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## High prevalence of OXA-23 carbapenemase-producing *Proteus mirabilis* among amoxicillin-clavulanate resistant isolates in France

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48 **Abstract**

49 In this multicentric study performed in 12 French hospitals, we reported that 26.9% (14/52) of  
50 the amoxicillin/clavulanate-resistant *Proteus mirabilis* isolates produced the OXA-23  
51 carbapenemase. We found that inhibition zone diameter less than 11 mm around  
52 amoxicillin/clavulanate disc was an accurate screening cut-off to detect these OXA-23  
53 producers. We confirmed by whole genome sequencing that these OXA-23-producers all  
54 belonged to the same lineage that has been demonstrated to disseminate OXA-23 or OXA-58  
55 in *P. mirabilis*.

56

57

58 *Proteus mirabilis* are gram-negative rods belonging to the *Morganellaceae* family inside the  
59 Enterobacterales order. This species is widespread in the environment but is also part of the  
60 gastrointestinal tract (GIT) microbiota. *P. mirabilis* clinical isolates are mainly responsible for  
61 urinary tract infections (UTIs), including healthcare-associated infections (1). Intrinsically, *P.*  
62 *mirabilis* is resistant to polymyxins, nitrofurantoin and tetracyclines. It does not produce any  
63  $\beta$ -lactamase and remains susceptible to all  $\beta$ -lactams except imipenem. Decreased  
64 susceptibility to imipenem (but not to the other carbapenems such as meropenem and  
65 ertapenem) corresponds to the expression of PBPs (penicillin binding proteins) of low affinity  
66 for this molecule (2). Acquired resistance to  $\beta$ -lactams is mainly due to the acquisition of  
67 extended-spectrum  $\beta$ -lactamases (ESBLs), cephalosporinases and sporadically  
68 carbapenemases (3). These carbapenemases are those usually identified in Enterobacterales  
69 such as: KPC (Ambler class A), metallo- $\beta$ -lactamases of NDM-, VIM- or IMP-type (Ambler  
70 class B), and carbapenem-hydrolyzing Ambler class D  $\beta$ -lactamases (CHDLs) of OXA-48  
71 type. In addition, as opposed to other Enterobacterales species, the most prevalent  
72 carbapenemases reported in *Acinetobacter* spp. (i.e., OXA-23, OXA-24/40 and OXA-58)  
73 have also been reported in *P. mirabilis*: OXA-23 in France and Finland, OXA-24/40 in  
74 Algeria and OXA-58 in Belgium and Germany (4-9). Recently, a global phylogenetic analysis  
75 has demonstrated that a unique clone of *P. mirabilis* is responsible for the dissemination  
76 OXA-23 or OXA-58 carbapenemases in humans and animals since 1996 (10).  
77 Despite OXA-23 and OXA-58 are carbapenemases, the production of these enzymes does not  
78 surprisingly lead to multidrug resistance in *P. mirabilis*. Usually, OXA-23-producing *P.*  
79 *mirabilis* isolates exhibits an AST profile with only resistance to amoxicillin, ticarcillin, and  
80 piperacillin with no recovery of susceptibility when combined with clavulanate or  
81 tazobactam. They remain susceptible to third-generation cephalosporins and resistance to  
82 carbapenems (meropenem and ertapenem) is difficult to detect due to the poor carbapenem-

83 hydrolyzing activity of OXA-23, OXA-24/-40 and OXA-58 and the common chromosomal  
84 localization of the carbapenemase-encoding genes in this major clone of OXA-23/OXA-58-  
85 producing *P. mirabilis* (3). Accordingly, this phenotype is very lucky to be confused with the  
86 high-level production of a penicillinase or the expression of a narrow-spectrum oxacillinase  
87 (e.g., OXA-1) (Figure S1). In addition, the frequency of the acquisition of carbapenemase  
88 from *Acinetobacter* in *P. mirabilis* remains unknown.

89 Here, we aimed to determine the prevalence of *Acinetobacter* main carbapenemases (i.e.,  
90 OXA-23, OXA-58 and OXA-24/40) in *P. mirabilis* clinical isolates resistant to amoxicillin-  
91 clavulanate collected in a French multicentric cohort.

92

93 From January 1<sup>st</sup> to December 31<sup>th</sup> 2019, 139 *P. mirabilis* isolates recovered from human  
94 clinical samples (no screening sample) collected in 12 French hospitals were analyzed.  
95 Antimicrobial susceptibility testing was performed using the disc diffusion method on  
96 Mueller-Hinton (MH) agar (Bio-Rad, Marnes-La-Coquette, France) and interpreted according  
97 to EUCAST guidelines. Among these *P. mirabilis* isolates, 52 strains with an inhibition  
98 diameter zone below 16 mm for urinary samples or below 19 mm for all other clinical  
99 samples were included as amoxicillin/clavulanate-resistant isolates, according to EUCAST  
100 breakpoints. These strains were isolated from urines (n=19), blood cultures (n=3), muco-  
101 cutaneous samples (n=7), catheter (n=1), respiratory samples (n=7), genital samples (n=3),  
102 abscesses and drainage (n=14) (Figure 1A). One additional ESBL-producing isolate was  
103 excluded from the study.

104 All the 52 amoxicillin/clavulanate-resistant *P. mirabilis* isolates were then screened by  
105 conventional PCR for the presence of *bla*<sub>OXA-23</sub>, *bla*<sub>OXA-24/40</sub> or *bla*<sub>OXA-58</sub> genes as previously  
106 described (5, 11). No strain was found to be positive for *bla*<sub>OXA-24/40</sub> or *bla*<sub>OXA-58</sub> gene whereas  
107 26.9% (14/52) of amoxicillin/clavulanate-resistant *P. mirabilis* isolates gave a positive signal

108 for *bla*<sub>OXA-23</sub>. The production of the OXA-23 carbapenemase was confirmed with the OXA-23  
109 K-SeT immunochromatographic detection assay (Coris Bioconcept) performed as previously  
110 described (12). These OXA-23-producing *P. mirabilis* were isolated from urines (n=7),  
111 respiratory samples (n=2), abscesses and drainage (n=5). Of note, all OXA-23-producing *P.*  
112 *mirabilis* isolates had an amoxicillin/clavulanate inhibition zone diameter between 7 mm and  
113 11 mm (Figure 1B). It suggests that the screening cut-off for OXA-23 production in *P.*  
114 *mirabilis* might be 11 mm inhibition zone diameter or less around an amoxicillin/clavulanate-  
115 containing disc (20 mg amoxicillin + 10 mg clavulanate). The determination of  
116 amoxicillin/clavulanate MICs by Etest (BioMérieux) confirmed that all OXA-23-producing *P.*  
117 *mirabilis* isolates had MICs comprised between 12 and 24 mg/L. According to EUCAST  
118 breakpoints, these OXA-23-producing *P. mirabilis* isolates are categorized as susceptible  
119 (MIC  $\leq$ 32 mg/L) if they are responsible for uncomplicated UTIs. Indeed, clavulanate can  
120 concentrate in urine leading to a higher breakpoint (32 mg/L) for uncomplicated UTI  
121 compared to strains responsible for other infections (breakpoint at 8 mg/L). However, since  
122 the OXA-23 enzyme is not inhibited by clavulanate, it might be possible that such susceptible  
123 categorization leads to treatment failure. Unfortunately, we could not have access to clinical  
124 data to confirm if such treatment failure occurred. Of note, among the 38  
125 amoxicillin/clavulanate-resistant *P. mirabilis* isolates that were negative for *bla*<sub>OXA-23</sub>, 76.3%  
126 (29/38) expressed the TEM-1 penicillinase and the narrow-spectrum oxacillinase OXA-1  
127 (assessed by PCR and sequencing), 13.2% (5/38) were positive only for *bla*<sub>OXA-1</sub>, 7.9% (3/38)  
128 were positive only for *bla*<sub>TEM-1</sub> and only one isolates (2.6%) was negative for both *bla*<sub>TEM-1</sub>  
129 and *bla*<sub>OXA-1</sub>.

130 No obvious epidemiological link could be identified between the 14 OXA-23-producing *P.*  
131 *mirabilis* isolates since they were recovered in different areas. However, to assess the clonal  
132 relationship between these 14 *P. mirabilis* isolates, we performed a whole genome sequencing

133 and comparison as previously described (10). The genomes of OXA-23-producing *P.*  
134 *mirabilis* were submitted to GenBank (Bioproject number PRJNA780406). As previously  
135 reported (10), all OXA-23-producing *P. mirabilis* isolates were part of the major lineage that  
136 disseminated in France and Belgium at least since 1996 (Figure 2).

137 As conclusion, we demonstrated that nearly one quarter of the *P. mirabilis* clinical isolates  
138 with an amoxicillin/clavulanate zone inhibition less than 19 mm were OXA-23-producing  
139 strains. We established that an amoxicillin/clavulanate zone inhibition less than 11 mm is an  
140 efficient screening cut-off to detect these OXA-23 producers. However, since currently only  
141 one clone of *P. mirabilis* has been reported to vehiculate *bla*<sub>OXA-23</sub>, such screening cut-off  
142 might have to be adapted if the emergence of another clone is further reported. As previously  
143 reported, we demonstrated that the immunochromatographic assay OXA-23 K-Set is a useful  
144 tool to rapidly identify the production of OXA-23 by *P. mirabilis*. Amoxicillin/clavulanate  
145 MICs of these OXA-23-producing *P. mirabilis* is comprised between 12 and 24 mg/L.  
146 Accordingly, these strains might be categorized as susceptible if they were considered to be  
147 responsible for uncomplicated UTIs. Since OXA-23 is not inhibited by clavulanate, clinical  
148 failure might occur. However, several therapeutic options are often possible outside the  $\beta$ -  
149 lactams family (fluoroquinolones, aminoglycosides, sulfamethoxazole-trimethoprim),  
150 particularly for urinary-tract infections. In addition, OXA-23 do not hydrolyze 3<sup>rd</sup> generation  
151 cephalosporins and only leads a low-level resistance that often remain undetectable for  
152 carbapenems (ertapenem or meropenem) or piperacillin-tazobactam, suggesting potential use  
153 of these molecules. But, complementary studies are needed to decipher this hypothesis.

154

## 155 REFERENCES

- 156 1. Canton R, Akova M, Carmeli Y, Giske CG, Glupczynski Y, Gniadkowski M,  
157 Livermore DM, Miriagou V, Naas T, Rossolini GM, Samuelsen O, Seifert H,

- 158 **Woodford N, Nordmann P, European Network on C.** 2012. Rapid evolution and  
159 spread of carbapenemases among Enterobacteriaceae in Europe. *Clin Microbiol Infect*  
160 **18**:413-431.
- 161 2. **Neuwirth C, Siebor E, Duez JM, Pechinot A, Kazmierczak A.** 1995. Imipenem  
162 resistance in clinical isolates of *Proteus mirabilis* associated with alterations in  
163 penicillin-binding proteins. *J Antimicrob Chemother* **36**:335-342.
- 164 3. **Girlich D, Bonnin RA, Dortet L, Naas T.** 2020. Genetics of Acquired Antibiotic  
165 Resistance Genes in *Proteus* spp. *Front Microbiol* **11**:256.
- 166 4. **Bonnet R, Marchandin H, Chanal C, Sirot D, Labia R, De Champs C, Jumas-  
167 Bilak E, Sirot J.** 2002. Chromosome-encoded class D beta-lactamase OXA-23 in  
168 *Proteus mirabilis*. *Antimicrob Agents Chemother* **46**:2004-2006.
- 169 5. **Girlich D, Bonnin RA, Bogaerts P, De Laveleye M, Huang DT, Dortet L, Glaser  
170 P, Glupczynski Y, Naas T.** 2017. Chromosomal amplification of the *bla*<sub>OXA-58</sub>  
171 carbapenemase gene in a *Proteus mirabilis* clinical isolate. *Antimicrob Agents  
172 Chemother* **61**.
- 173 6. **Lange F, Pfennigwerth N, Gerigk S, Gohlke F, Oberdorfer K, Purr I, Wohanka  
174 N, Roggenkamp A, Gatermann SG, Kaase M.** 2017. Dissemination of *bla*<sub>OXA-58</sub> in  
175 *Proteus mirabilis* isolates from Germany. *J Antimicrob Chemother* **72**:1334-1339.
- 176 7. **Leulmi Z, Kandouli C, Mihoubi I, Benlabed K, Lezzar A, Rolain JM.** 2019. First  
177 report of *bla*<sub>OXA-24</sub> carbapenemase gene, *armA* methyltransferase and *aac(6')-Ib-cr*  
178 among multidrug-resistant clinical isolates of *Proteus mirabilis* in Algeria. *J Glob  
179 Antimicrob Resist* **16**:125-129.
- 180 8. **Osterblad M, Karah N, Halkilahti J, Sarkkinen H, Uhlin BE, Jalava J.** 2016. Rare  
181 detection of the *Acinetobacter* class D carbapenemase *bla*<sub>OXA-23</sub> gene in *Proteus  
182 mirabilis*. *Antimicrob Agents Chemother* **60**:3243-3245.



- 183 9. **Potron A, Hocquet D, Triponney P, Plesiat P, Bertrand X, Valot B.** 2019.  
184 Carbapenem-susceptible OXA-23-producing *Proteus mirabilis* in the French  
185 community. *Antimicrob Agents Chemother* **63**.
- 186 10. **Bonnin RA, Girlich D, Jousset AB, Gauthier L, Cuzon G, Bogaerts P, Haenni M,**  
187 **Madec JY, Couve-Deacon E, Barraud O, Fortineau N, Glaser P, Glupczynski Y,**  
188 **Dortet L, Naas T.** 2020. A single *Proteus mirabilis* lineage from human and animal  
189 sources: a hidden reservoir of OXA-23 or OXA-58 carbapenemases in  
190 Enterobacterales. *Sci Rep* **10**:9160.
- 191 11. **Bonnin RA, Nordmann P, Potron A, Lecuyer H, Zahar JR, Poirel L.** 2011.  
192 Carbapenem-hydrolyzing GES-type extended-spectrum beta-lactamase in  
193 *Acinetobacter baumannii*. *Antimicrob Agents Chemother* **55**:349-354.
- 194 12. **Riccobono E, Bogaerts P, Antonelli A, Evrard S, Giani T, Rossolini GM,**  
195 **Glupczynski Y.** 2019. Evaluation of the OXA-23 K-SeT® immunochromatographic  
196 assay for the rapid detection of OXA-23-like carbapenemase-producing *Acinetobacter*  
197 spp. *J Antimicrob Chemother* **74**:1455-1457.
- 198  
199

200 **LEGEND OF THE FIGURES**

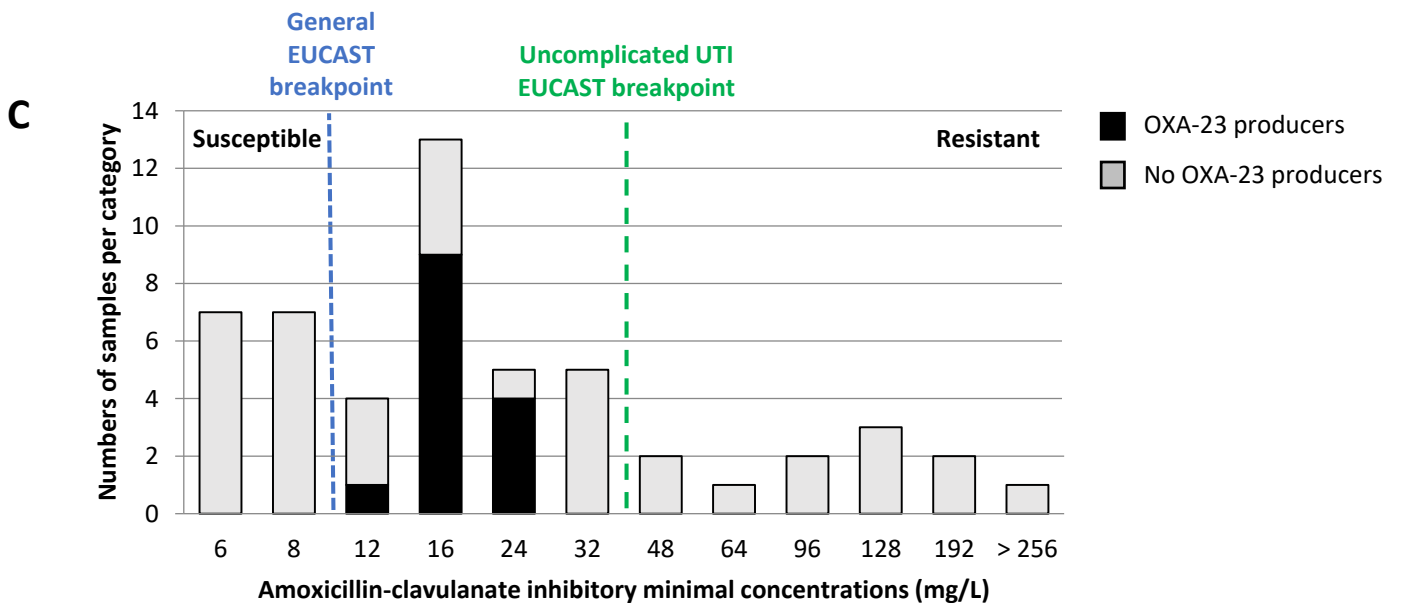
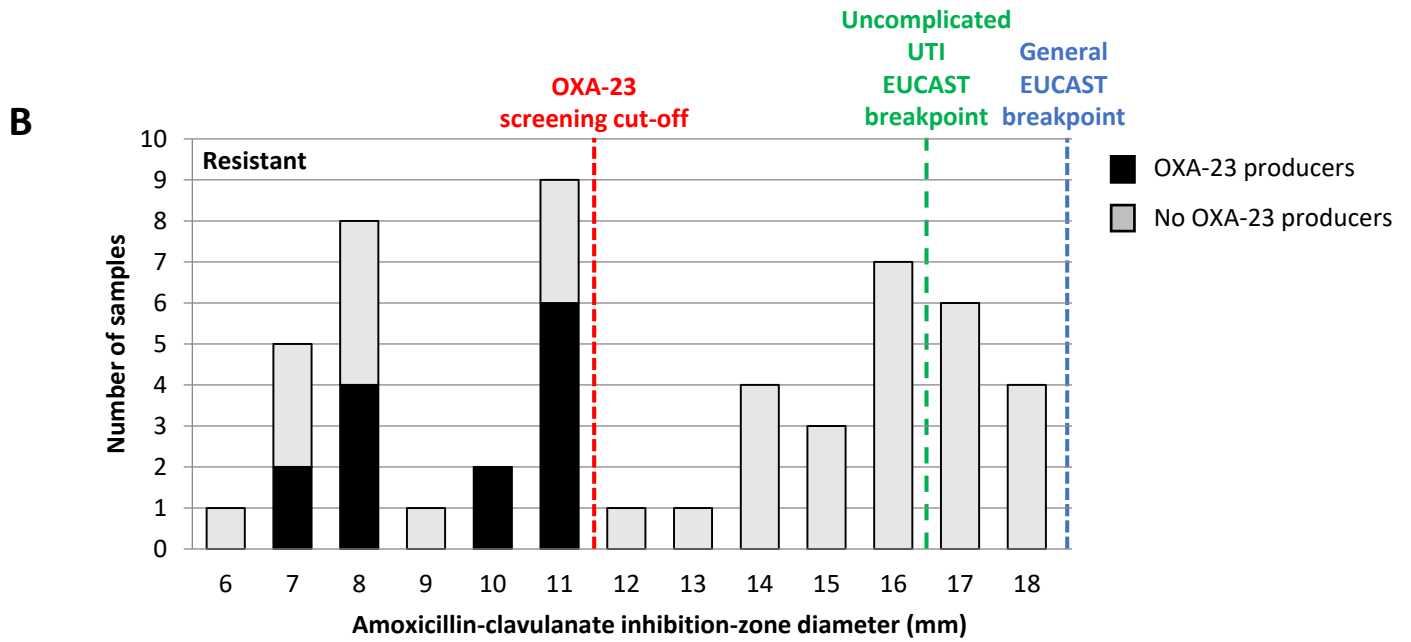
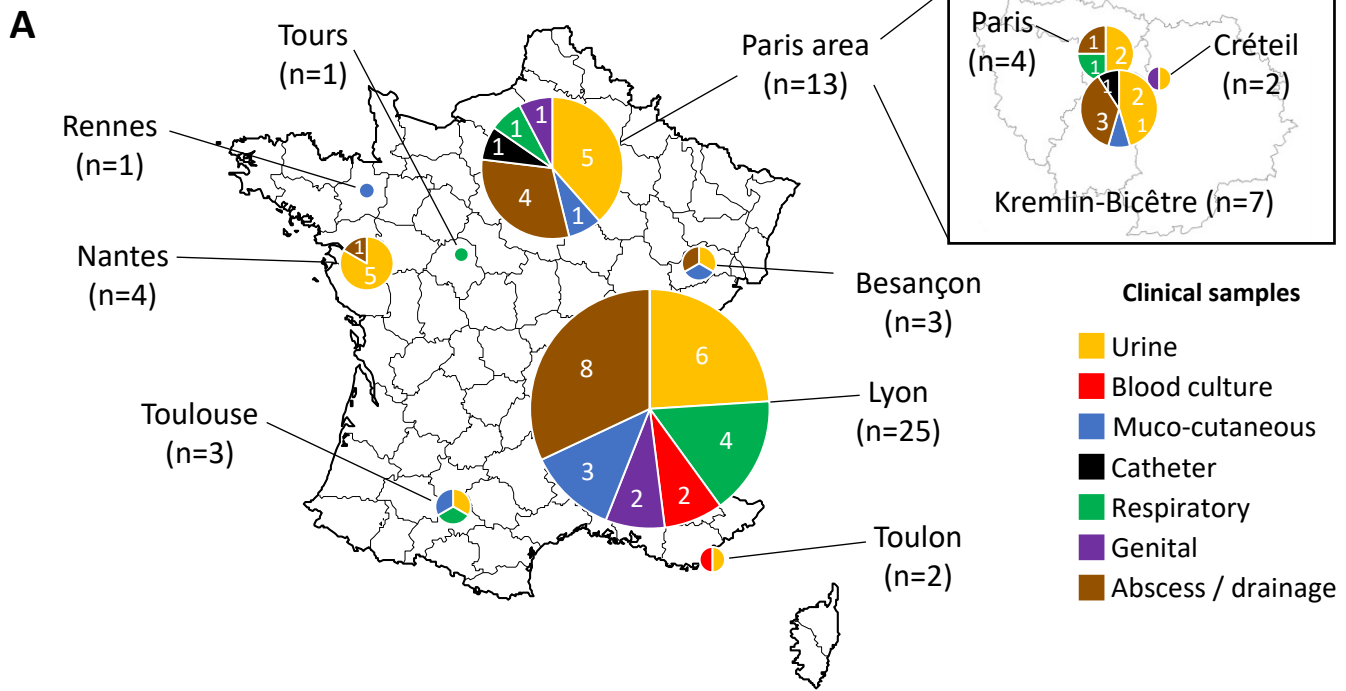
201 **Figure 1.** Characteristics of the 52 amoxicillin-clavulanate resistant *P. mirabilis* isolates **A.**  
202 Geographic distribution and clinical samples. **B.** Distribution of the amoxicillin-clavulanate  
203 zone inhibition diameters. **C.** Distribution of the amoxicillin-clavulanate minimal inhibition  
204 concentrations.

205

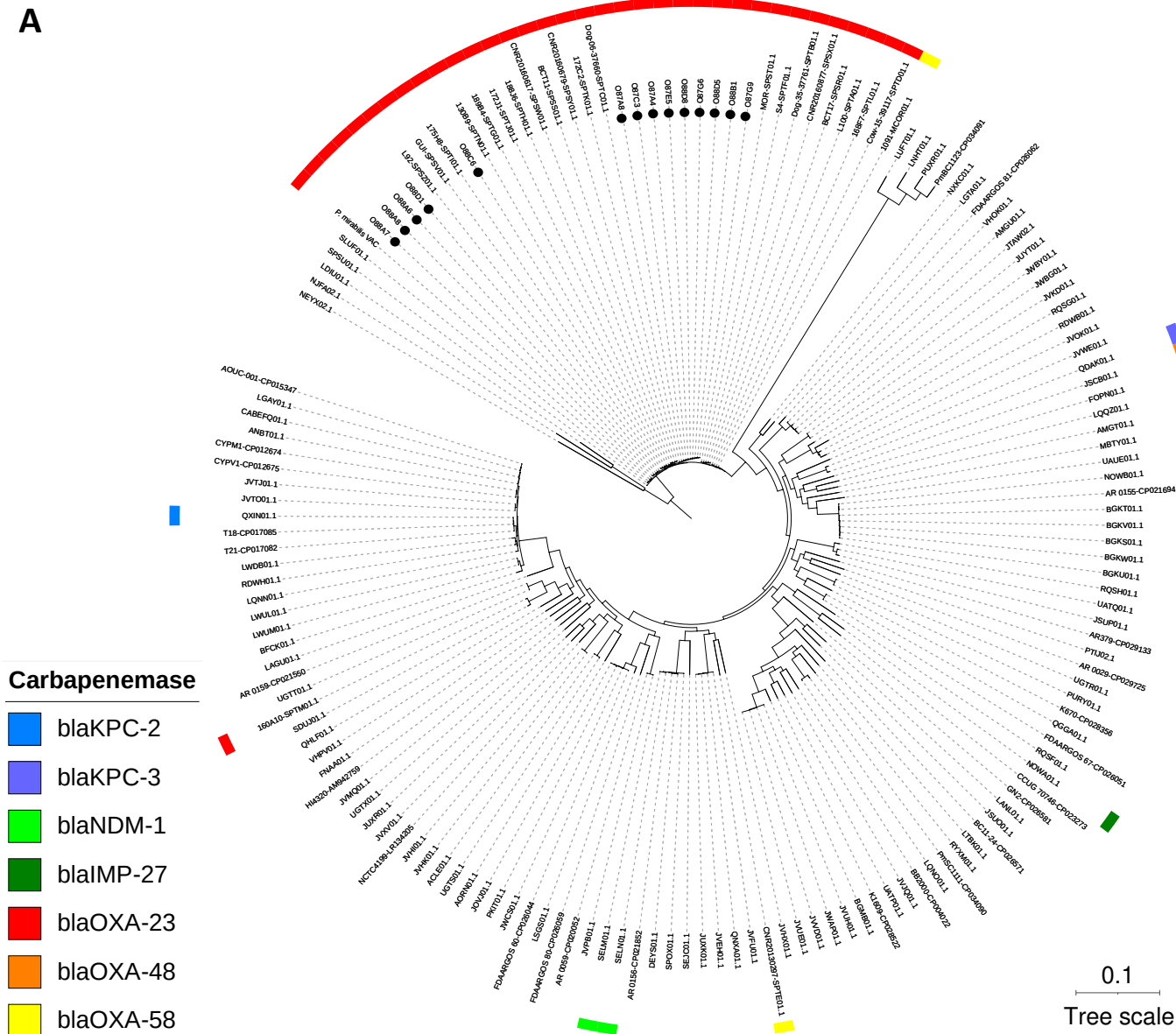
206 **Figure 2. A.** Phylogenetic relationship of the 14 OXA-23-producing *P. mirabilis* isolates with  
207 the 145 reference genomes of *P. mirabilis* reported by Bonnin R.A *et al* (10). This  
208 comparison was performed on 17.83% of the genome of OXA-23-producing *P. mirabilis*  
209 VAC used as reference. **B.** Phylogenetic relationship of the OXA-23/OXA-58-producing *P.*  
210 *mirabilis* isolates. This comparison was performed on 57,36% of the genome of OXA-23-  
211 producing *P. mirabilis* VAC used as reference.

212 OXA-23-producing *P. mirabilis* from this study are marked by a black point. Scale bar on tree  
213 indicates the number of single-nucleotide polymorphisms per position of common sequences.

214



**A**



**B**

