Genomic surveillance of antimicrobial-resistant *Escherichia coli*

in fecal sludge and sewage in Uganda

Ryota Gomi[a, *], Yasufumi Matsumura[b], Masaki Yamamoto[b], Mai Tanaka[a], Allan John

Komakech[c], Tomonari Matsuda[a], Hidenori Harada[d, *]

[a]Department of Environmental Engineering, Graduate School of Engineering, Kyoto

University, Katsura, Nishikyo-ku, 615-8540, Kyoto, Japan

[b]Department of Clinical Laboratory Medicine, Graduate School of Medicine, Kyoto

University, 54 Shogoin-kawahara-cho, Sakyo-ku, 606-8507, Kyoto, Japan

[c]Department of Agricultural and Biosystems Engineering, College of Agricultural and

Environmental Sciences, Makerere University, P.O. Box 7062, Kampala, Uganda

[d]Graduate School of Asian and African Area Studies, Kyoto University, Yoshida-

Shimoadachi, Sakyo-ku, 606-8501, Kyoto, Japan

*Corresponding authors

E-mail address: gomi.ryota.34v@kyoto-u.jp; Tel: +81-75-383-3354

E-mail address: harada.hidenori.8v@kyoto-u.ac.jp; Tel: +81-75-753-7830

ABSTRACT

The global increase of antimicrobial resistance (AMR) is a major public health concern. An

effective AMR surveillance tool is needed to track the emergence and spread of AMR.

Wastewater surveillance has been proposed as a resource-efficient tool for monitoring AMR

carriage in the community. Here, we performed genomic surveillance of antimicrobial-resistant

Escherichia coli obtained from fecal sludge and sewage in Uganda to gain insights into *E. coli*

epidemiology and AMR burden in the underlying population. Selective media containing

different antibiotic combinations (cefotaxime, ciprofloxacin, cefotaxime + ciprofloxacin +

gentamicin) were used to obtain antimicrobial-resistant *E. coli* from fecal sludge and sewage.

Short-read sequencing was performed for the obtained isolates, and a subset of isolates

(selected from predominant sequence types (STs)) was also subjected to long-read sequencing.

Genomic analysis of the obtained *E. coli* isolates (n = 181) revealed the prevalence of clonal

complex 10, including ST167 (n = 43), ST10 (n = 28), ST1284 (n = 17), and ST617 (n = 4), in

both fecal sludge and sewage, irrespective of antibiotics used for selection. We also detected

global high-risk clones ST1193 (n = 10) and ST131 (n = 2 clade A, n = 3 subclade C1-M27,

and n = 1 subclade C2). Diverse AMR determinants, including extended-spectrum β-lactamase

genes (mostly $bla_{CTX-M-15}$) and mutations in *gyrA* and *parC*, were identified. Analysis of the

completed genomes revealed that diverse IncF plasmids and chromosomal integration were the

major contributors to the spread of AMR genes in the predominant STs. This study showed

that a combination of sewage surveillance (or fecal sludge surveillance) and whole-genome

sequencing can be a powerful tool for monitoring AMR carriage in the underlying population.

Keywords: *Escherichia coli*, Antimicrobial resistance, One Health, Sewage surveillance,

Whole-genome sequencing

1. Introduction

The increase of antimicrobial resistance (AMR) is a global health concern. AMR can lead to adverse consequences such as increased mortality rates, prolonged hospital admissions, and higher medical costs (Majumder et al., 2020). Information on AMR collected through surveillance is needed to guide treatment, monitor the effectiveness of interventions, and develop polices and regulations to counter AMR (WHO, 2015). However, surveillance of AMR in resource-limited settings is challenging, especially when the surveillance targets populations.

Sewage contains pooled urine and feces from a large population, and one sewage sample can represent bacteria from multiple people in the community. For this reason, sewage surveillance (or wastewater-based epidemiology) has been proposed as a resource-efficient tool for monitoring AMR carriage in the underlying population (Aarestrup and Woolhouse, 2020; Larsson et al., 2022). Sewage surveillance is attractive in many aspects; for example, (i) sewage provides a sample from a large and mostly healthy population, which otherwise would not be easily monitored, and (ii) it does not collect data on individuals and thus reduces ethical risks (Hendriksen et al., 2019). Although it is a promising approach, sewage surveillance of AMR cannot be directly applied in areas with no connection to centralized (sewered) systems. A previous study reported at least 1.8 billion people in low- and middle-income countries use on-site sanitation systems like pit latrines (Berendes et al., 2017). In such areas, fecal sludge from on-site systems has been proposed to be used as pooled community samples for surveillance

purposes (Capone et al., 2020; Chigwechokha et al., 2022). Sewage surveillance (or fecal

sludge surveillance) of AMR can be either culture-dependent or culture-independent. Culture-

independent methods (e.g., short-read metagenomics) have some advantages over culture-

dependent methods, such as the ability to detect thousands of AMR genes in a single sample.

However, it provides limited information on the host or the genetic context of AMR genes

(Hendriksen et al., 2019). Culture-dependent methods, on the other hand, can link AMR genes

to specific host bacteria, provide information on phylogenetic characteristics on the host, and

may even provide information on the location (chromosome or plasmid) and genetic context

of AMR genes.

Escherichia coli is a commensal bacterium in humans and animals and is also known to cause

serious infections (Denamur et al., 2021). Although *E. coli* is intrinsically susceptible to almost

all clinically relevant antibiotics, it can accumulate AMR genes via, e.g., horizontal gene

transfer (Poirel et al., 2018). *E. coli* has been suggested as an indicator for AMR surveillance

in the environment (Anjum et al., 2021), and previous studies have shown that *E. coli* is a good

target organism for sewage surveillance of AMR (Huijbers et al., 2020; Hutinel et al., 2019;

Kwak et al., 2015; Raven et al., 2019). WHO also selected extended-spectrum β-lactamase

(ESBL)-producing *E. coli* as an indicator for "One Health" AMR surveillance (including

sewage surveillance) in the Tricycle protocol (WHO, 2021). The protocol recommends usage

of whole-genome sequencing (if possible) to determine the sequence type (ST), virulence

genotype, plasmid type, carriage of acquired AMR genes, and phylogenetic characteristics of

the obtained isolates, which contribute to the understanding of the epidemiology of pathogens.

Uganda is a country experiencing an extremely high prevalence of AMR (Nabadda et al., 2021).

Previous studies have reported high prevalence of multidrug resistance (MDR) among *E. coli*

(Katongole et al., 2020; Odongo et al., 2020). However, most studies were based on phenotypic

characterization or detection of a limited set of AMR genes/virulence genes, and thus their

genomic characteristics, including the clonal composition and resistome, are largely unknown.

In the present study, we isolated antimicrobial-resistant *E. coli* from fecal sludge and sewage

in Uganda and performed genomic analysis on the obtained isolates, aiming to gain insights

into *E. coli* epidemiology and AMR burden in the underlying population.

2. Materials and methods

2.1. Sample collection and isolation of *E. coli*

Samples were collected at a fecal sludge treatment plant (FSTP) and a wastewater treatment

plant (WWTP) in Kampala, Uganda, in October–November, 2018. We obtained samples from

both sources to cover a wider population in this region. For fecal sludge sampling, three grab

samples were collected at different times on each of five days from effluent of the primary

sedimentation tank in the FSTP; in total 15 samples were collected (these samples are hereafter

referred to simply as fecal sludge samples). For sewage sampling, up to three grab samples

were collected at different times over six days from influent of the WWTP, totaling 16 samples.

The samples were collected and stored in sterile sampling bottles and transported on ice to the

laboratory. The samples were then cultured, within 12 hours after collection, using a specific

enzyme substrate medium (CHROMagar ECC, Kanto Chemical, Tokyo, Japan) containing

four combinations of three antibiotics: (a) no antibiotics, (b) cefotaxime (CTX, 1 mg/L), (c)

ciprofloxacin (CIP, 1 mg/L), (d) CTX (1 mg/L) + CIP (1 mg/L) + gentamicin (GM, 4 mg/L).

The samples were serially diluted with PBS for colony counting. Up to three colonies with an

E. coli profile (blue colony) were picked from each of plate (b), (c), and (d) (i.e., we obtained

up to nine isolates from a single sample), and each was transferred into a screw tube containing

LB agar. The tubes were incubated overnight at 37 °C, stored at 4 °C, and then transported to

the laboratory in Japan. *E. coli* in each screw tube was again incubated on a plate with

CHROMAgar ECC containing the same antibiotic(s) as at the time of isolation. A colony with

an *E. coli* profile was picked and spread again on a plate with CHROMAgar ECC, and then a

single colony was picked from the plate, cultured in LB broth, and stored at –85 °C in 35%

glycerol.

2.2. Genome sequencing and assembly

A total of 192 presumptive antimicrobial-resistant *E. coli* isolates was subjected to genome

sequencing as below. DNA was extracted from each isolate using a QIAamp DNA Mini Kit

(Qiagen, Hilden, Germany) for Illumina sequencing. Illumina libraries were prepared using a

Nextera XT DNA Library Preparation Kit (Illumina, San Diego, CA) and sequenced on the

NextSeq550 platform, generating paired-end reads of 151 bp each. For some isolates, read

depth was not sufficient, so we sequenced the library again on the MiniSeq platform to obtain

additional paired-end reads of the same length. Illumina reads were processed using fastp

(v0.23.2) (Chen et al., 2018) and assembled using Unicycler (v0.4.8) with the --no_correct

option (Wick et al., 2017). The quality of each genome assembly was ensured by using the

quality control (QC) criteria of (i) contig number: ≤ 800; (ii) genome size: 3.7 Mbp to 6.4 Mbp;

and (iii) N50: >20 kb, as recommended by EnteroBase (Zhou et al., 2020).

For selected isolates (n = 26), we also performed Oxford Nanopore Technologies (ONT) long-

read sequencing to generate complete genomes. DNA was extracted from each isolate using a

DNeasy PowerSoil Pro Kit (Qiagen). The long-read sequencing library was prepared using the

SQK-LSK109 kit (Oxford Nanopore Technologies, Oxford, UK) and sequenced on the

MinION with a FLO-MIN106 flow cell. ONT reads were filtered using Filtlong (v0.2.1,

https://github.com/rrwick/Filtlong) to remove reads with low quality or short length. Hybrid

assembly of Illumina short reads and ONT long reads was performed by employing a long-

read-first approach. Briefly, filtered ONT reads were assembled using Flye (v2.9.1-b1780)

(Kolmogorov et al., 2019), and then the assemblies were polished with medaka (v1.7.1,

https://github.com/nanoporetech/medaka) using filtered ONT reads and Polypolish (v0.5.0)

using processed Illumina reads (Wick and Holt, 2022). Hybrid assembly was also performed

using a short-read-first approach, i.e., Unicycler (v0.5.0) hybrid assembly followed by

polishing with Polypolish (v0.5.0) using processed Illumina reads. If the long-read-first

approach generated a complete genome for an isolate, we chose the polished Flye assembly as

the final assembly. If the long-read-first approach did not complete the genome but the short-

read-first approach did, we chose the polished Unicycler assembly as the final assembly.

2.3. Genomic analysis

E. coli status was confirmed by performing an average nucleotide identity (ANI) analysis using

each genome sequenced in the present study and the genome sequence of the *E. coli* type strain

ATCC 11775 (= DSM 30083 = U5/41) (Wadley et al., 2019). ANI analysis was performed

using FastANI (v1.33) with the threshold of 95% (Jain et al., 2018). *E. coli* phylogroups were

determined using a combination of EzClermont (v0.7.0) and ClermonTyping (Beghain et al.,

2018; Waters et al., 2020). Multilocus sequence typing (MLST) was performed using MLST

(v2.19.0) (https://github.com/tseemann/mlst). *fimH* types, which are used for high-resolution

subtyping of MLST-based *E. coli* clonal groups, were determined using FimTyper 1.0 (Roer et

al., 2017). AMR genes were detected using a combination of ResFinder 4.1 (Bortolaia et al.,

2020) and Abricate (v1.0.1) (https://github.com/tseemann/abricate) with the ncbi database.

Genetic contexts of AMR genes were analyzed using the RAST server (Aziz et al., 2008), the

BLAST algorithm (https://blast.ncbi.nlm.nih.gov/Blast.cgi), and ISfinder (Siguier et al., 2006).

Mutations in quinolone resistance-determining regions (QRDRs) in *gyrA* (GyrA codons 83 and

87) and *parC* (ParC codons 80 and 84) were analyzed as described previously (Aoike et al.,

2013). Virulence genes were detected using the VirulenceFinder database (Joensen et al., 2014;

Malberg Tetzschner et al., 2020). *E. coli* pathotypes, which include extraintestinal pathogenic

E. coli (ExPEC) and several categories of intestinal pathogenic *E. coli* (InPEC), were defined

based on the presence of specific virulence genes as described previously (Gomi et al., 2015).

K1 and K5 capsular types of ST1193 isolates were determined based on blastn analysis using

M57382 (K1) and X53819 (K5) as references (Johnson and Stell, 2000). Plasmid replicons

were detected using PlasmidFinder 2.1, and plasmids were typed using pMLST 2.0 (Carattoli

et al., 2014).

A whole-genome SNP-based tree was built for isolates belonging to phylogroup A using

kSNP3 based on SNPs occurring in at least 90% of the genomes (Gardner et al., 2015). To

confirm the topology of the tree, we also built a tree for the phylogroup A genomes using

another software, parsnp (v1.7.4) (Treangen et al., 2014). For isolates belonging to clonal

complex 10 (CC10) within phylogroup A, we built a tree together with global CC10 genomes

(n = 4,744) obtained from the NCBI Reference Sequence (RefSeq) database. For isolates

belonging to ST1193 and ST131, we separately built a recombination-free phylogenetic tree

for each ST. To place our isolates in broader phylogenetic contexts, we also included isolates

analyzed in other studies which defined clades/subclades within each of ST1193 and ST131

(Johnson et al., 2019; Matsumura et al., 2017b). Detailed methods used for tree construction of

the CC10, ST1193, and ST131 genomes are provided in the Supplementary Materials and

methods.

2.4. Accession numbers

Genome assemblies were deposited in GenBank under BioProject PRJNA956323 (also see

Table S1 for the accession number of each genome and **Table S2** for the accession number of

each replicon for the completed genomes).

3. Results and discussion

3.1. Detection and isolation of antimicrobial-resistant *E. coli*

During the study period, we collected 15 fecal sludge samples and 16 sewage samples and

measured the concentrations of total *E. coli* and antimicrobial-resistant *E. coli* (**Table S3**). The

mean proportions of antimicrobial-resistant *E. coli* in the fecal sludge samples were 30.0% for

CTX, 26.9% for CIP, and 10.7% for CTX + CIP + GM. The mean proportions of antimicrobial-

resistant *E. coli* in the sewage samples were 39.2% for CTX, 21.0% for CIP, and 5.1% for CTX

+ CIP + GM. These proportions were higher than those reported previously for *E. coli* in

wastewater influent in some developed countries; for example, the proportions of

antimicrobial-resistant *E. coli* were 0%–3.2% for CTX and 3.2%–7.1% for CIP in Sweden

(Hutinel et al., 2019) and 1.6%–4.4% for CTX (or ceftazidime) and 2.4%–13.4% for CIP in

ten European countries (Huijbers et al., 2020). On the other hand, the proportions were

comparable to those reported in some other low- and middle-income countries (LMICs); for

example, the resistance proportions were 38% for CTX and 35% for CIP in South Africa

(Gumede et al., 2021) and 24% for CIP in Vietnam (Le et al., 2023), potentially highlighting

the extremely high prevalence of AMR in Uganda and some LMICs (Nabadda et al., 2021;

WHO, 2022).

In total, we obtained 192 presumptive antimicrobial-resistant *E. coli* isolates from the samples

and performed short-read sequencing on these isolates. After discarding contigs shorter than

100 bp, 187 genomes met the assembly QC criteria. Species identification of the 187 genomes

by the ANI analysis revealed that 181 belonged to *E. coli*, while 6 belonged to non-*E. coli*

species such as *Citrobacter freundii*. These 181 *E. coli* genomes, comprising 91 from fecal

sludge samples (31 from CTX-containing media, 31 from CIP-containing media, and 29 from

CTX + CIP + GM-containing media) and 90 from sewage samples (32 from CTX-containing

media, 26 from CIP-containing media, and 32 from CTX + CIP + GM-containing media), were

further analyzed in the present study.

3.2. Clonal composition

In total, 36 STs from six different phylogroups were detected among the 181 isolates (**Table**

S1). Phylogroup A was the most prevalent (n = 127), followed by B1 (n = 17), B2 (n = 17), C

(n = 10), D (n = 8), and F (n = 2). ST167 (n = 43), ST10 (n = 28), ST46 (n = 19), and ST1284

(n = 17), all of which belong to phylogroup A, were prevalent in both fecal sludge isolates and

sewage isolates (**Figure 1a**). In total, 144 isolates (79.6%) were from the top ten STs, while 37

isolates (20.4%) were from minor STs (i.e., STs that are not in the top ten and detected among

three or fewer isolates) (**Figures 1b** and **1c**). The top ten STs were generally associated with

two or three types of media and both fecal sludge and sewage, with a few exceptions (e.g.,

ST131 was exclusively found among fecal sludge isolates). Lineages associated with

extraintestinal infections were also among the top ten STs and detected in fecal sludge isolates

(n = 9 ST1193, n = 5 ST410, n = 6 ST131, n = 2 ST69) and sewage isolates (n = 1 ST1193, n

= 4 ST410, n = 2 ST69) (Denamur et al., 2021). Thirty-four isolates (18.8%), including those

from the above-mentioned STs associated with extraintestinal infections, were classified as

ExPEC based on the virulence gene contents (**Figure 1**). On the other hand, none of the isolates

were classified as InPEC. ExPEC strains are facultative pathogens and part of the intestinal

microflora of a fraction of the healthy population (Kohler and Dobrindt, 2011), which might

explain the relatively high prevalence of ExPEC among our *E. coli* collection.

We next compared the clonal composition of *E. coli* in this study and those reported previously

for clinical *E. coli* in Uganda. However, the clonal composition of *E. coli* in clinical settings is

largely unknown in Uganda (a search of human-derived *E. coli* genomes from Uganda in

EnteroBase returned no hits as of May 2023), and we could find only one study reporting the

ST composition of clinical *E. coli* isolates in Uganda. That study sequenced 24 Ugandan *E.*

coli isolates causing urinary tract infections (most were MDR) and reported the prevalence of

ST10 (n = 4, 15.4%) as well as the occurrence of ST410 (n = 2, 8.3%), ST131 (n = 1, 4.2%),

ST167 (n = 1, 4.2%), ST617 (n = 1, 4.2%), and ST1193 (n = 1, 4.2%) (Decano et al., 2021).

These STs were also among the top ten STs in the present study, indicating that sewage

surveillance may serve as a possible resource-efficient complement to clinical surveillance,

though further studies are needed to confirm this.

Previous studies have suggested that fecal sludge and sewage can be used for community

surveillance, but fecal sludge includes waste from fewer individuals and hence may be less

divergent than sewage (Capone et al., 2020). However, the number of unique STs was larger

for fecal sludge isolates than sewage isolates (26 unique STs vs 23 unique STs) (**Table S1**).

Moreover, Simpson's diversity index was higher for fecal sludge isolates than sewage isolates

when isolates from the same type of media were compared (**Figure 1a**). This might be because

of the fecal sludge sampling strategy employed in the present study: we obtained samples from

effluent of the primary sedimentation tank in a FSTP, which probably represents fecal sludge

from a large number of individuals. This might have contributed to the relatively high diversity

of *E. coli* isolates from fecal sludge samples, suggesting sampling from FSTPs or otherwise

designated fecal sludge dumping sites (rather than individual pit latrines) may better capture

the population-scale information in fecal sludge surveillance, when such places exist in the

region.

3.3. Antimicrobial resistance determinants

Six different ESBL genes, namely $bla_{CTX-M-3}$, $bla_{CTX-M-14}$, $bla_{CTX-M-15}$, $bla_{CTX-M-27}$, $bla_{CTX-M-55}$, and

$bla_{TEM-169}$, were detected among the isolates, with $bla_{CTX-M-15}$ being the predominant type

(**Figure 2a**). Based on the short-read assemblies, there were 21 isolates with two different

ESBL genes (n = 18 $bla_{CTX-M-14}$ + $bla_{CTX-M-15}$, n = 1 $bla_{CTX-M-15}$ + $bla_{CTX-M-27}$, n = 1 $bla_{CTX-M-3}$ +

$bla_{CTX-M-27}$, and n = 1 $bla_{TEM-169}$ + $bla_{CTX-M-15}$) (note that isolates carrying multiple copies of the

same ESBL gene were not considered here because those genes can be collapsed into one

contig in short-read assemblies). As expected, all but one isolate obtained from CTX-

containing media and CTX + CIP + GM-containing media carried at least one ESBL gene.

Importantly, many isolates obtained from CIP-containing media carried ESBL genes (41.9%

for fecal sludge isolates and 42.3% for sewage isolates), indicating the convergence of ESBL

genes and fluoroquinolone resistance.

All but four isolates obtained from CIP-containing media and CTX + CIP + GM-containing

media carried three or four mutations in QRDRs (**Figure 2b**). In all isolates with three

mutations in QRDRs, two were in codons 83 and 87 in GyrA, and the remaining mutation was

in ParC codon 80 or 84. These are congruent with previous studies reporting that two mutations

in the QRDR of *gyrA* and one or two mutations in the QRDR of *parC* are the main mechanism

of ciprofloxacin resistance in *E. coli* (Matsumura et al., 2017a; van der Putten et al., 2019).

Importantly, most isolates obtained from CTX-containing media also carried three or four

mutations in QRDRs (87.1% for fecal sludge isolates and 75.0% for sewage isolates), again

highlighting the convergence of ESBL genes and fluoroquinolone resistance determinants.

Gentamicin resistance in isolates obtained from CTX + CIP + GM-containing media could be

mostly explained by the presence of *aac(3)-II* genes (**Table S1**). Other resistance genes not

associated with antibiotics used in the selective media were also prevalent in our isolates; for

example, *sul* genes were detected in 175 isolates (96.7%) and *tet* genes were detected in 161

isolates (89.0%). However, genes conferring resistance to last-resort antibiotics, such as

carbapenems and colistin, were not detected in any isolates (**Table S1**). We did not use last-

resort antibiotics to select *E. coli* isolates in the present study, but we note that large-scale

genomic surveillance of isolates resistant to last-resort antibiotics should also be performed in

LMICs in future studies.

3.4. Genomic characteristics of phylogroup A isolates

Whole genome-based phylogenetic analysis was performed using kSNP3 to gain insights into

clonal relationships of 127 isolates belonging to phylogroup A, which was the dominant

phylogroup in the present study (**Figure 3**). The tree was largely separated according to STs,

though we observed separate clusters for ST10, ST46, and ST167. These separate clusters were

also confirmed in a tree generated using different software, parsnp (**Figure S1**). The ST10 and

ST167 clusters were characterized by distinct *fimH* types, namely *fimH54*, *fimH435*, and

fimH789 for ST10, and *fimH5*, *fimH29*, and *fimH54* for ST167. ST46 isolates from both

clusters did not carry *fimH*.

According to EnteroBase (Zhou et al., 2020), ST167, ST10, ST1284, and ST617 are all

classified into CC10. Classifying all isolates from a monophyletic clade containing these four

STs (the bottom clade in **Figure 3**) into CC10 identified that 99 isolates (54.7% of isolates in

the present study) belong to this lineage, indicating CC10 poses a significant AMR burden in

the underlying population. CC10 has been globally reported as a resident of the intestinal tract

of humans and other animals, and carriage of AMR genes (including ESBL genes) has also

been widely reported in this lineage (Reid et al., 2019). To determine the relationships between

CC10 isolates in this study and global CC10 isolates, we built a Mash-based tree using our

CC10 genomes and RefSeq CC10 genomes (**Figure S2** and **Table S4**). We found that our

CC10 genomes formed clusters with global CC10 genomes (e.g., ST617-ST1284 cluster and

ST167 cluster in **Figure S2**). On the other hand, some of the top 15 STs detected in global

CC10 genomes (e.g., ST48 and ST746) were not detected in our CC10 genomes. We also found

that our CC10 genomes were not evenly distributed in the tree, while African RefSeq CC10

genomes were scattered throughout the tree. These findings indicate that only a subset of global

clones within CC10 were prevalent in our study setting.

Although there were some small clusters specific to fecal sludge isolates (e.g., ST10 with

fimH789) and sewage isolates (e.g., a cluster containing six sewage isolates within ST46), fecal

sludge isolates and sewage isolates were generally intermingled in the tree (**Figure 3**). This

trend was also seen for media types; isolates selected with different antibiotics were generally

intermingled in the tree. Most phylogroup A isolates (except six isolates from minor STs

obtained using CTX-containing media) carried three or four mutations within QRDRs. As

mentioned above, ESBL genes were also prevalent even in isolates obtained using CIP-

containing media (n = 21/40, 52.5%). Notably, all ST167 isolates with *fimH*29 (n = 18) carried

both $bla_{CTX-M-14}$ and $bla_{CTX-M-15}$. Analysis of the completed genome of KFS-C10 from this clade

identified that $bla_{CTX-M-14}$ was integrated into the chromosome while $bla_{CTX-M-15}$ was carried on

an IncF[F31:F36:A4:B1] plasmid (note that this plasmid carried two different FII alleles, F31

and F36) (**Table S2**). There were seven isolates with ExPEC status (n = 4 ST46, n = 1 ST10, n

= 1 ST93, n = 1 ST1286). All seven isolates were obtained from CIP-containing media and

lacked ESBL genes, but they carried 3 to 12 non-ESBL AMR genes in addition to QRDR

mutations.

3.5. Genomic characteristics of ST1193 and ST131 isolates

We investigated the detailed genetic characteristics of isolates belonging to ST1193 (n = 10)

and ST131 (n = 6), most of which were obtained from fecal sludge, because these STs are

recognized as established/emerging global high-risk clones and the only MDR clones that are

dominant among unselected ExPEC populations (Pitout et al., 2022).

ST1193 is derived from the ST14 clonal complex, carries *fimH64*, and harbors *gyrA* (S83L and

D87N) and *parC* (S80I) mutations (Pitout et al., 2022). Previous studies reported that ST1193

isolates cluster together within the phylogenetic tree according to three major IncF plasmid

types, namely F-:A1:B1, F-:A1:B10, and F-:A1:B20, though the clusters are not strictly

monophyletic (Johnson et al., 2019; Wyrsch et al., 2022). These clusters were named as green

(F-:A1:B1), red (F-:A1:B10), and pink (F-:A1:B20) (Johnson et al., 2019). The phylogenetic

tree constructed in our study was congruent with these previous studies (i.e., largely separated

according to IncF types), and our isolates fell into an F-:A1:B10 cluster (n = 7) and an

F-:A1:B20 cluster (n = 3) (**Figure 4a**). Three isolates (KFS-B24, KFS-B25, KFS-C19) and two

isolates (KFS-D07, KSE-D22) with the F-:A1:B10 plasmid type clustered together in the tree.

Three isolates (KFS-D21, KFS-D24, KFS-D26) with the F-:A1:B20 plasmid type also

clustered together. ST1193 isolates with F-:A1:B:20 plasmids generally contain the K5

capsular type, and those with F-:A1:B1 or F-:A1:B10 plasmids generally contain the K1

capsular type (Johnson et al., 2019). However, all of our ST1193 isolates, including those with

F-:A1:B:20 plasmids, contained the K1 capsular type. A variety of AMR genes associated with

different drug classes were detected in our ST1193 isolates (**Figure 4c**). Notably, among six

isolates with complete genomes, three (KFS-B24, KFS-D13, KSE-D22) carried chromosomal

AMR genes, including $bla_{\text{CTX-M-15}}$, within different genetic contexts (discussed in detail below

and in **Figure S3**). To determine if global ST1193 genomes carry chromosomal AMR genes,

we checked the location of AMR genes in all complete ST1193 genomes deposited in GenBank

(as of October 2023). Among 46 genomes, excluding our own genomes, eight (17%) carried

chromosomal AMR genes and six (13%) carried chromosomal $bla_{\text{CTX-M}}$ (**Table S5**). We also

found that the genetic contexts of chromosomal $bla_{\text{CTX-M}}$ in ST1193 genomes were diverse and

the contexts detected in two of our ST1193 genomes (KFS-B24 and KFS-D13) were not

described previously, indicating multiple events contributed to integration of $bla_{\text{CTX-M}}$ into the

ST1193 chromosome. The transposition unit detected in the chromosome of KSE-D22, which

contains $bla_{\text{CTX-M-15}}$ and four other AMR genes, was found to be inserted into the same position

in the chromosome of a Canadian ST1193 *E. coli* genome (GCA_032296485.1), potentially

suggesting global circulation of this strain. These observations indicate chromosomal

integration of AMR genes, as well as plasmid carriage, can contribute to the MDR phenotype

of ST1193. All ST1193 isolates in this study were classified as ExPEC based on the virulence

gene profiles, which potentially indicates these isolates can cause extraintestinal infections.

ST131 is known to be divided into clades A, B, and C (containing subclades C0, C1, and C2)

(Pitout and Finn, 2020). Within subclade C1 there is a clone known as C1-M27, which is

responsible for the spread of ESBL-producing *E. coli* in some countries (Matsumura et al.,

2017b; Merino et al., 2018). The ST131 isolates in the present study belonged to subclade C1-

M27 (n = 3), clade A (n = 2), and subclade C2 (n = 1) (**Figure 4b**). Three subclade C1-M27

isolates clustered together within the tree, while two clade A isolates were distantly related. As

reported previously (Matsumura et al., 2017b), the C1-M27 isolates carried *fimH*30, LNIV-

type QRDRs, and $bla_{CTX-M-27}$ (**Figure 4c**). The two clade A isolates were typed as *fimH41* as

previously reported (Matsumura et al., 2017b), but carried $bla_{CTX-M-15}$ and mutations in both

gyrA and *parC* QRDRs. Although clade A *E. coli* is generally sensitive to antibiotics (Pitout

and Finn, 2020), clade A isolates with bla_{CTX-M} and *gyrA*/*parC* mutations have been

sporadically reported (Stoesser et al., 2016). The subclade C2 isolate carried *fimH*30, LNIV-

type QRDRs, and $bla_{CTX-M-15}$, which are the expected traits of the subclade C2 *E. coli* (Pitout

and Finn, 2020). A variety of AMR genes were detected in our ST131 isolates, and all the

isolates met the ExPEC criteria (**Figure 4c**).

Previous studies also identified the high-risk clones ST1193 and ST131 in sewage (Gomi et al.,

2017; Raven et al., 2019), indicating sewage surveillance can be an effective tool to monitor

the occurrence of these high-risk pathogens among populations. Genomic analysis, as

implemented in the present study, resolved fine-scale phylogenies of these high-risk clones at

the clade/subclade level (**Figure 4**), showing a combination of sewage (fecal sludge)

surveillance and whole-genome sequencing is even more effective and informative.

3.6. Locations and genetic contexts of AMR genes in isolates from major clones

In total, 26 genomes were selected from the top five STs (n = 8 ST167, n = 4 ST10, n = 3 ST46,

n = 2 ST1284, and n = 6 ST1193) and ST131 (n = 3) and subjected to long-read sequencing to

elucidate the locations and genetic contexts of the AMR genes in these major STs (care was

taken not to select multiple closely-related isolates). Hybrid assembly using short and long

reads completed 22 of 26 genomes (n = 6 ST167, n = 3 ST10, n = 3 ST46, n = 2 ST1284, n =

6 ST1193, and n = 2 ST131). The remaining four genomes could not be completed, probably

due to the presence of long repeats in the genomes.

The completed genomes carried one to eight plasmids (median four plasmids). Among the 89

plasmids in the completed genomes, 38 (42.7%) carried at least one AMR gene and thus were

defined as AMR plasmids. IncF AMR plasmids were the most prevalent (n = 25), followed by

Col(pHAD28) (n = 6), IncB/O/K/Z (n = 4), IncX1 (n = 1), IncX2 (n = 1), and IncHI2-IncHI2A

(n = 1) (**Table 1**). We note that the completed genomes represent only a subset of our isolates,

and the actual AMR plasmid diversity in the whole population may be different. Nonetheless,

the prevalence of AMR IncF plasmids is noteworthy, and 11 (79%) of 14 plasmidic $bla_{\text{CTX-M}}$

genes were located on IncF plasmids. IncF plasmids are frequently detected among $E. coli$ from

humans and can stably be maintained in commensal $E. coli$ within the human gastrointestinal

tract without antibiotic selection pressure (Bevan et al., 2017), which might explain this high

prevalence. IncF replicon sequence typing identified 14 different allele combinations, revealing

diverse IncF plasmids contributed to the spread of AMR genes within these major STs.

Although AMR plasmids of other replicon types were not common, two IncB/O/K/Z plasmids

and one IncHI2-IncHI2A plasmid contained a $bla_{\text{CTX-M}}$ gene. We found plasmids from other

continents that were highly similar to 13 (34%) of 38 AMR plasmids in our study under the

stringent criteria applied (i.e., >99% query coverage and >99% identity) (**Table 1**, **Table S2**).

This indicates circulation of global AMR plasmids (or clones with such plasmids) in our study

setting. On the other hand, close blastn hits (defined here as hits with >80% query coverage)

were not found for some AMR plasmids (CP124985, CP124987, and CP124993), indicating

the occurrence of unique/rare AMR plasmids in this region.

Among the 22 completed genomes, AMR genes were detected on the chromosome in eight

isolates (n = 3 ST167, n = 3 ST1193, n = 2 ST46). Notably, all eight isolates carried

chromosomal $bla_{\text{CTX-M}}$ (n = 7 $bla_{\text{CTX-M-15}}$ and n = 1 $bla_{\text{CTX-M-14}}$), and three isolates carried

additional chromosomal AMR genes (**Table S2**). Detailed analyses of genetic contexts of

chromosomal $bla_{\text{CTX-M}}$ genes and adjacent AMR genes are provided in **Figure S3**. We note that

recent studies have also shown the frequent occurrence (more than 50%) of chromosomal

$bla_{\text{CTX-M}}$ integration among *E. coli* isolates using both short- and long-read sequencing (Gomi

et al., 2022; Milenkov et al., 2023). Chromosomal integration of AMR genes might have been

previously underestimated due to the inability of PCR or short-read sequencing to determine

the location of AMR genes. Long-read sequencing will become more common in the near

future, which may uncover more examples of chromosomal integration of AMR genes and

underline the importance of this mechanism in the stabilization and maintenance of AMR genes.

3.7. Study limitations

This study has some limitations. First, the clonal composition of antimicrobial-resistant *E. coli*

observed in the present study might not directly reflect that of the gut flora of the underlying

population due to the noise caused by e.g., differential survival of *E. coli* strains in sewer

pipes/fecal sludge (Huijbers et al., 2020). Moreover, contamination from non-human animal

sources in the samples cannot be excluded. Dominance of CC10 in our collection, which is

prevalent not only in human feces but also in animal feces (Reid et al., 2019; Reid et al., 2017;

Zingali et al., 2020), also implies this possibility. However, we think contamination from non-

human animals is limited because the contribution from animal feces is lower than that from

human feces in this region (Komakech et al., 2014), and *E. coli* concentrations are generally

much higher in human feces than in domestic animals (Tenaillon et al., 2010). We also note

that these non-human sources should also be considered in terms of the One Health concept.

Inclusion of a sufficient number of fecal *E. coli* isolates from the matched human population

in genomic analysis will further confirm the usefulness of fecal sludge/sewage in AMR

surveillance. Second, we performed sampling over a relatively short period. Longitudinal

sampling with timeframes over one year, for example, will provide information on the change

of clonal composition. Third, long-read sequencing was performed only on the selected isolates

from major STs. Future studies employing larger-scale long-read sequencing of isolates from

various clones will elucidate AMR vectors also in minor STs. Nevertheless, our analyses

revealed detailed genomic characteristics of antimicrobial-resistant *E. coli* in fecal sludge and

sewage in Uganda, providing valuable insights into AMR burden in this region.

4. Conclusions

Here, we applied whole-genome sequencing to characterize antimicrobial-resistant *E. coli*

obtained from fecal sludge and sewage in Uganda. Our study revealed that CC10, including

ST167, ST10, ST1284, and ST617, were prevalent among both fecal sludge and sewage

isolates, indicating this lineage significantly contributed to AMR burden in the underlying

population. Global high-risk clones ST1193 and ST131 were also detected, adding potential

health risks to the population. We also revealed that many of the AMR genes were carried by

IncF plasmids or integrated into the chromosome by incorporating data obtained from long-

read sequencing. We admit that performing whole-genome sequencing in routine surveillance

is currently not realistic. However, as sequencing costs will continue to decrease, we believe

that a combination of fecal sludge/sewage surveillance and whole-genome sequencing will be

a powerful tool for monitoring AMR carriage in the underlying population.

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References

Aarestrup, F.M. and Woolhouse, M.E.J. 2020. Using sewage for surveillance of
antimicrobial resistance. Science 367(6478), 630-632.

Anjum, M.F., Schmitt, H., Borjesson, S., Berendonk, T.U. and network, W. 2021. The
potential of using E. coli as an indicator for the surveillance of antimicrobial resistance
(AMR) in the environment. Curr Opin Microbiol 64, 152-158.

Aoike, N., Saga, T., Sakata, R., Yoshizumi, A., Kimura, S., Iwata, M., Yoshizawa, S.,
Sugasawa, Y., Ishii, Y., Yamaguchi, K. and Tateda, K. 2013. Molecular
characterization of extraintestinal *Escherichia coli* isolates in Japan: relationship
between sequence types and mutation patterns of quinolone resistance-determining
regions analyzed by pyrosequencing. J Clin Microbiol 51(6), 1692-1698.

Aziz, R.K., Bartels, D., Best, A.A., DeJongh, M., Disz, T., Edwards, R.A., Formsma, K.,
Gerdes, S., Glass, E.M., Kubal, M., Meyer, F., Olsen, G.J., Olson, R., Osterman, A.L.,
Overbeek, R.A., McNeil, L.K., Paarmann, D., Paczian, T., Parrello, B., Pusch, G.D.,
Reich, C., Stevens, R., Vassieva, O., Vonstein, V., Wilke, A. and Zagnitko, O. 2008.
The RAST Server: rapid annotations using subsystems technology. BMC Genomics 9,
75.

Beghain, J., Bridier-Nahmias, A., Le Nagard, H., Denamur, E. and Clermont, O. 2018.
ClermonTyping: an easy-to-use and accurate in silico method for *Escherichia* genus
strain phylotyping. Microb Genom 4(7).

Berendes, D.M., Sumner, T.A. and Brown, J.M. 2017. Safely Managed Sanitation for All
Means Fecal Sludge Management for At Least 1.8 Billion People in Low and Middle
Income Countries. Environ Sci Technol 51(5), 3074-3083.

Bevan, E.R., Jones, A.M. and Hawkey, P.M. 2017. Global epidemiology of CTX-M beta-
lactamases: temporal and geographical shifts in genotype. J Antimicrob Chemother
72(8), 2145-2155.

Bortolaia, V., Kaas, R.S., Ruppe, E., Roberts, M.C., Schwarz, S., Cattoir, V., Philippon, A.,
Allesoe, R.L., Rebelo, A.R., Florensa, A.F., Fagelhauer, L., Chakraborty, T., Neumann,
B., Werner, G., Bender, J.K., Stingl, K., Nguyen, M., Coppens, J., Xavier, B.B.,
Malhotra-Kumar, S., Westh, H., Pinholt, M., Anjum, M.F., Duggett, N.A., Kempf, I.,
Nykasenoja, S., Olkkola, S., Wieczorek, K., Amaro, A., Clemente, L., Mossong, J.,
Losch, S., Ragimbeau, C., Lund, O. and Aarestrup, F.M. 2020. ResFinder 4.0 for
predictions of phenotypes from genotypes. J Antimicrob Chemother 75(12), 3491-3500.

Capone, D., Berendes, D., Cumming, O., Knee, J., Nala, R., Risk, B.B., Stauber, C., Zhu, K.
and Brown, J. 2020. Analysis of Fecal Sludges Reveals Common Enteric Pathogens
in Urban Maputo, Mozambique. Environ Sci Tech Let 7(12), 889-895.

Carattoli, A., Zankari, E., Garcia-Fernandez, A., Voldby Larsen, M., Lund, O., Villa, L., Moller
Aarestrup, F. and Hasman, H. 2014. *In silico* detection and typing of plasmids using
PlasmidFinder and plasmid multilocus sequence typing. Antimicrob Agents Chemother
58(7), 3895-3903.

Chen, S., Zhou, Y., Chen, Y. and Gu, J. 2018. fastp: an ultra-fast all-in-one FASTQ
preprocessor. Bioinformatics 34(17), i884-i890.

Chigwechokha, P., Street, R. and Holm, R.H. 2022. Advancing the Use of Fecal Sludge for
Timelier and Better-Quality Epidemiological Data in Low- and Middle-Income
Countries for Pandemic Prevention. Environ Sci Technol.

Decano, A.G., Pettigrew, K., Sabiiti, W., Sloan, D.J., Neema, S., Bazira, J., Kiiru, J., Onyango,
H., Asiimwe, B. and Holden, M.T.G. 2021. Pan-Resistome Characterization of
Uropathogenic *Escherichia coli* and *Klebsiella pneumoniae* Strains Circulating in
Uganda and Kenya, Isolated from 2017-2018. Antibiotics (Basel) 10(12).

Denamur, E., Clermont, O., Bonacorsi, S. and Gordon, D. 2021. The population genetics
of pathogenic *Escherichia coli*. Nat Rev Microbiol 19(1), 37-54.

Gardner, S.N., Slezak, T. and Hall, B.G. 2015. kSNP3.0: SNP detection and phylogenetic
analysis of genomes without genome alignment or reference genome. Bioinformatics
31(17), 2877-2878.

Gomi, R., Matsuda, T., Fujimori, Y., Harada, H., Matsui, Y. and Yoneda, M. 2015.
Characterization of Pathogenic *Escherichia coli* in River Water by Simultaneous
Detection and Sequencing of 14 Virulence Genes. Environ Sci Technol 49(11), 6800-
6807.

Gomi, R., Matsuda, T., Matsumura, Y., Yamamoto, M., Tanaka, M., Ichiyama, S. and Yoneda,
M. 2017. Occurrence of Clinically Important Lineages, Including the Sequence

Type 131 C1-M27 Subclone, among Extended-Spectrum-beta-Lactamase-Producing
Escherichia coli in Wastewater. Antimicrob Agents Chemother 61(9).

Gomi, R., Yamamoto, M., Tanaka, M. and Matsumura, Y. 2022. Chromosomal integration
of bla_{CTX-M} genes in diverse *Escherichia coli* isolates recovered from river water in
Japan. Curr Res Microb Sci 3, 100144.

Gumede, S.N., Abia, A.L.K., Amoako, D.G. and Essack, S.Y. 2021. Analysis of
Wastewater Reveals the Spread of Diverse Extended-Spectrum beta-Lactamase-
Producing *E. coli* Strains in uMgungundlovu District, South Africa. Antibiotics (Basel)
10(7).

Hendriksen, R.S., Munk, P., Njage, P., van Bunnik, B., McNally, L., Lukjancenko, O., Roder,
T., Nieuwenhuijse, D., Pedersen, S.K., Kjeldgaard, J., Kaas, R.S., Clausen, P., Vogt,
J.K., Leekitcharoenphon, P., van de Schans, M.G.M., Zuidema, T., de Roda Husman,
A.M., Rasmussen, S., Petersen, B., Global Sewage Surveillance project, c., Amid, C.,
Cochrane, G., Sicheritz-Ponten, T., Schmitt, H., Alvarez, J.R.M., Aidara-Kane, A.,
Pamp, S.J., Lund, O., Hald, T., Woolhouse, M., Koopmans, M.P., Vigre, H., Petersen,
T.N. and Aarestrup, F.M. 2019. Global monitoring of antimicrobial resistance
based on metagenomics analyses of urban sewage. Nat Commun 10(1), 1124.

Huijbers, P.M.C., Larsson, D.G.J. and Flach, C.F. 2020. Surveillance of antibiotic resistant
Escherichia coli in human populations through urban wastewater in ten European
countries. Environ Pollut 261, 114200.

Hutinel, M., Huijbers, P.M.C., Fick, J., Ahren, C., Larsson, D.G.J. and Flach, C.F. 2019.
Population-level surveillance of antibiotic resistance in *Escherichia coli* through
sewage analysis. Euro Surveill 24(37).

Jain, C., Rodriguez, R.L., Phillippy, A.M., Konstantinidis, K.T. and Aluru, S. 2018. High
throughput ANI analysis of 90K prokaryotic genomes reveals clear species boundaries.
Nat Commun 9(1), 5114.

Joensen, K.G., Scheutz, F., Lund, O., Hasman, H., Kaas, R.S., Nielsen, E.M. and Aarestrup,
F.M. 2014. Real-time whole-genome sequencing for routine typing, surveillance,
and outbreak detection of verotoxigenic *Escherichia coli*. J Clin Microbiol 52(5), 1501-
1510.

Johnson, J.R. and Stell, A.L. 2000. Extended virulence genotypes of *Escherichia coli*
strains from patients with urosepsis in relation to phylogeny and host compromise. J
Infect Dis 181(1), 261-272.

Johnson, T.J., Elnekave, E., Miller, E.A., Munoz-Aguayo, J., Flores Figueroa, C., Johnston, B.,
Nielson, D.W., Logue, C.M. and Johnson, J.R. 2019. Phylogenomic Analysis of
Extraintestinal Pathogenic *Escherichia coli* Sequence Type 1193, an Emerging
Multidrug-Resistant Clonal Group. Antimicrob Agents Chemother 63(1).

Katongole, P., Nalubega, F., Florence, N.C., Asiimwe, B. and Andia, I. 2020. Biofilm
formation, antimicrobial susceptibility and virulence genes of Uropathogenic
Escherichia coli isolated from clinical isolates in Uganda. BMC Infect Dis 20(1), 453.
Kohler, C.D. and Dobrindt, U. 2011. What defines extraintestinal pathogenic *Escherichia*
coli? Int J Med Microbiol 301(8), 642-647.
Kolmogorov, M., Yuan, J., Lin, Y. and Pevzner, P.A. 2019. Assembly of long, error-prone
reads using repeat graphs. Nat Biotechnol 37(5), 540-546.
Komakech, A.J., Banadda, N.E., Gebresenbet, G. and Vinneras, B. 2014. Maps of animal
urban agriculture in Kampala City. Agron Sustain Dev 34(2), 493–500.
Kwak, Y.K., Colque, P., Byfors, S., Giske, C.G., Mollby, R. and Kuhn, I. 2015.
Surveillance of antimicrobial resistance among *Escherichia coli* in wastewater in
Stockholm during 1 year: does it reflect the resistance trends in the society? Int J
Antimicrob Agents 45(1), 25-32.
Larsson, D.G.J., Flach, C.F. and Laxminarayan, R. 2022. Sewage surveillance of antibiotic
resistance holds both opportunities and challenges. Nat Rev Microbiol, 1-2.
Le, T.H., Tong, D.K., Pham, T.T.V., Hoang, T.L., Tran, T.K. and Ng, C. 2023. Occurrence
and removal of antibiotic resistant *Escherichia coli* and antibiotic resistance genes in
an urban wastewater treatment plant. Int J Environ Sci Technol.
Majumder, M.A.A., Rahman, S., Cohall, D., Bharatha, A., Singh, K., Haque, M. and Gittens-
St Hilaire, M. 2020. Antimicrobial Stewardship: Fighting Antimicrobial Resistance
and Protecting Global Public Health. Infect Drug Resist 13, 4713-4738.
Malberg Tetzschner, A.M., Johnson, J.R., Johnston, B.D., Lund, O. and Scheutz, F. 2020.
In Silico Genotyping of *Escherichia coli* Isolates for Extraintestinal Virulence Genes
by Use of Whole-Genome Sequencing Data. J Clin Microbiol 58(10).
Matsumura, Y., Noguchi, T., Tanaka, M., Kanahashi, T., Yamamoto, M., Nagao, M., Takakura,
S., Ichiyama, S. and th, J.B. 2017a. Population structure of Japanese extraintestinal
pathogenic *Escherichia coli* and its relationship with antimicrobial resistance. J
Antimicrob Chemother 72(4), 1040-1049.
Matsumura, Y., Pitout, J.D.D., Peirano, G., DeVinney, R., Noguchi, T., Yamamoto, M., Gomi,
R., Matsuda, T., Nakano, S., Nagao, M., Tanaka, M. and Ichiyama, S. 2017b. Rapid
Identification of Different *Escherichia coli* Sequence Type 131 Clades. Antimicrob
Agents Chemother 61(8).
Merino, I., Hernandez-Garcia, M., Turrientes, M.C., Perez-Viso, B., Lopez-Fresnena, N., Diaz-
Agero, C., Maechler, F., Fankhauser-Rodriguez, C., Kola, A., Schrenzel, J., Harbarth,
S., Bonten, M., Gastmeier, P., Canton, R., Ruiz-Garbajosa, P. and Group, R.G.S.
2018. Emergence of ESBL-producing *Escherichia coli* ST131-C1-M27 clade
colonizing patients in Europe. J Antimicrob Chemother 73(11), 2973-2980.

Milenkov, M., Proux, C., Rasolofoarison, T.L., Rakotomalala, F.A., Rasoanandrasana, S., Rahajamanana, L.V., Rafalimanana, C., Ravaoarisaina, Z., Ramahatafandry, I.T., Westeel, E., Petitjean, M., Marin, J., Mullaert, J., Han, L., Clermont, O., Raskine, L., Endtz, H., Andremont, A., Denamur, E., Komurian-Pradel, F., Samison, L.H. and Armand-Lefevre, L. 2023. Tricycle surveillance in Antananarivo, Madagascar: circulation of both extended-spectrum beta-lactamase producing *Escherichia coli* strains and plasmids among humans, chickens and the environment. medRXiv.

Nabadda, S., Kakooza, F., Kiggundu, R., Walwema, R., Bazira, J., Mayito, J., Mugerwa, I., Sekamatte, M., Kambugu, A., Lamorde, M., Kajumbula, H. and Mwebasa, H. 2021. Implementation of the World Health Organization Global Antimicrobial Resistance Surveillance System in Uganda, 2015-2020: Mixed-Methods Study Using National Surveillance Data. JMIR Public Health Surveill 7(10), e29954.

Odongo, I., Ssemambo, R. and Kungu, J.M. 2020. Prevalence of *Escherichia Coli* and Its Antimicrobial Susceptibility Profiles among Patients with UTI at Mulago Hospital, Kampala, Uganda. Interdiscip Perspect Infect Dis 2020, 8042540.

Pitout, J.D.D. and Finn, T.J. 2020. The evolutionary puzzle of *Escherichia coli* ST131. Infect Genet Evol 81, 104265.

Pitout, J.D.D., Peirano, G., Chen, L., DeVinney, R. and Matsumura, Y. 2022. *Escherichia coli* ST1193: Following in the Footsteps of *E. coli* ST131. Antimicrob Agents Chemother 66(7), e0051122.

Poirel, L., Madec, J.Y., Lupo, A., Schink, A.K., Kieffer, N., Nordmann, P. and Schwarz, S. 2018. Antimicrobial Resistance in *Escherichia coli*. Microbiol Spectr 6(4).

Raven, K.E., Ludden, C., Gouliouris, T., Blane, B., Naydenova, P., Brown, N.M., Parkhill, J. and Peacock, S.J. 2019. Genomic surveillance of *Escherichia coli* in municipal wastewater treatment plants as an indicator of clinically relevant pathogens and their resistance genes. Microb Genom 5(5).

Reid, C.J., DeMaere, M.Z. and Djordjevic, S.P. 2019. Australian porcine clonal complex 10 (CC10) *Escherichia coli* belong to multiple sublineages of a highly diverse global CC10 phylogeny. Microb Genom 5(3).

Reid, C.J., Wyrsch, E.R., Roy Chowdhury, P., Zingali, T., Liu, M., Darling, A.E., Chapman, T.A. and Djordjevic, S.P. 2017. Porcine commensal *Escherichia coli*: a reservoir for class 1 integrons associated with IS*26*. Microb Genom 3(12).

Roer, L., Tchesnokova, V., Allesoe, R., Muradova, M., Chattopadhyay, S., Ahrenfeldt, J., Thomsen, M.C.F., Lund, O., Hansen, F., Hammerum, A.M., Sokurenko, E. and Hasman, H. 2017. Development of a Web Tool for *Escherichia coli* Subtyping Based on *fimH* Alleles. J Clin Microbiol 55(8), 2538-2543.

Siguier, P., Perochon, J., Lestrade, L., Mahillon, J. and Chandler, M. 2006. ISfinder: the
reference centre for bacterial insertion sequences. Nucleic Acids Res 34(Database
issue), D32-36.

Stoesser, N., Sheppard, A.E., Pankhurst, L., De Maio, N., Moore, C.E., Sebra, R., Turner, P.,
Anson, L.W., Kasarskis, A., Batty, E.M., Kos, V., Wilson, D.J., Phetsouvanh, R.,
Wyllie, D., Sokurenko, E., Manges, A.R., Johnson, T.J., Price, L.B., Peto, T.E., Johnson,
J.R., Didelot, X., Walker, A.S., Crook, D.W. and Modernizing Medical Microbiology
Informatics, G. 2016. Evolutionary History of the Global Emergence of the
Escherichia coli Epidemic Clone ST131. mBio 7(2), e02162.

Tenaillon, O., Skurnik, D., Picard, B. and Denamur, E. 2010. The population genetics of
commensal *Escherichia coli*. Nat Rev Microbiol 8(3), 207-217.

Treangen, T.J., Ondov, B.D., Koren, S. and Phillippy, A.M. 2014. The Harvest suite for
rapid core-genome alignment and visualization of thousands of intraspecific microbial
genomes. Genome Biol 15(11), 524.

van der Putten, B.C.L., Remondini, D., Pasquini, G., Janes, V.A., Matamoros, S. and Schultsz,
C. 2019. Quantifying the contribution of four resistance mechanisms to
ciprofloxacin MIC in *Escherichia coli*: a systematic review. J Antimicrob Chemother
74(2), 298-310.

Wadley, T.D., Jenjaroenpun, P., Wongsurawat, T., Ussery, D.W. and Nookaew, I. 2019.
Complete Genome and Plasmid Sequences of *Escherichia coli* Type Strain ATCC
11775. Microbiol Resour Announc 8(9).

Waters, N.R., Abram, F., Brennan, F., Holmes, A. and Pritchard, L. 2020. Easy
phylotyping of *Escherichia coli* via the EzClermont web app and command-line tool.
Access Microbiol 2(9), acmi000143.

WHO 2015. Global action plan on antimicrobial resistance.

WHO 2021. WHO integrated global surveillance on ESBL-producing *E. coli* using a "One
Health" approach: implementation and opportunities.

WHO 2022. Global antimicrobial resistance and use surveillance system (GLASS) report:
2022.

Wick, R.R. and Holt, K.E. 2022. Polypolish: Short-read polishing of long-read bacterial
genome assemblies. PLoS Comput Biol 18(1), e1009802.

Wick, R.R., Judd, L.M., Gorrie, C.L. and Holt, K.E. 2017. Unicycler: Resolving bacterial
genome assemblies from short and long sequencing reads. PLoS Comput Biol 13(6),
e1005595.

Wyrsch, E.R., Bushell, R.N., Marenda, M.S., Browning, G.F. and Djordjevic, S.P. 2022.
Global Phylogeny and F Virulence Plasmid Carriage in Pandemic *Escherichia coli*
ST1193. Microbiol Spectr 10(6), e0255422.

Zhou, Z., Alikhan, N.F., Mohamed, K., Fan, Y., Agama Study, G. and Achtman, M.   2020.
The EnteroBase user's guide, with case studies on *Salmonella* transmissions, *Yersinia*
pestis phylogeny, and *Escherichia* core genomic diversity. Genome Res 30(1), 138-152.
Zingali, T., Reid, C.J., Chapman, T.A., Gaio, D., Liu, M., Darling, A.E. and Djordjevic, S.P.
2020.   Whole Genome Sequencing Analysis of Porcine Faecal Commensal
Escherichia coli Carrying Class 1 Integrons from Sows and Their Offspring.
Microorganisms 8(6).

Figure 1. (a) Clonal composition of 181 *E. coli* isolates. STs are shown separately for each

media type (CTX, CIP, and CTX + CIP + GM) and each sample type (fecal sludge and sewage).

The top ten STs are shown in descending order. The remaining STs, all of which were with

three or fewer isolates, are combined into "other STs". Phylogroup corresponding to each ST

is shown in parentheses. Circle size indicates the number of genomes, and intensity of circle

shading indicates the proportion of genomes classified as ExPEC (as per inset legends). Clonal

composition of minor STs (i.e., STs classified as "other STs" in (a)) from (b) fecal sludge and

(c) sewage. Phylogroup corresponding to each ST is shown in parentheses, and STs classified

as ExPEC are colored blue.

Figure 2. (a) ESBL genes and (b) QRDR mutations in *E. coli* isolates. AMR determinants are

shown separately for each media type (CTX, CIP, and CTX + CIP + GM) and each sample

type (fecal sludge and sewage). This figure is based on the analysis of short-read assembly data

and isolates with multiple copies of the same ESBL gene can be reported to carry a single copy.

For QRDRs, mutations in GyrA codons 83 and 87 and ParC codons 80 and 84 were counted.

Figure 3. kSNP3 whole-genome SNP-based phylogenetic tree of 127 phylogroup A isolates.

The tree was constructed using 54,632 SNP-loci, which occurred in at least 90% of the genomes.

A k-mer length of 19 was used for SNP identification. The presence of traits is indicated by

699 colored boxes (as per inset legends). For the ST column, major STs (i.e., ST10, ST46, ST167,

700 ST617, and ST1284) are indicated by the corresponding color boxes, while other STs are

701 represented by gray boxes. ST10 and ST167 clusters are highlighted in the tree according to

702 the *fimH* alleles, except for singletons. The names of completed genomes are colored blue.

Figure 4. Recombination-free phylogenetic trees for (a) ST1193 and (b) ST131. For ST1193,

we used the Assembly Dereplicator tool (v0.3.0, https://github.com/rrwick/Assembly-

Dereplicator) and subsampled global isolates to remove near-identical redundant isolates and

to reduce computational burden. The ST1193 tree was built using a 3,899 bp alignment

generated from our isolates (n = 10) and global isolates (n = 198). The ST131 tree was built

using a 10,712 bp alignment generated from our isolates (n = 6) and global isolates (n = 379).

Branches leading to our isolates are colored in red. The trees were midpoint rooted. Accession

numbers of global ST1193 genomes and ST131 genomes are available in **Table S6** and **Table**

S7. (c) Key genetic features of ST1193 and ST131 isolates sequenced in the present study. FS,

fecal sludge; SE, sewage. We did not assign clades to ST1193 isolates because the previously

defined ST1193 clades are not monophyletic as discussed in the main text. For QRDRs, GyrA

codons 83 and 87 and ParC codons 80 and 84 that are different from the wild type (SDSE) are

colored in red. Presence of AMR genes is indicated by colored boxes (colored by drug class).

All four isolates with *aac(6')-Ib* carried the *aac(6')-Ib-cr* variant, which is associated with

decreased susceptibility to aminoglycosides and to ciprofloxacin and norfloxacin. KFS-D13

carried *aadA1*, *dfrA5*, *ere(A)*, *qnrB1*, and *catA1* in addition to AMR genes shown in (c).

Genomes with blue names in (a)–(c) were completed.

Table 1. Basic characteristics of AMR plasmids in major STs.

Inc type (n)	Plasmid ST (n)	Chromosomal ST (n)	Size	ESBL gene (n)	No. of other AMR genes	Identical or closely related plasmids in other continents[a] (n)	Accession number(s)
Inc F[b] (25)	F-:A1:B10 (4)	ST1193 (4)	88,138 bp– 108,071 bp	-	3–7	Yes (3), No (1)	CP124974, CP125028, CP125054, CP125066
	F31:F36:A4:B1 (4)	ST167 (2)	168,379 bp, 173,762 bp	$bla_{\text{CTX-M-15}}$ (2)	6–8	No (2)	CP124971, CP125044
		ST10 (1)	174,470 bp	$bla_{\text{CTX-M-15}}$ (1)	8	No (1)	CP125035
		ST1284 (1)	174,534 bp	$bla_{\text{CTX-M-15}}$ (1)	8	No (1)	CP124977
	F48:A1:B49 (4)	ST167 (4)	81,682 bp– 131,123 bp	$bla_{\text{CTX-M-27}}$ (1)	8–11	No (4)	CP124996, CP125002, CP125007, CP125040
	F-:A1:B20 (2)	ST1193 (2)	90,924 bp	-	7	No (2)	CP125014, CP125021
	F1:A2:B20 (2)	ST131 (clade A) (1)	146,809 bp	-	10	Yes (1)	CP125005
		ST131 (subclade C1-M27) (1)	104,558 bp	$bla_{\text{CTX-M-27}}$ (1)	8	Yes (1)	CP125077

	F-:A-:B- (1)	ST131 (clade A) (1)	110,850 bp	$bla_{CTX-M-15}$ (1)	0	Yes (1)	CP125006
	F-:A-:B1 (1)	ST46 (1)	97,539 bp	$bla_{CTX-M-27}$ (1)	10	No (1)	CP125071
	F2:A-:B- (1)	ST46 (1)	73,681 bp	-	11	No (1)	CP124987
	F22:F36:A1:B49 (1)	ST46 (1)	131,446 bp	-	11	No (1)	CP124991
	F36:A1:B1 (1)	ST1284 (1)	122,643 bp	$bla_{CTX-M-15}$ (1)	9	No (1)	CP125060
	F36:A1:B20 (1)	ST10 (1)	109,736 bp	$bla_{CTX-M-15}$ (1)	13	No (1)	CP124993
	F40:A-:B- (1)	ST10 (1)	70,669 bp	-	5	No (1)	CP125034
	F48:A1:B1 (1)	ST10 (1)	103,762 bp	$bla_{CTX-M-15}$ (1)	14	No (1)	CP124985
	F77:A-:B- (1)	ST167 (1)	75,825 bp	-	7	No (1)	CP124997
Col (pHAD28) (6)	-	ST167 (3)	6,200 bp–6,222 bp	-	3	Yes (3)	CP124972, CP125041, CP125046
		ST1193 (2)	6,200 bp	-	3	Yes (2)	CP125017, CP125023
		ST1284 (1)	6,200 bp	-	3	Yes (1)	CP125063
IncB/O/K/Z (4)	-	ST1193 (3)	95,063 bp–97,447 bp	$bla_{CTX-M-55}$ (2)	0–3	No (3)	CP125015, CP125022, CP125065
		ST1284 (1)	95,267 bp	-	3	No (1)	CP124978

IncX1 (1)	-	ST167 (1)	37,322 bp	-	5	No (1)	CP125008
IncX2 (1)	-	ST1284 (1)	34,566 bp	-	2	No (1)	CP125061
IncHI2-IncHI2A (1)	ST1 (1)	ST1193 (1)	327,916 bp	$bla_{CTX-M-15}$ (1)	12	Yes (1)	CP125030

ᵃblastn searches against the nucleotide collection (nr/nt) of the NCBI were performed to

identify identical/closely related plasmids (>99% query coverage and >99% identity) in May

2023. Also see **Table S2** for detailed information on blast hits.

ᵇVarious types of IncF replicons were detected but were represented by IncF. Replicon

sequences of small plasmids (Col and IncQ) were detected in nine IncF plasmids but are not

listed here. Please see **Table S2** for details.

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