

The Genetic Basis for a *Neisseria gonorrhoeae* Clinical Isolate That Contains *mtrR*₇₉ Mutation But Is Highly Susceptible to Antibiotics Effluxed by the Mtr Pump System

Jianzhong Huang¹ and Karen Ingraham¹

¹GlaxoSmithKline, Collegeville, PA, USA

e-mail: Karen.A.Ingraham@gsk.com

Introduction

- Neisseria gonorrhoeae* (NG) causes the sexually transmitted disease gonorrhoea
- NG possesses multiple drug efflux systems (including MtrCDE, FarAB-MtrE, MacAB-MtrE, MATE, and NorM) which play an important role in evading antibiotics in the treatment for gonorrhoea and in helping this pathogen to evade innate antimicrobial defenses during infection¹
- Expression of the MtrCDE efflux system is highly regulated by both *cis*- and *trans*-acting regulatory elements
- Mutations of *mtrR*₇₉ (a single T base pair [bp] deletion) and *mtr*₁₂₀ (a C–T point mutation) in the promoter region between *mtrR* and *mtrCDE* are common and contribute to overexpression of the MtrCDE efflux pump, resulting in increased efflux² to multiple antibiotics, especially macrolides

Methods

- DNA amplification and sequencing:** The promoter regions of *mtrR* and *mtrCDE* were amplified by polymerase chain reaction before Sanger sequencing to identify mutations
- NG spot transformation:** 20µL of NG6 inoculum from a 24h plate was spotted onto a GC plate (2mM MgCl₂) and mixed with 1µg/10–20µL NG58 genomic DNA before ≥4h incubation (37°C; 5% CO₂). The transformation mix was selected on GC plates with various ciprofloxacin concentrations
- Susceptibility testing:** We used a modified fastidious broth microdilution method with 2X bacterial inoculum and a minimum inhibitory concentration (MIC) read ~48h after incubation at 37°C (5% CO₂)

Results

- Clinical isolate NG6, similar to the FA1090 strain, is highly susceptible to antibiotics (Table 1). *Mtr* promoter region sequence analysis revealed a single-bp deletion mutation, *mtrR*₇₉, in NG6, but not in FA1090, which can confer elevated efflux.² NG58B, a clinical isolate with elevated efflux, also contained the *mtrR*₇₉ mutation (Figure 1)

- We identified a new *cis*-acting control element in *mtrC* that can lead to a deletion of GC pair(s), resulting in a frameshift mutation to produce truncated MtrC and switch off the MtrCDE pump

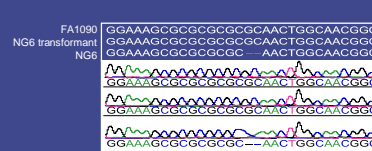
- Our results indicate that genotyping of the promoter region between *mtrR* and *mtrCDE* is insufficient to predict increased efflux phenotype
- Our results provide direct evidence that *N. gonorrhoeae* isolates with elevated efflux can genetically revert to low efflux via this *cis*-acting control element in *mtrC*

Figure 1. A single nucleotide deletion (*mtrR*₇₉) in the *mtr* promoter



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Figure 2. A GC deletion in *mtrC* resulting in a frameshift mutation



wt MtrC (predicted size of ~43 kDa)
 MAFYASKAMRAAALAAVALLSSCGKGGDAAQGGPAGREAPAPVGVVTV
 HPDPTVALVELPGRLESLRTADVRAQVGGIQRKLPQFGSYYRAQGLPYDSS
 RTELGLCSLRAQLBATGATLAKADADLRYKPLVYSDIKSKEYDPAATFAKSA
 EAGVYKAQAKSAGINLRSRITAPISFGIGSKVSEGLTLNAGDITVLAIRQT
 NPMVYVNTQSASEVMKRLRQIAEGKLLADGAIAGVGFDDGTVYPEKGRLLFA
 DPTVEESTGQITLRAAVSNDQNLMPGLYVRVLMQVQVADNFAVFPQAVTRGAK
 DTVIMVNAQGMERREVTVAQQGGTNWIVVITSLGKGDGVVVEGSIAGMTGAK
 KUTPKEWAPENDKARQALRGVOTASEAKPASEAK
 Truncated MtrC due to AGC (predicted size of ~13 kDa)
 MAFYASKAMRAAALAAVALLSSCGKGGDAAQGGPAGREAPAPVGVVTV
 HPDPTVALVELPGRLESLRTADVRAQVGGIQRKLPQFGSYYRAQGLPYDSS
 RTELGLCSLRA

Identical amino acid residuals are highlighted in yellow, and the extra residuals introduced by the frameshift mutation are in red.



Results

Table 1. Antimicrobial susceptibility of NG isolates and transformants

N. gonorrhoeae	Mutation in		Broth microdilution MIC* (µg/mL) at 48h						
	<i>mtrR</i>	<i>mtrC</i>	CIP	AZI	TET	PEN	SPT	CRO	NT
FA1090	wt	wt	0.004	0.03	0.125	NT	NT	NT	NT
NG58B [†] (donor)	<i>mtrR</i> ₇₉	wt	8	0.25	1–2	0.03–0.06 (4) [‡]	8–16	0.002–0.008 (0.06) [‡]	
NG6 (recipient)	<i>mtrR</i> ₇₉	A117 frameshift	0.002	0.03	0.5	0.125	16	0.002	
NG6 transformant #1	<i>mtrR</i> ₇₉	wt	0.004	0.25	2	0.5–1	16	0.004	
NG6 transformant #7	<i>mtrR</i> ₇₉	wt	0.004	0.25	2	0.5–1	16	0.004	

*MIC values are from two independent experiments, which showed significant (≥4-fold) increase in the transformants, relative to those from recipient (shown in blue font); [†]NG58B contains quinolone target mutations GyrA S91F D95G and ParC D86N; NG6 transformants #1 and #7 do not contain these mutations; [‡]The measured MIC values were well below published values³ (in parentheses), probably due to poor growth of NG58B in the broth medium. AZI, azithromycin; CIP, ciprofloxacin; CRO, ceftriaxone; PEN, penicillin; NT, not tested; SPT, spectinomycin; TET, tetracycline; wt, wild type

Table 2. Mutations in *mtr* promoter and *mtrC* contribute to efflux phenotype in NG

<i>mtr</i> _p	Mutation in		Predicted efflux phenotype
	<i>mtrR</i>	<i>mtrC</i>	
wt	wt (GCGCGCGCGCGC)	Low	
<i>mtrR</i> ₇₉ or <i>mtr</i> ₂₀	wt (GCGCGCGCGCGC)	Elevated	
<i>mtrR</i> ₇₉ or <i>mtr</i> ₂₀	Frameshift mutation	Low	
wt	Frameshift mutation	Low	

- PCR product analysis of *mtrCDE* from FA1090 and NG6 revealed no size differences between these two isolates, ruling out *mtrCDE* inactivation in NG6 from large insertion/deletion
- DNA sequence analysis of *mtrCDE* from NG6 identified a loss-of-function mutation ΔGC from a six-GC repeat (GCGCGCGCGCGC) in *mtrC*, causing an MtrC A117 frameshift mutation predicted to produce a truncated MtrC protein (Figure 2) and give the low efflux phenotype in NG6
- The six-GC repeat occurs four times in the FA1090 genome: 1327197 to 1327208 (*mtrC*); 1483171 to 1483182; 1758066 to 1758077; and 2039716 to 2039727
- Natural transformation of NG6 with wild-type *mtrC* and selection with ciprofloxacin generated transformants that corrected the ΔGC mutation (Figure 2), but still retained the *mtrR*₇₉ mutation (Figure 1) and restored the increased efflux phenotype (Table 1 and Table 2)
- A survey of the National Center for Biotechnology Information nucleotide collection database found that 5% (3/56) of NG genomes had frameshift mutations (ΔGC or ΔGCGC) in *mtrC*

References

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Disclosures

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