

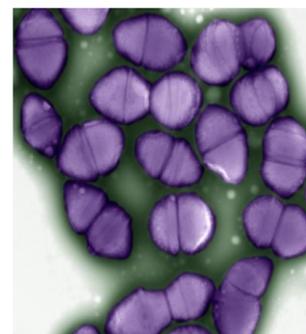


Molecular characterization and antimicrobial resistance of scarlet fever and invasive *Streptococcus pyogenes* in England and Wales, 2014

J Coelho, M Doumith, R Pike, R Daniel, C Dhimi, M Prest, T Chambers, A Al-Shahib, A Underwood, M Chand, A Efstratiou, R Hill, N Woodford & V Chalker
National Infection Service, Public Health England, Colindale, London, NW9 5EQ, United Kingdom

INTRODUCTION

- Streptococcus pyogenes* (group A streptococcus, GAS) causes: impetigo, puerperal sepsis, necrotising fasciitis, tonsillitis, scarlet fever, pneumonia, septicaemia and meningitis.
- An unprecedented increase in the number of scarlet fever (SF) cases was reported in England during 2014⁽¹⁾.



- AIM – to characterise by phenotypic antimicrobial susceptibility and known molecular mechanisms of resistance GAS isolates from patients with SF and invasive infection (iGAS) to determine whether the SF increase was attributed to a single clonal lineage with increased resistance.**

METHODS

- Isolates included were referred during April-June 2014:
 - 308 from patients with SF (throat swab);
 - 237 from patients with iGAS.
- emm* gene sequence typing (derived from genomic sequences).
- MICs by agar dilution and/or E-test (EUCAST guidelines): erythromycin, penicillin, ciprofloxacin, rifampicin and tetracycline.
- Genomic sequence data by Illumina methodology.
- Bioinformatic analysis performed against a locally-curated database of resistance determinants.

EMM GENE TYPING

- Isolates were polyclonal - 25 *emm* types identified.
- emm* 3 represented 36% of total isolates, followed by *emm* 1, 12 and 89.
- Similar diversity and distribution of *emm* types for SF and iGAS.
- All iGAS *emm* types were also found in SF.

<i>emm</i> type	iGAS (%)	SF (%)
3	27	43
1	23	9
89	10	3
12	7	17
28	6	4
6	4	6
others (<i>emm</i> 2,4, 5, 9, 11, 18, 22, 44, 53, 58, 73, 75, 76, 77, 81, 82, 87, 90 and 94)	20	19
Total	237 isolates	308 isolates

RESULTS

PHENOTYPIC SUSCEPTIBILITY AND GENOMIC DATA

Erythromycin

- 3.3% (n=18) resistant isolates – similar percentage observed by GAS bacteraemia data⁽²⁾.
- The *erm*(B), *mef*-(A), *mef*-(E), *msr*-(D) genes as well as mutations in the L4 and L22 and 23S regions were detected in genomic sequence data.
 - erm*(B): in 8 resistant isolates, absent from all susceptible.
 - erm*(B) positive were high level resistant (MIC >16 mg/L).
 - mef*A: in 2 resistant isolates; and in 5 susceptible isolates - ? Gene expression/efficiency factor.
 - Mef*-(E) & *msr*-(D) in 1 and 6 susceptible isolates, respectively.
 - Mutations in L2 and L4 were not specifically associated with resistance.
 - 44 mutations detected in the 23S rRNA gene; 13 in resistant isolates; 4 were exclusive.
 - 2 isolates had *erm*(B) & a mutation in the 23S:129:C-T.
 - 2 isolates had *erm*(B) & a mutation in the 23S:305:C-Y.
 - These mutations were not found in any susceptible strains. Association with resistance cannot be excluded.
 - 1 resistant isolate no known genes conferring resistance, but had mutations 23S 2061:A-R & 2702:C-T.
 - Neither of these mutations were found in any susceptible strains. Definitive association with resistance requires further investigation.
- Mutations or genes exclusive to resistant isolates were not identified in 7 of the 18 resistant isolates, further investigation is underway.

Antibiotic tested (Eucast breakpoints)	Resistant		Susceptible		Fisher's exact test <i>p</i> value
	SF	iGAS	SF	iGAS	
Erythromycin (0.5mg/L)	6	12*	296	231	0.095
Ciprofloxacin (Eucast ECOFF 1mg/L)**	nil	1	308	236	0.43
Tetracycline (2mg/L)	3	17	305	220	0.0001
Rifampicin (0.5mg/L)	nil	nil	237	308	1
Penicillin (0.25mg/L)	nil	nil	237	308	1

*9 isolates high level resistant (MIC>16mg/L)

**Ciprofloxacin MICs for 214 isoaltes (111iGAS and 103SF) 1mg/L, remaining 330 isolates <=0.5mg/L

Tetracycline

- 3.6 % resistant isolates; lower than in GAS bacteraemia susceptibility data⁽²⁾, but similar for iGAS only (14%).
- 17 resistant isolates had *tet*(M), and 2 *tet*(O) – both genes encode ribosomal protection proteins.
- tet*(M) and *tet*(O) were absent in all tetracycline susceptible isolates (n=525).
- Neither gene was found in one resistant *emm* 5 iGAS isolate (MIC 8mg/L) and further investigations are underway.

Ciprofloxacin

- 4 mutations in *parC* and 1 in *gyrA* were identified. None were exclusive to non-wild type strains. A single non-wild type isolate (MIC 2mg/L) with *parC* 305:C-Y mutation was identified, but also identified in 27 isolates with MIC below the ECOFF (1mg/L).

Rifampicin and penicillin:

- Isolates universally susceptible to rifampicin and penicillin, despite *rpoB* gene and penicillin-binding protein gene mutations, respectively.

SUMMARY

- Isolates were fully susceptible to penicillin and rifampicin & 1 isolate was non-wild type to ciprofloxacin ECOFF.
- Macrolide and tetracycline resistance were observed in 3.3% and 3.6 % of isolates, respectively.
- erm*(B) associated with high level erythromycin resistance.
- Further analysis required to confirm the point mutations in 23sRNA gene putatively associated with macrolide resistance and also the expression of *mefA*.
- Further work is underway to identify single nucleotide polymorphisms/genes conferring resistance (7 erythromycin-resistant isolates).
- tetracycline resistance was associated with *tet*(M) and *tet*(O) & was significantly higher in iGAS isolates versus SF
- SF and iGAS isolates were polyclonal with susceptibility data within expected ranges, indicating SF could not be attributed to a single lineage with increased resistance

References: 1- Health Protection Report Vol 8 No. 11 – 21 March 2014;

2-BSAC Bacteraemia Resistance Surveillance Programme, www.bsacsurv.org, accessed on 16th March 2016