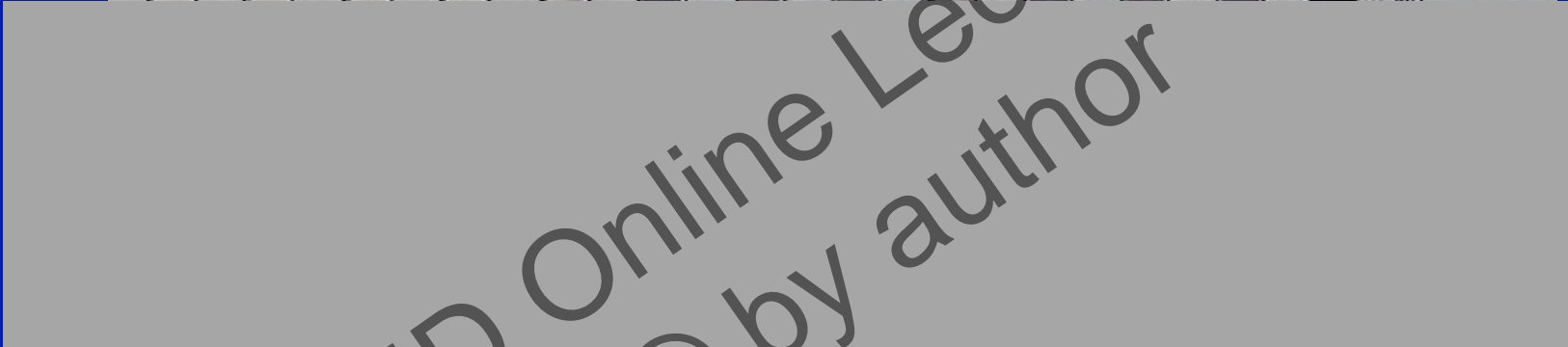


Absence  
of WT2  
=>Q438V  
Mutation  
rpoB

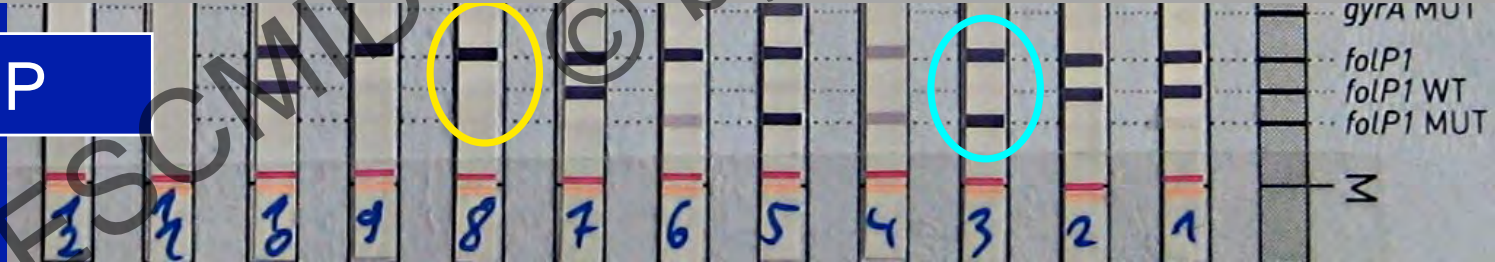
WT  
rpoB

S456L  
Mutation  
rpoB

# Exemples of strips (test GenoType Leprae DR)



folP



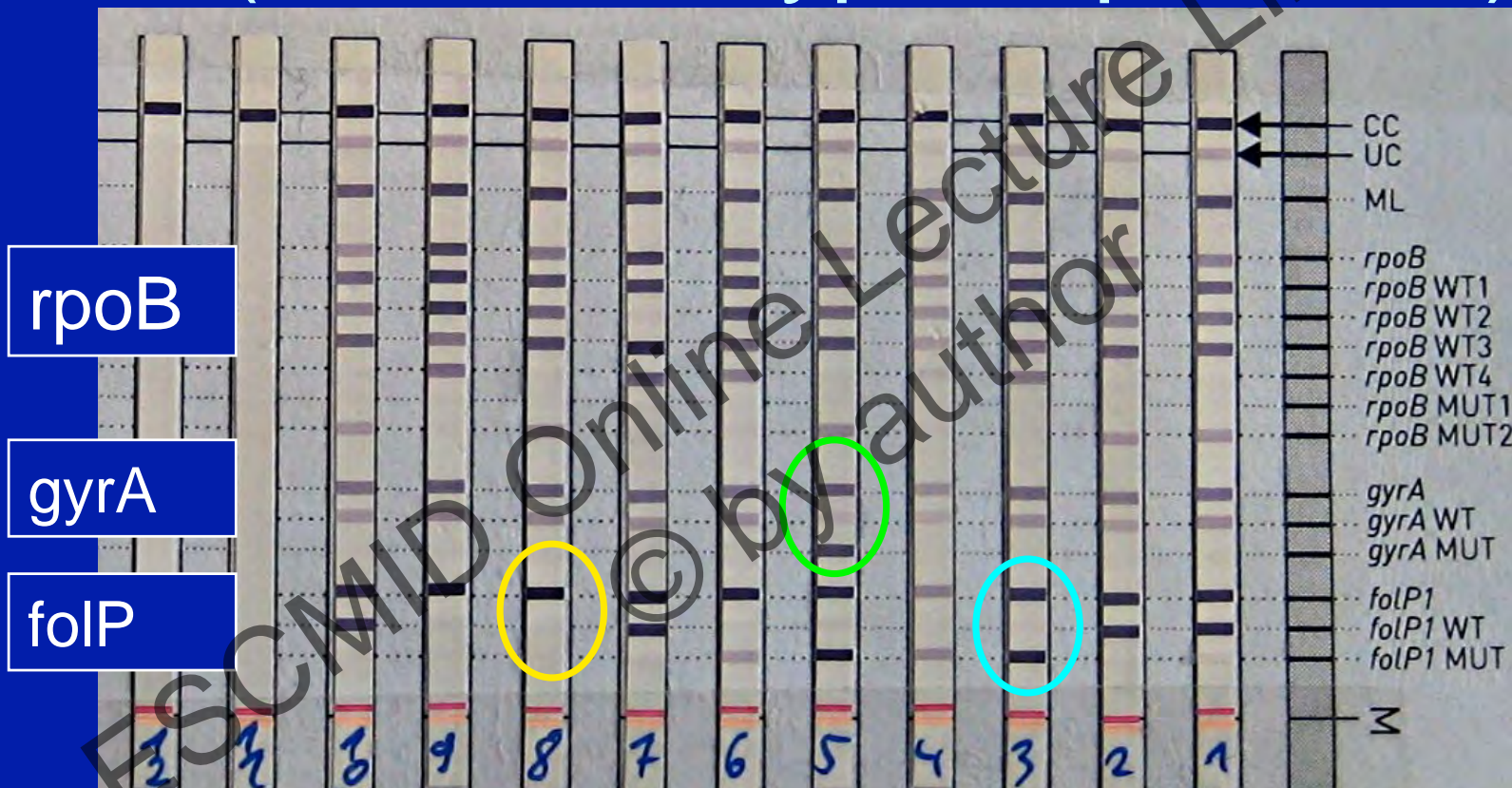
Absence  
of WTfolP  
= mutation  
T53I

folP  
mutation  
P55L

WT gyrA  
WT folP



# Exemples of strips (test GenoType Leprae DR)



**Absence  
 of WTfolP  
 = mutation  
 T53I**

**A91V  
 Mutation  
 gyrA**

**folP  
 mutation  
 P55L**

**WT gyrA  
 WT folP**

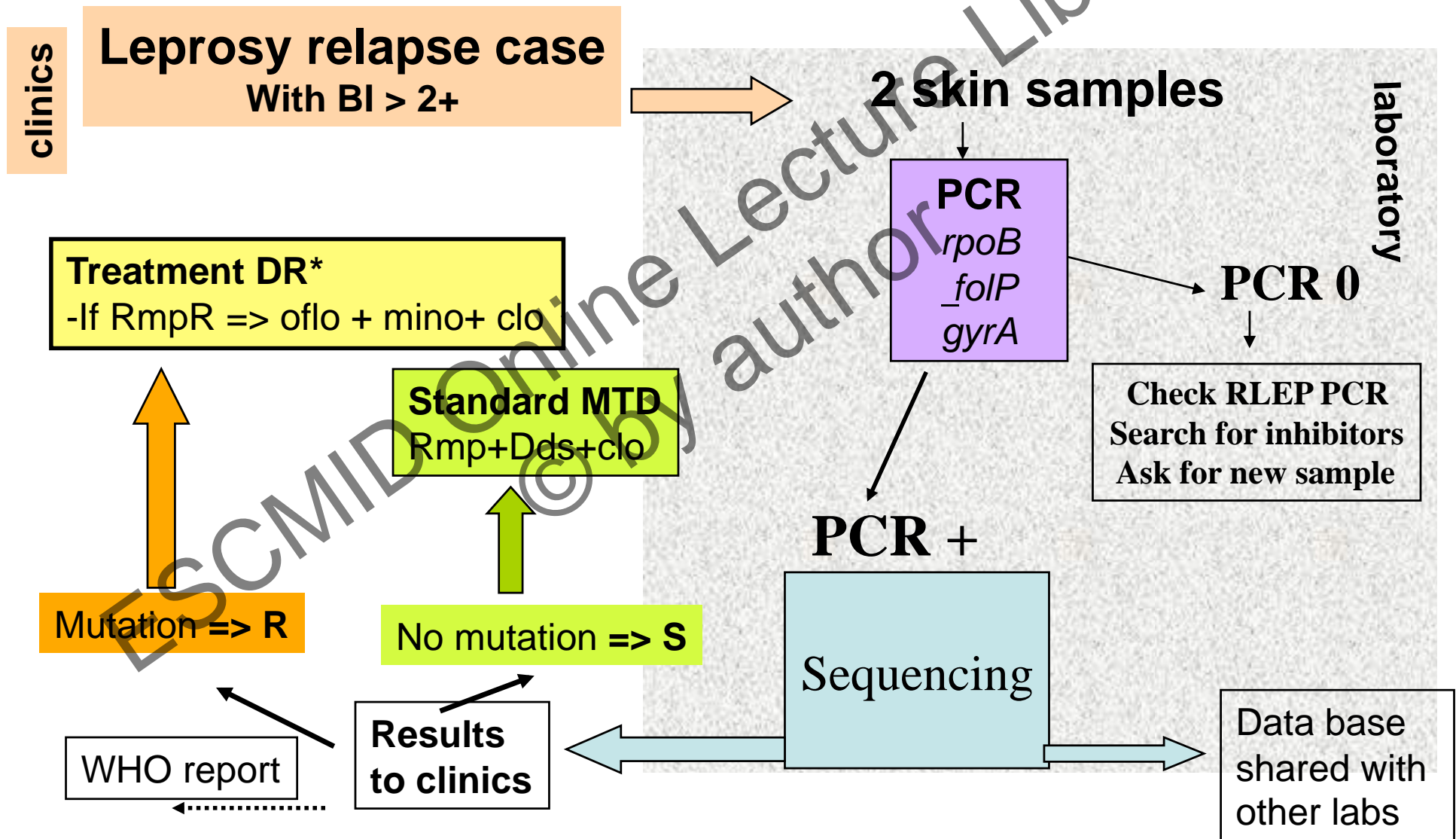


# Evaluation study: concordance with susceptibility testing

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- 84 skin biopsies tested in the mouse footpad
  - For rifampicin: 13 R, 71 S
  - For dapson: 8 R, 48S
  - For ofloxacin: 1 R, 4 S
- Concordance with resistance in the mouse footpad : 84/84 (100%)
- Concordance with PCR sequencing: 118/120 (98.3%)  
False results for 2 strains with a mutation at codon 447: Ser447Cys for one strain and a silent mutation for the second strain: these strains were susceptible in the mouse footpad susceptibility testing

# WHO network for surveillance of drug resistance in leprosy



\*see text

# Results for surveillance of resistance in France 1989-2009

- 199 cases
  - 102 new cases
  - 74 relapses
  - 23 follow up (patients BI+ after treatment)
- 13 rifampin resistant strains
  - 13 relapse cases
  - 11 from west indies, 1 Mali, 1 Cameroun

# Resistant cases

**Table 3. Characteristics of the 11 patients with rifampin-resistant (assessed by in vivo test in the mouse) leprosy.**

Patient no.	Year of biopsy	Age in years	Country	Case	Year of first diagnosis	Previous treatment and duration	Susceptibility to other drugs
1	1989	41	FWI	Relapse	1956	Dds 1956–1960; Sif + Rif 1980–1982	Dds <sup>R</sup> , Pth <sup>S</sup>
2	1990	58	FWI	Relapse	1959	Dds 1959–1968; Sif 1968–1980; Sif + Dds + Rif + Of 1980–1987	Dds <sup>R</sup>
3	1991	45	FWI	Relapse	1961	Dds 1961–1974; Dds + Rif 1974–1975	Dds <sup>R</sup> , Pth <sup>S</sup>
4	1992	55	FWI	Relapse	1956	Dds 1956–1973; Rif 1973–1974; Dds + Sif 1975–1991	Dds <sup>R</sup> , Pth <sup>S</sup>
5	1992	35	Mali	Relapse	1979	Dds 1979–1991; Rif + Ofx 1 month 1992	Dds <sup>R</sup> , Pth <sup>R</sup> , Ofx <sup>R</sup>
6	1992	50	FWI	Relapse	1958	Dds 1958–1977; Rif 1977–1979; Rif + Pth	Dds <sup>R</sup> , Pth <sup>R</sup>
7	1993	57	Cameroon	Relapse	1960	Dds 1961–1975; Pth + Rif 1975–1992	Dds <sup>S</sup> , Pth <sup>S</sup>
8	1995	64	FWI	Relapse	1946	Dds 1946–1978; Sif 1979–1982; Rif 1983–1995	Dds <sup>S</sup> , Pth <sup>S</sup>
9	1995	30	FWI	Relapse	1980	Dds + Rif + Pth 30 months	Dds <sup>S</sup> , Pth <sup>S</sup>
10	1997	45	FWI	Relapse	1950	Dds for 11 years	Dds <sup>S</sup> , Pth <sup>S</sup>
11	1999	69	FWI	Relapse	1947	Dds 1947–1972; Dds + Rif 1973–1976	Dds <sup>R</sup>

**NOTE.** Clf, clofazimine; Dds, dapsone; FWI, French West Indies; Ofx, ofloxacin; Pth, prothionamide; R, resistant; Rif, rifampin; S, sensitive; Sif, sulfonamides.

2001: Martinique, relapse, dds, dds+Rmp, DdsS

2002: Martinique, relapse, dds, Rmp, DdsS

# Conclusions

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- *M leprae* resistance does exist in the world
- Acquisition of resistance is similar to that occurred in *M. tuberculosis*
- Leprosy susceptibility testing is difficult since it required in mouse studies and Years experiments
- Resistance detection is now mostly done using genotypic detection of mutations known to confer resistance
- However new mutations need to be tested in vitro models (purified targets) or in animal models