

1 **Complete genomic characterisation of two *Escherichia coli* lineages**
2 **responsible for a cluster of carbapenem resistant infections in a Chinese**
3 **hospital**

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15 Running title: Carbapenem resistant clones of *E. coli*

16

17 **Abstract**

18 The increase in infections as a result of multi-drug resistant strains of *Escherichia*
19 *coli* is a global health crisis. The emergence of globally disseminated lineages of *E.*
20 *coli* carrying ESBL genes has been well characterised. An increase in strains
21 producing carbapenemase enzymes and mobile colistin resistance is now being
22 reported, but to date there is little genomic characterisation of such strains. Routine
23 screening of patients within an ICU of West China Hospital identified a number of *E.*
24 *coli* carrying the *bla*_{NDM-5} carbapenemase gene, found to be two distinct clones, *E.*
25 *coli* ST167 and ST617. Interrogation of publically available data shows isolation of
26 ESBL and carbapenem resistant strains of both lineages from clinical cases across
27 the world. Further analysis of a large collection of publically available genomes
28 shows that ST167 and ST617 have emerged in distinct patterns from the ST10
29 clonal complex of *E. coli*, but share evolutionary events involving switches in LPS
30 genetics, intergenic regions and anaerobic metabolism loci. These may be
31 evolutionary events which underpin the emergence of carbapenem resistance
32 plasmid carriage in *E. coli*.

33

34 **Background**

35 Infections from multi-drug resistant (MDR) *Escherichia coli* are a significant global
36 health care threat[1]. Despite being an extremely diverse species, MDR in *E. coli* is
37 largely confined to strains capable of causing extra-intestinal infections (ExPEC)
38 such as urinary tract infections (UTI) and bacteraemia[1–4]. As many as 50% of *E.*
39 *coli* strains isolated from UTI and bacteraemia cases may exhibit resistance to three
40 or more classes of antibiotic, termed MDR. This resistance is primarily driven by the
41 acquisition of large plasmids containing multiple resistance genes[2]. The rapid
42 global dissemination of MDR *E. coli* is associated with carriage of plasmids
43 containing genes encoding extended-spectrum β -lactamases (ESBL) which confer
44 resistance to third-generation cephalosporins[5]. The carriage of MDR plasmids
45 containing ESBL genes renders *E. coli* susceptible only to the carbapenem class of
46 antibiotics and the antimicrobial compound colistin[5]. However strains of *E. coli* are
47 now being reported with plasmids containing β -lactamases conferring resistance to
48 carbapenems (carbapenemases) and the *mcr-1* colistin resistance gene [6–9].
49 The global dissemination of ESBL *E. coli* is attributable to the rapid dispersal of a
50 small number of *E. coli* lineages. The most dominant of these is the ST131 lineage
51 which is predominantly associated with carriage of the *bla*_{CTX-M-15} ESBL gene[2].
52 ST131 is an ExPEC lineage and the most common cause of UTI and bacteraemia in
53 the developed world[2]. Other dominant lineages of ESBL *E. coli* are ST73, ST95,
54 and ST648 which are also ExPEC[3,4]. ESBL carriage can also be found transiently
55 in strains belonging the ST10 clonal complex of *E. coli*[3]. ST10 complex strains are
56 host generalist *E. coli* which are frequently found as intestinal commensal inhabitants
57 of mammals and avian species[10], and are devoid of the virulence-associated
58 genes known to be required for pathogenesis[11]. Our knowledge of the genomic

59 landscape of carbenemase production in *E. coli* is far less developed, with the vast
60 majority of reports being genomes of individual clinical isolates sporadically
61 distributed across the globe. Just one significant publication exists reporting a
62 specifically designed genomic analysis of a temporal collection of carbapenem
63 resistant *E. coli* which showed very wide dissemination of carbapenem resistance
64 across species and within-species lineages of the enterobacteriaceae [12].

65 Here we report the isolation of *E. coli* containing the carbapenem-resistance gene
66 *bla*_{NDM-5} in an ICU ward in West China Hospital, Chengdu. The isolates do not
67 belong to one of the dominant MDR lineages of ExPEC, but to ST167 and ST617,
68 both members of the ST10 clonal complex. Genomic data supports the long-term
69 presence of these bacteria in the ICU with repeated dissemination from a central
70 reservoir. Contextualisation of the Chinese strains with a collection of publically
71 available genomes shows isolation of MDR ST167 and ST617 strains from clinical
72 episodes across the world, and in the case of ST167 frequent occurrence of carriage
73 of both ESBL and carbapenemase genes. By comparing these lineages to a large
74 number of publically available ST10 genomes we identify potentially significant
75 events in their evolutionary trajectories, including mutations in the LPS biosynthesis
76 locus which truncate LPS. We also find evidence of compensatory mutations in
77 intergenic regions as found in *E. coli* ST131 as well as mutations in anaerobic
78 metabolism loci. Our findings support the need for a more concerted global
79 surveillance effort focussing on identifying frequently occurring lineages of
80 carbapenem resistant *E. coli*.

81 **Methods**

82 **Bacterial isolation and characterisation**

83 Strain 0215 was recovered from a rectal swab of a 75-year-old male patient on
84 September 2013 in a 50-bed medical ICU at West China Hospital, Chengdu, during
85 routine screening that is performed as standard in the ICU on all new admissions.
86 Following the identification of *bla*_{NDM-5}, we performed an active screening project on
87 adult patients (age ≥16) at the medical ICU ward during a 7-month period from May
88 to November 2014. This study was conducted in accordance with the amended
89 Declaration of Helsinki and was approved, under a waiver of consent, by the Ethics
90 Committee of West China Hospital. Rectal swabs were collected from patients within
91 2 days of admission to the ICU and within the 3 days prior to ICU discharge for those
92 patients with a length of stay of 3 days or more. Swabs were transferred to the
93 laboratory in transport media and were screened for carbapenem-resistant
94 Enterobacteriaceae using the CHROMAgar Orientation agar plates containing 2
95 µg/ml meropenem. Carbapenem-resistant *E. coli* were recovered from the rectal
96 swabs of 8 different patients (Table 1). Furthermore, one of the 8 patients developed
97 bacteraemia during his ICU stay and an *E. coli* was recovered from his blood and
98 included in the study. During the study period, two additional *E. coli* clinical isolates
99 carrying *bla*_{NDM-5} were recovered in the hospital, from two patients on admission.

100 **Genome sequencing**

101 The ST167 and ST617 strains isolated in Chengdu were cultured in LB broth at 37°C
102 overnight. DNA was extracted using QIAamp[®] DNA Mini Kit (QIAGEN) and 150 bp
103 paired-end libraries of each strain prepared and sequenced using the Illumina HiSeq
104 X-Ten platform (raw data accession numbers Table S1 and S2). Genomes were
105 assembled using SPAdes[13] and annotated using Prokka[14]. The MLST sequence
106 type of the strains was determined using the in silico prediction tool MLSTFinder[15].
107 The *E. coli* genome database Enterobase (www.enterobase.warwick.ac.uk) was

108 interrogated on 1st December 2016 and all available ST167 and ST617 genomes
109 were downloaded (Table S1 and S2) and annotated using Prokka. A further 256
110 ST10 genomes were selected to represent the geographical, temporal, and source
111 attribution diversity present in the database (Table S3) and were downloaded and
112 annotated using Prokka. To select these genomes a phylogenetic tree was inferred
113 from the assembled genome of every ST10 on Enterobase using Parsnp[16]. From
114 this phylogeny 500 genomes were chosen to span the entire phylogenetic diversity,
115 and then the final selection made to represent the full ST10 diversity as described.
116 The antibiotic resistance gene profile of all isolates was determined using Abricate
117 (<https://github.com/tseemann/abricate>).

118 **High-resolution SNP analysis**

119 We created a closed genome sequence for a Chinese ST167 strain 1237 by
120 combining our Illumina sequence data with data generated on the Minlon sequencer.
121 Raw Minlon reads were converted into fastQ format (accession number
122 PRJNA422975) using Poretools [17] and assembled using Canu [18], resulting in a
123 single contig chromosome and four distinct single contig plasmids. The raw illumina
124 data was then used to polish the genome assembly via five iterative rounds of
125 polishing with Pilon [19]. The ST167 and ST617 genomes from Chengdu were
126 analysed by mapping raw reads against the hybrid assembled ST167 genome.
127 Mapping was performed using Snippy (<https://github.com/tseemann/snippy>) and the
128 resulting SNP profiles were used to create a consensus sequence for each genome
129 which was aligned using the parsnp alignment tool in Harvest[16]. Analysis of the
130 plasmid containing the *bla*_{NDM-5} gene revealed that it was a 47-kb IncX3 plasmid and
131 there were no antibiotic resistant genes other than *bla*_{NDM-5} located on the plasmid.

132 Specific mapping of the raw Illumina data against the pNDM5 plasmid was
133 performed for all strains as described above.

134 **Phylogenetic analysis**

135 Pan-genomes were constructed for the ST167, ST617, ST10, and combined
136 datasets using Roary[20] with the --e --mafft setting to create a concatenated
137 alignment of core CDS. The alignments were used to infer ST167, ST617, ST10, and
138 combined phylogenies using RaxML[21] with the GTR-Gamma model of site
139 heterogeneity and 100 bootstrap iterations. Carriage of ESBL and carbapenemase
140 genes was annotated on the trees using Phandango
141 (<https://jameshadfield.github.io/phandango/>), and geographical source was
142 annotated using iTOL[22].

143 **Detection of lineage specific genetic traits**

144 Microbial GWAS was performed using two approaches. First the combined data set
145 pan-genome matrix was used as input for Scoary [23] searching for loci unique to
146 ST167, ST617, and both ST167 and ST617 versus ST10. In parallel we also used
147 SEER [24] to detect kmers significantly associated with ST167, ST617, or both
148 combined versus ST10. The results of both approaches were combined to identify
149 coding loci associated with the emergence of ST167 and ST617. In silico serotyping
150 was performed using two independent methods, SRST2 and SerotypeFinder [25,26].
151 Both methods utilise WGS data to specific O and H antigens to strains. Intergenic
152 regions (IGRs) were investigated using Piggy [27] to search for IGRs which had
153 switched [28] in ST617, ST167, or both compared to ST10. This data was combined
154 with SEER data to identify high-confidence IGR switches associated with the
155 emergence of ST167 and ST617.

156 **Results**

157 **Presence of *E. coli* ST167 and ST617 strains containing the NDM-5**
158 **carbapenemase resistance gene in an ICU ward in West China Hospital.**

159 A total of ten isolates of *E. coli* containing *bla*_{NDM-5} were obtained during the
160 investigation. Nine of these isolates belonged to sequence types ST167/617 (Table
161 1), which are members of the ST10 complex of *E. coli* most commonly associated
162 with mammalian intestinal commensal carriage. Three ST167 isolates (0215, 243
163 and 25) were obtained from swabs or clinical samples collected on admission to
164 hospital, suggesting that they were introduced from external sources. The three
165 patients were all citizens of Chengdu city but they were admitted to different local
166 hospitals before transferring to West China hospital. The remaining ST167 isolates
167 were recovered from swabs or samples collected at least 3 days after admission to
168 the ICU of West China hospital, suggesting that they were acquired during their ICU
169 stay. ST167 *E. coli* carrying *bla*_{NDM-5} caused infections (bacteremia and abdominal
170 infection) in only two patients but colonised the others. Both ST617 *E. coli* carrying
171 *bla*_{NDM-5} only colonised patients. All patients colonised or infected with *E. coli*
172 carrying *bla*_{NDM-5} of ST167 or ST617 had received carbapenems before the recovery
173 of the isolates.

174 **SNP analysis suggests continued dissemination of strains from a central**
175 **reservoir and sharing of resistance plasmid between lineages.**

176 To determine the level of relatedness between all isolated strains we mapped reads
177 of all the strains against a closed ST167 strain (strain 1237) generated by a
178 combination of Illumina and MinIon sequence data. The resulting high-resolution
179 SNP alignment showed the distance between the ST167 and ST617 strains to be
180 over 25,000 SNPs, confirming they are distinct lineages, with the two ST617 isolates
181 separated by just 7 SNPs. Deeper analysis of the ST167 cluster of strains showed

182 diversity ranging from 5 to 799 SNPs (Fig 1). Strains 936 and 1222 (both carriage
183 isolates) are the most closely related isolates with just 5 SNPs difference between
184 them, with both strains being acquired by patients in the ICU within one month of
185 each other. However these strains are 73 SNPs different from a strain isolated the
186 exact same month on the ICU from a strain (1237) that was acquired in the ICU. This
187 is almost double the genetic distance (46 SNPs) from a strain acquired (442 and 57,
188 isolated from the same patient) in the ICU two months earlier. These distances are
189 also larger than those for any isolate to the first two strains brought into the ICU,
190 strain 0215 and strain 243, which differ from all other isolates by around 30 SNPs,
191 and from each other by 15 SNPs. Such an observation suggests a potential
192 combination of patient-to-patient transmission in the affected ICU [29], along with the
193 continued dissemination of the strain from a central reservoir where there is an
194 accumulation of diversity [29,30]. Genomic analysis also allows us to identify a
195 second introgression of an ST167 strain (25) from the community, which is over 700
196 SNPs different from the other isolates. Mapping of the raw sequence data against
197 the 43kb IncX3 plasmid containing *bla_{NDM-5}* also confirmed that the plasmid present
198 in the ST617 strains was identical to that in all of the ST167 strains with just two
199 detectable SNPs difference across the isolates.

200 **MDR ST167 and ST617 *E. coli* have been isolated across the world.**

201 We sought to contextualise the wider relevance of our Chengdu isolates by
202 investigating the wider prevalence of ST167 and ST617 strains. We searched the
203 Enterobase *E. coli* database and recovered a total of 87 genomes of ST167 (table
204 S1) and 86 genomes of ST617 (table S2), isolated from across the world. A core
205 CDS-based phylogeny of both lineages showed a diverse set of genomes with
206 around 17,000 SNPs in ST167 and around 15,000 SNPs in ST617. Annotation of the

207 ST617 phylogeny with β -lactamase gene carriage shows a high prevalence of the
208 *bla*_{CTX-M-15} ESBL gene in characterised isolates (Fig 2A). Annotation of the ST167
209 phylogeny with β -lactamase gene carriage (Fig 2B) shows a pattern of resistance
210 gene carriage, with multiple independent acquisitions of carbapenemase across the
211 phylogeny including *bla*_{NDM-1}, *bla*_{NDM-5}, *bla*_{NDM-7}, *bla*_{OXA-181}, and *bla*_{KPC-3}. For both
212 phylogenies there is clear evidence of isolation of strains from across the globe.

213 **Evolutionary genomic analysis correlates switches in LPS gene content with**
214 **the emergence of the ST167/ST617 lineage**

215 Both ST167 and ST617 are single locus variants of the ST10 lineage of *E. coli*. ST10
216 is the most abundant lineage of *E. coli* represented in the Enterobase database and
217 contains isolates ranging from drug susceptible environmental and human
218 commensal strains, to multi-drug resistant strains isolated from human clinical UTI
219 and bacteraemia infections. We selected 256 ST10 genomes from Enterobase
220 (Table S3) to represent the known spectrum of ST10 diversity present in the
221 database, and merged this data set with our publically available ST167/ST617
222 genome data set to create a larger ST10 complex phylogeny (Fig 3). The resulting
223 phylogeny shows that ST167 and ST617 are sister clades with respect to ST10, with
224 ST617 emerging as a nested clade from a single outlying ST167 genome, though
225 the distance between ST167 and ST617 is around 18,000 SNPs.

226 Given the phylogenetic pattern of ST167 and ST617 with respect to ST10, we sought
227 to determine if their emergence from ST10 is associated with defined evolutionary
228 events. We used a combined GWAS approach to compare the ST167/617 genomes
229 with ST10, using both SEER and SCOARY analysis of a pangenome matrix. Only
230 loci considered to be significantly associated with one lineage over the other by both
231 methods were further investigated (Dataset S1). Most striking was the absence of

232 the *wzzB* gene and *wca* biosynthetic cluster in ST167/ST617 whilst the majority of
233 the ST10 genomes contained both (Figure 4). These genes are involved in LPS
234 biosynthesis with *wzzB* being the master controller of O antigen chain length in the
235 *wzx/wzy* pathway, whilst *wca* genes are responsible for colonic acid biosynthesis
236 [31]. In silico *E. coli* serotyping [32] established that ST167 and ST617 demonstrate
237 the exact same O antigenic type (O32novel) with similarity also seen in H antigen
238 type (H9 or H10) (Figure 3), whilst the SerotypeFinder database identified the
239 strains as O89.

240 Our combined GWAS analysis also identified another ~90 CDS which were present
241 across the entire data set, but which had distinct alleles in the ST167/ST617
242 genomes compared to those in ST10 (Figure 5, Dataset S2). Many of these CDS
243 encode dehydrogenase enzymes involved in anaerobic metabolism, or are part of
244 the *cob/pdu/eut* operons known to be involved in anaerobic respiration during
245 intestinal inflammation [33]. This would appear to suggest differential evolutionary
246 events in key genes involved in anaerobic metabolism in the formation of the
247 ST167/ST617 lineage. Also present were unique alleles in core CDS involved in acid
248 and bile salt tolerance, and a number of fimbrial-like proteins. In conjunction these
249 data would suggest differential evolutionary forces acting on loci involved in
250 mammalian colonisation in ST167/617 in comparison to ST10. Furthermore a
251 combined SEER and Piggy approach identified unique sequences in 17 intergenic
252 regions (IGRs) upstream of core CDS in ST167/617 that were distinct from ST10,
253 including IGRs upstream of anaerobic metabolic loci also present in the
254 SEER/SCOARY analysis (Dataset S1).

255 **Discussion**

256 Our data presented here provide a comprehensive genomic analysis of two lineages
257 of carbapenem resistant *E. coli* infecting multiple patients within the ICU of West
258 China hospital. Both these lineages, ST167 and ST617, are members of the larger
259 ST10 complex of *E. coli*, which is ubiquitously found in environmental, human
260 clinical, and mammalian intestinal commensal sampling. Our analysis is the first
261 genome level characterisation of strains belonging to ST167 or ST617, despite a
262 number of single site reports of clinical infections with both lineages existing in the
263 literature. From a public health perspective our genomic characterisation of the
264 ST167 and ST617 strains isolated from the ICU provide insight into the dynamics of
265 carbapenem resistant *E. coli* infection. Our genomic epidemiology analysis of the
266 ST167 strains suggests a scenario whereby a strain circulating in the Chengdu area
267 enters the hospital setting and establishes a reservoir in the hospital environment,
268 leading to continued episodes of acquisition and infection from a central source
269 where diversity is accumulating [30]. This is also supported by the observation of
270 ST617 being introduced into the ICU by a patient followed by acquisition in the ICU a
271 month later by a strain just 7 SNPs different.

272 Our analysis also shows that the diversity which accumulates in the genome of the
273 ST167 isolates during the course of the investigation is not mirrored by diversity in
274 the plasmid carrying the *bla_{NDM-5}* gene. Only 1 SNP difference existed between the
275 sequence of this plasmid in the ST167 isolates, and only 2 SNPs difference between
276 the ST167 and ST617 isolates. As a result it is impossible to tell if the IncX3 plasmid
277 associated with dissemination of *bla_{NDM-5}* in China [34] was transferred between
278 ST167 and ST617 in the hospital, or if the plasmid is highly stable with only
279 deleterious mutations occurring and quickly purged from the population. Clearly
280 there is a need for more thorough and detailed analysis of various resistance

281 plasmids within and between hospitals, such as was done recently for NDM-1
282 plasmids in Latin America [35].

283 The lack of appropriately designed isolate collection and sequencing strategy means
284 it is impossible to conduct any form of genomic epidemiological analyses of these *E.*
285 *coli* lineages beyond our Chinese investigation. However the ready availability of a
286 large number of good-quality, curated genome assemblies in the Enterobase
287 genome database do allow us to delve deeper into the evolutionary history of *E. coli*
288 ST167 and ST617. Whilst data generated and uploaded to Enterobase is prone to a
289 bias towards clinical MDR strains, it is still clear that ESBL and carbapenem resistant
290 strains of both these lineages have been isolated from across the world over the past
291 20 or so years (Tables S1 and S2). Phylogenetic analysis of almost 200 publically
292 available genome sequences, contextualised by an equal number of ST10 genomes
293 allows us to determine that ST617 shares a common ancestor with ST167 distinct
294 from ST10.

295 Comparative genomic analysis and GWAS for traits specific to ST167 and ST617
296 compared to ST10 also support emergence along a shared evolutionary branch. Key
297 among these is the complete loss of the *wca* operon encoding colanic acid
298 biosynthesis in the LPS biosynthesis pathway. The majority of *E. coli* produce their
299 LPS utilising the O-unit translocation pathway encoded for by *wzx* and *wzy*[31]. This
300 method utilises glycosyltransferases to assemble the O antigen in units at the
301 cytoplasmic membrane. These units are then translocated by *Wzx* and polymerized
302 by *Wzy* until the O antigen chain length is reached. This mechanism is utilised by the
303 majority of the ST10 isolates, however genomic analysis shows that ST167 and
304 ST617 utilise an alternative *wzm/wzt* ATP transporter pathway. This biosynthetic
305 pathway assembles the entire O-antigen on the cytoplasmic face before *Wzt*

306 transports the O-chain across [31], resulting in an O-antigen with truncated chain
307 length. O-antigen chain length plays a major role in pathogenicity of Gram negative
308 organisms, and it has been demonstrated that loss of long O-antigen chains in
309 *Salmonella* optimizes immune evasion and allows successful colonisation [36].
310 Alongside the LPS genetic changes, we also observed unique alleles of anaerobic
311 metabolism genes and genes potentially involved in host colonisation in ST167/617
312 compared to ST10. Recent modelling data has shown that any factor influencing the
313 ability of a bacterium to colonise a host will also influence its likelihood of evolving
314 antimicrobial resistance [37].

315 **Conclusions**

316 We provide data for the first ever, single hospital genomic analysis of clinical isolates
317 of carbapenem resistant *E. coli* belonging to the ST167/617 lineage. Our data
318 presented here provide evidence for evolutionary events that would affect microbial
319 interaction with a mammalian host underpinning the emergence of the ST167/617
320 lineage from ST10. There is also evidence for lineage specific alterations in
321 intergenic regions in ST167/617, a phenomenon which has already been described
322 as underpinning the emergence of MDR plasmid-containing *E. coli* ST131 strains
323 [28]. Clearly there is now a need for a fully designed genomic epidemiological
324 investigation of lineages of *E. coli* associated with carriage of carbapenem resistance
325 plasmids arising from the ST10 clade. Such a study will fully inform us of any
326 potential parallelism in the evolution of MDR lineages of *E. coli*, and of the true
327 nature and scope of their prevalence and global dissemination.

328 **Declarations**

329 Ethics approval: Not applicable

330 Consent for publication: Not applicable

331 Availability of data: All raw sequence data used in this study is deposited in the ENA
332 or SRA, with full accession numbers available in tables S1, S2 and S3. The fastq
333 data for our Minlon assembled genome is available at PRJNA422975.

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453

454

455 Table 1. Sources and patients of *E. coli* isolated in West China Hospital carrying *bla*_{NDM-5}

Isolate	ST	Collection date	Collection, days after admission to ICU	Source	The host patient	
					Age	Sex
0215	167	2013-09	0	Rectal swab	75	Male
243	167	2014-05	0	Rectal swab	84	Female
442 ^a	167	2014-07	7	Rectal swab	39	Male
57 ^a	167	2014-07	16	Blood	39	Male
936	167	2014-09	12	Rectal swab	63	Female
1222	167	2014-10	7	Rectal swab	17	Male
1237	167	2014-10	3	Rectal swab	44	Female
25	167	2014-10	0	Ascite	45	Female
784	617	2014-08	0	Rectal swab	82	Male
1037	617	2014-09	12	Rectal swab	85	Male

456 ^aIsolates 442 and 57 were recovered from the same patient.

457

458 Figure 1: Maximum likelihood phylogenetic tree of *E. coli* ST167 strains isolated from
459 the ICU of West China hospital. The phylogeny is inferred from a SNP alignment
460 obtained by mapping raw data against a MinIon/Illumina hybrid complete assembly
461 of isolate 1237. The annotation denotes the presence of ESBL and CPE associated
462 β -lactamases as determined by Abricate.

463

464 Figure 2: Maximum likelihood phylogenetic trees of a global collection of (A) ST617
465 and (B) ST167 strains. The phylogeny is inferred from an alignment of concatenated
466 core CDS sequences as determined by Roary, and is mid-point rooted. The
467 annotation denotes the presence of ESBL and CPE associated β -lactamases as
468 determined by Abricate.

469

470 Figure 3: Cladogram inferred from a maximum likelihood phylogenetic tree of ST10
471 strains (black branches), ST617 (red branches) and ST167 (blue branches) strains.
472 The phylogeny is inferred from an alignment of concatenated core CDS sequences
473 as determined by Roary, and is mid-point rooted. The outermost annotation denotes
474 the presence of ESBL and CPE associated β -lactamases as determined by Abricate.
475 The inner ring of annotation on the tree indicates O-antigen type as determined by in
476 silico typing using srst2. The outer ring of annotation indicates H-antigen flagellar
477 type as determined in silico using srst2.

478

479 Figure 4: Diagrammatic comparison of the region of the genome of *E. coli* MG1655
480 (top of diagram) and the ST167 strain 1237 (bottom of diagram) containing the *wca*
481 colanic acid biosynthesis locus.

482

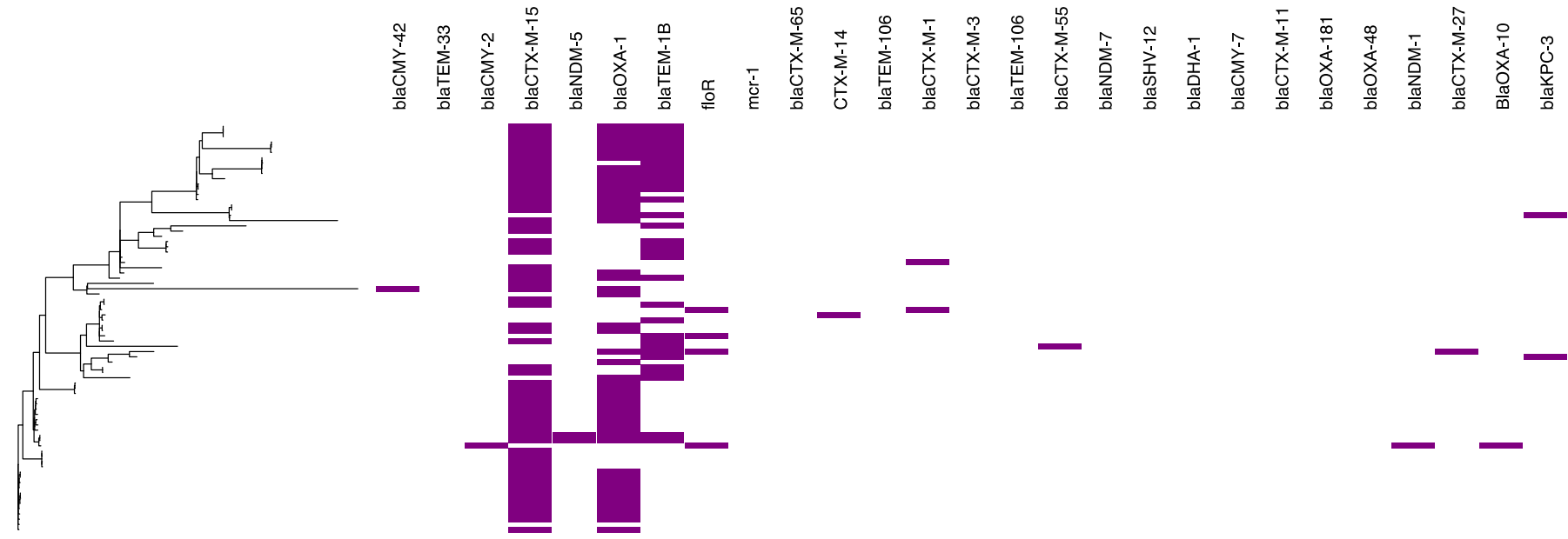
483 Figure 5: Manhattan skyline plot showing position of kmers identified by GWAS
484 analysis as being significantly associated with ST167/617 compared to ST10. The x
485 axis indicates the position on the WCHec1237 complete genome assembly, whilst
486 the Y axis indicates the numbers of statistically significant kmers mapping at that
487 position. Hits indicated in red are either intergenic regions (labelled IGR) identified as
488 being unique by both Piggy and SEER analysis, or anaerobic metabolism loci
489 identified as significantly different by both SEER and Scoary.

Tree scale: 0.1

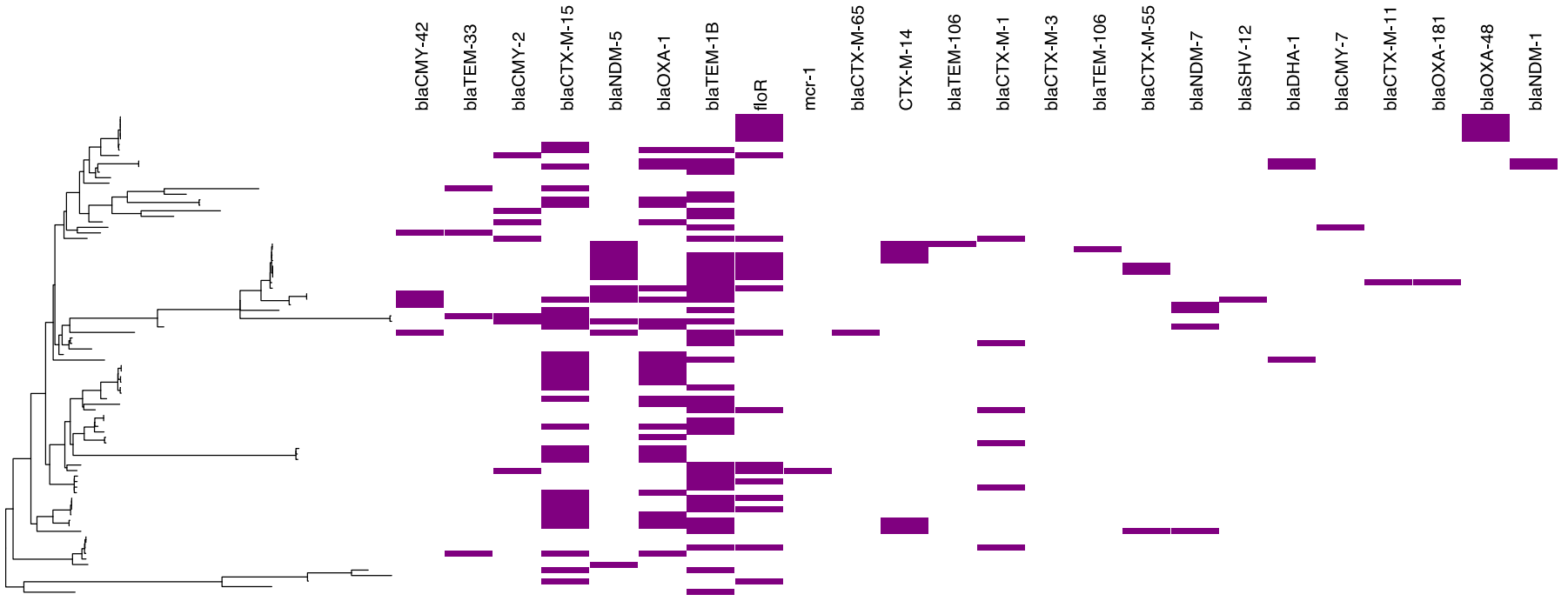


blaNDM-5
blaOXA-1
blaTEM-1B
blaTEM-106
blaTEM-106
blaCTX-M-55

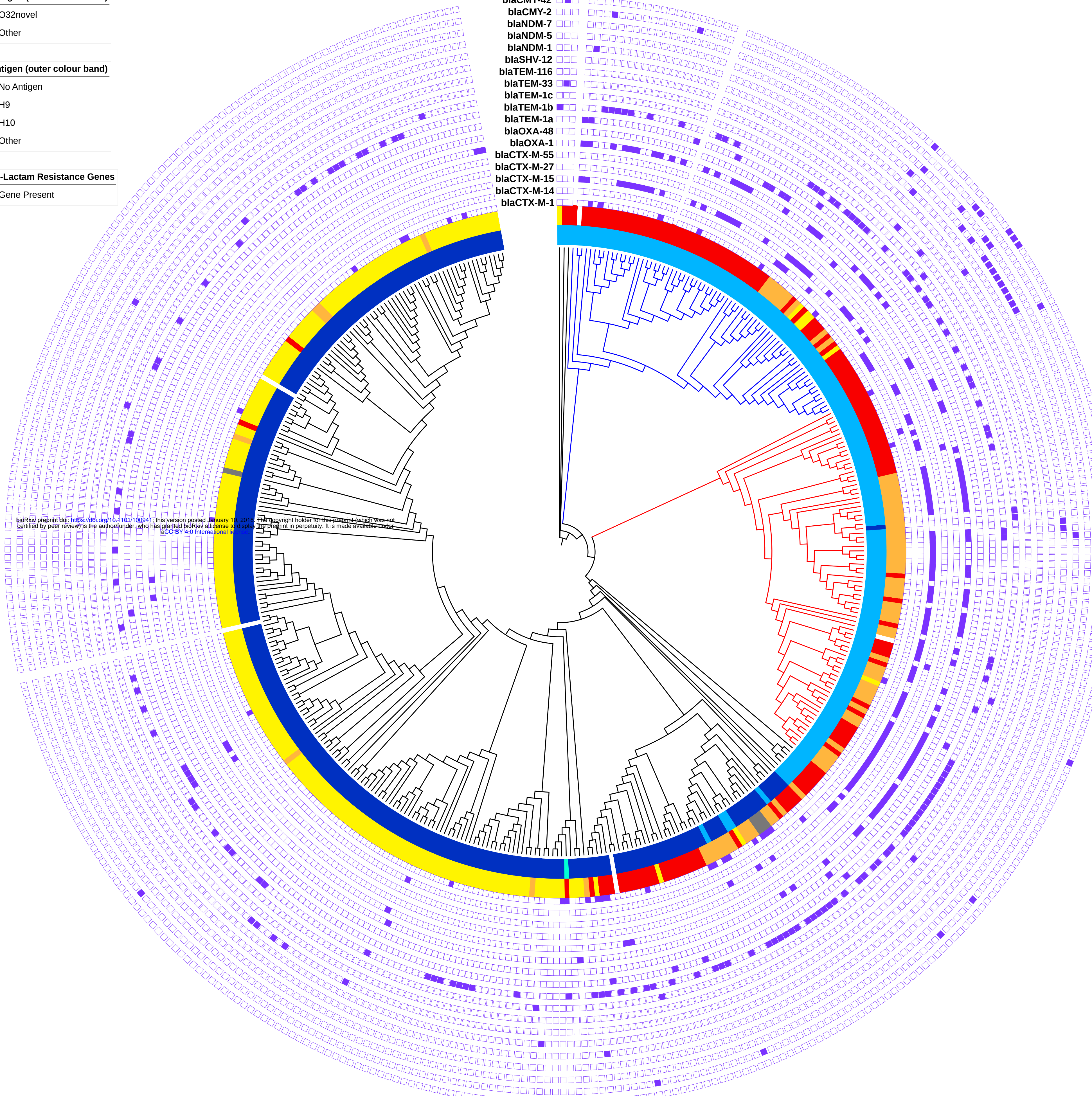
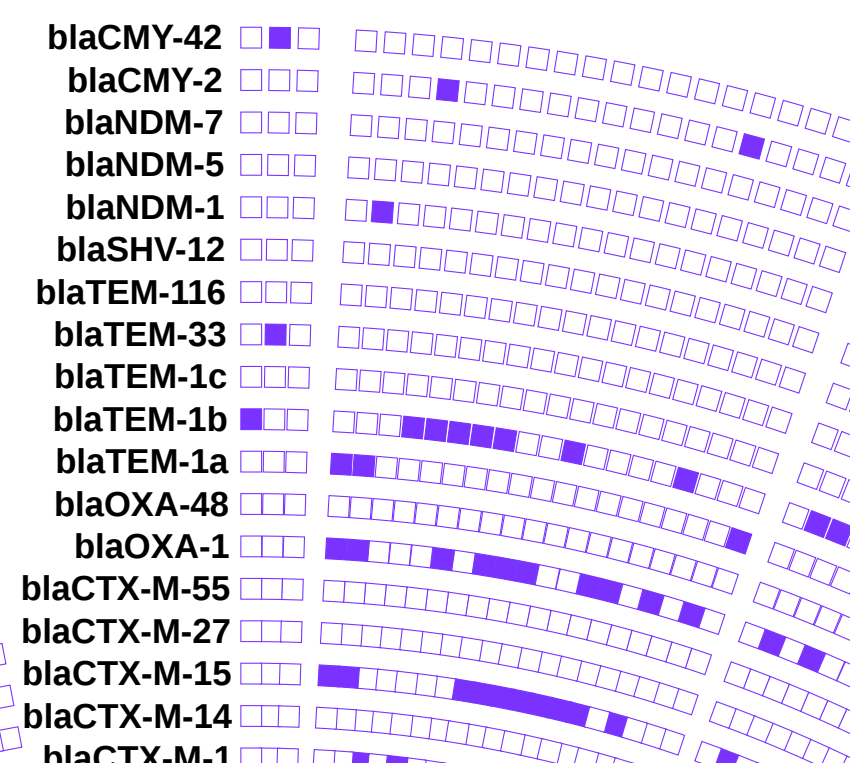
SNP Distance Matrix	1222	215	243	25	442	57	936	1237
1222	0	30	39	725	45	43	5	74
215	30	0	15	705	25	23	31	100
243	39	15	0	714	34	32	40	113
25	725	705	714	0	720	718	726	799
442	45	25	34	720	0	6	46	113
57	43	23	32	718	6	0	44	117
936	5	31	40	726	46	44	0	73
1237	74	100	113	799	113	117	73	0



A



B



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