Title:

Verification of emerging genomic mutations in *Mycobacterium tuberculosis* allows

transmission chains to be distinguished in an epidemiological typing cluster extending

over thirty years.

Short Title:

Emerging mutations in *M. tuberculosis* to support epidemiological investigations.

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Abstract:

Whole genome sequencing (WGS) is able to identify epidemiological links between

Mycobacterium tuberculosis isolates. Recent clustering can be ruled out using a pre-defined

single nucleotide polymorphism (SNP) threshold. If WGS clusters grow significantly over

time limited genetic variability hampers epidemiological investigations.

Newly emerging (informative) SNPs in isolates of an extended cluster growing for more than

30 years to >150 cases in the Netherlands were analysed. WGS data was analyzed from 61

sequencing files from 54 patients. Genomic positions that varied within the cluster isolates

were carefully screened for minority populations in other isolates from the cluster. A

transmission scheme was generated on the basis of WGS data alone then compared to the

epidemiological information available.

Fifty-two informative SNPs were identified, eight of which were also detected as mixed

variants. One emerging SNP in *dnaA* (1199G>A R400H) has been observed in other

transmitted strains and may be under selection. There was high concordance between the

transmission chains suggested on basis of the newly emerging SNPs and scenario's identified

using classical epidemiological cluster investigations.

Analysis of filtered SNPs accumulating in the genome of *M. tuberculosis* in large clusters

contains information on transmission dynamics and can be used to support epidemiological

investigations.

Introduction

In the Netherlands, all *Mycobacterium tuberculosis* complex isolates have been subjected to epidemiological typing by whole genome sequencing (WGS) at the national tuberculosis reference laboratory since 2016 [1]. Isolates within a 12 single nucleotide polymorphism (SNP) distance are reported as 'clustered' to the Municipal Public Health Services (MPHs) who perform interviews to identify and confirm epidemiological links [2]. However, most international WGS analysis pipeline's nowadays apply a stricter threshold of six SNPs to rule in a possible recent transmission [3-4]. Furthermore, SNP filtering in our pipeline is less strict than in most other pipelines, which results in an increased sensitivity to genetic variation and a parallel reduction in specificity (overcalling of SNPs). We estimate the increased SNP calling in our pipeline to be between 0 and 3 SNPs based on observations in international quality control exercises [1, 5].

In low transmission settings such as the Netherlands epidemiological clusters mostly consist of two to three cases, but occasionally large, longer-term clusters occur. In general, the detectable genetic variability between *M. tuberculosis* isolates in even large transmission clusters is limited [6-8]. Moreover, SNP variability between isolates from a single individual can be as large as between isolates from different individuals in a cluster [5, 9] Nonetheless, as the population structure of *M. tuberculosis* is clonal, in principle a higher resolution can be achieved by tracking truly emerging SNPs, as non-fixed alleles in a part of the isolates. This approach should enable a more precise reconstruction of transmission chains [10-13]. This was already suspected in 2010 by investigating single colony cultures of *M. tuberculosis* isolates associated with the large Harlingen outbreak in the Netherlands; the occurrence of new mutations in a part of the colonies of a sub set of the isolates was proven by PCR and

could be used to distinguish different sources of spread in the extending cluster [10]. Thus if

SNP calling is sufficiently accurate, a higher resolution in typing can be achieved by following

the accumulation of specific emerging SNPs and tracking them as fixed or non-fixed alleles in

isolates within transmission chains.

Here, we investigate WGS data of the second largest typing cluster in the Netherlands that

has been followed by three different molecular typing methods (initially IS*6110* RFLP, then

VNTR-MIRU 24, then WGS) over a time period of 30 years [2], with the objective to study

the accumulation of new SNPs and to test their utility to distinguish transmission forks

introduced by subsequent sources of spread. The predicted evolutionary branching of the

strain was compared to information available at MHSs on possible sources of spread in the

cluster and subsequent cases, in order to investigate the utility of the cluster sub-branching

information in the epidemiological investigation of MHSs.

Methods

Since 1993, DNA fingerprinting of all *M. tuberculosis* isolates has been performed in the

Netherlands, using RFLP typing from 1993-2008, VNTR-MIRU from 2004-2018 and WGS

from 2016 to the present. TB public health nurses systematically investigate possible

epidemiological links between clustered cases. This activity, the so called 'cluster

investigation', is prioritised for recent transmission defined as cases that occur within two

years after another case. A link is confirmed if the investigation reveals that the newly

clustered case was indeed in contact with another clustered and infectious case (e.g. a

family member, friend) or if the person was at a particular location at the same time with a

clustered infectious case. Since 2009, results of cluster investigations are reported to the

National TB Register (NTR), including the identified source case.

A single large cluster, that existed throughout the whole epidemiological typing period since

1993 and with a substantial number of confirmed epidemiological links between clustered

cases, was selected for detailed study. We requested the NTR Registration Committee to

provide demographic data of cases in this cluster and the results of cluster investigations. All

isolates in this cluster had been typed with WGS since 2016. Additionally, patients from

before 2016 with a confirmed epidemiological link were selected for re-typing by WGS.

MPHs provided information from routine cluster investigation on the most likely place of

transmission of patients in the cluster with a confirmed epidemiological link. The laboratory

technicians were blinded to information on possible epidemiological links between the

selected isolates.

From the cluster, 61 WGS sequencing files of *M. tuberculosis* isolates from 54 individuals

were analysed. From four individuals the sequences from two different isolates were

included; two individuals had two isolates (<6 months apart) and two others had two

isolates as a result of a reactivation (>6 months apart). An additional three isolates were

included twice as duplicate controls for the WGS sequencing and data analysis procedure.

The isolates were sequenced using an Illumina (CA, USA) HiSeq^{TM} 2500, NextSeq^{TM} 500 or

NextSeq^{TM} 550 sequencer. Unpaired reads were mapped against the H37Rv reference

genome using Bowtie2, (GenBank accession: AL123456.3). Breseq v0.28.1 was used to

detect SNPs and INDELs (insertions and deletions). The in-house pipeline called SNPs using a

≥80% allele frequency cut off [1]. Called SNPs were excluded from the SNP distance

calculation when present in 'difficult to sequence' genomic regions according to an

exclusion list or when they were within 12 bp from another SNP [3]. All sequencing data

were subjected to our routine quality check, specifically an average coverage of 50x or

more, no contamination detected (i.e. <3 SNPs called in ribosomal genes *rrs* or *rrl* genes and

no more than five specific reads of another lineage in any of the 62 Coll SNPs [14]). Also 15

high confidence first line resistance mutations (supplementary Table S2) were screened for

mutant reads at <80% to exclude a mixed resistance genotype / emerging resistance.

The sequencing data generated is available online, NCBI accession numbers are listed in

supplementary table S1.

Additional Analysis & WGS transmission scheme

Any SNPs not present in all sequenced isolates from the cluster called by our pipeline vs the

reference genome were graded 'confident' or 'non-confident' based on visual inspection of

the SAMtools pile ups [15]. These SNPs were then screened for their distribution in the

Dutch WGS database (containing at the moment of screening 3,981 isolates from 53

different lineages [14]). Allele frequencies for any confident SNPs not present in all

sequenced isolates in the cluster were then examined in all the isolates from the cluster

sequenced. These allele frequencies were used to identify emerging SNPs; an allele

frequency over 95% was considered 'fixed' and below 5% as wild type, an allele frequency

between 5% and 95% was considered a mixed SNP.

A WGS transmission scheme was then produced based on the distribution of all 'confident'

(both fixed and mixed) SNPs based on the assumptions that;

(i)   SNP acquisition is unique, i.e. the same SNP did not occur randomly twice.

(ii)   Fixed SNPs are not lost in the transmission scheme.

(iii)   Mixed SNPs are either transmitted or not transmitted to a secondary case.

The transmission scheme, generated from the WGS data was then compared to the

transmission inferences obtained on the basis of cluster investigations and the known

relationships between the isolates (including duplicates and multiple isolates from the same

individual).

Ethical clearance

The NTR Registration Committee approved our request and provided the WGS and

epidemiological data. As the routine collected data were pseudonymized, the study was not

subjected to the Dutch law for Medical Research Involving Human Subject Act (WMO).

Results

Cluster description based on epidemiological information

The selected cluster was identified in 1993 and composed of 157 tuberculosis cases by the

end of 2022 (overview in figure S1). In February 2003, infectious TB was diagnosed in a new

patient (case 5, Figure 1,transmission chain 1; red) who frequently visited pubs in one

specific street in Rotterdam. This patient was lost to follow-up during treatment and traced

in November 2003, being again highly infectious (case 23). Between 2003-2014, the cluster

increased by 121 patients; 80 (66%) were living in the city of Rotterdam, of which 30 (38%)

reported frequent visits to the pubs in the mentioned street. A new transmission chain

occurred in Amsterdam (Figure 1 transmission chain 7; dark blue Rotterdam, light blue

Amsterdam) with two highly infectious cases. Case 96 was diagnosed in 2009 by contact

investigation around a child with TB (case 94). A contact of this person developed

tuberculosis in 2012 (case 114) and had recurrent tuberculosis (case 129), more than two

158 years after completing the first treatment. Several new transmission locations were

159 identified by cluster investigation, such as a pub in another town (3 cases; not shown), a

160 penitentiary institute (3 cases), a coffee shop (5 cases), a school (4 cases, Figure 1,

161 transmission chain 6; purple) and a hospital (one case of nosocomial transmission). Case 153

162 developed tuberculosis nine years after being diagnosed with a TB infection in a contact

163 investigation and having received preventive treatment (Figure 1, transmission chain 5;

164 green).

166 *Cluster description based on WGS data (SNPs)*

167 A total of 773 SNPs vs the reference genome was called by our pipeline in all the sequenced

168 isolates from the selected cluster, 706 of these SNPs were shared by all 61 WGS files

169 (available online Table S1) investigated from the cluster on basis of WGS and uninformative.

170 All duplicate controls showed exactly the same confident SNPs as fixed, wild type or mixed.

171 Of the remaining 67 SNPs 53 were manually graded as confident, 14 as non-confident (Table

172 1). One SNP (Table 1, SNP 64), which was confidently graded, was present in all members of

173 the cluster but not always reliably called by our pipeline; this SNP was thus considered

174 uninformative and not used in the construction of the transmission scheme. The final

175 analysis was thus based on 52 SNPs (Table 1).

176 Subsequent comparison of the distribution of all 67 variable SNPs in the entire Dutch WGS

177 database showed that all but three of the 14 SNPs manually graded as non-confident SNPs

178 were randomly distributed throughout the database, and present in more than 100

179 unrelated isolates spread over at least seven different lineages, as a result of poor

180 mapping/sequencing at these positions (Table 1). The non-confident SNPs e.g. included

181 three SNPs in the *fhaA gene* (Table 1, SNPs 57-59) which had already been removed from

our routine cluster analyses by the pipeline based on the fact they were within 12 base pairs

from each other.

In total 46 of the 52 SNPs manually classified as 'confident' were exclusive to the cluster in

the Dutch WGS database. Five SNPs (Table 1; SNPs 8, 17, 18, 26, 29) were only shared by

one or two isolates from one different lineage in the Dutch WGS database. One confidently

graded SNP in *dna*A (Table 1, SNP 9) was shared by eight other isolates from four different

lineages.

SNP ID	Genome Position[*]	base change	Gene_amino acid change	Visual classification	No. isolates containing the SNP as called by the pipeline (allele frequency >80%)		No. of lineages [14] with members containing the SNP
					Isolates sequenced from the Cluster (n=58)	Dutch WGS database 2016-2022 (n=3981)	
1	2294333	A>G	Rv2047c_V65A	confident	1	0	1
2	443776	C>T	Rv0365c_W141*	confident	1	0	1
3	594270	G>A	cmaA2_Y170Y	confident	1	0	1
4	1943404	C>T	fadB3_P249L	confident	39	0	1
5	2319487	A>G	cobN_F423L	confident	39	0	1
6	4096187	G>T	Rv3658c_C251*	confident	39	0	1
7	4407263	G>A	parA_A90V	confident	39	0	1
8	4407980	G>A	gid_P75S	confident	1	2	2
9	1199	G>A	dnaA_R400H	confident	3	8	5
10	2173355	C>A	lppF_E147D	confident	1	0	1
11	963637	A>G	mog_H83R	confident	1	0	1
12	1004224	C>G	Rv0901_P90A	confident	1	0	1
13	3070852	A>C	vapB21/vapC42	confident	16	0	1
14	532562	T>C	Rv0443_V56A	confident	1	0	1
15	1044	G>A	dnaA_M348I	confident	3	0	1
16	4274903	A>G	Rv3811_I36V	confident	2	0	1
17	852736	A>C	phoR_H114P	confident	1	1	2
18	1254678	T>C	prpD_C42R	confident	1	2	2
19	2930021	G>A	SpeE /VapB41	confident	1	0	1

20	260800	C>T	lipW_R11H	confident	7	0	1
21	2243579	T>G	Rv1998c_H48P	confident	4	0	1
22	2188810	T>G	Rv1937_G105G	confident	1	0	1
23	2245506	C>T	Rv2000_R100C	confident	1	0	1
24	1113659	T>A	alaV/Rv0997	confident	1	0	1
25	2861465	C>T	aroD_E43K	confident	1	0	1
26	3412720	G>A	nrdE_H483Y	confident	1	1	2
27	528904	T>C	groEL2_V99V	confident	1	0	1
28	1130192	T>C	ispE_M1A	confident	1	0	1
29	1129791	C>A	ksgA_R214S	confident	1	1	2
30	3083748	T>A	Rv2776c_T186S	confident	2	0	1
31	2387113	C>T	Rv2125_A274V	confident	1	0	1
32	3538299	A>C	Rv3169_E354D	confident	1	0	1
33	4382137	C>T	Rv3896c_V239I	confident	1	0	1
34	4406935	G>T	parA_L199L	confident	1	0	1
35	249329	G>T	Rv0209_A98S	confident	1	0	1
36	899862	C>T	cpsY_R490H	confident	1	0	1
37	955882	T>A	fadA_I269N	confident	1	0	1
38	3541015	G>A	Rv3172c_A117V	confident	1	0	1
39	259417	G>A	Rv0216_G169S	confident	1	0	1
40	989495	C>T	citA_V123I	confident	4	0	1
41	1303690	C>G	fbiC_P254A	confident	4	0	1
42	520120	C>A	sodC_T174N	confident	1	0	1
43	3527101	G>A	nuoN_G438R	confident	1	0	1
44	1956891	C>T	Rv1730c_G119S	confident	1	0	1
45	2310534	C>T	ppm1_L74L	confident	1	0	1
46	2469060	C>T	Rv2204c_V76V	confident	1	0	1
47	1676559	C>T	Rv1486c_E109K	confident	1	0	1
48	3479870	C>T	moaD1_V57V	confident	1	0	1
49	402665	G>A	aspC_G166G	confident	1	0	1
50	2617123	G>T	mmpL9_G811*	confident	1	0	1
51	3196574	G>A	Rv2887_P48P	confident	1	0	1
52	4405126	C>G	Rv3916c_E14D	confident	1	0	1
53	1472517	T>C	rrs_0	non-confident	1	0	1
54	1472537	C>T	rrs_0	non-confident	1	0	1
55	1472581	A>C	rrs_0	non-confident	1	0	1
56	1480972	T>C	Rv1319c_E510E	non-confident	1	829	27
57	24704	T>C	fhaA_Q247Q	non-confident	3	159	23
58	24707	C>G	fhaA_E246D	non-confident	3	160	23
59	24716	A>G	fhaA_G243G	non-confident	3	183	24
60	2347521	T>C	Rv2090_L50P	non-confident	11	106	8
61	3232703	G>A	amt/ftsY	non-confident	19	560	23
62	3232759	G>A	amt/ftsY	non-confident	19	963	30
63	2339605	A>G	Rv2082_P299P	non-confident	33	401	7

64	2982956	A>G	Rv2665_P86P	confident	50	486	1
65	234477	T>G	Rv0197_Y749*	non-confident	55	2546	51
66	454295	T>C	Rv0376c_P26P	non-confident	55	3584	53
67	1779370	G>C	Rv1573_T19T	non-confident	57	1830	32

Table 1. Overview of all SNP diversity detected in the cluster, the visual grading of the SNPs and the
distribution of the diverse identified in the clustered isolates in the NL database of 3981 isolates. . * =
relative to the reference genome H37Rv (AL123456.3)

The accumulation of the 52 confident SNPs in a proportion of the isolates was used to

inform the WGS-based transmission scheme (Figure 2) based on the assumptions outlined in

the methods.

There were 44 confident SNPs that were not present in all isolates in the cluster and were

fixed (>=95% of reads) in all the files in which they were observed. The remaining eight

confident SNPs were present in at least one file as a mixed SNP (<95% of the reads). Six of

the eight mixed SNPs were fixed in at least one isolate (Figure 2, grey [mixed] and black

[fixed] symbols). The remaining two SNPs were only found as mixed in only a single isolate

and never fixed (SNPs 22 and 34).

The duplicate controls were identical and placed together on the WGS transmission tree

with pair 96 both containing mixed SNP 9 (Figure 2, triangle symbol) at 72% and 84%

respectively.

Only two of the eight mixed SNPs were present as a mixed SNP in more than one

sequencing file; one duplicate control (SNP 9 in sample 96 mentioned above) and one (SNP

15, Figure 2 round symbols) in two different sequencing files. The two files with a shared

mixed SNP 15 were serial isolates from the same individual (with a reactivation) (Figures 1

and 2; 114, 129). These results were derived from isolates collected in September 2012 (SNP

15; 8%) and March 2015 (SNP 15; 68%) from the same patient. Four files also contained a

fixed SNP 15(135, 139, 154 and 154*); two of these were duplicate controls (154, 154*). The

first isolate in which SNP 15 was mixed (September 2012) also contained a mixed SNP 14

(17%). SNP 14 was fixed in one additional isolate (134) without SNP 15. In the second isolate

(Figure 2 129; March 2015) two other additional mixed SNPs were present (SNP 17; 54%,

SNP 18; 58%). One isolate (Figure 2; 135) contained both SNPs 17 and 18 fixed along with

SNP 15.

Comparison of the epidemiological and WGS based transmission schemes.

The comparison of the information from the WGS analysis and the epidemiological

investigations included 33 confirmed epi-links (68 cases) and two relapses. The serial

isolates case 5 and its relapse (case 23) were identical, while the isolates from case 114 and

its relapse (case 129) contained mixed SNPs; (SNP 14; 17%, and SNP 15; 8%, in the first

episode SNP 15; 68%, SNP 17; 54% and SNP 18; 58% in the second isolate (Figure 2).

WGS failed for one isolate selected for WGS analysis (Figure 1, case 27 shaded oval). Out of

the remaining 33 of the confirmed epi-links and two repeat isolates screened for SNPs, 16

were identical, 11 contacts gained one SNP, four contacts gained two SNPs and two contacts

gained three new confident SNPs (Table 2). There were two epi-linked isolates (cases 85 and

97) that based on the WGS scheme lost a unique fixed SNP identified in the isolate of

putative source case 77 (Table 2, Figures 1 and 2). In retrospect it was concluded that these

two cases (85, 97) were related cases to case 77 but could also very well have been infected

by case 69, who was the source of infection of case 77, which would be consistent with the

WGS transmission scheme (Figure 2; supplementary table S1).

Table 2. Distribution of SNP distances between isolates considered to have an

epidemiological link based on contact investigations undertaken by the MHSs.

SNPs between source and secondary case		Number of Epi-links
SNPs gained	SNPs Lost	
0	0	16
1	0	10
2	0	5
3	0	2
0	1	1
1	1	1

All cases that occurred since 2015 in patients residing in Amsterdam and surrounding areas

contained SNPs 4-7 and for most epidemiological links were identified (Figure 1 and 2,

transmission chain 7 dark and light blue lines).

Discussion

This study shows that with proper verification of variable mutations identified in a large

cluster useful information was revealed with respect to the micro-evolution of the strain.

The resulting branching divided the large cluster in several satellite-clusters, which is

relevant for monitoring the development of the outbreak and to steer public health actions.

The inferences based on a detailed WGS analysis were almost entirely compatible with the

possible scenarios developed by the MHSs based on information extracted from

epidemiological investigations. The initial outbreak occurred in Rotterdam, the second

largest city in the Netherlands, and was associated with known risk factors like frequent

visits to pubs in one area. From 2009 onwards, cases emerged in a sub-cluster in

Amsterdam. Over time the outbreak strain acquired four confident SNPs, which were

present in isolates linked to subsequent cases in Amsterdam, but not in the initial cases in

Rotterdam.

We classified all 67 SNPs that were variably present in the cluster using two independent

approaches; firstly visual inspection of the sequencing reads (SAMtools Pileups [15]) and

secondly an analysis of distribution of the SNPs in the WGS database in the Netherlands

comprising 3,981 diagnostic isolates (Table 1). Of the 14 visually non-confident called SNPs,

11 were also identified as non-informative based on their presence in a large number of

genetically diverse isolates. A proportion of these SNPs were found in genomic regions that

have been previously recognized as poorly mapping [16]. The remaining three SNPs in *rrs*

(Table 1; SNP 53-55) were considered unreliable, presumably as a result of contamination

with other bacteria. Finally, one confidently called SNP (64; Rv2662_P86P) was found in 486

other isolates in the WGS database, all belonging to one lineage and was likely present in all

members of this lineage but not called by our pipeline in a small proportion of lineage

4.1.2.1 isolates due to poor mapping of a A>G substitution directly next to a string of G

nucleotides (Table 1).

Six of the 52 remaining confident SNPs were not unique to the cluster but present in one,

two and in one case eight additional isolates in the WGS database of 3,981 unique isolates.

Positions under selection in clonal organism such as *M. tuberculosis* are subject to

homoplasy, most notably mutations associated with drug resistance [17]. These six SNPs are

thus potential candidates for positions under selection. Strikingly, SNP 9 [dnaA_R400H]

emerged in the cluster and was identified in eight unrelated isolates in diverse lineages,

present in the WGS database (Table 1). Additionally, a second SNP also emerged in this

cluster in the *dna*A gene (M348I), this SNP was only identified in isolates from the cluster

studied (Table 1, SNP 15). Mutations in *dna*A have previously been observed in spontaneous

M. tuberculosis drug resistant laboratory mutants [11], and have been associated with

increased survival during INH treatment and more robust growth at the MIC of isoniazid

[18]. Furthermore, *dna*A mutations have also been observed in more efficiently transmitted

variants in another cluster of isolates that was subject to detailed SNP analysis [12]. Notably,

both *dna*A mutations observed in this cluster were initially identified as mixed SNPs and

transmitted to other individuals. Furthermore, the *dna*A_M348I mutation was also present

in two isolates from a treatment failure / reactivation case (cases 114, 129) isolated more

than two years apart (Figure 2, transmission chain 7; blue) with at least four mixed SNPs

which were identified as fixed in other individuals who were presumably infected by this

case.

After filtering, either manually or screening our database for unexpected homoplasy, high

confidence informative SNPs duplicate controls were identical and serial/reactivation

isolates were all directly linked in the WGS scheme.

We identified the SNP variability within the cluster on the basis of SNP thresholds and then

filtered this short list of SNPs based on a screen for variability of these variable positions in a

larger database allowing "noisy" SNPs to be identified and filtered out of the analysis. In this

way true potentially epidemiologically informative SNPs within the cluster were identified.

The resulting short list of confident informative positions could then be analysed in all other

isolates sequenced from the cluster in detail with the aim of identifying the isolates in the

cluster in which the SNPs were emerging/not fixed [10-12, 19]. This approach in cancelling

sequence noise using a large database to screen for epidemiologically informative variation,

adds to the epidemiological typing. Comparing the epidemiological data available to WGS

based transmission scheme supports the assumption that careful analysis can identify

epidemiologically informative variability in closely related sequences.

Limitations

Even with a permissive SNP calling algorithm for a significant proportion of individuals (20

of 54 ,37%) in the cluster analysis we were unable to identify any confident SNP variation

with at least one other case. Long read sequencing or the use of pan genome analysis may

allow the analysis of more variable regions of the genome that currently cannot be

confidently analysed using short read sequencing [16] allowing the detection of large

genome rearrangements as well as potentially allowing analysis of regions not present in the

reference genome currently used could potentially increase the typing resolution [20, 21]

within recently clustered isolates. We sequenced cultured isolates raising the possibility that

sub-populations of bacteria present in the sample may grow at different rates, be lost, or

additional mutations accumulate during culture [22]. Finally, we did not screen the whole

genomes for mixed SNPs to streamline the analysis, targeted only SNPs that were

variable/informative within the clustered isolates sequenced. This detailed analysis was

performed on a single larger cluster. The identification of emerging SNPs will only be

informative when the majority of cases in the cluster are identified and sequence data is

available for at least the majority of the potentially linked cases.

Conclusion

In conclusion, although clustering can be effectively ruled out on the basis of SNP distance

thresholds alone we demonstrate there is additional information available in micro

variability within the WGS data from isolates in a large cluster that can be useful to identify

possible links and target epidemiological investigations. We confirm mixed SNPs, if present,

may be fixed in subsequent isolates and strongly suggest a transmission direction and direct

epidemiological link as supported by the epidemiological information available from the

cluster studied and recently proposed by others [19, 23, 24]. Screening for these mixed SNPs

in a long established cluster can therefore provide epidemiologically useful information.

Strategies to automate and validate this type of SNP analysis could be implemented. Marker

SNPs characteristic of specific transmission chains [25] can be identified in larger clusters

and are potentially more precise than SNP thresholds to identify epidemiologically linked

isolates.

  Figure legends:

Figure 1 Transmission scheme based on epidemiological information. Cases sequenced with an epidemiological link confirmed by MHSs are present as ovals, with arrows showing the direction of transmission. Relapse cases in the same individual are linked with a solid black line. Oval borders indicate the location of the case; solid thick border Rotterdam; dashed thick border Amsterdam; thin border; other towns or villages in the Netherlands. The arrow colour indicates a distinct epidemiological transmission chain. Dotted arrows indicate situations in which transmission was considered likely. The cases and epidemiological transmission chains are presented using the same colours in Figure 2 (except case 27 shaded, for which WGS data was unanalysable due to contamination of the culture). The year and number of isolates from the cluster is indicated on the left hand side (and in table S1).

Figure 2: Transmission scheme based on WGS data. Numbers inside boxes indicate NTR

cases (Figure 1), cases with zero fixed SNP differences are inside the same box. NTR case

numbers appearing more than once indicate duplicate sequences generated from the same

isolate are indicated by an *. Follow up isolates from the same NTR case are indicated in

bold with a "b". Reactivations have a different NTR case number but are underlined with the

second episode in bold. Numbers inside white ovals indicate a fixed SNP (Table 1); unfixed

SNPs inside shaded symbols; a grey symbol if the SNP was mixed and a black symbol when in

subsequent cases where the SNP was fixed, they have their frequency indicated as a

percentage after a comma inside the box. Solid lines linking boxes indicate the inferred

transmission of fixed SNPs, dashed lines the inferred transmission of mixed SNPs. Coloured

lines indicate isolates in epidemiologically linked transmission chains(Figure 1).

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377 **Contributions (CRediT)**

378 Rina de Zwaan: Data curation, Formal Analysis, Writing review and editing.
379 Gerard de Vries: Conceptualization, Data curation, Methodology, Writing – review & editing.
380 Ella Ubbelohde: Data analysis, Writing – review & editing.
381 Arnout Mulder: Data curation.
382 Miranda Kamst: Project administration, Supervision.
383 Karin Rebel: Data curation.
384 Saskia Kautz: Data curation.
385 Kristin Kremer: Funding acquisition, Project administration, Supervision, Writing – review &
386 editing.
387 Richard Anthony: Conceptualization, Funding acquisition, Methodology, Supervision, Writing
388 – original draft.
389 Dick van Soolingen: Conceptualization, Funding acquisition, Writing -original draft, Writing –
390 review & editing.
391

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1996	2
2002	3-4
2003	5-23
2004	24-47
2005	48-63
2006	64-76
2007	77-88
2008	89-92
2009	93-101
2010	102-108
2011	109-111
2012	112-114
2013	115-123
2014	124-126
2015	127-136
2016	137-140
2017	141-142
2018	143-146
2019	146-150
2020	152-155
2021	156
2022	157

Chain 1
Chain 2
Chain 3
Chain 4
Chain 5
Chain 6
Chain 7
Chain 8

Chain 1
Chain 2
Chain 3
Chain 4
Chain 5
Chain 6
Chain 7
Chain 8