Methods paper template

SeroBA: rapid high-throughput serotyping

of Streptococcus pneumoniae from whole

genome sequence data

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ABSTRACT

Streptococcus pneumoniae is responsible for 240,000 - 460,000 deaths in children under 5 years of age each year. Accurate identification of pneumococcal serotypes is important for tracking the distribution and evolution of serotypes following the introduction of effective vaccines. Recent efforts have been made to infer serotypes directly from genomic data but current software approaches are limited and do not scale well. Here, we introduce a novel method, SeroBA, which uses a hybrid assembly and mapping approach. We compared SeroBA against real and simulated data and present results on the concordance and computational performance against a validation dataset, the robustness and scalability when analysing a large dataset, and the impact of varying the depth of coverage in the cps locus region on sequence-based serotyping. SeroBA can predict serotypes, by identifying the cps locus, directly from raw whole genome sequencing read data with 98% concordance using a k-mer based method, can process 10,000 samples in just over 1 day using a standard server and can call serotypes at a coverage as low as 10x. SeroBA is implemented in Python3 and is freely available

under an open source GPLv3 license from: https://github.com/sanger-pathogens/seroba

DATA SUMMARY

- The reference genome *Streptococcus pneumoniae* ATCC 700669 is available from National
 Center for Biotechnology Information (NCBI) with the accession number: FM211187
 - 2. Simulated paired end reads for experiment 2 have been deposited in FigShare: https://doi.org/10.6084/m9.figshare.5086054.v1
 - 3. Accession numbers for all other experiments are listed in Supplementary Table S1 and Supplementary Table S2.

I/We confirm all supporting data, code and protocols have been provided within the article or through supplementary data files. \boxtimes

IMPACT STATEMENT

- 44 This article describes SeroBA, a k-mer based method for predicting the serotypes of Streptococcus
- 45 pneumoniae from Whole Genome Sequencing (WGS) data. SeroBA can identify 92 serotypes and 2
- subtypes with constant memory usage and low computational costs. We showed that SeroBA is able
- 47 to reliably predict serotypes at a depth of coverage as low as 10x and is scalable to large datasets.

INTRODUCTION

- Streptococcus pneumoniae (the pneumococcus) is a clinically important bacterium estimated to cause 700,000 to 1 million deaths in children under 5 years of age annually prior to the introduction of polysaccharide conjugate vaccines (O'Brien et al. 2009). The capsular polysaccharide biosynthesis (cps) locus, which encodes the serotype, is a major virulence factor in S. pneumoniae. The introduction of multi-valent pneumococcal conjugate vaccines has led to a substantial change in the circulating serotypes (Menezes et al. 2011) and decreased the number of deaths in children under 5 years of age to 240,000 460,000 annually (Wahl et al. 2016). By surveilling the circulating serotypes, the epidemiological trends of S. pneumoniae can be observed, pre- and post-vaccination. The rapid reduction in the cost of whole genome sequencing (WGS) has lead to its extensive use in the monitoring of pneumococcal serotypes (Lang et al. 2015)
- To date there are nearly 100 known serotypes described for *S. pneumoniae* based on differing biochemical and antigenic properties of the capsule (Van Tonder et al. 2017). The *cps* locus, which encodes the serotype, can be very similar between serotypes from the same serogroup (such as serogroup 6) with some of them distinguished by a single nucleotide polymorphism (SNP), rendering a gene non-functional or altering the sugar linkage (Bentley et al. 2006). However, dissimilar loci may be grouped in the serogroup as they elicit a similar antibody response (e.g. serogroup 35). The large number of identified serotypes, and the high similarity between them, makes it challenging to computationally predict the serotype based on WGS data. Another challenge is recombination with other serotypes resulting in a mosaic *cps* locus (Salter et al. 2017) which may or may not affect the polysaccharide being produced. It is possible to have significant variation across the *cps* locus which does not lead to a different polysaccharide capsule being produced (Ko et al. 2013). Conversely novel

serotypes can be generated through these processes and can go unnoticed by antibody-based serotyping (Geno et al.; Park et al. 2007). Finally, mixed populations in a single sample and contamination can lead to ambiguity.

There are a number of methods available to predict serotypes in *S. pneumoniae*. Besides the gold standard method, Quellung, which can be subjective in certain cases, there are five additional methods based on serological tests, at least eight semi-automated molecular tests based on PCR and one method that uses microarray data for serotyping (Jauneikaite et al. 2015). There are a number of insilico methods to detect the *cps* locus, which can then be used to predict serotypes from WGS data (Croucher et al. 2009; Leung et al. 2012; Kapatai et al. 2016; Metcalf et al. 2016). However, the tool described by Metcalf *et al.* is an in-house tool, and the tool described by Leung *et al.* only covers half of the known serotypes.

The only fully-featured automated pipeline for serotyping *S. pneumoniae* WGS data is PneumoCat, which was developed by Public Health England (PHE) (Kapatai et al. 2016). PneumoCat provides a capsular type variant (CTV) database including FASTA sequences for 92 serotypes and 2 subtypes as well as additional information about alleles, genes and SNPs for serotypes within specific serogroups. To predict a serotype, PneumoCat uses bowtie2 (Langmead and Salzberg 2012) to align reads to all serotype sequences. If the serotype belongs to a predefined serogroup or the serotype sequence could not be unambiguously identified, PneumoCat maps the reads to serogroup specific genes to identify the genetic variants. It is however computationally and memory intensive, and does not work with samples where there is a low depth of coverage in the *cps* locus region, as shown below.

To address these problems, we developed SeroBA, which makes efficient use of computational resources and can accurately detect the *cps* locus even at low coverage, and thus predict serotypes from WGS data using a database adapted from PneumoCAT (Kapatai et al. 2016). This accuracy was evaluated by comparing the results to a standard, validated dataset from PHE (Kapatai et al. 2016). We showed that it is scalable and robust by calculating the serotypes of 9,886 samples from the GPS project, an ongoing global pneumococcal sequencing project, on commodity hardware. Simulated read data, with varying coverage over a known reference sequence, was used to show the minimum depth of coverage required to call a serotype.

THEORY AND IMPLEMENTATION

SeroBA takes Illumina paired-end reads in FASTQ format as input as shown in Figure 1. Precomputed databases are bundled with the application that describe the serotypes. The first of these is a k-mer counts database for every serotype sequence produced by KMC (v3.0.0) (Kokot et al. 2017), the second is an ARIBA (v 2.9.3) (Hunt et al. 2017) compatible database for every serotype, and the third is a capsular type variant (CTV) database, including FASTA sequences for 92 serotypes

and 2 subtypes, as well as additional information about alleles, genes and SNPs for serotypes in 113 114 specific serogroups. These databases were adapted from PneumoCAT (Kapatai et al. 2016). A k-mer 115 analysis is performed on the input reads, and the intersection is found between these k-mers and the 116 precomputed k-mer database of serotypes. The k-mer coverage of the input reads over the serotype 117 sequences is normalised to the sequence length of the serotype sequence and the serotype with the 118 highest normalised sequence coverage is selected. This step identifies the possible serotype or 119 serogroup and ARIBA is used to confirm the presence of the selected serotype from the raw reads. If a 120 serogroup is selected, the cps sequence produced by ARIBA and serotype specific genes are aligned 121 with nucmer (Kurtz et al. 2004) to find specific variants, such as presence/absence of genes, SNPs, or 122 gene truncations as defined in the CTV. The output of SeroBA includes the predicted serotype with 123 detailed information that led to the prediction, as well as an assembly of the cps locus sequences.

VALIDATION DATASET

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- 126 A validation dataset consisting of 2,065 UK isolates (Supplementary Table S1) retrieved from the
- 127 PHE archive was originally used to evaluate PneumoCat. It consists of 72 out of 92 known serotypes,
- including all serotypes contained in commercial vaccines, and 19 non-typeable samples. The serotype
- of each sample was confirmed by latex agglutination with Statens Serum Institut typing sera (Kapatai
- et al. 2016). PneumoCat v1.1 (Kapatai et al. 2016) and SeroBA v0.1 were evaluated on an AMD
- Opteron 6272 server running Ubuntu 12.04.2 LTS, with 32 cores and 256GB of RAM. A single CPU
- 132 (Central Processing Unit) was used for each experiment, repeated 10 times, with the mean memory
- usage and wall clock times noted.
- 134 Figure 2 summarises the serotypes called for each sample by each method. As serotyping with latex
- agglutination and Quellung can be subjective (Selva et al. 2012) and potentially imprecise, a serotype
- was said to be concordant if two or more methods agreed on the same serotype. This gave a
- concordance of 98.4% for SeroBA and 98.5% for PneumoCat with latex agglutination method. The
- reference sequences in the CTV for the serotypes 24A, 24B, 24F may not be representative for the
- circulating strains (Kapatai et al. 2016), so SeroBA will report serogroup 24 instead of reporting the
- serotype. As discussed in (Kapatai et al. 2016) serological predciton in serogoup 12 were error-prone,
- so a prediction of either 12B or 12F were counted as concordant.
- 143 The overall computational resources required to call the serotypes differed substantially between
- PneumoCat and SeroBA (Table 1): SeroBA was fifteen times faster and required five times less
- memory than PneumoCat.

EVALUATION USING A LARGE DATASET

- To show the scalability of SeroBA to large datasets, we took 9,477 S. pneumoniae samples from the
- 148 GPS project (Supplementary Table S2) and calculated the serotypes using the hardware setup
- 149 previously described. A comparison with serotypes determined using experimental methods gave an
- accuracy of 98.2% for SeroBA. The serotypes were determined by different experimental methods as
- listed in Supplementary Table S2. Using all 32 cores resulted in a total wall-clock time of 823.78
- hours. This showed that SeroBA can robustly scale to large datasets.

IMPACT OF DEPTH OF COVERAGE

The effect of depth of coverage on the serotyping results produced by SeroBA and PneumoCat was evaluated by simulating perfect paired end reads over the serotype 23F *cps* locus from the *Streptococcus pneumoniae* ATCC 700669 (accession code: FM211187) reference genome (Croucher et al. 2009). Flanking regions of 1,000 bases were included on either side of the *cps* locus to eliminate confounding effects of low coverage at the locus boundaries. The reads with a length of 125 base pairs were generated by FASTAQ (v3.15.0) (https://github.com/sanger-pathogens/Fastaq) with an insert size of 500 bases and standard deviation of 50 with varying depth of coverage from 1x to 50x and from 100x to 350x in steps of 50. SeroBA started to predict serotype 23F at a depth of coverage of 10x while PneumoCat required nearly twice as much, needing at least 19x coverage. The computational resources required by SeroBA remained constant with increasing depth of coverage; however, the computational resource requirements of PneumoCat continue to grow linearly (Figure 3). At 350x coverage, PneumoCat took 3 times longer than SeroBA. Similarly, the amount of memory required by SeroBA stabilised at 150MB, regardless of coverage, whereas PneumoCat's memory requirement grew with the depth of coverage, requiring 3 times more than SeroBA at 350x coverage. Each experiment was repeated 10 times and the mean was calculated.

CONCLUSION

In this paper, we described SeroBA a method for predicting serotypes from *S. pneumoniae* Illumina NGS reads. We compared SeroBA and PneumoCat to a gold standard experimental serotyping method and showed that they had approximately the same level of concordance. However, SeroBA was fifteen times faster and required five times less memory than PneumoCat. The assembly of the *cps* locus sequence provides by SeroBA is another key feature that is very useful for further analyses and reference free comparisons. SeroBA was able to predict the serotype from only 10x read depth and scaled well on a large dataset of nearly 10,000 samples with a prediction accuracy of over 98%.

AUTHOR STATEMENTS

[REMOVED FOR BLIND REVIEW]

ABBREVIATIONS

- 186 SNP: Single nucleotide polymorphism
- 187 WGS: Whole genome sequencing
- 188 CTV: Capsular Type Variant database

189 CPS: Capsular polysaccharide biosynthesis 190 GPS: The Global Pneumococcal Sequencing 191 192 REFERENCES 193 194 Bentley SD, Aanensen DM, Mavroidi A, Saunders D, Rabbinowitsch E, Collins M, et al. Genetic 195 Analysis of the Capsular Biosynthetic Locus from All 90 Pneumococcal Serotypes. PLoS Genet 196 [Internet]. 2006;2(3):e31-e31. Available from: 197 http://dx.plos.org/10.1371/journal.pgen.0020031 198 Croucher NJ, Walker D, Romero P, Lennard N, Paterson GK, Bason NC, et al. Role of Conjugative 199 Elements in the Evolution of the Multidrug-Resistant Pandemic Clone Streptococcus 200 pneumoniaeSpain23F ST81. J Bacteriol [Internet]. 2009a Mar;191(5):1480-9. Available from: 201 http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2648205/ 202 Geno KA, Saad JS, Nahm MH. Discovery of Novel Pneumococcal Serotype 35D, a Natural WciG-203 Deficient Variant of Serotype 35B. 204 Hunt M, Mather AE, Sánchez-Busó L, Page AJ, Parkhill J, Keane JA, et al. ARIBA: rapid antimicrobial 205 resistance genotyping directly from sequencing reads. bioRxiv. 2017;118000. 206 Jauneikaite E, Tocheva AS, Jefferies JMC, Gladstone RA, Faust SN, Christodoulides M, et al. Current 207 methods for capsular typing of Streptococcus pneumoniae. Vol. 113, Journal of 208 Microbiological Methods. 2015. p. 41–9. 209 Kapatai G, Sheppard CL, Al-Shahib A, Litt DJ, Underwood AP, Harrison TG, et al. Whole genome 210 sequencing of Streptococcus pneumoniae 2: development, evaluation and verification of 211 targets for serogroup and serotype prediction using an automated pipeline. PeerJ [Internet]. 212 2016a Sep;4:e2477-e2477. Available from: https://peerj.com/articles/2477 213 Ko KS, Baek JY, Song J-H. Capsular gene sequences and genotypes of "serotype 6E" 214 Streptococcus pneumoniae isolates. J Clin Microbiol. 2013 Oct;51(10):3395–9. 215 Kokot M, Długosz M, Deorowicz S. KMC 3: counting and manipulating k-mer statistics. 2017 Jan 27; 216 Kurtz S, Phillippy A, Delcher AL, Smoot M, Shumway M, Antonescu C, et al. Versatile and open 217 software for comparing large genomes. Genome Biol. 2004;5(2):R12. 218 Lang ALS, McNeil SA, Hatchette TF, Elsherif M, Martin I, LeBlanc JJ. Detection and prediction of 219 Streptococcus pneumoniae serotypes directly from nasopharyngeal swabs using PCR. J Med 220 Microbiol. 2015 Aug;64(8):836-44. 221 Langmead B, Salzberg SL. Fast gapped-read alignment with Bowtie 2. Nat Methods. 2012;9(4):357–9. 222 Leung MH, Bryson K, Freystatter K, Pichon B, Edwards G, Charalambous BM, et al. Sequetyping: 223 Serotyping Streptococcus pneumoniae by a single PCR sequencing strategy. J Clin Microbiol. 224 2012;50(7):2419-27. 225 Menezes AP de O, Campos LC, dos Santos MS, Azevedo J, dos Santos RCN, Carvalho M da GS, et al. 226 Serotype distribution and antimicrobial resistance of Streptococcus pneumoniae prior to 227 introduction of the 10-valent pneumococcal conjugate vaccine in Brazil, 2000–2007. Vaccine. 228 2011;29(6):1139-44. 229 Metcalf BJ, Gertz RE, Gladstone RA, Walker H, Sherwood LK, Jackson D, et al. Strain features and 230 distributions in pneumococci from children with invasive disease before and after 13-valent 231 conjugate vaccine implementation in the USA. Clin Microbiol Infect [Internet]. 2016 232 Jan;22(1):60.e9-60.e29. Available from: http://www.ncbi.nlm.nih.gov/pubmed/26363404 233 O'Brien KL, Wolfson LJ, Watt JP, Henkle E, Deloria-Knoll M, McCall N, et al. Burden of disease caused 234 by Streptococcus pneumoniae in children younger than 5 years: global estimates. Lance 235 [Internet]. 2009;374(9693):893-902. Available from: 236 http://www.ncbi.nlm.nih.gov/pubmed/19748398 237 Park IH, Pritchard DG, Cartee R, Brandao A, Brandileone MCC, Nahm MH. Discovery of a new 238 capsular serotype (6C) within serogroup 6 of Streptococcus pneumoniae. J Clin Microbiol. 239 2007 Apr;45(4):1225-33. 240 Salter SJ, Hinds J, Gould KA, Lambertsen L, Hanage WP, Antonio M, et al. Variation at the capsule 241 locus, cps, of mistyped and non-typable Streptococcus pneumoniae isolates. 2017;1231. 242 Selva L, del Amo E, Brotons P, Muñoz-Almagro C. Rapid and easy identification of capsular serotypes 243 of Streptococcus pneumoniae by use of fragment analysis by automated fluorescence-based 244 capillary electrophoresis. J Clin Microbiol. 2012 Nov;50(11):3451-7. 245 Van Tonder AJ, Bray JE, Quirk SJ, Haraldsson G, Jolley KA, Maiden MCJ, et al. Putatively novel 246 serotypes and the potential for reduced vaccine effectiveness: capsular locus diversity 247 revealed among 5405 pneumococcal genomes. 2017; 248 Wahl B, O'Brien KL, Greenbaum A, Liu L, Chu Y, Black R, et al. Global burden of Streptococcus 249 pneumoniae in children younger than 5 years in the pneumococcal conjugate vaccines (PCV) 250 era: 2000-2015. ISPPD-10 [Internet]. 2016 Dec 15; Available from: 251 http://beta.bib.irb.hr/850035 252 253 DATA BIBLIOGRAPHY 254

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FIGURES AND TABLES

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Table 1: Performance of SeroBA and PneumoCat on the validation set

Tool	Mean Wall Clock Time (m)	Mean RAM usage (MB)
PneumoCat	65.84	922.89
SeroBA	4.53	187.82

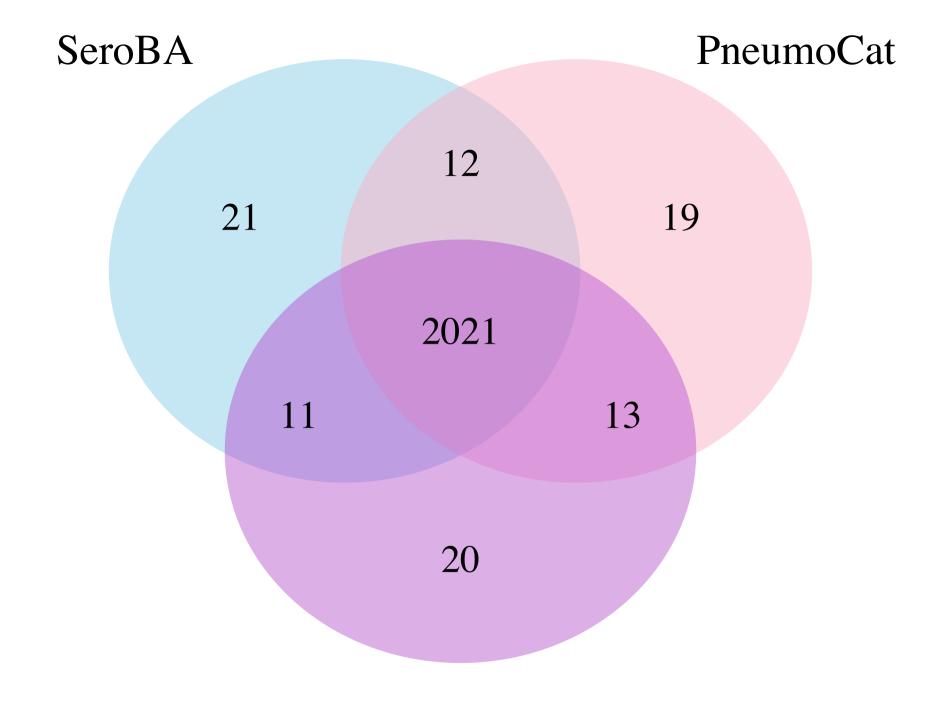
262 Figure 1: Flowchart outlining the main steps of the SeroBA algorithm

Figure 2: Agreement of serotyping results between different methods

264 Figure 3: a) mean CPU time in seconds used by SeroBA and PneumoCat when varying the coverage 265

from 1x to 350x; b) maximum memory allocation of SeroBA and PneumoCat when varying the

266 coverage from 1x to 350x. Each data point represents the mean value of ten identical experiments.



experimental method

