# **Original Article**

# Extended-spectrum $\beta$ -lactamases, transferable quinolone resistance, and virulotyping in extra-intestinal *E. coli* in Uruguay

Rafael Vignoli<sup>1</sup>, Virginia García-Fulgueiras<sup>1</sup>, Nicolás F Cordeiro<sup>1</sup>, Inés Bado<sup>1</sup>, Verónica Seija<sup>3,4</sup>, Paula Aguerrebere<sup>1</sup>, Gabriel Laguna<sup>1</sup>, Lucía Araújo<sup>1</sup>, Cristina Bazet<sup>4,5</sup>, Gabriel Gutkind<sup>6</sup>, Alejandro Chabalgoity<sup>2</sup>

<sup>1</sup> Departamento de Bacteriología y Virología, Instituto de Higiene, Facultad de Medicina, Universidad de la República, Montevideo, Uruguay

<sup>2</sup> Departamento de Desarrollo Biotecnológico, Instituto de Higiene, Facultad de Medicina, Universidad de la República, Montevideo, Uruguay

<sup>3</sup> Sección Bacteriología, Laboratorio Central, Hospital Pasteur, Administración de los Servicios de Salud del Estado, Larravide S/N, Montevideo, Uruguay

<sup>4</sup> Departamento de Laboratorio Clínico, área Microbiología, Hospital de Clínicas, Facultad de Medicina, Universidad de la República, Montevideo, Uruguay

<sup>5</sup> Laboratorio de Microbiología, Cooperativa Asistencial Médica del Este de Colonia, Colonia, Uruguay

<sup>6</sup> Cátedra de Microbiología, Facultad de Farmacia y Bioquímica, Universidad de Buenos Aires, Buenos Aires, Argentina

#### Abstract

Introduction: To characterize extended-spectrum  $\beta$ -lactamases (ESBLs) and plasmid-mediated quinolone resistance (PMQR) genes in *Escherichia coli* isolates obtained from extra-intestinal samples in three Uruguayan hospitals.

Methodology: Fifty-five ESBL-producing *E. coli* isolates were studied. Virulence genes, ESBLs, and PMQR genes were detected by polymerase chain reaction. ESBL-producing isolates were compared by pulsed-field gel electrophoresis. Multi-locus sequence typing was also performed on 13 selected isolates.

Results: Thirty-seven isolates harbored  $bla_{CTX-M-15}$  (67.3%), eight  $bla_{CTX-M-2}$  (14.6%), five  $bla_{CTX-M-14}$  (9.1%), three carried both  $bla_{CTX-M-2}$  and  $bla_{CTX-M-14}$ , one  $bla_{CTX-M-9}$ , and one  $bla_{CTX-M-8}$ . Among the CTX-M-15 producers, 92% belonged to sequence types ST131 and ST405, and carried aac(6')lb-cr as well. Isolates harboring  $bla_{CTX-M-2}$ ,  $bla_{CTX-M-14}$ ,  $bla_{CTX-M-8}$  were found to be genetically unrelated. Conclusions: The successful dissemination of CTX-M-15-producing *E.coli* isolates seems to be linked to the spreading of high-risk clones and horizontal gene transfer. A trade-off between carrying more antibiotic resistance and less virulence-related genes could partially account for the evolutionary advantages featured by successful clones.

Key words: virulence genes; ESBL; plasmid-mediated quinolone resistance.

J Infect Dev Ctries 2016; 10(1):043-052. doi:10.3855/jidc.6918

(Received 25 March 2015 - Accepted 13 July 2015)

Copyright © 2016 Vignoli *et al.* This is an open-access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

#### Introduction

Escherichia coli is a versatile pathogen, responsible for intestinal and extra-intestinal infections. Urinary tract infections (UTIs), sepsis, bacteremia, and meningitis are among the latter. The ability of E. coli to cause extra intestinal infections relies on a number of virulence factors that include adhesins, tissue-damaging effectors, and factors conferring resistance to the bactericidal activity of serum, among others [1,2].

Identification of extra-intestinal pathogenic *E. coli* strains (ExPEC) can be achieved by detecting at least two of the following genes: *papA*, *papC*, *sfa/foc*,

*afa/dra*, *iutA*, or *kpsM II* [3]. The occurrence of these genes is associated with strains belonging to phylogenetic groups B2 and D (associated with ExPEC), and less frequently with groups A and B1, corresponding to commensal *E. coli* strains [4].

The emergence of successful clones such as *E. coli* ST131 or clonal group A (CGA), both distributed worldwide, is a clear example of coexistence between antibiotic multiresistance and virulence factors [5-7].

Co-resistance in *E. coli* to oxyiminocephalosporins (especially mediated by ESBLs) and quinolones is an increasing event worldwide, particularly in Latin America [8]. Yet, the available information concerning

the dissemination of different clones and/or the presence of virulence factors is scarce in South America [9,10].

In Uruguay, the occurrence of *E. coli* strains producing PER-2, CTX-M-15, SHV-5, or CTX-M-2 ESBLs, as well as plasmid-mediated quinolone resistance genes (PMQR) linked to CTX-M-15, has already been reported [11-14]. We recently issued the first report in Latin America of a non-ExPEC strain harboring CTX-M-19 [15]; nevertheless there is no information so far that relates virulence factors in ExPEC, ESBLs, and PMQR among the circulating clones.

In the present work, we describe the ESBLs present in *E. coli* strains obtained from extra-intestinal samples from three hospitals in Uruguay.

# Methodology

#### Bacterial isolates

Fifty-five ESBL-producing extra-intestinal *E. coli* isolates were obtained from three Uruguayan hospitals located in two different cities, between 1 March 2010 and 28 February 2011. Each isolate was designated with letters E, C, or HP according to the hospital of origin. Thirty-six isolates were recovered from urine, seven from blood, five from skin lesions, two from abscesses, three from respiratory samples, and two from peritoneal fluid samples.

#### Antimicrobial susceptibility and detection of extendedspectrum $\beta$ -lactamases (ESBLs)

Bacterial identification and antibiotic susceptibility tests were performed using the VITEK2 Compact system (bioMérieux, Marcy l'Étoile, France). Every isolate displaying minimum inhibitory concentration (MIC) values to cefotaxime and/or ceftazidme and/or cepefime  $> 1 \mu g/mL$  underwent ESBL screening and confirmatory tests using ceftazidime and cefotaxime (30 µg) alone and combined with 10 µg of clavulanate. performed by disk diffusion as suggested by Clinical Laboratory Standards Institute (CLSI) guidelines [16]. MIC values to ceftazidime, cefotaxime, and ciprofloxacin were confirmed by Etest (bioMérieux, Marcy l'Étoile, France), following the manufacturer's instructions.

### Characterization of ESBL and PMQR genes

Isolates with positive ESBL-screening results were further analyzed by polymerase chain reaction (PCR) for the presence of  $bla_{CTX-M}$ ,  $bla_{TEM}$ ,  $bla_{PER-2}$ , and  $bla_{SHV}$  genes using specific primers [11]; PCR products were sequenced on both strands using the same primers.

The occurrence of genes *qnrA*, *qnrB*, *qnrC*, *qnrD*, *qnrS*, and *qepA* was also screened by PCR, in isolates with MIC to nalidixic acid > 2  $\mu$ g/mL [11]. Strains displaying MIC values to amikacin > 2  $\mu$ g/mL were analyzed for the presence of *aac(6')Ib* and the *cr* variant [11].

# *Multi-locus sequence typing (MLST), determination of CGA, and PFGE*

MLST was performed on selected isolates, representative of the most frequent pulsetypes, by gene amplification and sequencing of seven housekeeping genes (*adk*, *fumC*, *gyrB*, *icd*, *mdh*, *purA*, and *recA*), according to the protocol and primers specified at the *E. coli* MLST web site (http://mlst.ucc.ie/mlst/dbs/Ecoli).

*Xba*I PFGE analysis was performed as previously described [17]. Additionally, CGA was determined for isolates characterized by MLST and belonging to D by single-nucleotide phylogenetic group polymorphisms (SNPs) analysis of *fumC*, as described by Johnson et al. [18]. PFGE profiles were analyzed with BioNumerics fingerprinting software (Applied Maths, St-Martens-Latem, Belgium). Dendrograms were generated using the unweighted pair-group method (UPGMA) using arithmetic averages, based on the Dice similarity coefficient, with a 2.0% band position tolerance. PFGE profiles sharing > 85% similarity were considered to be genetically related [19].

# Transfer of ESBL, conjugation assays, and plasmid characterisation

Twenty-five isolates representative of all pulsetypes were selected for conjugation and plasmid characterization. Conjugation assays were carried out using rifampicin-resistant E. coli J53-2 strain as Transconjugants recipient. were selected on MacConkey agar plates (Oxoid, Basingstoke, UK) supplemented with rifampicin (150 mg/L) (Sigma-Aldrich St. Louis, USA) and ceftriaxone (1 mg/L) (Sigma-Aldrich St. Louis, USA) [20].

Conjugative plasmid incompatibility groups (Inc) and addiction systems were determined by PCR-based replicon-typing according to Carattoli *et al.* and Mnif *et al.*, respectively, using genomic DNA obtained from transconjugants as a template [21,22].

#### *Phylogenetic group and virulotyping*

Classification of isolates into phylogenetic groups was determined by PCR as previously described [4], based on the presence or absence of three DNA fragments: *chuA*–, yjaA, and Tspe4.C2. Additionally, the sub-grouping scheme proposed by Branger *et al.* [23] was used. Briefly, the absence of the three DNA fragments corresponds to subgroup A<sub>0</sub>, whereas the occurrence of only *yjaA* corresponds to A<sub>1</sub>; on the other hand, B2<sub>2</sub> corresponds to the occurrence of *chuA* and *yjaA*, and B2<sub>3</sub> is defined by the presence of the three DNA fragments. Finally, subgroup D<sub>1</sub> features the presence of only *chuA*, whereas subgroup D<sub>2</sub> features *chuA* and Tspe4.C2.

Detection of virulence-related genes was performed in two stages. First, all isolates underwent PCR virulence screening (VS) as previously described by Johnson *et al* [3].

Next, isolates carrying two or more of *papA*, *papC*, *sfa/foc*, *afa/dra*, *iutA*, or *kpsM* II genes (*i.e.*, VS+) were further examined by multiplex PCR for another 25 virulence-related genes, as described by Johnson *et al.* [1].

Figure 1. Main features of 55 E. coli strains studied in this work.

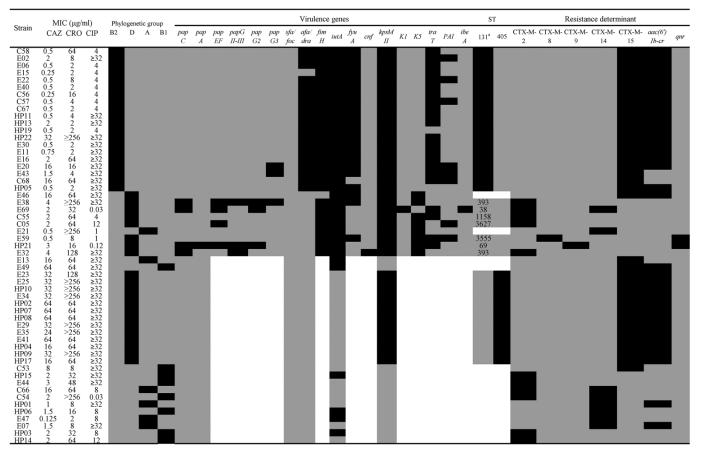
#### Results

The 55 isolates under study were phenotypically identified as ESBL-producers; however, the proportion of isolates resistant to cefotaxime or to ceftazidime was dissimilar.

According to the CLSI interpretative criteria, 100% of the isolates were resistant to cefotaxime (MIC50 = 64  $\mu$ g/mL, MIC90  $\geq$  256  $\mu$ g/mL), whereas only 40% (22) were resistant to ceftazidime (MIC50 = 2  $\mu$ g/mL, MIC90 = 32  $\mu$ g/mL). On the other hand, 50/55 (90.9%) were resistant to ciprofloxacin (Figure 1, Table 1).

The 55 ESBL-producing isolates were distributed in 12 different resistance patterns; (Table 1) nevertheless, 39/55 (70.9%) were clustered in three major profiles (Table 1).

All of the isolates were susceptible to carbapenems (data not shown).



Black: positive; grey: negative; white: not determined. a Sequencetype (ST) other than ST131 and ST405 were depicted in this column.

Detection of ESBLs and transferable quinolone resistance

A total of 58 ESBL genes were detected among the 55 ESBL-producing isolates. Thirty-seven isolates (67.3%) carried  $bla_{CTX-M-15}$ , eight (14.6%) carried  $bla_{CTX-M-2}$ , five (9.1%) carried  $bla_{CTX-M-14}$ , three carried both  $bla_{CTX-M-2}$  and  $bla_{CTX-M-14}$  (isolates C54, C66, and E69), one isolate carried  $bla_{CTX-M-8}$ , and another single isolate carried  $bla_{CTX-M-9}$  (Figure 1). Conversely, no  $bla_{TEM}$ ,  $bla_{SHV}$ , or  $bla_{PER-2}$  ESBL genes were detected.

Fifty of the ESBL-producing isolates were also resistant to ciprofloxacin, 35 of which harbored aac(6')Ib-cr (33 carried  $bla_{CTX-M-15}$  and two carried  $bla_{CTX-M-14}$ ). Additionally, qnrA was detected in a single isolate, along with  $bla_{CTX-M-9}$ . Furthermore, qnrB was detected along with  $bla_{CTX-M-8}$ ; however, in both cases, MIC values to ciprofloxacin were within the susceptibility range defined by the CLSI (Figure 1). No qnrC, qnrD, qnrS, or qepA genes were detected.

#### Clonal relationship

PFGE assays were performed on all ESBLproducing isolates; four of them were untypeable (three CTX-M-2 producers and one CTX-M-15 producer).

PFGE analysis of  $bla_{CTX-M-15}$ .bearing isolates indicated that they were clustered in five pulsetypes; two major pulsetypes, named A and B, accounted for 20 and 13 isolates, respectively, whereas pulsetypes C and D comprised two isolates each, and pulsetype E included a single isolate (Figure 2).

On the other hand, isolates carrying  $bla_{\text{CTX-M-2}}$ ,  $bla_{\text{CTX-M-14}}$ ,  $bla_{\text{CTX-M-9}}$ , and  $bla_{\text{CTX-M-8}}$  belonged to different pulsetypes, named F through O (Figure 2).

MLST analysis showed that all of the isolates in pulsetype A belonged to sequence type ST131, whereas isolates in pulsetype B belonged to ST405.

Isolates belonging to ST131 were detected in the three hospitals included in this study and were recovered from various sources (urine, blood, surgical wound infections, and peritoneal fluid).

Similarly, isolates belonging to ST405 were only recovered in two hospitals (both located in the capital city, Montevideo) from similar sources, including broncheoalveolar lavage, abscesses, and pleural fluid as well.

Table 1. Antibiotics resistance profiles of 55 ESBL producers E. coli and distribution of mainly clones.

Profile	Antibiotype	Ν	PT/ST/ BLEE (n)
1	OAkGNCS	6	B/405/CTX-M-15 <sup>(4)</sup> , A/131/CTX-M-15 <sup>(1)</sup> , NT/393/CTX-M-2 <sup>(1)</sup>
2	OAkGNC	1	I/393/CTX-M-2 <sup>(1)</sup>
3	OAkNCS	12	A/131/CTX-M-15 <sup>(11)</sup> , D/ND/CTX-M-15 <sup>(1)</sup>
4	OGNCS	12	B/405/CTX-M-15 <sup>(6)</sup> , A/131/CTX-M-15 <sup>(1)</sup> , K/ND/CTX-M-2 <sup>(1)</sup> , LL/ND/CTX-M-2,CTX-M-14 <sup>(1)</sup> , NT/ND/CTX-M-2 <sup>(1)</sup> , N/ND/CTX-M-14 <sup>(1)</sup> , D/ND/CTX-M-14 <sup>(1)</sup>
5	OGNC	2	E/ND/CTX-M-15 <sup>(1)</sup> , A/131/CTX-M-15 <sup>(1)</sup>
6	OGS	1	O/69/CTX-M-9 <sup>(1)</sup>
7	ONCS	15	B/405/CTX-M-15 <sup>(3)</sup> , A/131/CTX-M-15 <sup>(6)</sup> , NT/ND/CTX-M-2 <sup>(2)</sup> , C/ND/CTX-M-15 <sup>(1)</sup> , I/ND/CTX-M-2 <sup>(1)</sup> , G/ND/CTX-M-14 <sup>(1)</sup> , H/ND/CTX-M-14 <sup>(1)</sup>
8	ONC	2	F/1158/CTX-M-2 <sup>(1)</sup> , F/3627/CTX-M-2 <sup>(1)</sup>
9	ONS	1	J/ND/CTX-M-14 <sup>(1)</sup>
10	ON	1	M/3555/CTX-M-8 <sup>(1)</sup>
11	OG	1	C/38/CTX-M-2,CTX-M-14 <sup>(1)</sup>
12	0	1	L/ND/CTX-M-2,CTX-M-14 <sup>(1)</sup>

O: oxyiminocephalosporins; Ak: amikacin; G: gentamicin; N: nalidixic acid; C: ciprofloxacin; S: sulfamethoxazole-trimethoprim; PT: pulsetype; ST: sequence type; N: number of isolates displaying each resistance profile, (n) number of isolates belonging to each clone within a particular resistance profile.

<b>Table 2.</b> Correlation between MLST and <i>fu</i>	<i>umC</i> SNPs aimed at the detection of CGA in phylogenetic group D E. coli isolates

MLST	No. of isolates –	fumC SNPs for nucleotidic residues					
MLSI	No. of isolates –	270	271	288			
ST 38	1	А	Т	С			
ST 69	1	Α	Т	Т			
ST 393	2	G	С	С			
ST 405	13	G	С	С			
ST 1158	1	А	Т	С			
ST3555	1	G	С	С			
ST3627	1	А	Т	С			

Characters in boldface correspond to the only sequence type compatible with CGA, according to the SNP profile.

On the other hand, CTX-M-2-producing isolates were typed as ST393 (n = 2), ST38, ST1158, and ST3627, whereas CTX-M-9 and CTX-M-8-producing isolates were found to belong to ST69 and ST3555, respectively.

#### Determination of clonal group A

Phylogenetic group D included 21 isolates, 13 of which belonged to pulsetype B and ST405. Furthermore, another 6 isolates underwent MLST studies. Sequence analyses of *fumC* aimed at the detection of CGA showed that only a single isolate (HP21), belonging to ST69 and carrying  $bla_{CTX-M}$ - J Infect Dev Ctries 2016; 10(1):043-052.

<sub>9</sub>/qnrA, displayed the SNP C288T (Table 2).

#### Transfer of ESBL genes and plasmid characterization

Twenty-five isolates representative of each pulsetype, as well as the four untypeable isolates, were selected for conjugation assays: seven isolates harboring  $bla_{\text{CTX-M-15}}$ , eight  $bla_{\text{CTX-M-2}}$ , five  $bla_{\text{CTX-M-14}}$ , three isolates carrying both  $bla_{\text{CTX-M-2}}$  and  $bla_{\text{CTX-M-14}}$ , one carrying  $bla_{\text{CTX-M-9}}$ , and one with  $bla_{\text{CTX-M-8}}$  (Table 3).

Figure 2. PFGE patterns and main features of ESBL-producing ExPEC strains.

0				U					
-100		Strain	Sample	Pulsotype	ST	ESBL	PMQR	FG	Virulence profile
***		E13	urine	С		CTX-M-15		A <sub>1</sub>	nd
79.0		E69	blood	С	ST38	CTX-M-2/14	-	D <sub>1</sub>	papC,papEF,papGII,fimH,iutA,kpsMII,K1,traT,ibeA
		C05	urine	F	ST3627	CTX-M-2	-	D <sub>1</sub>	papEF,fimH,iutA,kpsMII,K5,PAI
785	MÉTE TETTÉTÉ TETÖTÖTÖTÖT	C55	urine	F	ST1158	CTX-M-2	-	D <sub>1</sub>	fimH,iutA,kpsMII,k5,traT
		E49	urine	D		CTX-M-15	aac(6')lb-cr	A <sub>1</sub>	nd
76.0 92.3		HP06	urine	D		CTX-M-14	-	A <sub>1</sub>	nd
75.0 00		E47	urine	G		CTX-M-14	-	B1 <sub>1</sub>	nd
734 <u>800</u>		HP01	urine	н		CTX-M-14	aac(6')lb-cr	A <sub>1</sub>	nd
721		E46	blood	E		CTX-M-15	aac(6')lb-cr	D2	iutA, fyuA, kpsMII,K5,
		E38	urine	1	ST393	CTX-M-2	-	D <sub>1</sub>	papC,papEF, papGII-III,papGII,papGIII, fimH,iutA,fyuA,kpsMII,K5
69.6 88.2		HP15	urine	1		CTX-M-2	-	B11	nd
		E21	WE	J		CTX-M-14		A <sub>1</sub>	fimH,iutA,kpsMII,k5
		C68	urine	A		CTX-M-15	-	B23	afa/dra, fimH, iutA, kpsMII, traT, PAI
		HP13	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
		C57	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT, PAI
		E11	urine	A	ST131	CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
		E20	urine	A	ST131	CTX-M-15	aac(6')lb-cr	B23	papGIII, afa/dra, fimH, iutA,fyuA, kpsMII, traT, PAI
97.1		E22	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMll, traT,PA/
9094.1		E43	urine	A	ST131	CTX-M-15	aac(6')lb-cr	B23	papGIII, afa/dra, fimH, iutA,fyuA, kpsMII, traT,PA/
		C58	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
910 94.0		C67	urine	А		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
**		E02	blood	A	ST131	CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT, PAI
192		E06	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
-		C56	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT, PAI
958		HP05	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMll
		HP19	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMll
		E15	WE	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
94.8		E30	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII, traT
80.4 97.4		E40	SWI	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII,
- st		E16	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII,
L		HP11	urine	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII,
76.2		PA02	peritoneal	A		CTX-M-15	aac(6')lb-cr	B23	afa/dra, fimH, iutA,fyuA, kpsMII,
		E44	peritoneal	К		CTX-M-2	-	B11	nd
70.7		C54	urine	L		CTX-M-2/14	-	B11	nd
5		C66	blood	LL		CTX-M-2/14	-	A <sub>1</sub>	nd
		E59	urine	M	ST3555	CTX-M-8	qnrB	D <sub>1</sub>	fimH, iutA,fyuA, kpsMII,K5,traT, PAI,
77.8		E07	urine	Ν		CTX-M-14		A <sub>1</sub>	nd
ſ		HP21	blood	0	ST69	CTX-M-9	qnrA	D <sub>1</sub>	papC,papA,papEF, papGII-III,papGII,fimH,iutA,kpsMII,k5,traT
		E34	urine	В		CTX-M-15	aac(6')lb-cr	D <sub>2</sub>	nd
		E35	BAL	В	ST405	CTX-M-15	aac(6')lb-cr	$D_2$	nd
		HP17	urine	В		CTX-M-15	aac(6')lb-cr	$D_2$	nd
		HP02	pleural fluid	в		CTX-M-15	aac(6')lb-cr	D <sub>2</sub>	nd
		HP07	blood	в		CTX-M-15	aac(6')lb-cr	$D_2$	nd
74.7 97.6		HP08	TA	В		CTX-M-15	aac(6')lb-cr	D <sub>2</sub>	nd
		HP10	Abd. Absc	В	ST405	CTX-M-15	aac(6')lb-cr	D <sub>2</sub>	nd
966		E23	urine	В		CTX-M-15	aac(6')lb-cr		nd
94.6		E25	blood	в		CTX-M-15	aac(6')Ib-cr		nd
		E29	urine	В		CTX-M-15	aac(6')lb-cr		nd
91.0	11 11 11 1 1 111111 1111 111	E41	urine	в		CTX-M-15	aac(6')lb-cr		nd
8.5		HP04	SWI	в		CTX-M-15	aac(6')lb-cr	_	nd
		HP09	skin absc	в		CTX-M-15	aac(6')lb-cr	$D_2$	nd

PMQR: plasmid mediated quinolone resistance; PG: phylogenetic group; VS: virulence screening; WE: wound exudate; SWI: surgical wound infection; TA: tracheal aspirate; BAL: bronchoalveolar lavage; abd. absc: abdominal abscess.

Table 3. Main features of the 25 selected extra-intestinal	pathogenic E. coli and	transconiugants strains under study

									strains under study
Strain	Resistance genes	Pulsetype	ST	CTX	CAZ	CIP	AK	Inc	Addiction system
C05	bla <sub>CTX-M-2</sub>	F	3627	64	2	12	4		
E7	bla <sub>CTX-M-14</sub> /aac(6')Ib-cr	Ν		8	1.5	≥ 32	16		
TcE7	bla <sub>CTX-M-14</sub>	-	-	8	1.5	0.03	0.38	I1	pndAC
E13	bla <sub>CTX-M-15</sub>	С		64	16	$\geq$ 32	4		
TcE13	bla <sub>CTX-M-15</sub>	-	-	24	8	.06	1	F -FIA-FIB	vagCD/pemKI/ccdAB/srnBC
E20	bla <sub>CTX-M-15</sub> / aac(6')Ib-cr	А	131	16	16	$\geq$ 32	8		
TcE20	bla <sub>CTX-M-15</sub> / aac(6')Ib-cr	-	-	16	8	0.12	2	F-FIA-FIB	vagCD/pemKI/ccdAB/srnBC
E21	bla <sub>CTX-M-14</sub>	J		> 256	0.5	1	3		
TcE21	$bla_{\text{CTX-M-14}}$	-	-	16	2	0.015	0.5	I1	pndAC
E32	bla <sub>CTX-M-2</sub>	NT	ST393	128	4	$\geq$ 32	$\geq$ 32		
E35	bla <sub>CTX-M-15</sub> / aac(6')Ib-cr	В	ST405	> 256	24	$\geq$ 32	6		
E38	bla <sub>CTX-M-2</sub>	Ι	ST393	> 256	4	$\geq$ 32	24		
E44	bla <sub>CTX-M-2</sub>	Κ		48	3	$\geq$ 32	1,5		
TcE44	bla <sub>CTX-M-2</sub>	-	-	32	3	0.015	0.125	F-FIB, A/C	hok-sok
E46	bla <sub>CTX-M-15</sub> / aac(6')Ib-cr	Е		64	16	$\geq$ 32	8		
E47	bla <sub>CTX-M-14</sub>	G		2	0.125	8	3		
TcE47	bla <sub>CTX-M-14</sub>	-	-	6	1	0.015	0.25	К, В/О	
E49	bla <sub>CTX-M-15</sub> / aac(6')Ib-cr	D		64	64	$\geq$ 32	16		
C53	bla <sub>CTX-M-15</sub>	NT		8	8	$\geq$ 32	32		
C54	bla <sub>CTX-M-2/14</sub>	L		> 256	2	0.03	3		
TcC54	bla <sub>CTX-M-14</sub>	-	-	32	6	0.015	0.35	I1	pndAC
C55	bla <sub>CTX-M-2</sub>	F	ST1158	64	2	4	3		
E59	bla <sub>CTX-M-8</sub> /qnrB	М	ST3555	8	0.5	1	6		
TcE59	bla <sub>CTX-M-8</sub>	-	-	2	0.75	0.015	0.125	I1	pndAC
C66	bla <sub>CTX-M-2/14</sub>	LL		64	16	8	2		
TcE66	bla <sub>CTX-M-14</sub>	-	-	12	1.5	0.015	0.25	F I1	pndAC/ hok-sok
E69	bla <sub>CTX-M-2/14</sub>	С	ST38	32	2	0.03	4		
TcE69	bla <sub>CTX-M-14</sub>	-	-	16	1.5	0.015	0.38	F I1	pndAC/ hok-sok
HP01	bla <sub>CTX-M-14</sub> / aac(6')Ib-cr	Н	Nd	8	1	$\geq$ 32	1		
TcHP01	bla <sub>CTX-M-14</sub>			8	2	0.015	0.25	I1	pndAC
HP03	bla <sub>CTX-M-2</sub>	NT	Nd	32	2	8	2		
HP06	bla <sub>CTX-M-14</sub>	D	Nd	16	1.5	8	2	I1	
TcHP06	bla <sub>CTX-M-14</sub>	-	-	8	1.5	0.008	0.125		pndAC
HP13	bla <sub>CTX-M-15</sub>	А	ST131	2	2	$\geq$ 32	16		
HP14	bla <sub>CTX-M-2</sub>	NT	Nd	64	2	12	4		
HP15	bla <sub>CTX-M-2</sub>	Ι	Nd	32	2	$\geq$ 32	4		
HP21	bla <sub>CTX-M-9</sub> /qnrA	О	ST69	16	3	0.12	8		
TcHP21	bla <sub>CTX-M-9</sub>	-	-	4	1	0.03	0.25	HI1-HI2	

Tc: transconjugant; NT: untypeable; Nd: not determined; CTX: cefotaxime; CAZ: ceftazidime; CIP: ciprofloxacin; AK: amikacin; Inc: incompatibility group; Incompatibility group and addiction systems only were detected in transconjugants.

Thirteen transconjugants were obtained. All of the  $bla_{\text{CTX-M-14}}$ ,  $bla_{\text{CTX-M-9}}$ , and  $bla_{\text{CTX-M-8}}$  genes were encoded in conjugative plasmids; however, only two  $bla_{\text{CTX-M-15}}$  alleles (carried by isolates E13 and E20, pulsetypes A and C, respectively) as well as a single  $bla_{\text{CTX-M-2}}$  allele (isolate E44, pulsetype K) were encoded in conjugative plasmids.

Seven of the  $bla_{CTX-M-14}$  alleles were encoded in IncII plasmids featuring a *pndAC* addiction system. In contrast, plasmids carrying  $bla_{CTX-M-2}$  (IncF-FIB, IncA/C) and  $bla_{CTX-M-9}$  (IncHI1-HI2) featured no addiction systems. Nevertheless, both of the  $bla_{CTX-M-15}$ -bearing plasmids featured several addiction systems, specifically *vagCD*, *pemKI*, *ccdAB*, and *srnBC* (Table 3).

#### *Phylogenetic group and virulotyping of ESBLproducing strains*

Forty-one of the 55 ESBL-producing isolates belonged to phylogenetic groups B2 and D (B2<sub>3</sub> = 20; D<sub>2</sub> = 13; D<sub>1</sub> = 8). However, only 29 of such isolates were VS+, namely the twenty strains belonging to phylogenetic group B2<sub>3</sub> (pulsetype A, ST131, CTX-M-15 producers), eight isolates belonging to phylogenetic group D<sub>1</sub>, and one isolate belonging to phylogenetic group A<sub>1</sub> (Figure 1).

Isolates belonging to phylogenetic group  $D_1$  were found to be genetically unrelated; five such isolates were CTX-M-2 producers and were typed as ST393 (n = 2), ST38, ST1158, and ST3627. Other  $D_1$  isolates included a CTX-M-9 and QnrA-producer (ST69), as well as another isolate belonging to the new sequence type ST3555, which harbored both *qnrB* and *bla*<sub>CTX-M-</sub> <sup>8.</sup>

Isolates carrying large numbers of virulence genes (between 9 and 10), namely isolates E38, E69, and HP21, belonged to phylogenetic group  $D_1$ ; nevertheless, they were not among the most disseminated strains.

On the other hand, the 14 isolates belonging to phylogenetic group  $D_2$  and ST405 were VS-.

## Discussion

In the present study, the 55 ESBL-producing isolates were distributed in 12 different resistance patterns, the most frequent being oxyiminocephalosporins / nalidixic acid / ciprofloxacin / sulfamethoxazole-trimethoprim (n = 15), oxyiminocephalosporins / gentamicin / nalidixic acid / ciprofloxacin / sulfamethoxazole-trimethoprim (n = 12), and oxyiminocephalosporins / amikacin /

nalidixic acid / ciprofloxacin / sulfamethoxazoletrimethoprim (n = 12).

Co-resistance to fluoroquinolones was observed in 90.9% (50/55) of the studied isolates; co-resistance to sulfamethoxazole trimethoprim was detected in 85.5% (47/55), co-resistance to gentamicin in 41.8% (23/55), and co-resistance to amikacin in 34.5% (19/55).

Recent studies have reported susceptibility results and molecular characterization of *E. coli* isolates in India, albeit with some differences; while coresistance levels to sulfamethoxazole-trimethoprim and to ciprofloxacin were similar (81.6% and 93.9%, respectively), co-resistance to amikacin was higher (57.1%), and resistance to carbapenems was even detected (20.4%) [24].

Sixty percent of the isolates (33/55) were clustered in two clones, namely B2<sub>3</sub>-ST131 and D<sub>2</sub>-ST405. Accordingly, these clones accounted for 56.5% of coresistance to gentamicin (13/23 isolates) and 66% of co-resistance to ciprofloxacin (33/50); however, they were responsible for 84.2% of co-resistance to amikacin (16/19 isolates).

Although both clones have been widely reported worldwide [25-28], their presence in South America is still scarcely reported [9,10,29].

In the present study, 41/55 isolates (74.5%) corresponded to phylogenetic groups B2 and D; nevertheless, only 28 (50.9%) could be classified as ExPEC based on VS. Additionally, all of the isolates corresponding to phylogenetic group B2 belonged to ST131. Our results are in accordance with those of Brisse *et al.*, who found that CTX-M-production in ExPEC was exceptional in non-ST131 B2 strains [30]. Conversely, Roy *et al.* recently reported that over a third of CTX-M-15-producing *E. coli* B2 strains did not belong to ST131 [24]. These discrepancies highlight the importance of knowing the local epidemiology, in order to determine the circulating clones in each region.

Multiresistant clone B2<sub>3</sub>-ST131 has been previously associated with a high number of virulence genes [27,31]; in this work, the number of virulence genes associated with this clone was between five and eight. Regarding the clone D<sub>2</sub>-ST405, none of the antibiotic-resistant isolates could be classified as ExPEC (based on VS). Conversely, only a single isolate belonging to CGA was detected, which suggests that this group does not constitute a problem, at least within the studied hospitals. This isolate, however, harbored a large number (10) of virulencerelated genes. Accordingly, this ST69 isolate (HP21) along with isolates E38 and E69 (ST393 and ST38,

respectively) carried large numbers of virulence genes and were not disseminated.

In this sense, the multiresistant clone B2<sub>3</sub>-ST131 could have reached an optimal balance between virulence and antibiotic resistance, allowing it to competitively colonize, to cause infection, and to disseminate among different hosts.

On the other hand, we recently reported that a group of non-ExPEC *E. coli* isolates (based on VS) formed intracellular niches in urothelial cells; this finding was linked to the occurrence or recurrent UTIs [32]. Taking those findings into consideration, it is possible that the diversity of virulence-related genes in ExPEC is greater than the VS employed during the present study.

With respect to ESBL production, this is the first study to show a clear predominance in our region of CTX-M-15 in E. coli strains (60%), followed by CTX-M-2 (20%). Until recently, and particularly in Uruguay, the most frequently detected ESBL (in varying proportions) was CTX-M-2 [12,33] CTX-M-15 was first detected in 2006 in a general hospital [13], and in 2009, this ESBL was detected in the pediatric hospital [11]. However, until now, there was no information on the sequence types of ESBL-producing E. coli strains. The presence of CTX-M-15-producing pandemic clones such as ST131 and ST405 has already been reported in Colombia [10] and Argentina (ST131) [9]; nevertheless, there is no information about the sequence types associated with other CTX-M enzymes in our continent.

The CTX-M-9 and QnrA1-producing strain was typed as ST69, which has already been associated with ESBL and non-ESBL-producing strains [34,35]. In our study, this was the only isolate that belonged to CGA. Strains belonging to CGA have been widely reported around the world, even in South America [7,18]; nevertheless, in general, there is no information regarding sequence types of CGA strains.

On the other hand, CTX-M-2-producing strains were associated with various sequence types, which included clones already linked to CTX-M enzymes such as ST38 and ST393 [25,34-36]. Furthermore, CTX-M-2 was detected in clones so far unrelated with antibiotic resistance, *i.e.*, ST1158 (allelic profile 18, 3, 17, 6, 5, 5, 4) and in the novel sequence type ST3627 (allelic profile 13, 26, 39, 25, 5, 31, 19). Additionally, the isolate carrying *qnrB/bla*<sub>CTX-M-8</sub> also belonged to the novel sequence type ST3555 (allelic profile 101, 19, 97, 108, 26, 79, 19).

CTX-M-8 was first described in Brazil in 2000, but was only recently detected in other South American countries including Uruguay and Argentina [9,11]. Additionally, this ESBL seems to be slowly disseminating in Europe, Africa, and Asia as well [37-39].

In our country, the dissemination of CTX-M-15 may be the result of two mechanisms: either the dispersion of successful clones such as ST131 and ST405, or the acquisition of conjugative plasmids featuring multiple addiction systems.

On the other hand, the expansion of  $bla_{CTX-M-14}$  could be mainly due to cross-species dissemination of IncI1 plasmids featuring the *pndAC* addiction system. In this regard, we recently reported the occurrence of  $bla_{CTX-M-14}$  in an isolate of *Salmonella enterica* serovar Enteritidis, encoded in a similar plasmid [40]. Additionally, in our continent, IncI1 plasmids harboring  $bla_{CTX-M-14}$  and  $bla_{CTX-M-19}$  (both belonging to group 4 in the CTX-M family) have already been described in *E. coli* strains in our country and in Bolivia [14,36].

Furthermore, only one of the 11 isolates encoding  $bla_{\text{CTX-M-2}}$  carried such gene in a conjugative plasmid. Incidentally, such plasmid had no addiction systems.

Recently, Bartoloni *et al.*, in a 20-year study, reported a shift in the epidemiology of ESBLs in Bolivia and Perú, describing an increase in the prevalence of CTX-M-15 and CTX-M-14, and a decrease of CTX-M-2 [41]. A similar scenario was also described in Argentina [9].

## Conclusions

In this study, we propose some elements that could account for this epidemiologic change. For instance, the association of CTX-M-15 with successful clones or with plasmids carrying addiction systems, and/or the dissemination  $bla_{\text{CTX-M-14}}$  in conjugative IncII plasmids with *pndAC*, contrasts with the small proportion of  $bla_{\text{CTX-M-2}}$ -encoding conjugative plasmids lacking detectable addiction systems.

Additionally, the link between CTX-M-15 (which confers higher resistance levels to ceftazidime) and PMQR such as aac(6')Ib-cr, creates better chances for co-selection of those isolates carrying both resistance mechanisms, in relation to those carrying only CTX-M-2.

The fact that these changes in the epidemiology of ESBLs go hand in hand with changes in genes conferring resistance to other antimicrobials (such as PMQR) highlights the importance of molecular and epidemiological studies.

#### Acknowledgements

This work was partially supported by grants from CSIC (Comisión Sectorial de Investigación Científica, Uruguay) to R.V.

#### References

- 1. Johnson JR, Stell AL (2000) Extended virulence genotypes of *Escherichia coli* strains from patients with urosepsis in relation to phylogeny and host compromise. J Infect Dis 181: 261-272.
- Ron EZ (2010) Distribution and evolution of virulence factors in septicemic *Escherichia coli*. Int J Med Microbiol 300: 367-370.
- Johnson JR, Kuskowski MA, Owens K, Gajewski A, Winokur PL (2003) Phylogenetic origin and virulence genotype in relation to resistance to fluoroquinolones and/or extended-spectrum cephalosporins and cephamycins among *Escherichia coli* isolates from animals and humans. J Infect Dis 188: 759-768.
- 4. Clermont O, Bonacorsi S, Bingen E (2000) Rapid and simple determination of the *Escherichia coli* phylogenetic group. Appl Environ Microbiol 66: 4555-4558.
- Peirano G, Pitout JD (2010) Molecular epidemiology of *Escherichia coli* producing CTX-M beta-lactamases: the worldwide emergence of clone ST131 O25:H4. Int J Antimicrob Agents 35: 316-321.
- Woodford N, Turton JF, Livermore DM (2011) Multiresistant Gram-negative bacteria: the role of high-risk clones in the dissemination of antibiotic resistance. FEMS Microbiology Reviews 35: 736-755.
- Johnson JR, Menard ME, Lauderdale TL, Kosmidis C, Gordon D, Collignon P, Maslow JN, Andrasevic AT, Kuskowski MA (2011) Global distribution and epidemiologic associations of *Escherichia coli* clonal group A, 1998-2007. Emerg Infect Dis 17: 2001-2009.
- Villegas MV, Blanco MG, Sifuentes-Osornio J, Rossi F (2011) Increasing prevalence of extended-spectrum-betalactamase among Gram-negative bacilli in Latin America-2008 update from the Study for Monitoring Antimicrobial Resistance Trends (SMART). Braz J Infect Dis 15: 34-39.
- Sennati S, Santella G, Di Conza J, Pallecchi L, Pino M, Ghiglione B, Rossolini GM, Radice M, Gutkind G (2012) Changing epidemiology of extended-spectrum betalactamases in Argentina: emergence of CTX-M-15. Antimicrob Agents Chemother 56: 6003-6005.
- Ruiz SJ, Montealegre MC, Ruiz-Garbajosa P, Correa A, Briceno DF, Martinez E, Rosso F, Munoz M, Quinn JP, Canton R, Villegas MV (2011) First Characterization of CTX-M-15-Producing *Escherichia coli* ST131 and ST405 Clones Causing Community-Onset Infections in South America. J Clin Microbiol 49: 1993-1996.
- Garcia-Fulgueiras V, Bado I, Mota MI, Robino L, Cordeiro NF, Varela A, Algorta G, Gutkind G, Ayala JA, Vignoli R (2011) Extended-spectrum b-lactamases and plasmidmediated quinolone resistance in enterobacterial clinical isolates in the paediatric hospital of Uruguay. J Antimicrob Chemother 66: 1725-1729.
- Bado I, Cordeiro NF, Robino L, Garcia-Fulgueiras V, Seija V, Bazet C, Gutkind G, Ayala JA, Vignoli R (2010) Detection of Class 1 and 2 Integrons, Extended-Spectrum β-lactamases and qnr alleles in Enterobacterial Isolates From the Digestive Tract of Intensive Care Unit Inpatients. Int J Antimicrob Agents 36: 453-458.

- Cordeiro NF, Robino L, Medina J, Seija V, Bado I, Garcia V, Berro M, Pontet J, Lopez L, Bazet C, Rieppi G, Gutkind G, Ayala JA, Vignoli R (2008) Ciprofloxacin-resistant enterobacteria harboring the *aac(6')-Ib-cr* variant isolated from feces of inpatients in an intensive care unit in Uruguay. Antimicrob Agents Chemother 52: 806-807.
- 14. Vignoli R, Varela G, Mota MI, Cordeiro NF, Power P, Ingold E, Gadea P, Sirok A, Schelotto F, Ayala JA, Gutkind G (2005) Enteropathogenic *Escherichia coli* strains carrying genes encoding the PER-2 and TEM-116 extended-spectrum beta-lactamases isolated from children with diarrhea in Uruguay. J Clin Microbiol 43: 2940-2943.
- García-Fulgueiras V, Bado I, Cordeiro N, Algorta G, Vignoli R (2013) First report of the ceftazidimase CTX-M-19 in South America. New Microbes and New Infections 1: 44-47.
- Clinical and Laboratory Standards Institute (2011) Performance standards for antimicrobial susceptibility testing; twenty-first informational supplement. Document M100-S21. Wayne, PA: CLSI.
- 17. Mora A, Lopez C, Dabhi G, Blanco M, Blanco JE, Alonso MP, Herrera A, Mamani R, Bonacorsi S, Moulin-Schouleur M, Blanco J (2009) Extraintestinal pathogenic *Escherichia coli* O1:K1:H7/NM from human and avian origin: detection of clonal groups B2 ST95 and D ST59 with different host distribution. BMC Microbiol 9: 132.
- Johnson JR, Owens K, Manges AR, Riley LW (2004) Rapid and Specific Detection of Escherichia coli Clonal Group A by Gene-Specific PCR. J Clin Microbiol 42: 2618-2622.
- Janatova M, Albrechtova K, Petrzelkova KJ, Dolejska M, Papousek I, Masarikova M, Cizek A, Todd A, Shutt K, Kalousova B, Profousova-Psenkova I, Modry D, Literak I (2014) Antimicrobial-resistant Enterobacteriaceae from humans and wildlife in Dzanga-Sangha Protected Area, Central African Republic. Vet Microbiol 171: 422-431.
- Shin SY, Kwon KC, Park JW, Song JH, Ko YH, Sung JY, Shin HW, Koo SH (2009) Characteristics of *aac(6')-lb-cr* gene in extended-spectrum β-lactamase-producing *Escherichia coli* and *Klebsiella pneumoniae* isolated from Chungnam area. Korean J Lab Med 29: 541-550.
- Mnif B, Vimont S, Boyd A, Bourit E, Picard B, Branger C, Denamur E, Arlet G (2010) Molecular characterization of addiction systems of plasmids encoding extended-spectrum beta-lactamases in *Escherichia coli*. J Antimicrob Chemother 65: 1599-1603.
- 22. Carattoli A, Bertini A, Villa L, Falbo V, Hopkins KL, Threlfall EJ (2005) Identification of plasmids by PCR-based replicon typing. J Microbiol Methods 63: 219-228.
- 23. Branger C, Zamfir O, Geoffroy S, Laurans G, Arlet G, Thien HV, Gouriou S, Picard B, Denamur E (2005) Genetic background of *Escherichia coli* and extended-spectrum beta-lactamase type. Emerg Infect Dis 11: 54-61.
- 24. Roy S, Datta S, Das P, Gaind R, Pal T, Tapader R, Mukherjee S, Basu S (2015) Insight into neonatal septicaemic *Escherichia coli* from India with respect to phylogroups, serotypes, virulence, extended-spectrum-beta-lactamases and association of ST131 clonal group. Epidemiol Infect: 1-11.
- 25. Peirano G, van der Bij AK, Gregson DB, Pitout JD (2012) Molecular epidemiology over an 11-year period (2000 to 2010) of extended-spectrum beta-lactamase-producing Escherichia coli causing bacteremia in a centralized Canadian region. J Clin Microbiol 50: 294-299.
- Ben Slama K, Ben Sallem R, Jouini A, Rachid S, Moussa L, Saenz Y, Estepa V, Somalo S, Boudabous A, Torres C (2011)

Diversity of genetic lineages among CTX-M-15 and CTX-M-14 producing *Escherichia coli* strains in a Tunisian hospital. Curr Microbiol 62: 1794-1801.

- 27. Matsumura Y, Yamamoto M, Nagao M, Ito Y, Takakura S, Ichiyama S (2013) Association of fluoroquinolone resistance, virulence genes, and IncF plasmids with extended-spectrum beta-lactamase-producing *Escherichia coli* ST131 and ST405 clonal groups. Antimicrob Agents Chemother 57: 4736-4742.
- Rodriguez-Villalobos H, Bogaerts P, Berhin C, Bauraing C, Deplano A, Montesinos I, de Mendonca R, Jans B, Glupczynski Y (2011) Trends in production of extendedspectrum beta-lactamases among Enterobacteriaceae of clinical interest: results of a nationwide survey in Belgian hospitals. J Antimicrob Chemother 66: 37-47.
- Peirano G, Asensi MD, Pitondo-Silva A, Pitout JD (2011) Molecular characteristics of extended-spectrum betalactamase-producing *Escherichia coli* from Rio de Janeiro, Brazil. Clin Microbiol Infect 17: 1039-1043.
- 30. Brisse S, Diancourt L, Laouenan C, Vigan M, Caro V, Arlet G, Drieux L, Leflon-Guibout V, Mentre F, Jarlier V, Nicolas-Chanoine MH (2012) Phylogenetic distribution of CTX-Mand non-extended-spectrum-beta-lactamase-producing Escherichia coli isolates: group B2 isolates, except clone ST131, rarely produce CTX-M enzymes. J Clin Microbiol 50: 2974-2981.
- Van der Bij AK, Peirano G, Pitondo-Silva A, Pitout JD (2012)The presence of genes encoding for different virulence factors in clonally related *Escherichia coli* that produce CTX-Ms. Diagn Microbiol Infect Dis 72: 297-302.
- 32. Robino L, Scavone P, Araujo L, Algorta G, Zunino P, Pirez MC, Vignoli R (2014) Intracellular Bacteria in the Pathogenesis of *Escherichia coli* Urinary Tract Infection in Children. Clin Infect Dis 59: e158-e164.
- Robino L, Telechea H, Speranza N, García-Fulgueiras V, Cordeiro NF, Bado I, Mota MI, Giachetto G, Algorta G, Vignoli R (2013) Risk Factors for the Acquisition of Extended-Spectrum β-Lactamase-Producing Enterobacteriaceae in Hospitalized Children. J Inf Dev Ctries 7: 361-364.
- 34. Kim J, Bae IK, Jeong SH, Chang CL, Lee CH, Lee K (2011) Characterization of IncF plasmids carrying the blaCTX-M-14 gene in clinical isolates of *Escherichia coli* from Korea. J Antimicrob Chemother 66: 1263-1268.
- 35. Blanco J, Mora A, Mamani R, Lopez C, Blanco M, Dahbi G, Herrera A, Blanco JE, Alonso MP, Garcia-Garrote F, Chaves F, Orellana MA, Martinez-Martinez L, Calvo J, Prats G, Larrosa MN, Gonzalez-Lopez JJ, Lopez-Cerero L, Rodriguez-Bano J, Pascual A (2011) National survey of *Escherichia coli* causing extraintestinal infections reveals the spread of drugresistant clonal groups O25b:H4-B2-ST131, O15:H1-D-

ST393 and CGA-D-ST69 with high virulence gene content in Spain. J Antimicrob Chemother 66: 2011-2021.

- 36. Izdebski R, Baraniak A, Fiett J, Adler A, Kazma M, Salomon J, Lawrence C, Rossini A, Salvia A, Vidal Samso J, Fierro J, Paul M, Lerman Y, Malhotra-Kumar S, Lammens C, Goossens H, Hryniewicz W, Brun-Buisson C, Carmeli Y, Gniadkowski M (2013) Clonal structure, extended-spectrum beta-lactamases, and acquired AmpC-type cephalosporinases of *Escherichia coli* populations colonizing patients in rehabilitation centers in four countries. Antimicrob Agents Chemother 57: 309-316.
- Eller C, Leistner R, Guerra B, Fischer J, Wendt C, Rabsch W, Werner G, Pfeifer Y (2014) Emergence of extended-spectrum β-lactamase (ESBL) CTX-M-8 in Germany. J Antimicrob Chemother 69: 562-564.
- Kiiru J, Kariuki S, Goddeeris B, Butaye P (2012) Analysis of beta-lactamase phenotypes and carriage of selected betalactamase genes among *Escherichia coli* strains obtained from Kenyan patients during an 18-year period. BMC Microbiol 12: 155.
- 39. Kawamura K, Goto K, Nakane K, Arakawa Y (2013) Molecular Epidemiology of Extended-Spectrum beta-Lactamases and Escherichia coli Isolated from Retail Foods Including Chicken Meat in Japan. Foodborne Pathog Dis 11: 104-110.
- 40. Bado I, Garcia-Fulgueiras V, Cordeiro NF, Betancor L, Caiata L, Seija V, Robino L, Algorta G, Chabalgoity JA, Ayala JA, Gutkind GO, Vignoli R (2012) First human isolate of *Salmonella enterica* serotype Enteritidis harboring *bla*<sub>CTX</sub>. M-14</sub> in South America. Antimicrob Agents Chemother 56: 2132-2134.
- 41. Bartoloni A, Pallecchi L, Riccobono E, Mantella A, Magnelli D, Di Maggio T, Villagran AL, Lara Y, Saavedra C, Strohmeyer M, Bartalesi F, Trigoso C, Rossolini GM (2012) Relentless increase of resistance to fluoroquinolones and expanded-spectrum cephalosporins in *Escherichia coli*: 20 years of surveillance in resource-limited settings from Latin America. Clin Microbiol Infect 19: 356-361.

#### Corresponding author

Rafael Vignoli

Departamento de Bacteriología y Virología, Instituto de Higiene, Facultad de Medicina Universidad de la República, Alfredo Navarro 3051 CP11600 Montevideo, Uruguay Phone: (598) 2487 57 95 Fax: (598) 2487 57 95 Email: rvignoli@higiene.edu.uy

Conflict of interests: No conflict of interests is declared.