



SPITALUL JUDEȚEAN DE URGENȚĂ
„SFÂNTUL IOAN CEL NOU” – SUCEAVA



UNIVERSITATEA ȘTEFAN CEL MARE SUCEAVA

REZISTENȚA LA ANTIBIOTICE PRIN PRODUCEREA DE BETA LACTAMAZĂ

Conf. dr. Roxana Filip^{1,2}

¹Spitalul Județean de Urgență Sf. Ioan cel Nou Suceava,
Laborator TB Biologie Moleculară

²Universitatea Ștefan cel Mare Suceava,
Facultatea de Medicină și Științe Biologice

Roxana Filip: roxana_filip@yahoo.com

Take home messages:

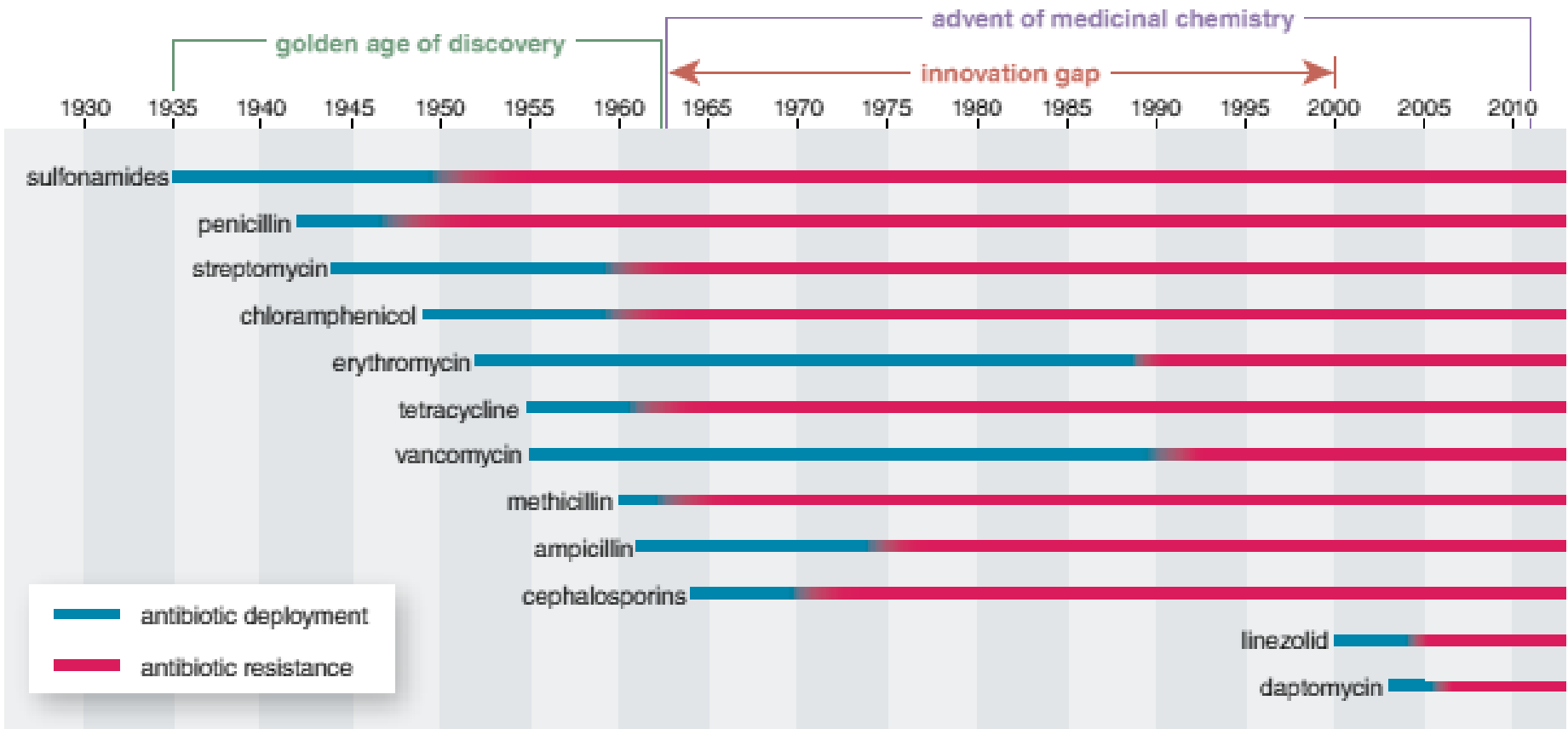
- Clasificarea beta lactamazelor- evoluție
- Emergența rezistenței la bacterii Gram negativ
- Bacterii producătoare de carbapenemaze
- Beta lactamze rezistente la inhibitori
- Mecanisme de rezistență asociate
- Bacterii cu multiple beta lactamaze
- Rolul **laboratorului**

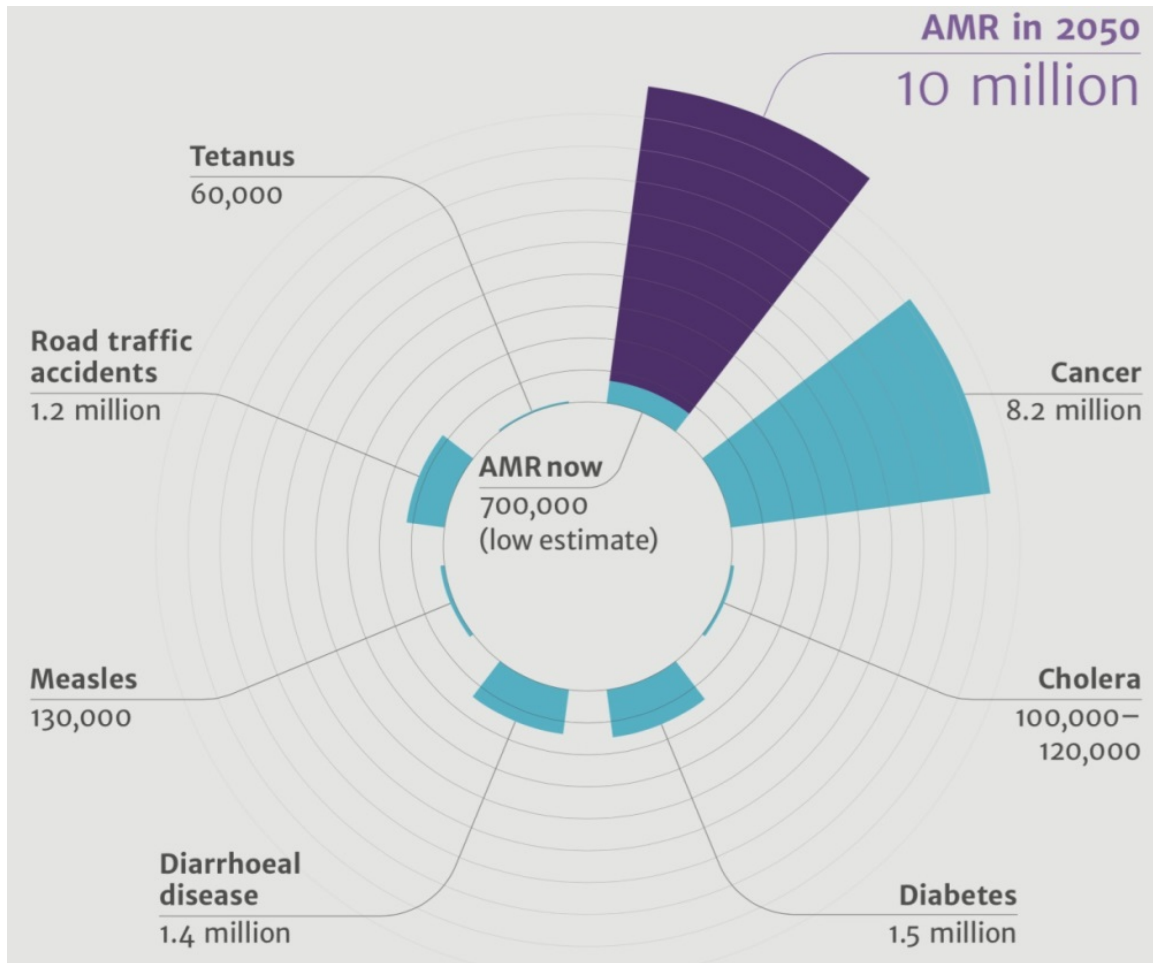
Clinicianul- “cere și ți se va da”

Tehnicile de biologie moleculară “ from bench to molecular chess”

"Lasciate ogni speranza, o voi che entrate" Divina Commedia di Dante Alighieri.

The rate at which microbes are acquiring resistance is **GREATER** than the rate at which antimicrobials are being discovered





From **7% to 50%** deaths related to infection

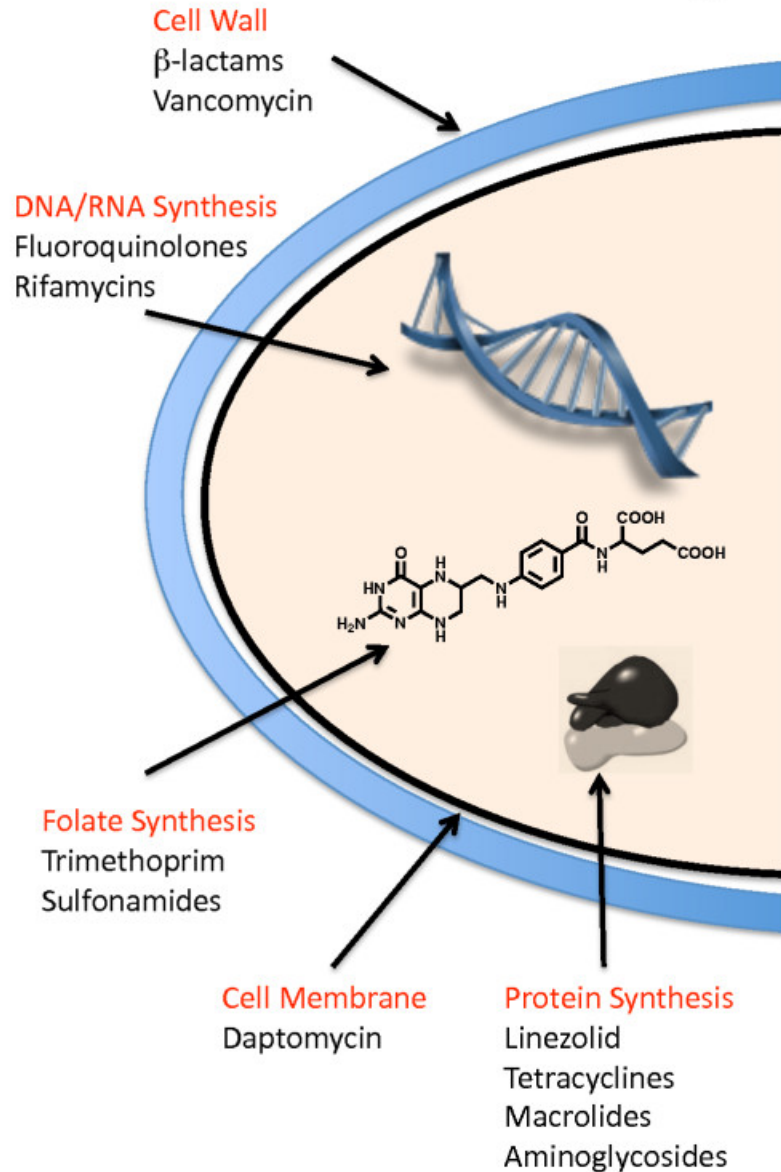
>25 000 death/y from multidrug resistant bacteria (EMA/ECDC report, Cassini et al., 2019)

Increased mortality rates

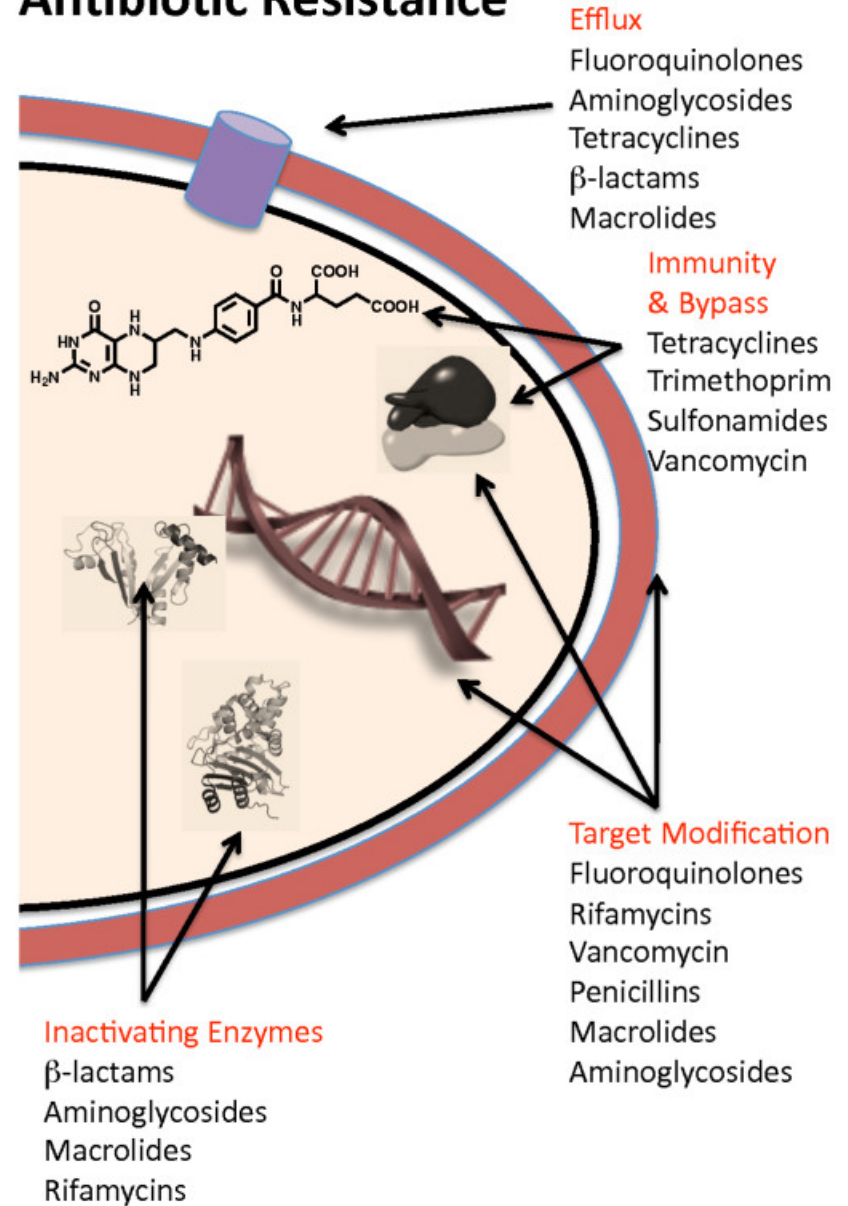
Estimated annual cost for healthcare systems and gross domestic product loss of \$300 billion (Naylor et al., 2018).

Surgery, transplants, and chemotherapy - no longer viable due to infection

Antibiotic Targets



Antibiotic Resistance



How does resistance occur

Resistance = natural phenomenon accelerated by the misuse of antimicrobial drugs -
WHO Fact Sheet No. 194 (2014)

Natural

naturally occurring resistance genes*

RNA-methylase, ABC-ATP Binding Cassette type transporters, aminoglycoside-phosphotransferases and β -lactamases

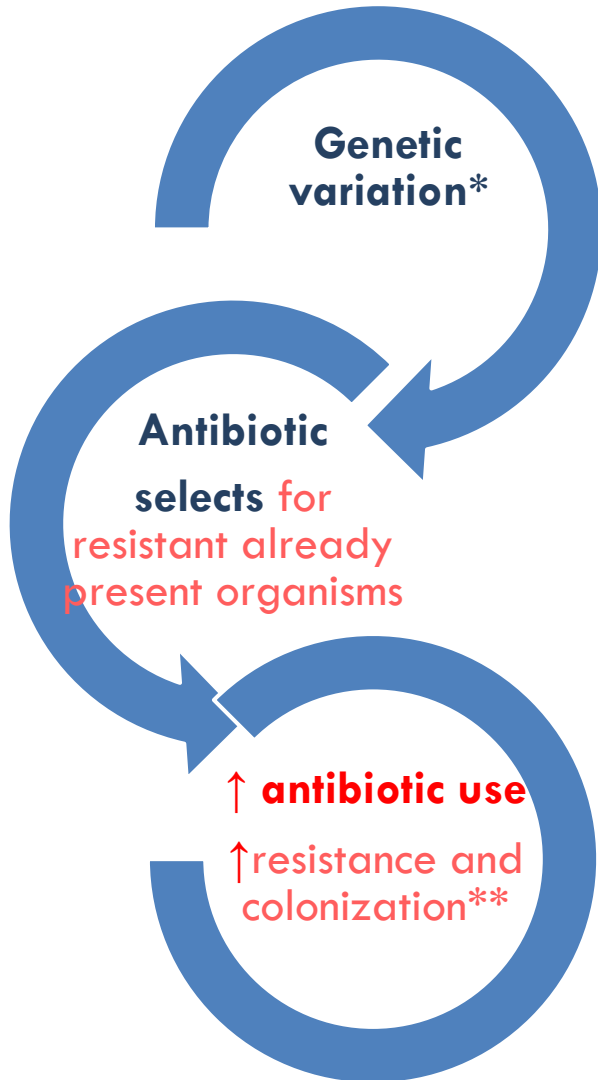
random mutations of biosynthesis genes providing a selective advantage to cells

co-selection of antibiotics and antibiotic resistance genes (Fajardo and Martinez, 2008).

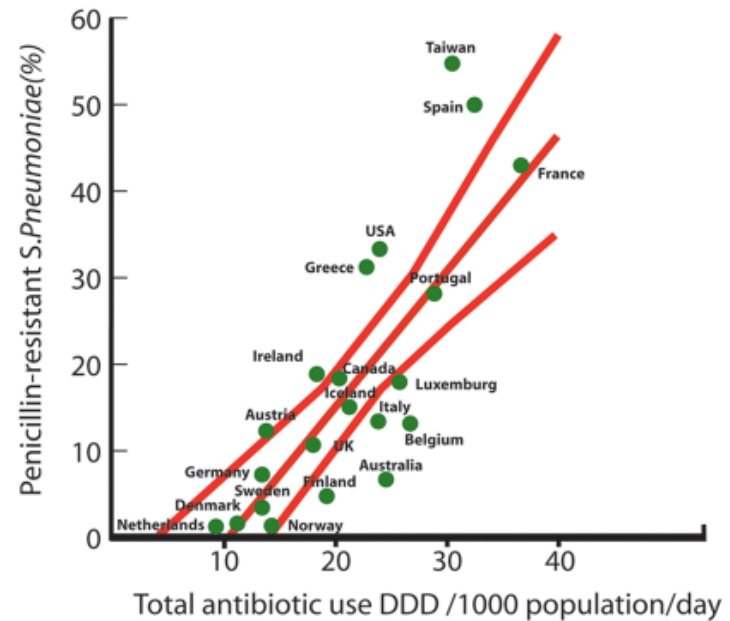
Acquired

Initially susceptible bacteria become resistant

How does resistance evolve?



“The more we use them, the more we lose them...”



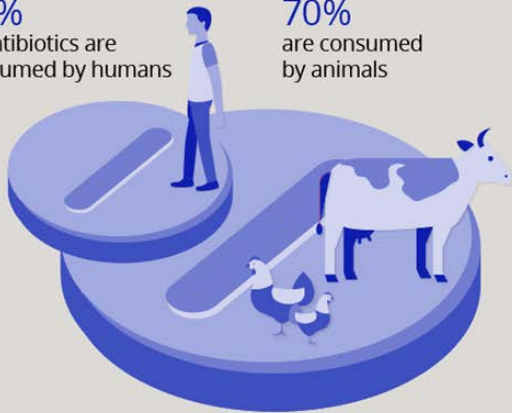
Liselotte Diaz Höjberg

Antibiotics in humans and animals

2012

30% of antibiotics are consumed by humans

70% are consumed by animals

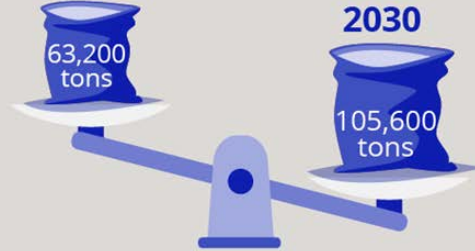


2010

63,200 tons

2030

105,600 tons



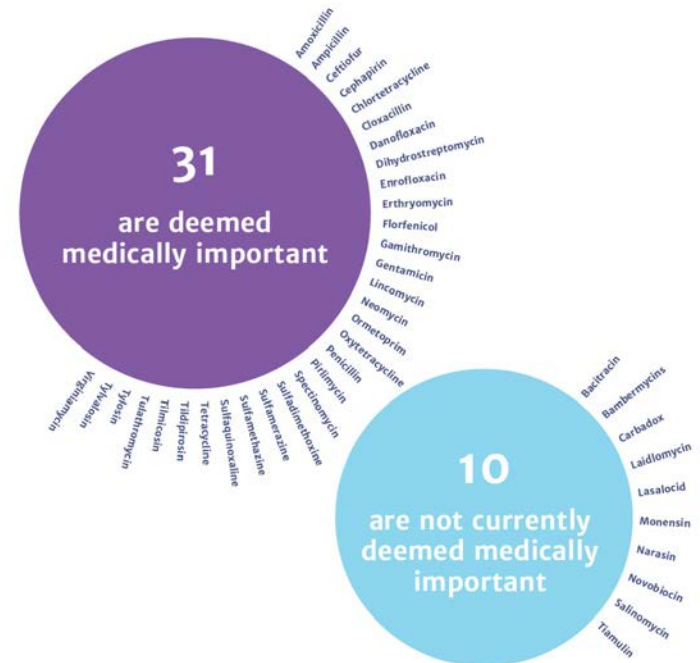
By 2030

Global consumption of antibiotics in livestock production to increase by two-thirds

Source: Review on antimicrobial resistance
Credit: Rebecca Robinson/LSHTM

MOST ANTIBIOTICS USED IN ANIMALS ARE MEDICALLY IMPORTANT FOR HUMANS

Of the 41 antibiotics* that are approved for used in food producing animals by the FDA, 31 are categorised as being medically important for human use.



Source: FDA, 2012 Summary report on Antimicrobials sold or distributed for use in Food-producing animals.

* Includes ionophores

Antibiotics



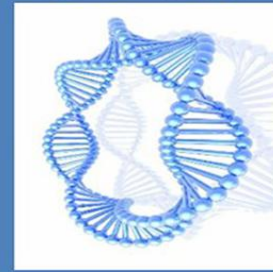
Biocides



Metals



Genes



Drivers of Antimicrobial Resistance

Agriculture

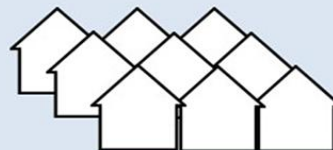


Animal Husbandry

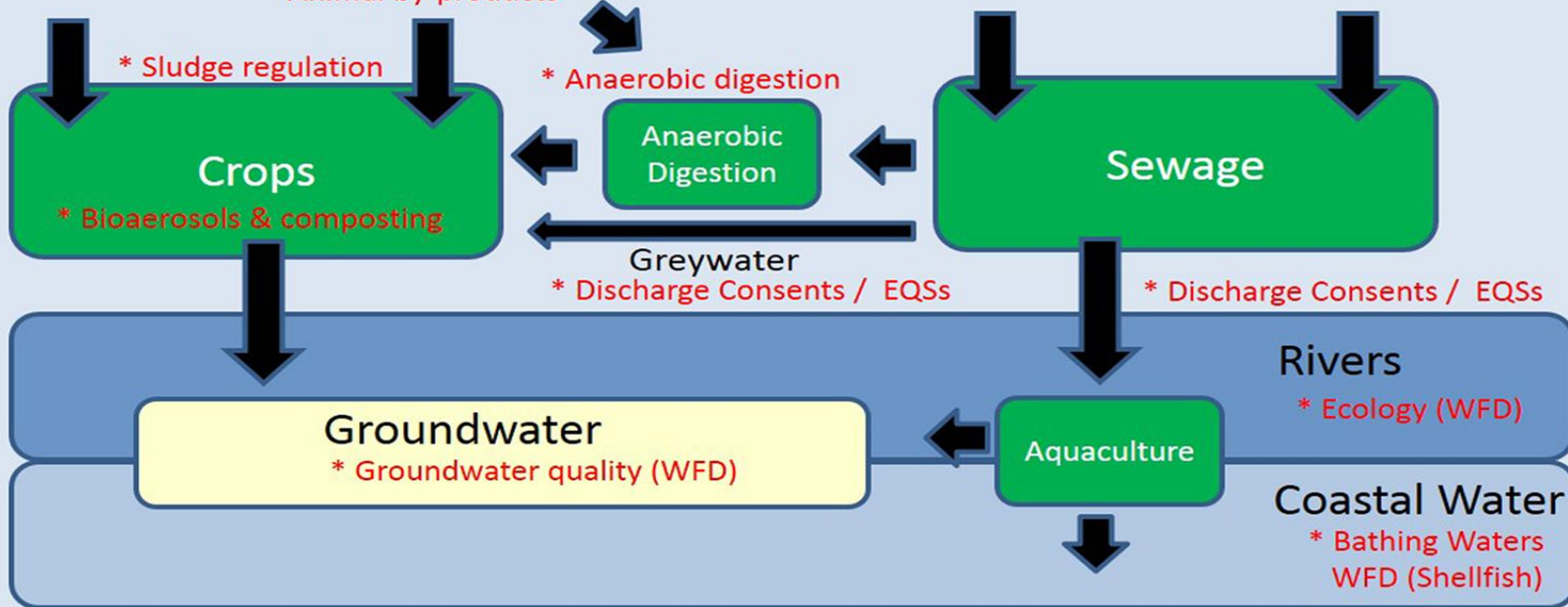


* Animal by-products

Household



Industry

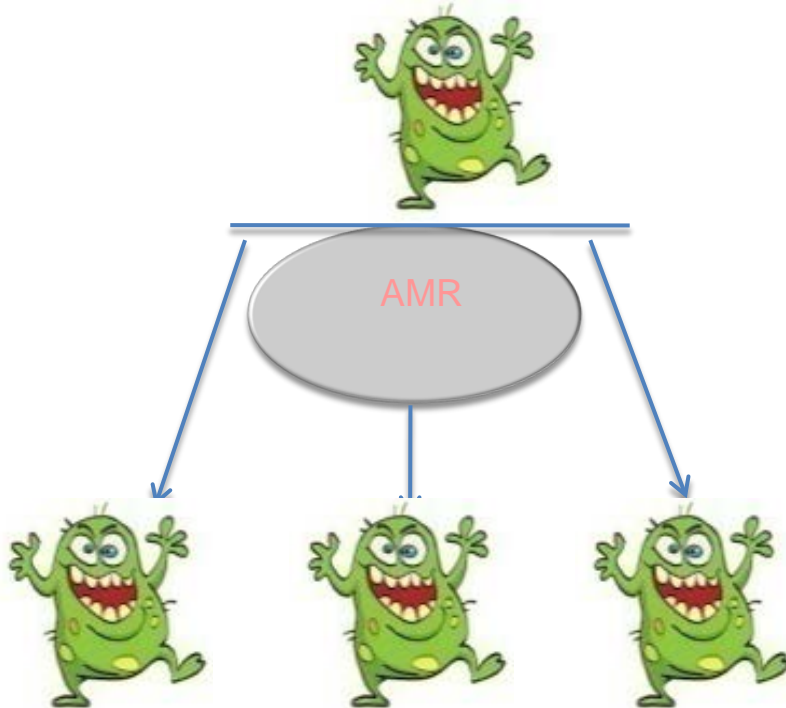


*EA regulatory interests

GENETIC RESISTANCE

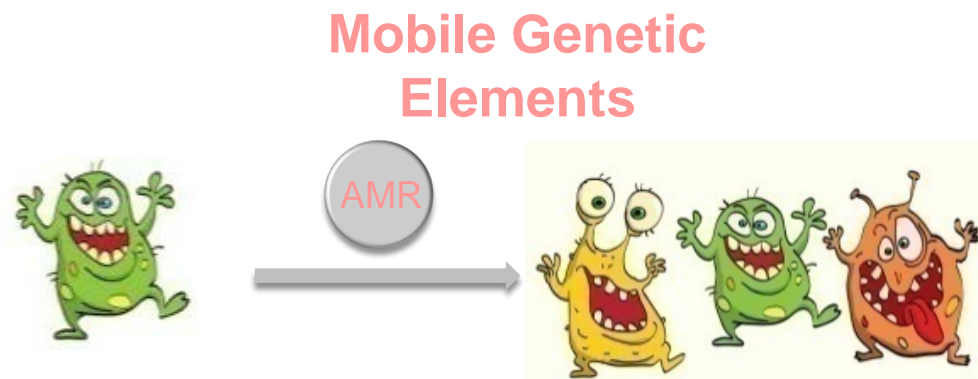
(1) VERTICAL

Spontaneous mutation



(2) HORIZONTAL

Horizontal transfer of AMR genes



Bacteria have generally a short generation time (less than 1h)!



Important acronymes

- ❑ MRSA- METHICILLIN-RESISTANT *S. aureus*
- ❑ PRSP- PENICILLIN RESISTANT *Str. pneumoniae*
- ❑ VISA- VANCOMYCIN (GLYCOPEPTIDE)-INTERMEDIATE *S. aureus*
- ❑ VRSA- VANCOMYCIN-RESISTANT *S. aureus*
- ❑ VRE- VANCOMYCIN R *Enterococcus faecium*
- ❑ ESBLs - Extended-spectrum β -lactamases (R Pen, Cefalosp. incl. 3rd gen, Monobactames+/-Carbapenemes)
- ❑ CRE – CARBAPENEMASE PRODUCING ENTEROBACTERIACEAE

Important acronymes

- **Multidrug-resistant (MDR) – Resistant to at least three classes**
- **Extensively drug-resistant (XDR): resistant to all but one classes**
- **Pan drug-resistant (PDR): resistant to all tested antibiotics**

SPICE (SPACE) Organisms - AmpC Resistance

Gram-negative bacteria that have inducible, chromosomal beta-lactamase genes known as AmpC. Resistance may not be detectable initially, but appears after a period of exposure to beta-lactam antibiotics

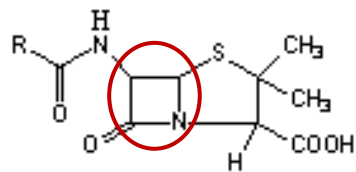
- S**erratia
- P**rovidencia
- "**I**ndole-positive" (Proteus, Morganella, Providencia) species / **A**cinetobacter
- C**itrobacter
- E**nterobacter species



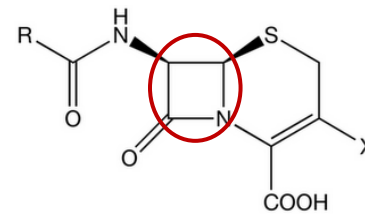
Other organisms in this class include: Acinetobacter, Cronobacter, Edwardsiella, Hafnia, Morganella, and rarely Pseudomonas

- **ESKAPE(E)** -*Enterococcus faecium*, *Staphylococcus aureus*, *Klebsiella pneumoniae*, *Acinetobacter baumannii*, *Pseudomonas aeruginosa*, *Enterobacter sp.* (*Escherichia coli*)
- **ESCAPE** -*Enterococcus faecium*, *Staphylococcus aureus*, *Clostridium difficile*, *Acinetobacter baumannii*, *Pseudomonas aeruginosa*, *Enterobacteriaceae*

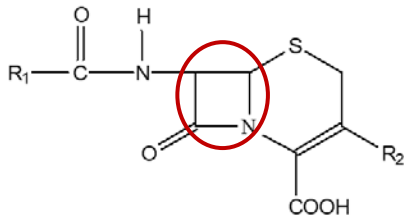




Penicillin

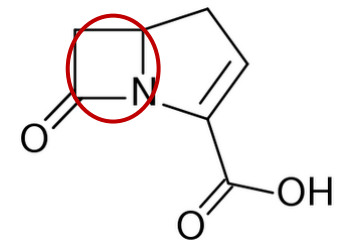


Monobactam



Cephalosporin

Beta Lactams



Carbapenem

Penicillins

PCN

Penicillin G
Benzathine PCN
VK PCN (PO)

Anti-Staph

Oxacillin (IV)
Nafcillin (IV)
Dicloxacillin (PO)

Amino-PCN

Amp +/-
Sulb (IV) #
Amox +/-
Clav (PO) #

Anti-Pseud

Pip +/- Tazo ^ #
Tic +/- Clav ^ #
(not available)

Cephalosporins

- Cephalexin
Cefazolin
- Cefuroxime
- Ceftriaxone
Ceftazidime ^
- Cefepime ^
- Ceftaroline
(Like CTX+MRSA)

↑
Increasing gram neg coverage
↓

Extended GNR
Ceftol-Tazo * ^ ~
Ceftaz-Avi * ^ ~

Monobactam

Aztreonam ^

- Aerobic Gram neg
- Pseudomonas
- Bad 4 gram pos
- Bad 4 anaerobes

KEY

- * ESBL
- ^ Pseudomonas
- ~ Carbapenem-R
- # Anaerobes

Carbapenems

Imipenem * ^

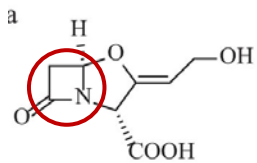
Meropenem * ^ #
+/- vaborbactam ~

Doripenem * ^ #

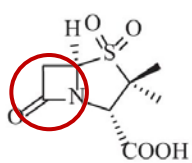
[Ertapenem] * #

- No pseudomonas
- 1x daily dosing

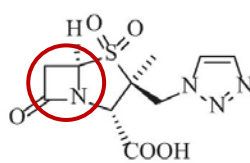
D. Serota 2018



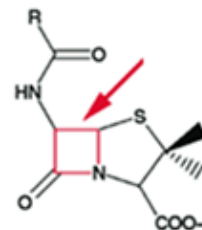
Clavulanate



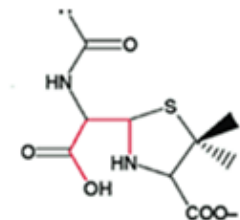
Sulbactam



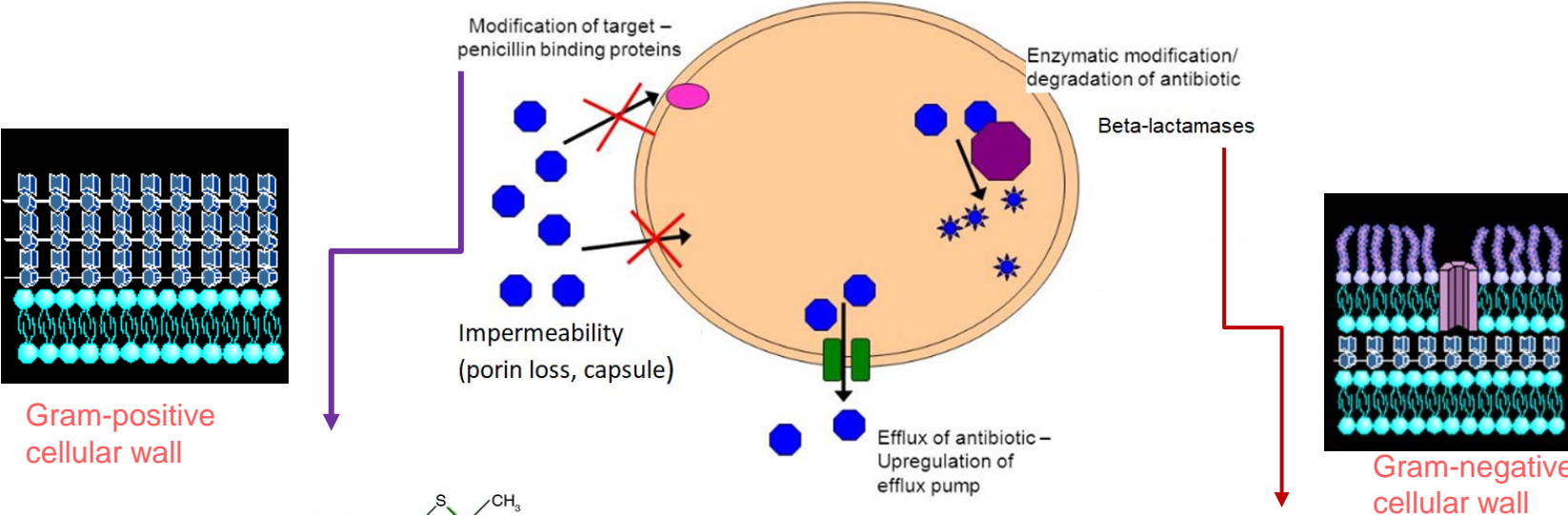
Tazobactam



beta-lactamase target

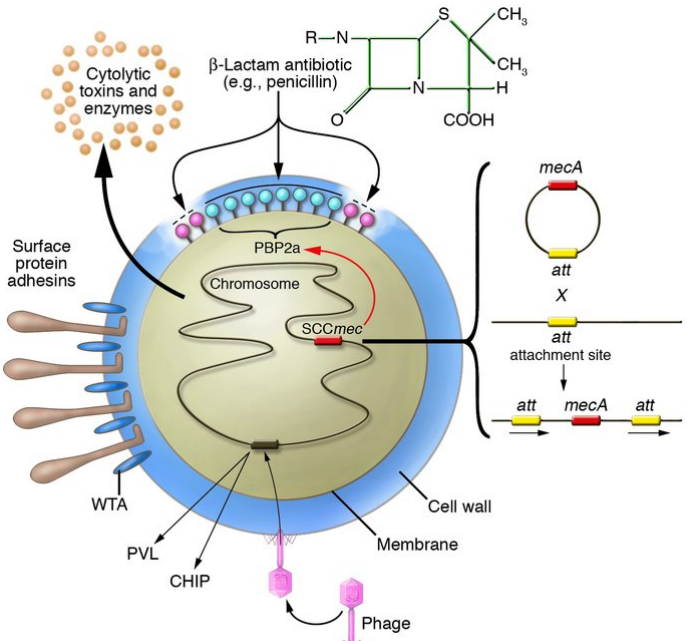


Beta-lactam resistance mechanisms

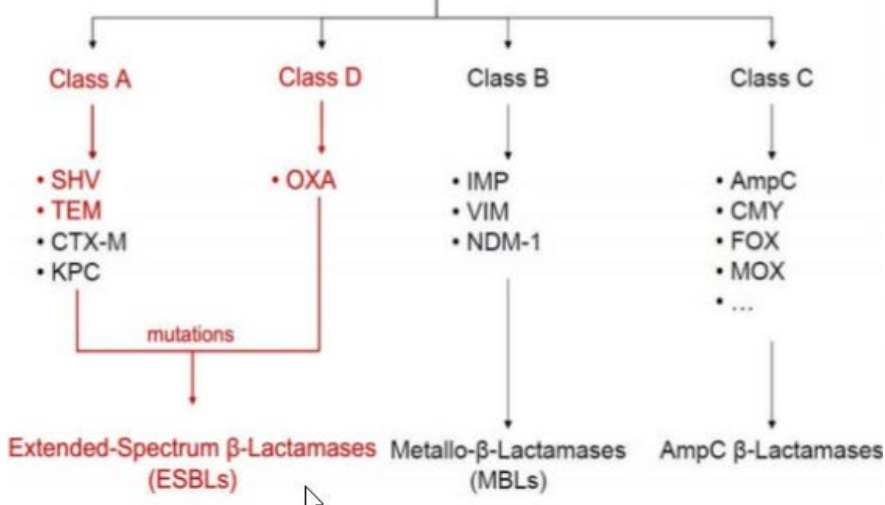


Gram-positive cellular wall

Gram-negative cellular wall



Classification



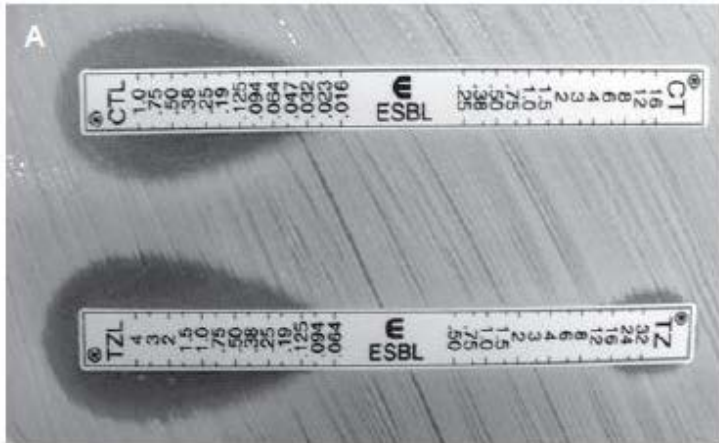


Clavulanic acid synergism test

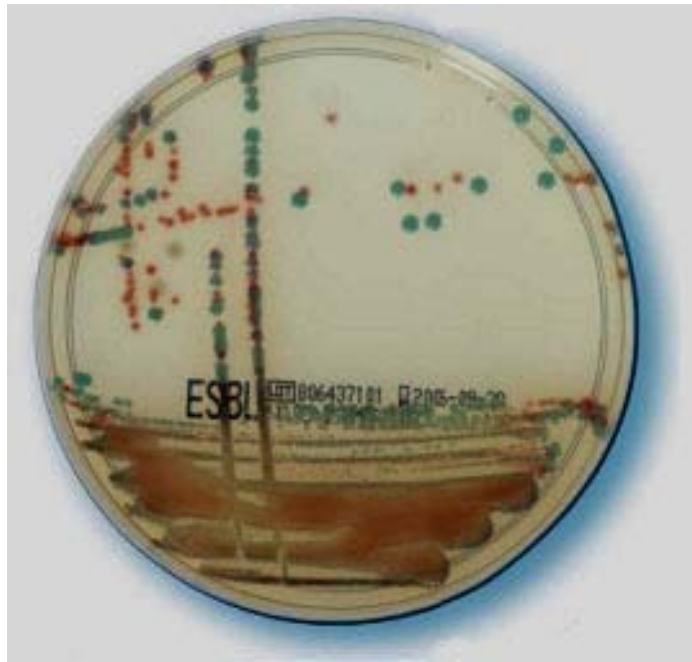
Double disk (> 5mm) between 3rd gen cephalosporin and the disk supplemented with clavulanic acid



MIC assay (automatic, E-test etc.)

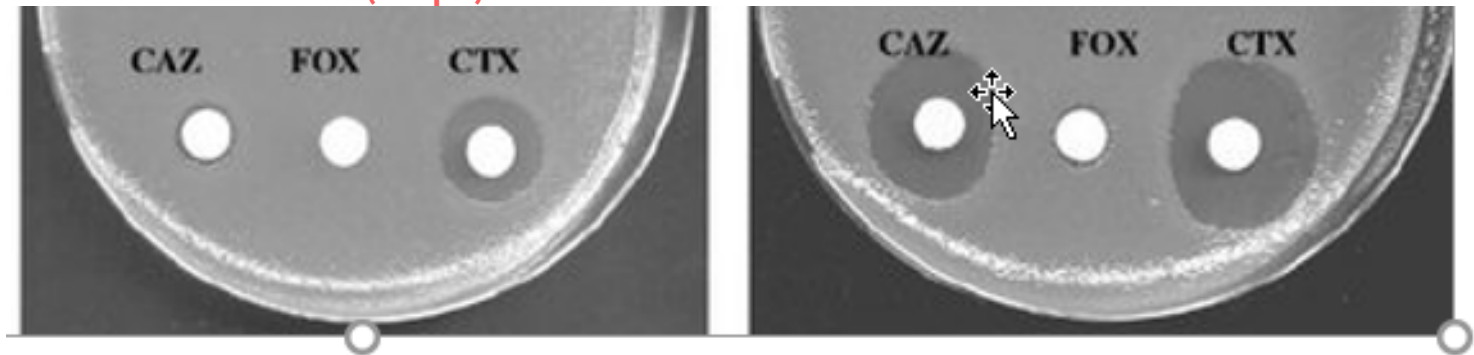


CromID ESBL



AmpC Cephalosporinase-Producing Enterobacteriaceae

- **Incidence** in children 14.2% -29%
- Transmissible AmpC, less frequent, most commonly CMY-2, but also ACT/MIR-type AmpC genes.
- **AMPCEs** (*Acinetobacter*, *Morganella*, *Proteus*/*Providencia*/*Pseudomonas*, *Citrobacter*, *Enterobacter*, *Serratia*)
- Inducible/derepressed
- R to Clavulanic Acid (CLA) and Cefoxitin (FOX)
- Therapeutic options:
 - ▣ 4th gen cephalosporins
 - ▣ Carbapenemes
- **Class C beta-lactamase (AmpC) detection**

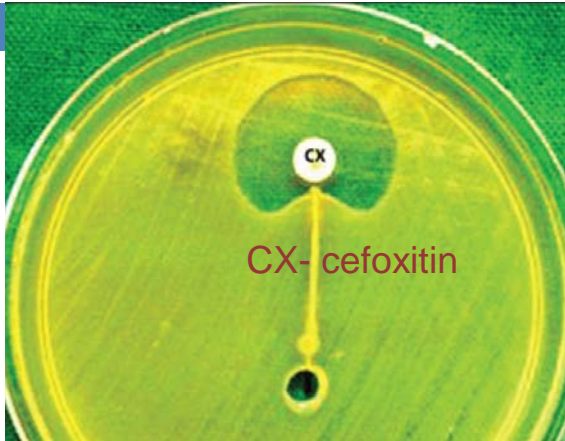


Derepressed AmpC

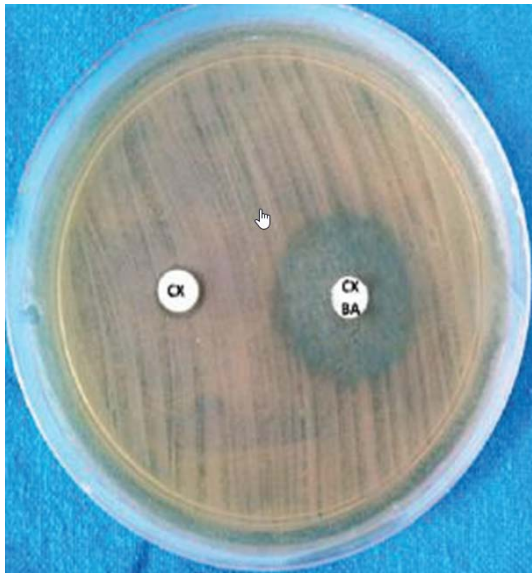
inducible AmpC

Class C beta-lactamase (AmpC) detection

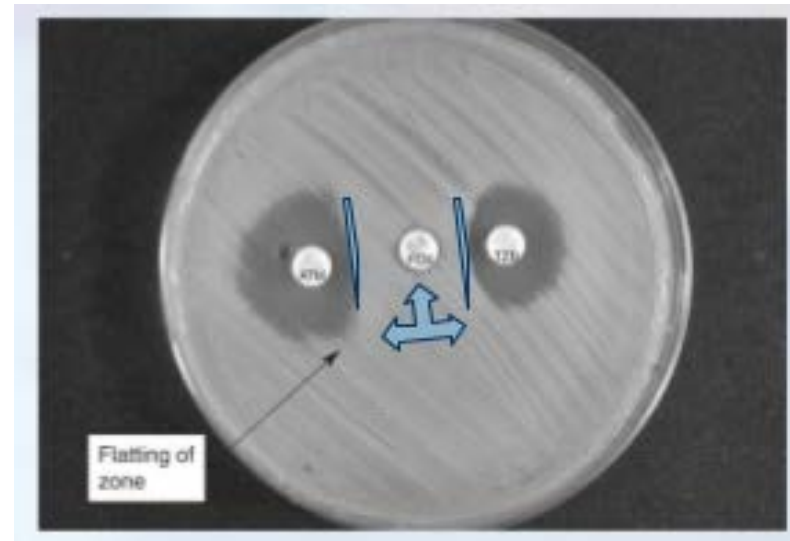
1. Modified Hodge test



2. DD test



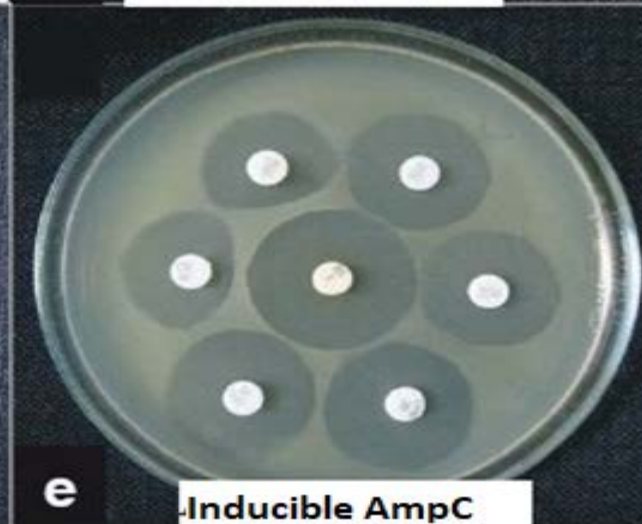
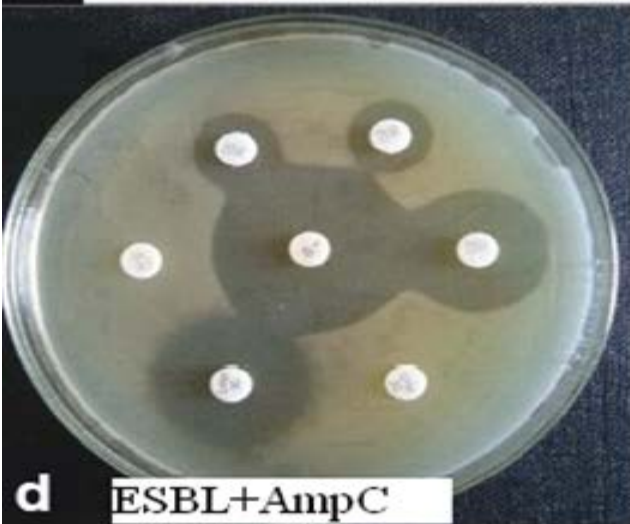
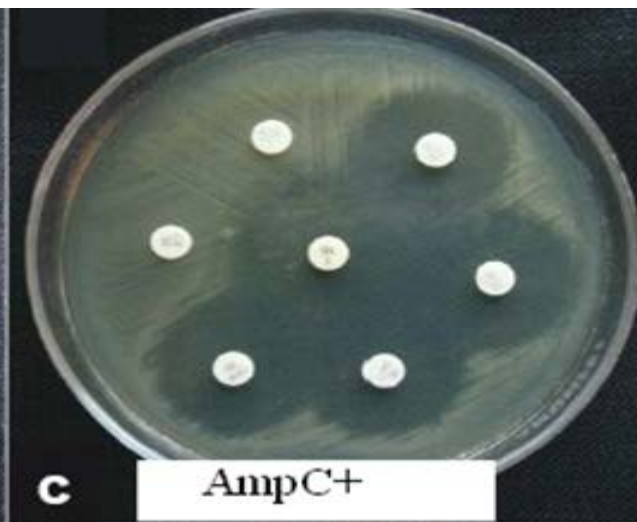
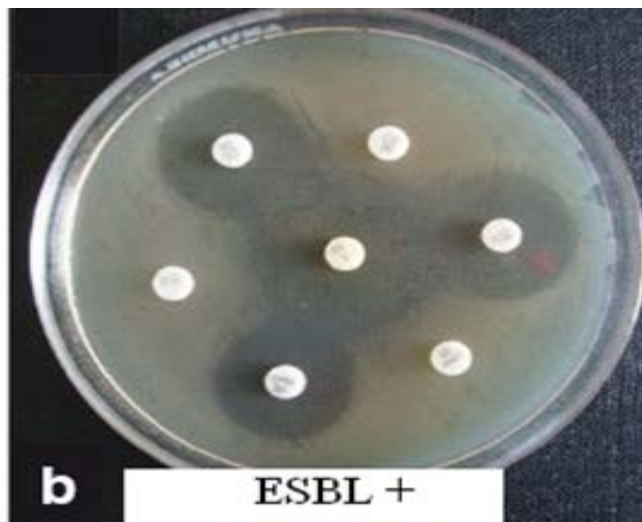
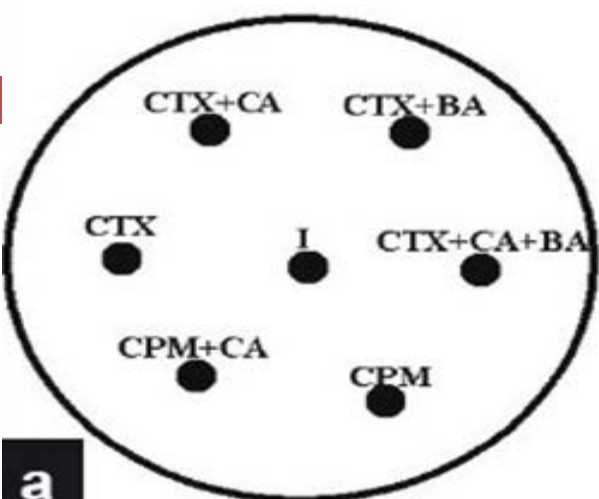
3. Antagonism



Test strain
E. cloacae - AmpC
Indicator strain
E. coli NCTC10418
Disk
Cefotaxim 30 μ g

4. Commercial kits - Rosco, Mast, AB Biodisk –E-Test etc.

Differentiation of ESBL, AmpC, ESBL+AmpC phenotypes using specific inhibitors



I-imipenem;
CA/CLA- clavulanic acid;
BA – boronic acid;
CPM-cefpirome (4th gen cephalosporin);
CTX-cefotaxime (3rd gen cephalosporin).

Carbapenem Resistant Enterobacteriaceae

- Involved clones different from adults, i.e., non-ST258 KPC-Enterobacteriaceae strains
- KPC_{MDR}, OXA-48, IMP, NDM and VIM
- Low, but increasing incidence of pediatric CRE infections over time, especially for *Enterobacter* species
- 50% mortality rate in pediatric hospitalized patients with bloodstream CRE infection (CDC, 2013)
- Children, especially infants-silently colonized for months to years

- **Risk factors in children**
 - medical comorbidities, prolonged hospitalizations, immunosuppression, prior antibiotic use, especially exposure to exposure to carbapenems and aminoglycosides, pulmonary and neurologic comorbidities, GI and pulmonary devices.

- Decreased sensitivity to carbapenems
- Therapeutic options for CRE
 - tigecycline carefully weighed for people <18 years
 - colistin and other polymyxins - optimal dosing issues for the pediatric population
 - oral fosfomicin -CRE bladder infection

- Terapia necontrolată cu antibiotice determină selectarea rezistenței atât la patogen, dar și la flora comensală. Acest lucru afectează mediul de spital, dar și mediul înconjurător: personalul medical, ceilalți pacienți, familia (Bush, Bradford, 2020);
- Răspândirea rezistenței se poate realiza prin plasmide, transpozoni și integroni-epidemiologie genetică. TEM-1-prima beta lactamază descrisă în literatură în 1965 la un pacient din Grecia, la o tulpină de *E.coli*, s-a răspândit la > 70% dintre speciile de *Enterobacterales* 30% *Neisseria gonorrhoeae*.

- Majoritatea beta lactamazelor codificate de elementele mobile au originea în cromozomul bacterian al altor specii:
- Beta lactamazele SHV derivate din SHV-1 al cromozomului de *K. pneumoniae*;
- AmpC plasmidice exprimate în *K. pneumoniae* și *E. coli*, care sunt aproape identice cu AmpC cromozomal al complexului *Enterobacter cloacae* (ACT-1 și MIR-1), *Citrobacter freundii* (CMY), *Hafnia alvei* (ACC-1) și *Morganella morganii* (DHA-1);
- Cea mai frecvent întâlnită beta lactamază cu spectru extins, CTX-M, își are originea în *Kluyvera* spp (Bradford, 2001).

- **Beta lactamaza AmpC**

- **Apartține clasei Ambler C și grupul funcțional 1 clasificarea Bush Jacoby Medeiros;**
- **Conferă rezistență la: peniciline, oxyimino cefalosporine: Ceftazidima, Cefotaxima, Ceftriaxona; monobactame și cefamicine-cefoxitina;**
- **Majoritatea nu sunt inhibate de clavulanata, sulbactam, tazobactam, dar sunt inhibate de: avibactam, relebactam, vaborbactam;**
- **Sunt inhibate de aztreonam (Bush et al., 1982);**
- **Frecvent sunt cromosomale la: *C. freundii*, *Enterobacter aerogenes*, *E.cloacae*, *Serratia marcescens* și sunt inductibile;**
- **Genele codificatoare se regăsesc pe plasmide.**

Acinetobacter spp.

- Purtător al genei intrinseci care codifică AmpC, *bla*_{ADC}, gena secvențiată prima dată în 2000;
- Rezistentă la cefalosporinele cu spectru extins prin supraexprimarea unui promotor localizat pe ISA *ba1*.

Burkholderia spp.

- Majoritatea tulpinilor-beta lactamaza cromosomala clasa A;
- Rezistentă la peniciline și cefalosporine de generația I;
- Pacienți cu fibroză chistică.

Pseudomonas aeruginosa

- AmpC codificată cromozomal – rezistența la aminopeniciline și cefalosporine;
- Mutațiile – hiperproducere de AmpC-rezistentă la ticarcilină, piperacilină, aztreonam și cefalosporine de generația 3 și 4;
- Modificări de permeabilitate ale porinelor- mecanism asociat;
- Rezistență la cefepima –mutații în gena care codifică AmpC și modificări în porine.

- **BLSE codificate plasmidic - Nomenclatură**
 - **1989 Bush grupul 2b (Bush, 1989) capabile să hidrolizeze antibioticele cu spectru extins, dar sunt inhibate de acidul clavulanic; inițial în 2010- *K. oxytoca*.**
- **Variante Inițiale TEM si SHV**
 - **SHV-2 1985 *K. ozaenae* izolată în Germania (Kliebe et al., 1985);**
 - **Aprilie 2020: 183 variante de TEM și 178 variante de SHV (<https://www.ncbi.nlm.nih.gov>).**

- **CTX-M**
 - **Raportate în 1980;**
 - **Răspândite din 2000; în prezent sunt cele mai comune BLSE (Peirano, Pitout, 2019);**
 - **Hidrolizează cefotaxima și ceftriaxona mai mult decât ceftazidime;**
 - **CTX-M15 hidrolizează ceftazidima la rate mai mari decât CTX M3, ceea ce explică larga răspândire (Poirel et al., 2002);**
 - **Frecvent la: *Klebsiella pneumoniae* și *E.coli*.**

- **Carbapenemaze**
- **SME**
 - *Serratia marcescens*;
 - rezistentă la carbapeneme, dar sensibile la ceftazidime;
 - rapoarte în Anglia, SUA, dar și restul Europei (Bush, 2020).
- **KPC**
 - 1990
 - rezistentă la: cefalosporine, monobactame carbapeneme; multirezistență.
- **OXA48, 23, 40**
 - hidrolizează penicilinele și carbapenemele, fiind slab inhibate de inhibitori, cu excepția avibactam.



AMX Amoxicillin

TIC Ticarcillin

CF Cephalotin

FOX Cefoxitin

CTX Cefotaxime

AMC Amoxicillin/
clavulanic acid

CAZ Ceftazidime

CFM Cefixime

GM Gentamicin

TM Tobramycin

NET Netilmicin

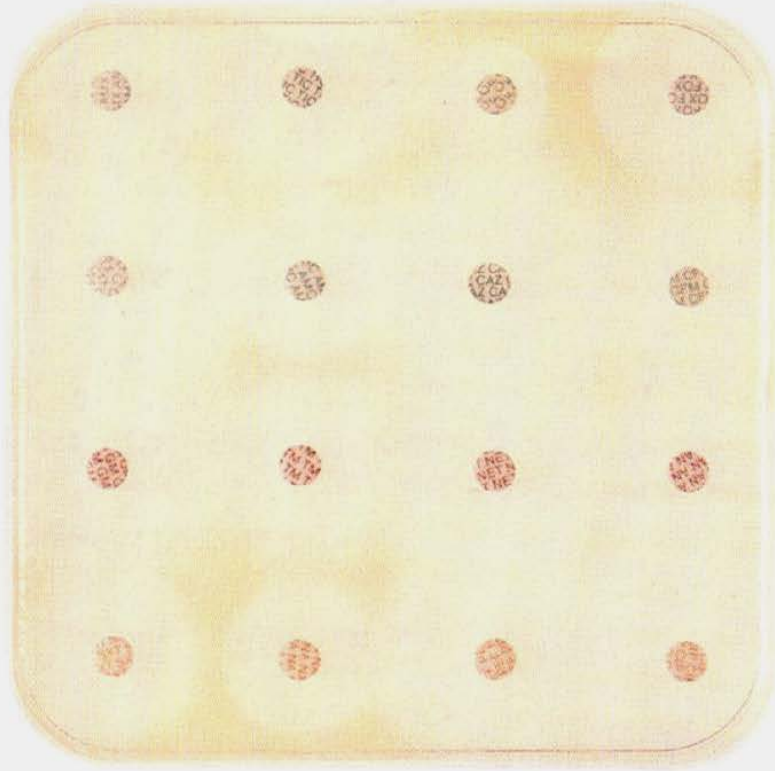
AN Amikacin

SXT Trimethoprim/
sulfamethoxazole

NA Nalidixic acid

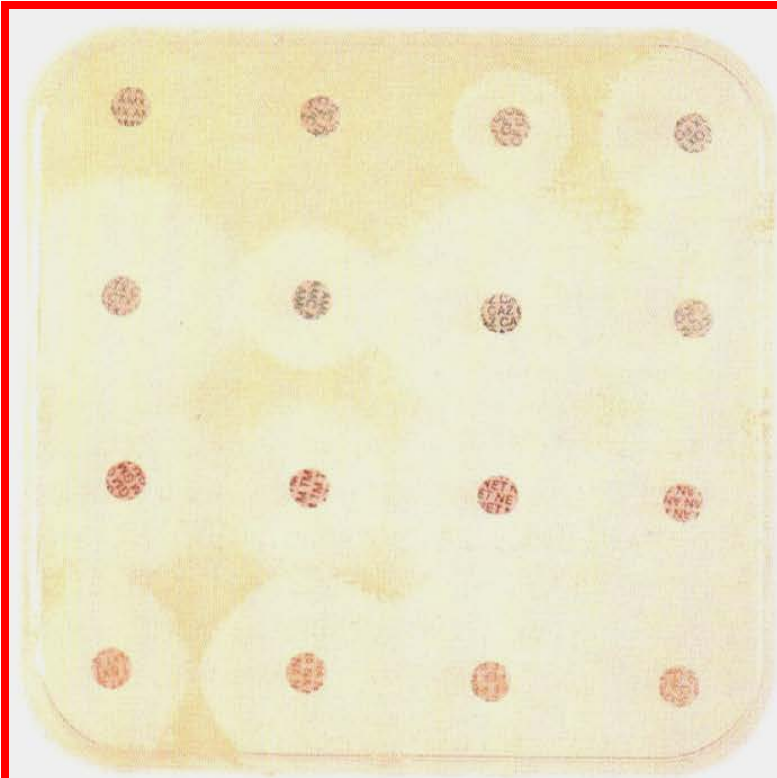
PEF Pefloxacin

CIP Ciprofloxacin



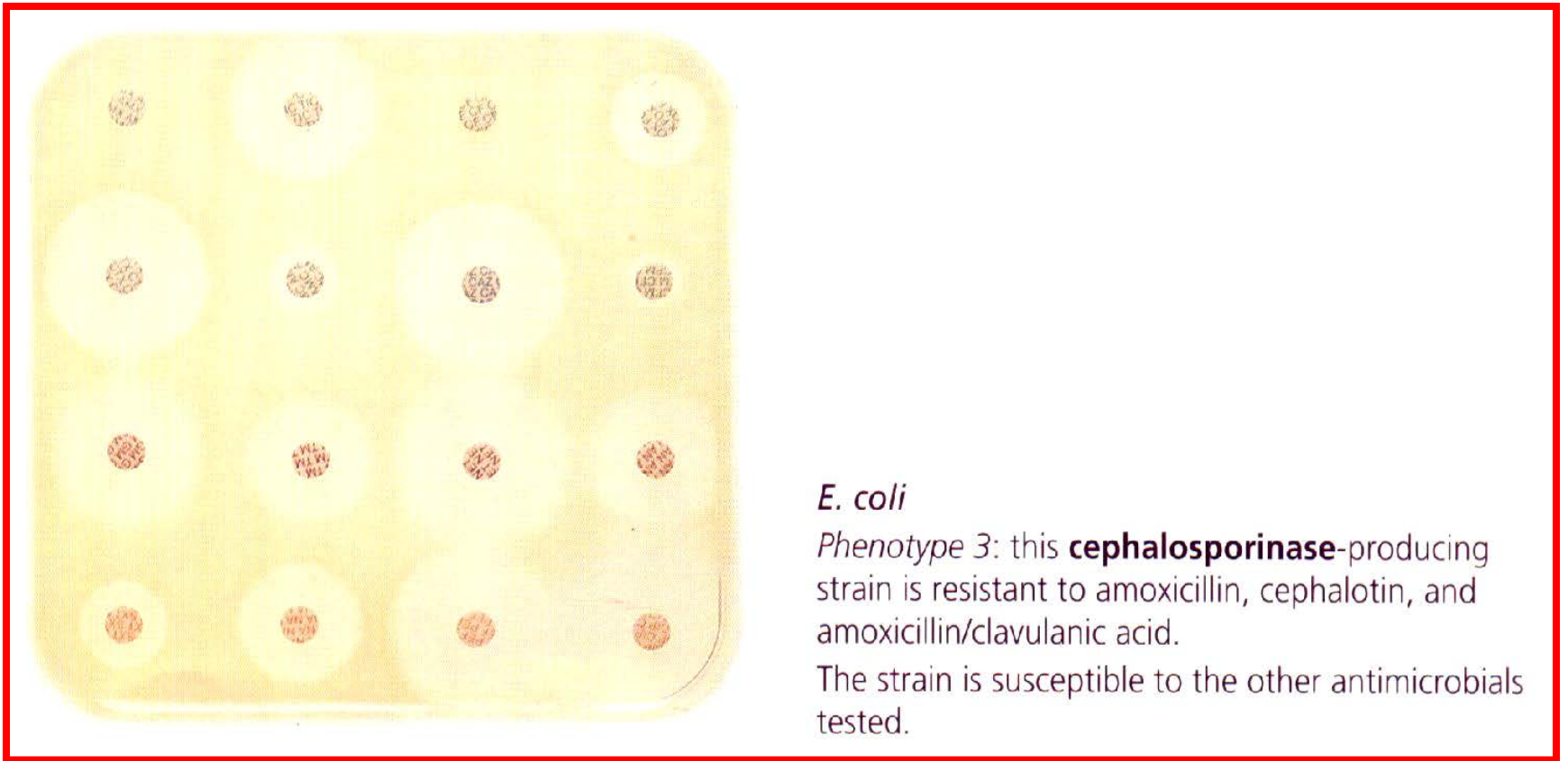
E. coli

Phenotype 1: this strain is **susceptible** to all the antimicrobials tested.



E. coli

Phenotype 2: this **penicillinase**-producing strain is resistant to amoxicillin and ticarcillin.



E. coli

Phenotype 3: this **cephalosporinase**-producing strain is resistant to amoxicillin, cephalotin, and amoxicillin/clavulanic acid.

The strain is susceptible to the other antimicrobials tested.



Rene Magritte
Belgian surrealism;
Son of man (1964)
Vizibilul invizibil

Bibliografie

1. Prof. Mariana Carmen Chifiriuc, *Antibiotic resistance in pediatric respiratory infections*, Department of Microbiology, Faculty of Biology, Division of Life, Environmental and Earth Sciences, Research Institute of the University of Bucharest; slide 3-20 accept verbal 12.10.22;19:42
Bradford P.A., *Extended spectrum beta lactamases in the 21 st century: characterization, epidemiology and detection of this important resistance threat*. 2001, Clin Microbiol Rev 14:933-951;

3. Bush K., Freudenberg JS, Sykes RB. *Interaction of azthreonam and related monobactams with beta lactamases from Gram negative bacteria.* 1982, *Antimicrob Agents and Chemother* 22;414-420.
<https://doi.org/10.1128/aac.22.3.414>;

4. Bush K. *Classification of beta lactamases: groups 1,2a,2b and 2b'.* *Antimicrob Agents Chemother*, 1989, 33:264270,
<https://doi.org/10.1128/aac.33.3.264>

5. Kliebe C, Niles BA, Meyer JF, Tolxdorff Neutzling RM et al. *Evolution of plasmid coded resistance to broad spectrum cephalosporins.* *Antimicrob Agents Chemother*, 1985, 28:302-307.<https://doi.org/10.1128/aac.28.2.302>

6. Peirano G., Pitout J. *Extended spectrum beta lactamase producing Enterobacteriaceae : update on molecular epidemiology and treatment options. Drugs, 2019, 79:1529-1541.*<https://doi.org/10.1007/s40265-019-01180-3>;
7. Poirel L, Gniadkowski M, Nordmann P. *Biochemical analysis of the ceftazidime hydrolyzing extended spectrum beta lactamase CTX-M15 and of its structurally related beta lactamase CTX M 3. 2002, J Antimicrob Chemother 50:1031-1034.*