




Draft Genome Sequences of Antimicrobial-Resistant *Shigella* Clinical Isolates from Pakistan

 Sara Lomonaco,^a Christine Lascols,^{b,c} Matthew A. Crawford,^d Kevin Anderson,^e David R. Hodge,^e Debra J. Fisher,^d Segaran P. Pillai,^f Stephen A. Morse,^c Erum Khan,^g Molly A. Hughes,^d Marc W. Allard,^a Shashi K. Sharma^a

^aDivision of Microbiology, Office of Regulatory Science, Center for Food Safety and Applied Nutrition, U.S. Food and Drug Administration, College Park, Maryland, USA

^bNational Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, Atlanta, Georgia, USA

^cIHRC, Inc., Atlanta, Georgia, USA

^dDepartment of Medicine, Division of Infectious Diseases and International Health, University of Virginia, Charlottesville, Virginia, USA

^eScience and Technology Directorate, U.S. Department of Homeland Security, Washington, DC, USA

^fOffice of the Commissioner, U.S. Food and Drug Administration, Silver Spring, Maryland, USA

^gDepartment of Pathology and Laboratory Medicine, Aga Khan University, Karachi, Pakistan

ABSTRACT *Shigella* spp. are the most common cause of dysentery in developing countries and the second leading cause of diarrheal deaths worldwide. Multidrug-resistant (MDR) *Shigella* spp. are a serious threat to global health. Herein, we report draft genome sequences for three MDR *Shigella* isolates from Pakistan, two *Shigella flexneri* isolates and one *Shigella sonnei* isolate.

Among the *Enterobacteriaceae*, the genus *Shigella* is composed of four species (*Shigella dysenteriae*, *Shigella flexneri*, *Shigella boydii*, and *Shigella sonnei*) that cause severe diarrhea (1). Shigellosis is the most common cause of dysentery in developing countries and the second leading cause of diarrheal deaths worldwide (1). Rarely, *Shigella* spp. can also cause bacteremia, usually in children and immunocompromised adults (2, 3). The emergence of antimicrobial resistance (AMR) among *Shigella* spp. increasingly threatens the clinical management of shigellosis (4, 5). Multidrug-resistant (MDR) *Shigella* spp. are a serious threat to global health (6).

We report the draft genome sequences of three MDR *Shigella* isolates from Pakistan. The *S. flexneri* isolates were acquired from blood in 2015 (CFSAN059650) or stool (CFSAN059651 [original collection date unavailable]). The *S. sonnei* isolate (CFSAN059652) was obtained from stool in 2016. The isolates were obtained using standard culture methods, including growth on MacConkey agar, and identification and antimicrobial susceptibility testing were performed with the API 20E system and disk diffusion method (both bioMérieux), respectively (7). The results were confirmed with the Vitek 2 system (bioMérieux) and conventional broth microdilution (8). All isolates were resistant to ampicillin, cefazolin, ceftriaxone, cefotaxime, trimethoprim-sulfamethoxazole, and tetracycline. CFSAN059651 was resistant to cefepime, aztreonam, ampicillin-sulbactam, and chloramphenicol. CFSAN059650 and CFSAN059652 exhibited intermediate resistance against ciprofloxacin and ampicillin-sulbactam or against aztreonam and ceftazidime, respectively. Isolates were grown overnight in lysogeny broth (Lennox) at 37°C prior to DNA extraction using the DNeasy blood and tissue kit (Qiagen). DNA libraries were prepared via the Nextera XT DNA library kit (Illumina). Sequencing was performed on an Illumina MiSeq platform using the MiSeq reagent kit v2 (2 × 250-bp paired-end reads). Minimum average coverage (>50×) and read 1 (R1)/read 2 (R2) Q scores (>26) were set to ensure sequence quality. Sequence integrity (i.e., absence of contamination) was evaluated with Kraken (9, 10). Unless otherwise noted, default parameters were used in all analyses. *De novo* genome

Citation Lomonaco S, Lascols C, Crawford MA, Anderson K, Hodge DR, Fisher DJ, Pillai SP, Morse SA, Khan E, Hughes MA, Allard MW, Sharma SK. 2019. Draft genome sequences of antimicrobial-resistant *Shigella* clinical isolates from Pakistan. *Microbiol Resour Announc* 8:e00500-19. <https://doi.org/10.1128/MRA.00500-19>.

Editor Frank J. Stewart, Georgia Institute of Technology

This is a work of the U.S. Government and is not subject to copyright protection in the United States. Foreign copyrights may apply.

Address correspondence to Sara Lomonaco, sara.lomonaco@fda.hhs.gov.

Received 30 April 2019

Accepted 24 June 2019

Published 25 July 2019

TABLE 1 Assembly statistics and accession numbers for the reported *Shigella flexneri* and *Shigella sonnei* genome sequences^a

Species and CFSAN ID ^b	NCBI BioSample accession no.	Yr of isolation	No. of contigs	Total length (bp)	N ₅₀ (bp)	GC content (%)	Genome coverage (×)	Coverage read count	Avg read quality (Q score [R1, R2])	SRR accession no.	WGS accession no. ^c
<i>Shigella flexneri</i>											
CFSAN059650	SAMN10086692	2015	356	4,629,951	33,749	50.55	52	1,021,504	32, 26.6	SRR8836963	SSML00000000
CFSAN059651	SAMN10086664	NA ^d	359	4,620,515	31,916	50.45	69	1,373,334	32, 27	SRR8836950	SSMK00000000
<i>Shigella sonnei</i>											
CFSAN059652	SAMN10086663	2016	384	4,528,736	25,093	50.85	71	1,388,868	32, 26.9	SRR8837012	SSMJ00000000

^a All three clinical isolates belong to NCBI BioProject number [PRJNA342326](#).

^b ID, identifier.

^c WGS, whole-genome sequencing.

^d NA, not available.

assemblies were created with Shovill 0.9 (<https://github.com/tseemann/shovill>), available in GalaxyTrakr (<https://www.galaxytrakr.org>) (11). The “trim reads” option was selected, and the minimum contig length was set at 500 bp. The draft genomes were submitted for annotation to the NCBI Prokaryotic Genome Annotation Pipeline (12). The number of reads, number of contigs, genome size, and GC content for each isolate are listed in Table 1.

ResFinder (13) was used to determine isolate sequence types (STs) based on *in silico* multilocus sequence typing (MLST) (14) and to identify AMR genes showing >99% identity to the reference gene sequences. The two *S. flexneri* isolates belonged to ST245, and the *S. sonnei* isolate belonged to ST152. CFSAN059650, CFSAN059651, and CFSAN059652 were found to harbor 10, 8, and 7 known AMR genes, respectively. All *Shigella* isolates carried *drfA1*, *sul2*, a CTX-M gene, and a *tet* gene. All isolates possessed AMR genes conferring resistance to β -lactams, aminoglycosides, trimethoprim, sulfonamides, and tetracyclines. Additional genes involved in resistance to fluoroquinolones (CFSAN059650 and CFSAN059652) or phenicol (CFSAN059651) were also observed. The data provided here offer a comparative genetic context for AMR in *Shigella* spp. that will inform infectious diseases epidemiology and be useful in public health monitoring.

Data availability. The genome assemblies described herein are available in DDBJ/EMBL/GenBank under accession numbers [SSMJ00000000](#), [SSMK00000000](#), and [SSML00000000](#). The versions here are the first versions. Other accession number data are presented in Table 1.

ACKNOWLEDGMENTS

S.L. received support by appointment to the Research Participation Program at the Center for Food Safety and Applied Nutrition, U.S. Food and Drug Administration, administered by the Oak Ridge Institute for Science and Education (<https://orise.orau.gov/>) through an interagency agreement between the U.S. Department of Energy and the U.S. Food and Drug Administration. This work was also supported by the U.S. Department of Homeland Security, Science and Technology Directorate (interagency agreement contract number HSHQPM-17-X-00057). M.A.C. and M.A.H. received additional support from U.S. National Institutes of Health grant R21 AI139947.

The findings and conclusions in this report are those of the authors and do not necessarily represent the views of the U.S. Food and Drug Administration, the Centers for Disease Control and Prevention, or the U.S. Department of Homeland Security. The use of trade names and commercial sources is for identification purposes only and does not imply endorsement.

REFERENCES

- Kotloff KL, Riddle MS, Platts-Mills JA, Pavlinac P, Zaidi A. 2018. Shigellosis. *Lancet* 391:801–812. [https://doi.org/10.1016/S0140-6736\(17\)33296-8](https://doi.org/10.1016/S0140-6736(17)33296-8).
- Sharma S, Arora A. 2012. *Shigella flexneri* bacteremia in adult. *J Lab Physicians* 4:65–66. <https://doi.org/10.4103/0974-2727.98682>.
- Shogbesan O, Rettew A, Shaikh B, Abdulkareem A, Donato A. 2017. *Shigella sonnei* bacteremia presenting with profound hepatic dysfunction. *Case Rep Gastrointest Med* 2017:7293281. <https://doi.org/10.1155/2017/7293281>.
- Ashkenazi S, Levy I, Kazaronovski V, Samra Z. 2003. Growing antimicrobial resistance of *Shigella* isolates. *J Antimicrob Chemother* 51:427–429. <https://doi.org/10.1093/jac/dkg080>.
- Schwartz KL, Morris SK. 2018. Travel and the spread of drug-resistant

- bacteria. *Curr Infect Dis Rep* 20:29. <https://doi.org/10.1007/s11908-018-0634-9>.
6. CDC. 2013. Antibiotic resistance threats in the United States, 2013. U.S. Department of Health and Human Services, CDC, Atlanta, GA. <https://www.cdc.gov/drugresistance/pdf/ar-threats-2013-508.pdf>. Accessed 28 June 2019.
 7. Khan E, Ejaz M, Zafar A, Jabeen K, Shakoob S, Inayat R, Hasan R. 2010. Increased isolation of ESBL producing *Klebsiella pneumoniae* with emergence of carbapenem resistant isolates in Pakistan: report from a tertiary care hospital. *J Pak Med Assoc* 60:186–190.
 8. CLSI. 2017. Performance standards for antimicrobial susceptibility testing; 27th informational supplement. CLSI document M100-S. CLSI, Wayne, PA.
 9. Timme RE, Sanchez Leon M, Allard MW. 2019. Utilizing the public GenomeTrakr database for foodborne pathogen traceback. *In* Bridier A (ed), Foodborne bacterial pathogens. *Methods in molecular biology*, vol 1918. Humana Press, New York, NY.
 10. Wood DE, Salzberg SL. 2014. Kraken: ultrafast metagenomic sequence classification using exact alignments. *Genome Biol* 15:R46. <https://doi.org/10.1186/gb-2014-15-3-r46>.
 11. Afgan E, Baker D, Batut B, van den Beek M, Bouvier D, Čech M, Chilton J, Clements D, Coraor N, Grüning BA, Guerler A, Hillman-Jackson J, Hiltmann S, Jalili V, Rasche H, Soranzo N, Goecks J, Taylor J, Nekrutenko A, Blankenberg D. 2018. The Galaxy platform for accessible, reproducible and collaborative biomedical analyses: 2018 update. *Nucleic Acids Res* 46:W537–W544. <https://doi.org/10.1093/nar/gky379>.
 12. Tatusova T, DiCuccio M, Badretdin A, Chetvernin V, Nawrocki EP, Zaslavsky L, Lomsadze A, Pruitt KD, Borodovsky M, Ostell J. 2016. NCBI Prokaryotic Genome Annotation Pipeline. *Nucleic Acids Res* 44: 6614–6624. <https://doi.org/10.1093/nar/gkw569>.
 13. Zankari E, Hasman H, Cosentino S, Vestergaard M, Rasmussen S, Lund O, Aarestrup FM, Larsen MV. 2012. Identification of acquired antimicrobial resistance genes. *J Antimicrob Chemother* 67:2640–2644. <https://doi.org/10.1093/jac/dks261>.
 14. Larsen MV, Cosentino S, Rasmussen S, Friis C, Hasman H, Marvig RL, Jelsbak L, Sicheritz-Pontén T, Ussery DW, Aarestrup FM, Lund O. 2012. Multilocus sequence typing of total-genome-sequenced bacteria. *J Clin Microbiol* 50:1355–1361. <https://doi.org/10.1128/JCM.06094-11>.