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10 *Mycobacterium* trehalose polyphleates are required for infection by therapeutically useful
11 mycobacteriophages BPs and Muddy
18 Running title: Phage requirement for trehalose polyphleates

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Abstract

Mycobacteriophages are good model systems for understanding their bacterial hosts and show

promise as therapeutic agents for nontuberculous mycobacterium infections. However, little is

known about phage recognition of *Mycobacterium* cell surfaces, or mechanisms of phage

resistance. We show here that surface-exposed trehalose polyphleates (TPPs) are required for

infection of *Mycobacterium abscessus* and *Mycobacterium smegmatis* by clinically useful

phages BPs and Muddy, and that TPP loss leads to defects in adsorption, infection, and confers

resistance. Transposon mutagenesis indicates that TPP loss is the primary mechanism for

phage resistance. Spontaneous phage resistance occurs through TPP loss, and some *M.*

abscessus clinical isolates are phage-insensitive due to TPP absence. Both BPs and Muddy

become TPP-independent through single amino acid substitutions in their tail spike proteins,

and *M. abscessus* mutants resistant to TPP-independent phages reveal additional resistance

mechanisms. Clinical use of BPs and Muddy TPP-independent mutants should preempt phage

resistance caused by TPP loss.

Introduction

Nontuberculous mycobacteria (NTM) include several important human pathogens such as *Mycobacterium abscessus* and *Mycobacterium avium*[1,2]. These infections are often refractory to effective antibiotic treatment due to both intrinsic and acquired resistance mutations, and new treatment options are needed[3]. The therapeutic application of mycobacteriophages shows some promise for the treatment of pulmonary infections in persons with cystic fibrosis[4-6], disseminated infection following bilateral lung transplantation[4], and disseminated *Mycobacterium chelonae* infection[7]. However, broadening therapy beyond single-patient compassionate use applications will require expansion of the repertoire of therapeutically useful phages, and increasing host range such that a higher proportion of clinical isolates can be treated[5,8,9]. Clinical administration of bacteriophages is anticipated to give rise to phage resistant mutants and disease recurrence[10], but the frequency and mechanisms of mycobacteriophage resistance are poorly understood[11]. Very few mycobacteriophage receptors are known, although glycopeptidolipids (GPLs) are proposed as receptors for mycobacteriophage I3 in *Mycobacterium smegmatis*[12].

Over 12,000 individual mycobacteriophages have been described, with most being isolated on *M. smegmatis*[13]. The genome sequences of 2,200 of these show them to be highly diverse genetically and pervasively mosaic[14,15]. They can be sorted into groups of genomically related phages (e.g. Cluster A, B, C etc.), some of which can be readily divided into subclusters (e.g. Subcluster A1, A2, A3 etc.) based on sequence variation[16,17]. Seven of the sequenced phages currently have no close relatives and are designated as 'Singletons'. A subset of these phages has relatively broad host range and are also able to efficiently infect *Mycobacterium tuberculosis*, including phages in Clusters/Subclusters A2, A3, G1, K1, K2, K3, K4, and AB[18,19]. A similar subset of phages also infects some clinical isolates of *M. abscessus*, although it is noteworthy that phage host ranges on these strains is highly variable (even for related phages

within clusters/subclusters), and is highly variable among different clinical isolates[4,9]. There is

also substantial variation in the outcomes of phage infection of *M. abscessus* strains, with

notable differences between rough and smooth colony morphotypes[9]. For example, a smaller

proportion of smooth isolates are susceptible to phage infection than rough strains – as

determined by plaque formation – and none of the smooth strains are efficiently killed by any

phage tested[9].

Mycobacterial cell walls characteristically have a mycolic acid-rich outer layer referred to as the

mycobacterial outer membrane or mycomembrane[20]. In addition to abundant mycolic acids,

there are numerous other types of complex molecules including multiple acylated lipids such as

di- and polyacyltrehalose (DAT and PAT), phthiocerol dimycocerosate (PDIM) and

sulfoglycolipids (SGL), although not all are found in all *Mycobacterium* species. Smooth strains

of *M. abscessus* have abundant GPLs although these are lacking or greatly less abundant in

rough strains[21,22]. Recently, it has been shown that some mycobacterial species, including *M.*

abscessus, have trehalose polyphleates (TPPs), which are high-molecular-weight, surface-

exposed glycolipids, in their cell walls[23,24]. These TPPs may be important for *M. abscessus*

virulence and are associated with clumping and cording[24]. A five gene cluster, – including a

polyketide synthetase (Pks) – is required for TPP biosynthesis and TPP precursor (DAT)

transport to the outer surface of the cell by MmpL10[25]. TPPs are not present in *M. tuberculosis*

although DAT and PAT are[25]. The specific roles of TPPs are not known, but their position on the

outer surface makes them candidates for use as phage receptors.

Here, we show that TPPs are required for the binding and infection of *M. abscessus* by phages

BPs and Muddy. These phages share little or no nucleotide similarity but both have been used

therapeutically, sometimes in combination with each other[4,26]. *M. abscessus* transposon

insertion mutants that are resistant to these phages map in all five genes involved in TPP

synthesis, all have lost TPPs from their cell walls, and phage adsorption is lost. Spontaneous

phage resistant mutants of some *M. abscessus* clinical isolates also have mutations in the

known TPP synthesis genes, and some *M. abscessus* clinical isolates that are insensitive to

BPs and Muddy are naturally defective in TPPs. However, the TPP requirement can be readily

overcome by mutations in phage tail spike proteins, suggesting that TPPs are acting as a co-

receptor, and the cell wall binding target of the phages is likely essential for mycobacterial

viability. *M. abscessus* strains resistant to BPs and Muddy TPP-independent mutants reveal

new mechanisms of phage resistance.

Results

Development of a transposon system for mutagenesis of *M. abscessus* clinical isolates

M. abscessus GD01 (subspecies *massiliense*) was selected for transposon mutagenesis as it is

the first clinical isolate treated therapeutically[4] and is killed well by phages Muddy, ZoeJΔ*45*,

and BPsΔ*33*HTH_HRM10, mapping in Clusters AB, K2, and G1, respectively. Muddy is a lytic

phage and ZoeJΔ*45* and BPsΔ*33*HTH_HRM10 are engineered lytic derivatives of ZoeJ[27] and

BPs[28], respectively. Because GD01 – like many *M. abscessus* isolates – is kanamycin resistant

(MIC>128 μg/mL)[29], we re-engineered the extant Kan[R] MycoMarT7 transposon using CRISPY-

BRED[30] to include a Hyg[R] cassette, constructing derivatives both with and without the existing

R6Kγ origin of replication (Fig. 1A). The shorter transposon (MycoMarT7-Hyg2) transduced

strain GD01 ~100 times more efficiently than the longer MycoMarT7-Hyg1 transposon; this

efficiency difference was not observed for *M. smegmatis*. We transduced strain GD01 with

MycoMarT7-Hyg2 and selected Hyg-resistant transductants on solid media to yield a random

mutagenesis library (Fig. 1B). We note that the parent of the transposon delivery phages, TM4,

does not form plaques on any *M. abscessus* strain[9] but efficiently delivers DNA to *M. abscessus*

cells[31].

BPs𝚫*33*HTH_HRM10 and Muddy Tn resistant mutants are defective in trehalose

polyphleates

To identify *M. abscessus* GD01 phage resistant mutants, the Tn library was plated on solid

media seeded with either BPs𝚫*33*HTH_HRM10 or Muddy. Single colonies were recovered at a

frequency of ~10^{-3} and twenty individual colonies were picked from each selection, rescreened,

and characterized (Fig. 1, Fig. S1, Table S1). Eighteen of the 20 BPs𝚫*33*HTH_HRM10 resistant

candidates were mapped, all of which have transposon insertions in a gene cluster involved in

trehalose polyphleates synthesis; some appear have secondary transposon insertions mapping

elsewhere (Table S1, Fig. 1C, D). Thirteen of the 20 Muddy resistant candidates were mapped

and surprisingly all also contain insertions in TPP synthesis genes (Table S1, Fig. 1C, D). TPP

synthesis has previously been reported to be non-essential[32], and these observations suggest

that loss of TPPs is the primary mechanism of resistance to both BPs𝚫*33*HTH_HRM10 and

Muddy. Further analysis showed that all of the mutants tested have similar phenotypes with a

large reduction in the efficiency of plaquing (EOP) of BPs𝚫*33*HTH_HRM10, and a more modest

reduction in EOP of Muddy, but with formation of very turbid plaques (Fig. 1E).

Complementation of a f*adD23* Tn mutant confirmed that phage resistance results from TPP loss

(Fig. 1F). All of the strains that we tested remain sensitive to ZoeJ𝚫*43-45*, Itos, and Faith1𝚫*38-*

40 (Fig. 1E, S1).

Analysis of cell wall lipids shows that all of the mutants tested have lost TPPs (Fig. 1G).

Interruption of TPP precursor transport (as in an *mmpL10* mutant; Fig. 1D), or loss of PE which

is needed for the final step of TPP synthesis (Fig. 1D) can result in accumulation of the DAT

precursor[23,25], and our *mmpL10* transposon insertion mutants do accumulate DAT. Our *pE*

mutants did not accumulate DAT and the Tn insertions may be polar, interrupting *fadD23*

expression and DAT synthesis (Figs. 1C, 1D, 1G). No defects in trehalose dimycolate (TDM)

synthesis were observed, which is transported by MmpL3[33] (Fig. 1G).

BPsΔ*33*HTH_HRM10 mutants in the predicted tail spike gene are TPP-independent

Although BPsΔ*33*HTH_HRM10 does not efficiently infect *M. abscessus* TPP synthesis mutants,

plaques were observed at high phage titers that are candidates for TPP-independent mutants

(Fig. 1E). Five individual plaques were purified, shown to have heritable infection of *M.*

abscessus TPP mutants, and were further characterized. Two were isolated on *M. abscessus*

GD01 *fadD23::Tn* (phKSW2 and phKSW3), two on GD01 *pE::Tn* (phKSW4 and phKSW5), and

one on GD180_RM2 (BPs_REM1; see below); an additional mutant (phKSW1) was isolated on

M. smegmatis Δ*MSMEG_5439* (Table S2; see below)*.* These mutants form clear plaques on all

TPP synthesis pathway mutants tested (Fig. 2A), and sequencing showed that all have single

amino acid substitutions in the predicted BPs tail spike protein, gp22 (Table S2). Interestingly,

two of these substitutions, gp22 A306V and A604E (present in phKSW3 and phKSW5,

respectively), were reported previously as BPs host range mutants able to infect *M.*

tuberculosis[18,28]. The gp22 A604E substitution is also present in phage BPsΔ*33*HTH_HRM[GD03]

that infects some other *M. abscessus* strains[4]. Although phKSW4 (and phKSW2; Table S2) has

a gp22 L462R substitution, BPs_REM1 has both a gp22 L462R substitution and a G780R

substitution. BPs_REM1 forms somewhat clearer plaques than phKSW4 on the TPP mutants

(Fig. 2A) suggesting the G780R has an additive effect towards clear plaque formation.

TPPs are required for efficient adsorption of BPsΔ*33*HTH_HRM10 to *M. abscessus* GD01

Because TPPs are surface-exposed and are required for BPsΔ*33*HTH_HRM10 infection, we tested if they are required for adsorption (Fig. 2B). Wild-type BPs adsorbs relatively poorly to *M. smegmatis*[18] and BPsΔ*33*HTH_HRM10 adsorption is similarly poor on *M. abscessus* GD01 (Fig. 2B). However, BPsΔ*33*HTH_HRM10 is clearly defective in adsorption to a GD01 *fadD23*::Tn mutant (Fig. 2B, left panel). Interestingly, the TPP-independent phage phKSW1 (Table S2) adsorbs considerably faster to GD01 (as does a BPs gp22 A604E mutant in *M. smegmatis*[18]) than its parent phage (Fig. 2B, middle panel), and shows only a small improvement in adsorption on the GD01 *fadD23*::Tn mutant relative to BPsΔ*33*HTH_HRM10 infection of GD01 (Fig. 2B). In contrast, ZoeJΔ*43-45* adsorbs similarly to both *M. abscessus* strains (Fig. 2B, right panel).

Muddy mutants in the predicted tail spike gene *24* are also TPP-independent

We similarly isolated a resistance escape mutant of Muddy (Muddy_REM1, Table 2) and – together with three Muddy mutants with expanded *M. tuberculosis*[19] host ranges – characterized their infection of TPP pathway mutants (Fig. 2C). Three of the mutants (Muddy_REM1, Muddy_HRM^{N0157}-1 and Muddy_HRM^{N0052}-1) efficiently infect all of the TPP pathway mutants; Muddy_HRM^{N0157}-2 forms very turbid plaques on all of the mutants similar to wild-type Muddy (Fig. 2C). Sequencing showed that Muddy_REM1 contains a single base substitution in the tail spike gene *24* conferring a E680K substitution (Table S2), the same substitution as in Muddy_HRM^{N0052}-1; Muddy_HRM^{N0157}-1 and Muddy_HRM^{N0157}-2 have G487W and T608A substitutions in gp24, respectively[19].

Spontaneous *M. abscessus* phage resistant mutants in the TPP pathway

We previously reported *M. abscessus* mutants spontaneously resistant to BPs derivatives[9]. Two of the strains (GD17_RM1 and GD22_RM4, Table S3) have mutations in *pks* and are at least partially resistant to BPsΔ*33*HTH_HRM10[9]. We have similarly isolated three additional spontaneous mutants resistant to BPsΔ*33*HTH_HRM10, two of which (GD38_RM2 and GD59_RM1) have mutations in *pks*; the third (GD180_RM2) has a nonsense mutation in *mmpL10* (Table S3). BPsΔ*33*HTH_HRM10 does not form plaques on mutants GD38_ RM2, GD17_RM1 or GD59_RM1 and very small plaques at a reduced EOP on GD22_RM4 (Fig. 3A). Thus, point mutations in *M. abscessus* TPP synthesis genes can give rise to BPs resistance, although these have not been observed clinically[5]. These mutants are infected well by other phages we tested that infect the parent strain (Fig. 3A).

The *M. abscessus* Pks protein (MAB_0939) is a 3697-residue multidomain protein (Fig. 3B). Two of the spontaneously resistant mutants have frameshift mutations close to the midpoint of the gene (at codons 2,115 and 2,389, Table S3, Fig. 3B) and two others have amino acid substitutions in the N-terminal Keto-synthase (KS) domain (Table S3, Fig. 3B). We note that the two frameshift mutations are in the second Acyltransferase (AT) domain and leave the upstream domains intact (Fig. 3B).

Some phage-insensitive *M. abscessus* clinical isolates are naturally defective in TPPs

M. abscessus clinical isolates vary greatly in their sensitivity to BPs_Δ*33*HTH_HRM10 and Muddy[9]. There are likely numerous determining factors, but these could include loss of TPPs. Analysis of the TPP synthesis proteins (Pks, PE, PapA3, MmpL10 and FadD23) of 143

sequenced clinical isolates and reference strain ATCC 19977 identified 37 distinct genotypes

that generally correlate with global nucleotide similarity (Fig. 3C); however, no evident

correlation between these variations and sensitivity to BPs_$\Delta33$HTH_HRM10 and/or Muddy was

observed (Fig. 3C). Most of the variations observed reflect amino acid substitutions, although

two strains (GD262 and GD273) have identical large deletions in *pks* (3,645 bp) and two others

(GD155 and GD286) have translocations resulting in 30.2 kbp insertions in *pks* (Fig. 3D). Both

GD273 and GD286 have phage infection profiles consistent with TPP loss, and the TPP-

independent mutant Muddy_HRM^{N0052}-1 overcomes the defect (Fig. 3E). GD262, GD273 and

GD286 are not susceptible to BPs$\Delta33$HTH_HRM10 or the TPP-independent mutant BPs_REM1

(Fig. 3E), and these strains likely carry additional phage defense mechanisms targeting BPs

and its derivatives. GD155 has a smooth colony morphotype (Fig. 3C) and is not susceptible to

any of the phages tested here.

Complementation restores TPP synthesis and phage infection

Mutants GD22_RM4 and GD180_RM2 – defective in *pks* and *mmpL10,* respectively (Fig. 4A) –

can both be complemented to fully restore BPs$\Delta33$HTH_HRM10 and Muddy infection (Fig. 4B).

Both mutants lack cell wall TPPs, and TPPs are at least partially restored by complementation

(Fig. 4C). Furthermore, a derivative of BPs expressing mCherry[34] – which behaves similarly to

BPs$\Delta33$HTH_HRM10 in plaque assays (Fig. 4B) and liquid infections (Fig. 4D) – gives

fluorescence from parent strains, but not from GD22_RM4 and GD180_RM2 (Fig. 4E, F).

Complementation fully restores liquid infection of GD180_RM2, and partially restores infection

of GD22_RM4 (Fig. 4D), as well as fluorescence with the reporter phage (Fig. 4E, F). These

data are consistent with an early defect in phage infection in these mutants, consistent with loss

of adsorption to the cell surface. We note that disruption of TPP synthesis does not interfere

with Ziehl-Neelsen staining of the bacteria or alter antibiotic sensitivities (Fig. S2).

M. smegmatis mutants in the TPP synthesis pathway are resistant to phages

BPs_Δ_33_HTH_HRM10 and Muddy

M. smegmatis is genetically tractable and susceptible to a large number of diverse phages, and

using TPP mutants in _pks (MSMEG_0408)_, _mmpL10 (MSMEG_0410)_, and _pE_

_(MSMEG_0412)_[23,35] we showed that these have similar – albeit somewhat milder – phenotypes

to _M. abscessus_ TPP mutants (Fig. 5A). As expected, Δ_pks_, Δ_mmpL10_ and Δ_pE_ mutants failed

to produce TPPs, whilst complementation restores the presence of TPPs (Fig. 5B). The

relatively efficient infection of the Δ_fadD23_ mutant is consistent with incomplete TPP loss,

possibly due to an unidentified fatty acyl-AMP ligase partially overcoming the defect[23]. Muddy

similarly forms very turbid plaques on the Δ_pks_ and Δ_papA3_ mutants, but only mildly so on the

Δ_fadD23_ mutant (Fig. 5A). Interestingly, the TPP-independent BPs and Muddy mutants infect _M._

smegmatis TPP mutants normally (Fig. 5A). Complementation of the Δ_papA3_, Δ_pks_, Δ_mmpL10_,

and Δ_pE_ mutants restores normal infection by both Muddy and BPsΔ_33_HTH_HRM10 (Fig. S3).

BPs_Δ_33_HTH_HRM10 and its mCherry derivatives are both defective in liquid infection of the

Δ_pks_, Δ_mmpL10_, and Δ_pE M. smegmatis_ mutants, and efficient infection and lysis is restored by

complementation (Fig. S3A, E). The mCherry reporter phage shows fluorescence in wild-type

M. smegmatis, but loss of fluorescence in infection of all three mutants, with restoration of

infection in the complemented strains (Fig. S3B, C). In addition, the mCherry fluorophage

behaves similarly to its parent in plaque assays on _M. smegmatis_ mutant and complemented

strains (Fig. S3E). Both BPsΔ_33_HTH_HRM10 and the TPP-independent phKSW1 are defective

in adsorption of a Δ*pks* mutant relative to wild type *M. smegmatis* (Fig. 5C), similar to *M.*

abscessus (Fig. 2B).

Testing a broader phage panel showed that most are not dependent on TPPs, with the

exceptions of ShedlockHolmes, MsGreen, and Papyrus, in Clusters/Subclusters K3, L3, and R,

respectively, which show some TPP-dependence (Fig. 5D). MsGreen and ShedlockHolmes

have tail genes related to Muddy gene *24*, although we note that ZoeJ does so also, and yet is

not TPP-dependent. However, such variation is not unexpected, as the escape mutant

observations show that only a single amino acid substitution is sufficient to confer TPP

independence (Figs. 2A, 2C, 5A).

Resistance to BPs and Muddy TPP-independent phages reveals new resistance

mechanisms.

The TPP-independent phage mutants infect *M. abscessus* efficiently, and we therefore repeated

the selection for Tn insertion mutants to explore if there are other surface molecules required for

infection. Interestingly, such mutants arise from the same library at a 100-fold lower abundance

than BPsΔ*33*HTH_HRM10 and Muddy resistant mutants (Fig. 6A, Table S1). All but one of the

phKSW1 resistant mutants analyzed are similarly resistant to BPsΔ*33*HTH_HRM10, BPs_REM1

and phKSW1 but remain sensitive to Muddy and Muddy_REM1 (Fig. 6B); One (RM10) is

resistant to phKSW1 but is sensitive to BPs_REM1 and is resistant to Muddy but not

Muddy_REM1 (Fig. 6B). One of the two Muddy_REM1 resistant mutants is only partially

resistant to Muddy and Muddy_REM1, but both are fully sensitive to all of the BPs derivatives

(Fig. 6B).

Characterization of these mutants shows that they are unlikely to be defective in surface

recognition by the phages. Two Muddy_REM1-resistant strains have Tn insertions in

transcription genes *greA* and *rpoC* (Table S1), and one phKSW1 resistant mutant maps in *recB*

(*MAB_0399c*; Table S1); these are unlikely to be directly involved in phage binding. Four of the

phKSW1-resistant mutants (RM2, RM5, RM7, and RM8), representing at least three

independent insertions (Fig. 6, S5) have transposons at GD01 coordinate 1,169,901, in a region

absent from ATCC19977 and many other *M. abscessus* strains and within a candidate 'phage-

inducible chromosomal island' (PICI) (Fig. 6C, Table S1). The insertions are upstream of GD01

gene *EXM25_05825* encoding a protein with a DUF4145 domain, which is implicated in a

variety of viral defense systems and is often fused with restriction endonucleases and abortive

infection systems[36-38] (Fig. 6C). It is plausible that the BPs resistant phenotype results from

overexpression of this gene.

Analysis of the cell wall lipids shows that all of the mutants retain TPPs with the exception of

GD01Tn_phKSW1_RM10 (Fig. 6D), which has a Tn insertion in *papA3* in addition to a

secondary insertion in *MAB_1686* (Table S1). Two additional mutants (GD01Tn_phKSW1_RM1

and RM4) have an insertion in the nearby *MAB_1690* gene and have normal TPPs (Fig. 6D);

MAB_1686 and *MAB_1690* are within a large (22 kbp) operon encoding an Mce4 transport

system (Table S1). However, this Mce4 system is likely not acting as a receptor as the

Tn_phMSW1_RM1 mutant does not have an adsorption defect (Fig. 6E). The

Tn_phKSW1_RM2 mutant also does not have any adsorption defect (Fig. 6E).

Discussion

Trehalose polyphleates are among the largest known lipids in mycobacteria and are structurally

related to sulfolipids SL-1 and polyacylated trehalose PAT, which in contrast to TPPs, are found

exclusively in *M. tuberculosis*. The roles of TPPs in mycobacterial physiology and/or growth

remain unclear, but are implicated in clumping and cording in *M. abscessus*[24]. Many TPP-

defective *M. abscessus* strains have rough morphotypes – typically associated with cording –

consistent with the rough colony morphology primarily resulting from GPL loss[22]. Clearly, TPPs

are critical for adsorption of several phages, including the therapeutically useful Muddy and

BPs[4,5]. The finding that both phages require TPPs is a surprise, as they are genomically distinct,

share few genes, and were thus considered to be suitable for combination in phage cocktails.

Nonetheless, the availability of TPP-independent phage mutants provides substitutes to which

resistance both occurs at a much lower frequency, and such mutants do not typically show co-

resistance to the two phages. We propose that the TPP-independent phage replace their

cognate parent phages in therapeutic cocktails.

A simple explanation for the role of TPPs is that they are specifically recognized and bound to

by BPs, Muddy and the other TPP-dependent phages as the only requirement for DNA injection.

However, it is then unclear as to how the TPP-independent phages overcome TPP loss, and it

seems implausible that they gain the ability to bind to a completely different receptor. A more

likely explanation is that TPPs act as co-receptors for Muddy and BPs and facilitate recognition

of a different surface molecule; the TPP-independent phage mutants would then simply bypass

the need for activation by TPPs. The observation that tail spike mutants such as phKSW1

adsorb substantially better than the parent phage, even to TPP-containing host cells, is

consistent with this latter explanation. Furthermore, wild-type BPs does not efficiently infect *M.*

tuberculosis H37Rv, but a mutant with the gp22 A604E substitution enables efficient infection[18],

even though *M. tuberculosis* lacks TPPs[39]. Similarly, wild-type Muddy efficiently infects *M.*

tuberculosis H37Rv[19] despite its lack of TPPs, and Muddy tail spike substitutions expand its

host range to other *M. tuberculosis* strains[19]. These observations not only suggest that TPPs

are not the receptors *per se* for these phages, but that there may be general mechanisms

governing receptor access by the phages, together with phage strategies for expanding host cell

recognition and infection. Furthermore, if TPPs are not the target of direct phage recognition,

the true receptor is likely to be encoded by genes that are essential for mycobacterial viability.

Thus, although transposon insertion mutagenesis has been used in other systems for identifying

phage receptors[40-43], this maybe of more limited use in *Mycobacterium*, although as we have

shown here, it is useful for mapping a plethora of resistance mechanisms.

Understanding the roles of TPPs in *M. abscessus* is important for therapeutic phage use, and

we note that in at least some clinical isolates the loss of TPPs through gene deletions or

translocation leads to loss of infection by BPsΔ*33*HTH_HRM10 or Muddy. In the first therapeutic

use of mycobacteriophages, BPsΔ*33*HTH_HRM10 and Muddy were used in combination with

ZoeJ, and it is of interest that ZoeJ is not TPP-dependent. We also note that resistance to BPs

derivatives or Muddy has not been observed in clinical use, even in 11 cases where only a

single phage was used[5]. It is plausible that resistance through TPP loss has a tradeoff with

fitness, and the roles of TPPs in *M. abscessus* pathogenicity warrant further study.

Finally, transposon mutagenesis and selection of mutants resistant to the TPP-independent

phages reveals additional mechanisms of phage resistance. Particularly intriguing is the

isolation of insertions in a candidate PICI, with the potential to activate expression of a PICI

gene implicated in phage defense. These *Mycobacterium* PICIs and their roles in phage

infection profiles deserve further investigation.

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390   Declaration of interests

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Materials and Methods

Bacterial strains and culture conditions

Bacterial strains (Table S4) were grown in Middlebrook 7H9 media (BD Difco) supplemented

10% oleic acid, albumin, dextrose, catalase (OADC enrichment) (7H9/OADC) or on Middlebrook

7H10/OADC solid media (BD Difco) at 37° C. Antibiotics were added when required.

Transformations of electrocompetent mycobacteria were performed using a Bio-Rad Gene

pulser (25 µF, 2500 V, 800 Ohms). For some *M. smegmatis* strains, Tween-80 (0.05%) was

used in starter cultures but omitted in subcultures used for phage infections. Cultures used in

phage infection were supplemented with 1 mM $CaCl_2$. When required, *M. abscessus* strains

were selected with 1 mg/mL hygromycin or 200 µg/mL streptomycin, and *M. smegmatis* were

selected with 50 µg/mL hygromycin. *M. abscessus* strains in the GDxx series are part of the

strain collection at the University of Pittsburgh and were kindly provided by numerous

colleagues.

Engineering of MycoMarT7-Hyg2

Phage MycoMarT7-Hyg1 and MycoMarT7-Hyg2 were engineered from phage MycoMarT7

using CRISPY-BRED recombineering[30]. Briefly, dsDNA recombineering substrates were

designed that contained the desired mutation (a HygR cassette) with flanking sequences to

permit the replacement of either KanR (MycoMarT7-Hyg1) or KanR and oriR6K (MycoMarT7-

Hyg2). These substrates and genomic DNA from MycoMarT7 were transformed into *M.*

smegmatis mc²155 recombineering cells that contain the plasmid pJV138[30]. Transformations

were combined with cells containing a CRISPR plasmid selecting against the parent

MycoMarT7 and plated on solid media; this enriches for mutants containing the allelic

replacement that form plaques on the plate. Resulting plaques were screened for presence of

the Hyg-marked transposon by PCR, and positive plaques were plaque purified, whole genome

sequenced, and confirmed to have retained temperature sensitivity.

Construction of the *M. abscessus* GD01 transposon insertion library and phage

challenge

The transposon mutagenesis library was largely prepared as previously described[31]. Briefly, 50

mL of *M. abscessus* GD01 was grown to an OD_{600} of 0.2. The cells were pelleted and

resuspended in 1 mL of phage buffer (10 mM Tris HCl, pH 7.5; 10 mM $MgSO_4$; 68.5 mM NaCl; 1

mM $CaCl_2$), pre-warmed to 37° C and infected with 800 µL MycoMarT7-Hyg2 ($5x10^{10}$ pfu/mL).

The cells and MycoMarT7-Hyg2 were incubated at 37° C for 7.5 hours. Cells were pelleted and

resuspended in 8 mL PBS + 0.05% Tween80, and the resuspension was combined with 8 mL

40% glycerol for freezing at -80° C. The transduction frequency was determined by measuring

hygromycin resistant colonies/mL and 120,000 transductants were plated onto large square

plates containing solid 7H10/OADC media with 0.1% Tween80 and 1 mg/mL hygromycin. Plates

incubated at 37° C for nine days. To harvest the library, cells were scraped off the solid media,

resuspended in 7H9/OADC combined with 40% glycerol, aliquoted and frozen at -80° C.

To identify GD01 insertion mutants that were resistant to phage infection, ~20 µL of GD01 Tn

library was thawed and grown overnight to an OD_{600} of 0.175. Dilutions of this culture

(approximately 10^4, 10^5 and 10^6 cells) were spread onto 7H10/OADC solid media plates seeded

with or without 10^8 pfu of phages BPs_$\Delta 33$HTH_HRM10, Muddy phKSW1 or Muddy_REM1.

Plates were incubated at 37° C for seven days. Colonies able to grow on phage-seeded plates

were subjected to PCR to identify a transposon insertion site (see below) and struck out two

times to remove any remaining phage. After streaking, single colonies were grown in liquid

media and used for phage susceptibility testing by standard plaque assay.

Identification of transposon insertion sites

Transposon insertion sites were identified by PCR using a primer that annealed to the

transposon in the hygromycin resistance gene (Tn_Hyg_Fwd_2: 5'-

CTTCACCTTCCTGCACGACT-3'), and a primer with a degenerate 3' end, or if that did not yield

an amplicon, nested PCR with primers Tn_Hyg_Fwd_2 and Primer 557 (5'-

GGCCAGCGAGCTAACGAGCANNNNNNNGTT-3') followed by PCR with primers Primer 414

(5'-GGCCAGCGAGCTAACGAGAC-3') and Tn_Hyg_Fwd_1 (5'-

TTCGAGGTGTTCGAGGAGAC-3'). Amplicons were gel extracted, Sanger sequenced from the

transposon, and the result aligned to the GD01 sequence to identify the transposon insertion

site. For most strains (and at least one strain per interrupted gene), the transposon insertion site

was confirmed by designing primers that flanked the site identified by the initial PCR and

confirming that this region had increased in size by 1,259 bp compared to strain GD01.

Screening of phage susceptibility

Phage susceptibility profiles were assessed using standard plaque assays. Top agar bacterial

lawns were made by combining Middlebrook Top Agar (MBTA; Middlebrook 7H9, 1 mM $CaCl_2$,

0.35% BactoAgar) with 300 µL-500 µL cell culture. After top agar had solidified, phages were

10-fold serially diluted and spotted onto the top agar bacterial lawns and incubated 24-48 hours

(*M. smegmatis*) or 5-7 days (*M. abscessus*) until bacterial lawns were confluent. Phages used

in this study were obtained from University of Pittsburgh and *M. smegmatis* mc^2155 was used to

propagate them.

Plasmid construction

To create plasmid pKSW131, *fadD23*, *pE*, *mmpL10* and *papA3* and the flanking intergenic

sequence was amplified using Q5 HiFi 2× MasterMix (NEB) from genomic DNA isolated from *M.*

abscessus GD01. The amplicon was purified and cloned into EcoRI-digested vector pLA155

using the NEBuilder Gibson Assembly Master Mix and transformed into *E. coli* strain DH5a;

plasmids and primers are shown in Table S5. The culture that yielded a successfully

constructed plasmid was grown at 30° C rather than 37° C, although it is unknown if this

contributed to successful plasmid maintenance in the culture. To create plasmid pKSW134, the

open reading frame of *fadD23* was amplified from GD01 gDNA and cloned into Pml I-digested

anhydrotetracycline (ATc) inducible vector pCCK39[44] using the NEBuilder Gibson Assembly

Master Mix. The entire plasmids were sequenced by Plasmidsaurus Inc

(https://www.plasmidsaurus.com/).

pMV*pks_mWasabi* and pMV*mmpL10_mWasabi* were constructed based on pMV*pks* and

pMV*mmpL10* by in-fusion cloning. The *mWasabi* sequence under the control of the constitutive

Pleft* promoter[45] was amplified by PCR using a Q5 high-fidelity DNA polymerase (New England

Biolabs). Plasmids were linearized with KpnI-HF (New England Biolabs). Agarose gels were

used to purify linear fragments, then circularized using In-Fusion SNAP Assembly Master Mix

(Takara Inc.), according to the manufacturer's instructions. Stellar competent cells were used for

transformation. Plasmids generated were verified by sequencing.

Isolation and whole genome sequencing of phage resistant mycobacteria mutants

Two of these phage resistant mutants (GD17_RM1 and GD22 RM_4) were described

previously[9]; the others were isolated in the same manner. Briefly, 10^8 CFU *M. abscessus* were

incubated with 10^9 PFU of phage. Infections were plated on solid media at two and five days-

post infection, and survivors were purified, tested for phage resistance, and sequenced. The

mutants were sequenced as described previously[9].

Isolation of BPs_Δ*33*HTH_HRM10 mutants

Clear plaques were observed within high titer spots for phage BPs_Δ*33*HTH_HRM10 on strains

GD01Tn_BPs_HRM10_RM6, GD01Tn_BPs_HRM10_RM11 and GD180_RM2. These plaques

were picked and plated on the resistant strain two additional times to purify. A purified plaque

was then used to produce a high-titer phage lysate on *M. smegmatis* mc^{2}155, and subsequently

subjected to gene *22* PCR sequencing or whole-genome sequencing.

Total lipids extraction of mycobacteria and TLC analysis

Bacteria were grown in LB medium at 37° C without agitation and pelleted by centrifugation

(3,000 *g*, 10 min, room temperature). Lipids were extracted as described previously[23]. Briefly,

bacterial pellets were treated successively with $CHCl_3/CH_3OH$ (1:2) and $CHCl_3/CH_3OH$ (2:1),

washed with water and dried. Lipids were resuspended in $CHCl_3$ prior to spot on TLC. For TLC

analysis, silica gel G60 plates (10 x 20 cm, Macherey-Nagel) were used to spot samples and

lipids were separated with $CHCl_3/CH_3OH$ (90:10, v/v). Lipid profiles were shown by spraying the

plates with a 0.2% anthrone solution (w/v) in concentrated H_2SO_4 and charring.

Adsorption Assays

M. smegmatis strains were grown to an OD_{600} of 0.5-0.8, then concentrated approximately

tenfold to $1.75x10^9$/mL. One milliliter of cells (*M. smegmatis* mc^{2}155 or mc^{2}155 Δ*pks*) were

infected in triplicate in a 12-well plate at a multiplicity of infection (MOI) of 0.001. At each

timepoint, 50 μL of liquid were removed, pelleted, and the supernatant that contained unbound

phage was titered on *M. smegmatis*. For *M. abscessus* GD01 and *M. abscessus* GD01

fadD23::Tn, the same protocol was followed but the strains were grown to an OD_{600} of 0.15-0.25

and cells were concentrated approximately tenfold to $6.3x10^8$/mL.

Growth curves of mycobacteria incubated with phages

Bacterial growth assays were performed in 96-well plates (Falcon), each well containing 100 μL

of bacterial culture and 100 μL of phage lysates or medium as control. Exponential phage

cultures of mycobacteria were used and set at $3x10^7$ CFU/mL in Middlebrook 7H9/OADC

supplemented with 1 mM CaCl$_2$. Phages were incubated at a MOI 10 and diluted in 7H9/OADC

supplemented with 1 mM CaCl$_2$. Measurements were taken every three hours for *M. smegmatis*

strains and six hours for *M. abscessus* strains using a spectrophotometer (Tecan, infinite 200

PRO) until stationary phase was reached (2 days for *M. smegmatis* strains and 6 days for *M.*

abscessus strains). Plates were incubated at 37° C without agitation.

Microscopy and flow cytometry sample preparation

Mycobacteria were sub-cultured in 7H9/OADC with agitation to obtain exponential phase

cultures. Bacteria were concentrated to obtain a sample containing 1.2x10^7 CFU (for

microscopy) or 6x10^6 CFU (for flow cytometry) and then incubated with either medium or phage

BPs_Δ33HTH_HRM10 (MOI 10) as controls or phage BPs_Δ33HTH_HRM10 mCherry (MOI

10). For *M. smegmatis* strains, the infections were performed for two hours and four hours for

M. smegmatis and *M. abscessus*, respectively, at 37° C without agitation. After infection,

samples were fixed with PFA 4% for 20 min at room temperature. Samples were then diluted as

necessary depending on the experiment with 7H9/OADC supplemented with 0.025% tyloxapol

and sonicated to disrupt bacterial aggregates. For microscopy, samples were then mounted

between coverslips and slides with Immu-Mount (Epredia). Samples were kept at 4° C in the

dark until analysis.

Microscopy

DIC (Differential interference contrast) and epifluorescence images were acquired on a ZEISS

Axio Imager Z1 up-right microscope. A 63X Plan Apochromat 1.4 NA oil objective and a 100X

Plan Apochromat 1.4 NA oil objective was used respectively for *M. smegmatis* or *M. abscessus*

strains. mCherry was excited with an Intenslight fiber lamp with Texas Red (Ex: 560/40, dic.

585, Em: 630/75) filter cube. Images were acquired with a scMOS ZYLA 4.2 MP.

Image analysis

Representative fields without technical artefacts were chosen. Fiji software was used to adjust

intensity, brightness and contrast (identically for compared image sets).

Flow cytometry

Infected bacteria were analysed by flow cytometry using a NovoCyte ACEA flow cytometer

(excitation laser wavelength: 561 nm, emission filter: 615/20 nm). Gates were drawn using SSC-

A/FSC-A and multiple cells were excluded with SSC-H / SSC-A. Uninfected cells and bacteria

infected by non-fluorescent phage were included as controls. Experiments were performed at

least twice with similar results. Approximately 300,000 events were recorded per experiment.

Analysis was done with NovoExpress.

Ziehl-Nilseen staining

Concentrated cultures were fixed on glass slides by heating at 150°C for 15 min followed by

chemical fixation with methanol. BD Carbolfuchsin kit was used following manufacturer

recommendations. Samples were observed using an Evos M7000 Imaging System.

Drug susceptibility testing

The CLSI guidelines[46] were followed to determine the minimum inhibitory concentrations

(MICs). Briefly, all cultures were incubated in Cation-adjusted Mueller-Hinton Broth (CaMHB) at

30°C prior experiments. Each well of a 96-well plate was filled with 100 µL of bacterial

suspension previously inoculated with 5.10^6 CFU/mL, except for the first column, to which 198

µL of the bacterial suspension was added. 2 µL of drug at its highest concentration was added

to the first column containing 198 µL of bacterial suspension and was two-fold serially diluted.

Results are obtained after 4 days of incubation at 30°C without agitation. Three independent

experiments were carried out in duplicate.

Statistical analysis

Statistical analysis was carried out with GraphPad Prism version 9.0.0 for Windows (GraphPad

Software, San Diego, California, United States). Descriptive statistics are cited and represented

as median and interquartile range for each of the variables calculated. A non-parametric Dunn's

test was used to compare the different conditions at 48 hours for *M. smegmatis* or 144 hours for

M. abscessus. A significance level *a priori* was set at $\alpha = 0.05$.

Phylogenetic analysis of TPP pathway amino acid sequences in *M. abscessus*

A phylogenetic tree was constructed of a concatenated alignment of amino acid sequences of

the five TPP synthesis pathway members for 143 clinical isolates of *M. abscessus* and *M.*

abscessus ATCC19977. Homologs were identified using MMSeqs2 and phammseqs[47] and

subsequently aligned using ClustalO and Trimal[48]. A concatenated alignment was generated

with a custom python script and the maximum likelihood phylogeny was generated using

RAxML[49].

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 Figure Legends

Figure 1. Identification of phage-resistant transposon insertion mutants of *M. abscessus*

GD01. **A**. Construction of MycoMarT7-Hyg1 and MycoMarT7-Hyg2. Transposon delivery phage

phiMycoMarT7 delivers a transposon containing *Escherichia coli* ori6Kγ (grey) and kanamycin

resistance cassette (blue), flanked by inverted repeats (yellow boxes). CRISPY-BRED[30] was

used to create phiMycoMarT7-Hyg1 and phiMycoMarT7-Hyg2, which deliver transposons

containing oriR6K (grey box) and a hygromycin resistance cassette (red box), or only a

hygromycin resistance cassette. **B**. *M. abscessus* GD01 or a transposon library of *M. abscessus*

strain GD01 (*M.ab* GD01 Tn Lib) were plated on solid media or solid media seeded with phage

BPs_Δ*33*HTH_HRM10 (or Muddy; not shown). **C**. Locations of transposon insertions in the TPP

locus in phage resistant mutants. Red and black bars show the locations of insertion isolated as

resistant to BPs_Δ*33*HTH_HRM10 and Muddy, respectively. **D**. Proposed roles of Pks, PapA3,

FadD23, MmpL10 and PE in the synthesis and transport of TPPs and DAT. **E**. Tenfold serial

dilutions of phages were spotted onto solid media with *M. smegmatis* mc^{2}155, *M. abscessus*

GD01, or representative *M. abscessus* GD01 transposon insertion mutant strains:

GD01Tn_BPs_HRM10_RM1 (B_RM1); GD01Tn_BPs_HRM10_RM6 (B_RM6);

GD01Tn_BPs_HRM10_RM11 (B_RM11); GD01Tn_BPs_HRM10_RM10 (B_RM 10);

GD01Tn_BPs_HRM10_RM5 (B_RM 5). The locations of Tn insertions are indicated in

parentheses. Phages used are: BPs_Δ*33*HTH_HRM10 ("BPs"), Muddy, ZoeJΔ*43-45* ("ZoeJ"),

Itos, and Faith1Δ*38-40* ("Faith1"). Plaque assays were performed at least twice with similar

results. **F**. Tenfold serial dilutions of phages were spotted onto solid media with strain GD01

fadD23::Tn (GD01Tn_BPs_HRM10_RM1) containing plasmid pKSW134 with gene *fadD23*

under expression of an anhydrotetracycline (ATc)-inducible promoter. FadD23 is not expressed

in the absence of ATc (left panel) but is induced by ATc (right panel). Plaque assays were

performed at least twice with similar results. **G**. TLC analysis of total lipids extracted from *M.*

abscessus GD01 and mutants with transposon insertions in the TPP synthesis and transport

genes. *M. smegmatis* mc^{2}155 and a Δ*mmpL10* mutant strain of *M. smegmatis* are also included

as controls.

Figure 2. Mutants of BPs_Δ*33*HTH_HRM10 and Muddy overcome TPP loss. A. Ten-fold

serial dilutions of BPs_Δ*33*HTH_HRM10 and gp22 mutants (as indicated on left; see Table S2)

were spotted onto solid media with *M. smegmatis* mc^{2}155, *M. abscessus* GD01, or *M.*

abscessus GD01 transposon insertion mutant strains. Plaque assays were performed at least

twice with similar results. The locations of amino acid substitutions in BPs_Δ*33*HTH_HRM10

gp22 conferring the ability to infect TPP-deficient strains (red) or were previously found to

broaden host range to include *M. tuberculosis* (purple) (bottom panel). The A306V and A604E

substitutions were identified with both assays. **B**. Adsorption of phages BPs_Δ*33*HTH_HRM10,

phKSW1 and ZoeJΔ*43-45* to *M. abscessus* strains GD01 and GD01 *fadD23*::Tn

(GD01Tn_BPs_HRM10_RM1) as indicated by the percentage of unadsorbed phages remaining

in infection supernatants at different times after infection. Assays were performed in duplicate

twice and the mean is displayed; error bars represent one standard deviation. **C**. Tenfold serial

dilutions of Muddy and Muddy gp24 mutants (as indicated on left) were spotted onto solid media

with *M. smegmatis* mc^{2}155, *M. abscessus* GD01, or *M. abscessus* GD01 transposon insertion

mutant strains. Plaque assays were performed at least twice with similar results. The location of

amino acid substitutions in Muddy gp24 that confer the ability to infect TPP deficient strains

(bottom panel).

Figure 3. Phage infection profiles of *M. abscessus* phage resistant mutants. Tenfold serial

dilutions of phage lysates (as indicated on left) were spotted onto solid media with *M.*

smegmatis mc^{2}155, the parent *M. abscessus* strains or spontaneously isolated phage resistant

mutant (RM) derivatives. Plaque assays were performed at least twice with similar results. **B**. A

schematic representation of *M. abscessus* Pks showing the location of predicted functional

domains and the amino acid changes in spontaneous phage resistant mutants below. Domain

abbreviations are: AT, Acyltransferase; KS, Ketosynthase, KR, Ketoreductase; DH,

Dehydratase; ER, Enoylreductase; PP, phosphopantetheinylate acyl carrier protein. Domains

were identified using the PKS analysis web site at http://nrps.igs.umaryland.edu/ [50]. **C**. Amino

acid sequences from the five TPP synthesis pathway genes in 143 *M. abscessus* clinical

isolates (and *M. abscessus* ATCC19977) were concatenated and used to construct a

phylogenetic tree. Strain morphotypes are labeled as either rough (R) or smooth

(S). Susceptibilities to phages BPs_Δ*33*HTH_HRM10 and Muddy are represented in green and

red, respectively[9]. Arrows indicate strains in panels D and E. **D**. Position of large deletions

(GD262 and GD273) or insertions (GD155 and GD286) in the *pks* gene with respect to the

GD01 TPP locus. **E**. Ten-fold serial dilutions of phage lysates (as indicated on left) were spotted

onto solid media with either *M. smegmatis* mc^{2}155 or *M. abscessus* strains GD273 and GD286.

Plaque assays were performed at least twice with similar results.

Figure 4. TPPs are essential for BPs_Δ*33*HTH_HRM10 to lyse *M. abscessus*. A.

Representation of the *M. abscessus* TPP locus showing mutations affecting the clinical strains

studied. **B**. Phages were spotted as ten-fold serial dilutions onto clinical strains, resistant

mutants and complemented strains. Plates were incubated 2-3 days at 37° C prior to imaging.

The assay was repeated at least three times and a representative experiment is shown. **C**.TLC

analysis of total lipids extracted from *M. abscessus* clinical strains (GD22 and GD180),

spontaneous resistant mutants (RM) and complemented strains (::C). Eluent: CHCl$_3$/CH$_3$OH

(90:10, v/v). Anthrone was sprayed on the plates to visualize the lipid profile and followed by

charring. **D**. Liquid growth of the strains with or without BPs_Δ*33*HTH_HRM10 or

BPs_Δ*33*HTH_HRM10 mCherry (MOI 10) monitored every 6 hours for 6 days at 37° C in

7H9/OADC supplemented with 1 mM $CaCl_2$. Data are plotted as the median of three

independent experiments made in triplicates ± interquartile range. Statistical analysis conducted

to compare the differences at 144h between each strain: ns, $P \geq 0.05$, * $P \leq 0.05$, ** $P \leq 0.01$,

*** $P \leq 0.001$**** $P \leq 0.0001$. **E**. Representative fields of *M. abscessus* clinical strains infected

with BPs_Δ*33*HTH_HRM10 mCherry (MOI 10) for 4 hours at 37° C prior to fixation. Infected

bacilli appear in red. **F**. Flow cytometry data are represented as dot plot show the percentage of

bacilli infected with the BPs_Δ*33*HTH_HRM10 mCherry fluorophage relative to the study

population.

Figure 5. TPPs are also required for infection of *M. smegmatis* by phages BPs and

Muddy. A. Tenfold serial dilutions of phages (as indicated on left) were spotted onto solid media

with *M. smegmatis* mc²155, Δ*pks*, Δ*papA3* or Δ*fadD23* as indicated. Plaque assays were

performed at least twice with similar results. **B**. TLC analysis of total lipids extracted from wild-

type *M. smegmatis*, three TPP-deficient mutants and the corresponding complemented strains.

Eluent: $CHCl_3/CH_3OH$ (90:10, v/v). TLC was revealed by spraying anthrone on the plate,

followed by charring. **C**. Adsorption of phages BPs_Δ*33*HTH_HRM10, phKSW1 and ZoeJΔ*43-*

45 on *M. smegmatis* strains mc²155 and Δ*pks* as indicated by the percentage of unadsorbed

phages remaining in supernatant at different times after infection. Assays were performed in

triplicate at least twice with similar results and a representative experiment is shown. Data are

represented as the mean ±SD. Other replicates are shown in Figure S5. **D**. A panel of phages

from various genetic clusters were tenfold serially diluted and spotted onto *M. smegmatis*

mc²155 and Δ*pks.* Phage names are shown with their cluster/subcluster designation in

parentheses.

Figure 6. Evidence for additional phage resistance mechanisms. A. Recovery of *M.*

abscessus GD01 transposon mutants resistant to phages BPs, phKSW1, Muddy, and

Muddy_REM1. A culture of an *M. abscessus* GD01 transposon library (GD01 Tn Lib) containing

approximately 10^6 CFU was plated onto phage-seeded plates as indicated. **B**. Phage infection

profiles of resistant mutants. Ten-fold serial dilutions of phages BPsΔ*33*HTH_HRM10 ("BPs"),

phKSW1, Muddy, Muddy_REM1 and ZoeJΔ*43-45* ("ZoeJ") (as indicated at the left) were spotted

onto lawns of *M. abscessus* GD01 or mutants isolated as resistant to TPP-independent phages

phKSW1 and Muddy_REM1. Mutant designations indicate they are Tn insertions (Tn), the

phage used for mutant selection (i.e. phKSW1 or Muddy_REM1), and the mutant number (e.g.

RM1, RM2 etc). Where siblings are suspected (Table S1) only one representative is shown. **C**.

Organization of a putative candidate phage-inducible chromosomal island (PICI) in *M.*

abscessus GD01. The satellite region is defined by the *attL* and *attR* attachment sites resulting

from site-specific integration at a tRNA-Leu gene (GD01 coordinates 1158039 to 1170246). It

contains several phage-related genes (green boxes) with the putative functions indicated. At the

extreme right-hand end of the PICI, a gene (locus tag EXM25_05825) carries a DUF4145

domain implicated in phage defense in other systems. Four mutants contain a Tn insertion at

the site indicated by the vertical arrow. **D**. TLC analysis of total lipids extracted from *M.*

abscessus GD01 and transposon mutants isolated as resistant to TPP-independent phages. **E**.

Adsorption of BPsΔ*33*HTH_HRM10 and phKSW1 to GD01Tn_phKSW1_RM1 (blue, top panels)

and to GD01Tn_phKSW1_RM2 (green, bottom panels). Adsorption to GD01 performed in

parallel is shown in black. The proportions of phage particles remaining in solution are shown at

different times after infection. Assays were performed in duplicate twice and the mean is

displayed; error bars represent one standard deviation.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6