Prevalence and mechanisms of high-level carbapenem antibiotic tolerance in

clinical isolates of *Klebsiella pneumoniae*

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Abstract:

Antibiotic tolerance is the ability of bacteria to survive normally lethal doses of antibiotics

for extended time periods. Clinically significant Enterobacterales, for example, often

exhibit high tolerance to the last-resort antibiotic meropenem. Meropenem tolerance is

associated with formation of cell wall-deficient spheroplasts that readily recover to rod

shape and normal growth upon removal of the antibiotic. Both the true prevalence of

tolerance, and genetic mechanisms underlying it, remain poorly understood. Here, we

find that meropenem tolerance is widespread among clinical Enterobacterales. Using

forward genetics, we uncover novel tolerance factors in a hypertolerant isolate of the

ESKAPE pathogen *Klebsiella pneumoniae*. We find that multiple mechanisms contribute

to tolerance, and that cell envelope stress responses (PhoPQ, Cpx, Rcs and

OmpR/EnvZ) collectively promote spheroplast stability and recovery, while the lytic

transglycosylase MltB counteracts it. Our data indicate that tolerance is widespread

among clinical isolates, and that outer membrane maintenance is a key factor promoting

survival of tolerant *K. pneumoniae.*

Introduction

Healthcare-associated infections are common sequelae of hospitalization and

increasingly, treatment of these infections fails due to antibiotic resistance [1]. However,

treatment also often fails despite the absence of outright resistance [2]. This has been

attributed to other strategies bacteria have for evading complete eradication, including

the well-characterized phenomenon of bacterial persistence [3]. However, between the

extremes of frank resistance and persistence there is considerable complexity in bacterial

antibiotic susceptibility patterns. For example, antibiotic tolerance, which has recently

received increased attention as another means of surviving antibiotic insult, represents a

state where a large fraction of a susceptible bacterial population survives in the presence

of an antibiotic for extended periods. Gram-negative bacteria in particular can enter a

non-replicative, cell wall-deficient spheroplast form upon treatment with β-lactam

antibiotics [4-7]. This phenotype is reminiscent of L-forms [8-10] with the distinction that

spheroplasts (unlike L-forms) do not proliferate in the presence of antibiotic. Spheroplasts

remain intact for extended time periods and readily recover their cell shape and resume

division when the β-lactam drug is removed. However, the true prevalence of β-lactam

tolerant Gram-negative pathogens among clinical isolates is unknown.

Klebsiella pneumoniae is a Gram-negative nosocomial pathogen that can cause a

variety of opportunistic infections, including eponymous pneumonia, bloodstream

infections and UTIs [11]. A member of the infamous ESKAPE group of pathogens, *K.*

pneumoniae exhibits particularly worrisome levels of treatment failure [12]. Due to the

high level of resistance against most β-lactams, the carbapenems remain one of the

leading antibiotic classes that are effective against *K. pneumoniae* [13]. Determining

mechanisms that alter susceptibility against β-lactams in general, and carbapenems in

particular, is thus a critical need for developing new treatment options against *K.*

pneumoniae.

β-lactams covalently and irreversibly bind to so-called penicillin-binding proteins

(PBPs), which are the principal synthases of the main cell wall component peptidoglycan

(PG). β-lactam binding results in several downstream events that contribute to cell death

in poorly-defined ways [14]. Endogenous cell wall lytic enzymes (collectively referred to

as autolysins) degrade the PG sacculus into monomers and ultimately eliminate the

sacculus entirely. In some bacteria, cell wall degradation can cause catastrophic rupture

and cell lysis, for example in the well-studied model organism *E. coli.* In addition, the

constant synthesis and immediate autolysin-mediated degradation of PG (futile cycling)

depletes cellular resources, exacerbating detrimental effects independent of cell lysis [15,

16]. Interestingly, β-lactam exposure coincides with the generation of damaging reactive

oxygen species (ROS), though the contribution of ROS to β-lactam killing is not entirely

clear [17]. It is thought that the combination of these direct and indirect effects likely

collectively contributes to cell death by lysis or internal damage. How tolerant cells

manage this assault to stay alive has remained poorly understood, but previous work has

implicated cell envelope stress signaling in spheroplast survival [17-19]. In the cholera

pathogen *Vibrio cholerae*, for example, the VxrAB system is induced by β-lactam stress,

resulting in the upregulation of cell wall synthesis functions (which readies the cell for

recovery once the antibiotic is removed) and downregulation of detrimental iron influx

(putatively to reduce the damage sustained by ROS production) [17].

In this study, we sought to characterize meropenem tolerance in *K. pneumoniae*. We

found that clinical isolates of this nosocomial Gram-negative pathogen often exhibit high

levels of meropenem tolerance. Using TnSeq, we defined genetic requirements for

tolerance, and uncovered a role for cell envelope stress signaling systems in both

spheroplast maintenance and recovery. Our data open the door for a more in-depth

understanding of the molecular mechanisms promoting tolerance, priming the future

design of antibiotic adjuvants that eradicate tolerant cells.

Results

Klebsiella species clinical isolates exhibit high meropenem tolerance

As part of a larger effort to determine the role of antibiotic tolerance in healthcare settings,

we characterized a large panel of bloodstream isolates from the culture collection of Weill

Cornell Medical (WCM). This de-identified 271 isolate panel (Table S1) is fully

characterized through antimicrobial susceptibility testing and consists of a large number

of mostly carbapenem-susceptible (MIC <1 µg/mL) Gram-negative pathogens, with three

isolates testing as intermediate (MIC = 2) and seven strains as fully resistant (MIC > 4

µg/mL; one strain due to its possession of the KPC carbapenemase). Since the majority

of the isolates are carbapenem susceptible, we considered this an ideal panel for

determination of how prevalent carbapenem tolerance (rather than resistance) is in

clinical samples. Currently, no fully-established sufficiently high throughput tolerance

assay exists [20], and we therefore chose to use a semi-quantitative assay for our screen.

To this end, we grew the isolate panel (curated to remove the resistant isolates with MIC

> 4 µg/mL) in a 96-well format, where we exposed cells to meropenem (10 µg/mL, 5x –

100x MIC) at high cell densities (following a 10-fold dilution of overnight culture into fresh

medium). At an eight-hour timepoint, 5 µL of thus-treated cultures were then spotted on

an agar plate together with 5 ng of purified carbapenemase (KPC-2) to remove the

antibiotic. After 24 hours of incubation, spots were then scored as full growth (a confluent

spot = high tolerance), growth with a few visible colonies (= intermediate) or no growth (=

low tolerance) (**Fig. 1A, S1**). Since this panel contained isolates exhibiting a wide

distribution of susceptibilities to meropenem (MICs ranging from ≤0.015 – 4 µg/mL), we

considered the possibility that apparent differences in tolerance may instead indicate

differences in MIC. Plotting tolerance categories over MIC values revealed that all 3

tolerance categories contained isolates with similar variance in MICs (**Fig. 1B**). As an

example, all isolates in **Fig. 1A** with a yellow circle had comparatively high MICs (>1

µg/mL), but displayed very different survival levels at 8 and 24 hours of meropenem

exposure. Thus, tolerance as determined in this assay is not a simple function of MIC

variation; rather, these data suggest that our assay captures true tolerance.

Figure 1: Widespread meropenem tolerance among bloodstream isolates

(A) A panel of bloodstream isolates was exposed to 10 µg/mL (>2x MIC for all isolates) meropenem in 96-well format (BHI medium) and incubated for 8 hours or 24 hours. Following incubation, purified KPC-2 enzyme was added to the wells, and 10 µL transferred to a BHI plate without antibiotic. Tolerance was scored qualitatively as the ability to form colonies/confluent growth after 8 or 24 hours. Yellow circles indicate examples of different tolerance levels across high MIC (>/=1 µg/mL). Red circle indicates

the positive control (resistant KPC+ strain). Red box indicates examples of (from left to
right) a highly tolerant *Klebsiella pneumoniae* isolate, a medium tolerant *E. coli* and a low
tolerance *E. coli.* (B) Tolerance categories were plotted with their corresponding MIC
values. (C) Genus distribution among the tolerance categories.

We then asked whether some genera were more likely to display tolerance than

others, and to this end plotted tolerance as a function of bacterial genus. Interestingly, the

low tolerance fraction was almost exclusively occupied by *E. coli* isolates (consistent with

our previous observations [7]), while the high tolerance fraction was enriched in

Enterobacter species., Pseudomonas aeruginosa, and especially *Klebsiella pneumoniae*

(**Fig. 1C**). Thus, *K. pneumoniae* clinical isolates are particularly likely to display antibiotic

tolerance among clinical isolates of Enterobacterales.

The K. pneumoniae TS1 isolate is highly meropenem tolerant

Since *K. pneumoniae* clinical isolates answered our survey as particularly tolerant,

we chose to focus on this species for further study of meropenem tolerance. However,

we noted that different *K. pneumoniae* isolates diverged in tolerance levels in our spot

assay (**Fig. 1A**). To more quantitatively determine strain-specific differences, and to

identify new model strains for mechanistic studies, we compared two well-characterized

clinical isolates of *K. pneumoniae* for their tolerance levels *in vitro*, namely *K. pneumoniae*

strains TS1 (a derivative of the CDC isolate bank AR0080) and KPNIH1 [21]. Both strains

have been cured of their carbapenemase-containing plasmids and are thus fully

meropenem susceptible (**Table S2** MICs). Time-dependent killing experiments in the

presence of 10 µg/mL meropenem revealed drastic differences in tolerance levels

between the two strains, despite their similarly low MICs (**Fig. 2, Table S2**).

Figure 2: *K. pneumoniae* TS1 is a hypertolerant clinical isolate

(A) Example time-dependent killing experiment (BHI medium) in meropenem (10 µg/mL)
reveals differences in tolerance levels among two *K. pneumoniae* isolates (with the model
E. coli strain MG1655 as comparison). (B) Tolerance in *K. pneumoniae* is associated with
spheroplast formation. Aliquots from the experiment depicted in panel (A) were
transferred to agarose slides at the indicated time-points and imaged. (C) Recovery after
addition of purified KPC-2 carbapenemase demonstrates spheroplast viability.

This observation supports our previous finding of widely different tolerance levels

between different isolates of the same species [7]. Both *K. pneumoniae* strains still

exhibited higher levels of survival relative to the low-tolerance *E. coli* MG1655 comparison

strain, which exhibited a steep, 4.5 log reduction in viability within six hours of meropenem

treatment, and complete elimination by 24 hours of exposure. The TS1 strain was almost

completely tolerant, with only a slight (5-10 fold) decrease in viability even after 24 hours

of exposure (**Fig. 2A**). In contrast, the KPNIH1 isolate drastically lost viability by 10,000-

fold after 24 hours. In *both Klebsiella* isolates, survival coincided with formation of cell

wall-deficient spheroplasts (**Fig. 2B**) that readily recovered to rod-shape morphology

upon removal of the antibiotic (**Fig. 2C**). We also used these three benchmark strains to

validate our high-tolerance spot assay (**Fig. 1A**). Consistent with the time-dependent

killing experiments (**Fig. 2A**), TS1 scored as highly tolerant, KPNIH1 as intermediate, and

MG1655 as non-tolerant in the spot assay (**Fig. S1**). Thus, the TS1 isolate is highly

meropenem tolerant, and serves as an ideal model for a mechanistic characterization of

spheroplast formation and recovery.

A TnSeq approach reveals putative tolerance genes in K. pneumoniae TS1

We next sought to identify factors that contribute to meropenem tolerance in *K.*

pneumoniae. To this end, we conducted a transposon-insertion sequencing screen to

assemble a genome-wide mutant fitness map in the presence of meropenem and

compared insertion frequencies before and after 6 hours of meropenem challenge

(including an outgrowth step, see methods for details, **Fig. 3A**).

Figure 3: TnSeq identifies genetic determinants of meropenem tolerance.

(A) Outline of TnSeq experimental procedure. (B) Identification of significant candidate tolerance factors in TS1 by plotting insertion density of a recovered library vs. the input library. (C) Validation of TnSeq hits. Mutants were obtained from the KPNIH1 mutant library and exposed to meropenem (10 µg/mL) for 6 hours, followed by dilution and spot-plating. Raw data of 3 independent biological replicates are shown +/- standard deviation. Red dotted line indicates WT average survival level; blue dotted line represents the 10fold reduced survival benchmark.

The screen uncovered many expected and novel putative tolerance genes (**Fig. 3B**). Notably, the gene coding for PBP1b was detected within the top two percent of candidate essential genes for tolerance to meropenem. Class aPBPs like aPBP1b have an established role in rebuilding the cell wall after damage [22, 23], and thus serve as

internal validation of our screening conditions, establishing confidence in our screening

approach. Next, we validated our most prominent (top 10%) hits. We used an ordered,

commercially available transposon insertion library in the intermediate tolerance strain

KPNIH1 [21] for a first-pass validation. This resulted in confirmation of several genes

whose inactivation either promoted or decreased tolerance (**Fig. 3C**). The reduced

tolerance fraction was enriched in cell envelope functions (**Fig. 3C**, green bars), which is

expected due to the need to re-establish a cell wall upon spheroplast recovery. We also

noticed that disruptions in several cell envelope stress response systems (*rcs*, *pho*, *cpx*,

and *ompR-envZ*), drastically reduced survival during meropenem stress (**Fig. 3C**, red

bars), while two gene disruptions (in the gene for the cell wall lytic enzyme MltB, and in

the poorly characterized outer membrane lipoprotein OsmB), increased survival. Taken

together, these results demonstrate that the *K. pneumoniae* TnSeq experiment was

effective at identifying specific genes with roles in meropenem tolerance, lending

themselves to further study as outlined below.

The lytic transglycosylase MltB *endogenously reduces meropenem tolerance*

Our TnSeq screen identified both genes that promote meropenem tolerance as

well as genes which endogenously reduce tolerance. The gene coding for the lytic

transglycosylase enzyme MltB, for example, answered the screen as imparting a severe

fitness cost in the presence of meropenem. This was unexpected, since bacteria have

many functionally redundant lytic transglycosylase paralogs throughout their genomes,

and phenotypes associated with a single deletion are thus rare [24]. To dissect the role

of LTGs in meropenem tolerance further, we tested a panel of transposon disruption

mutants in known and predicted LTG genes for meropenem tolerance in the lower

tolerance strain KPNIH1. Among eleven mutants tested, only *mltB::tn* and (to a lesser

degree) *sltY::tn* exhibited significantly increased survival in the presence of meropenem,

with a drastic 1000-fold increase in survival after 24 hours for *mltB* and 100-fold for *sltY*

(**Fig. 4A**). Time-dependent killing experiments confirmed a strong role for MltB as an

antagonist of antibiotic tolerance, as the *mltB::tn* mutant exhibited minimal (5-fold) killing

in the presence of meropenem over 24 hours (**Fig. 4B**).

Figure 4: mltB and sltY reduce tolerance to meropenem and prevent cells from
retaining polar morphology

(A) Survival of mutants in lytic transglycosylases. Mutants were obtained from the
KPNIH1 mutant library and exposed to meropenem (10 µg/mL) for 6 hours, followed by
dilution and spot-plating. (B) Time-dependent killing reveals increased tolerance in an
mltB mutant. (C) Cell wall degradation in LTG mutants. Bacteria were applied to an

agarose pad containing BHI and 10 μg/mL meropenem. Images were taken every hour.
(D) Recovery dynamics of spheroplasts. Cells were treated with meropenem (10 μg/mL)
for 6 hours. Purified KPC-2 was then added, followed by timelapse microscopy.

The *mltB::tn* and *sltY:tn* mutants were further characterized by examining cell

morphology upon spheroplast formation and recovery. Timelapse microscopy of cells

exposed to meropenem revealed that the *mltB::tn* and *sltY:tn* disruption mutants retained

morphology at the cell poles for longer than the wild type parent strain, and qualitatively

exhibited an increase in the relative abundance of intact spheroplasts (**Fig. 4C**); this

coincided with qualitatively enhanced recovery dynamics (**Fig. 4D**). These data suggest

that *mltB* and (to a lesser extent) *sltY* reduce tolerance by accelerating the degradation

of peptidoglycan when synthesis is halted by meropenem, and thus point to a dominant

role of these LTGs in cell wall turnover in *K. pneumoniae*. These data suggest that

activation of autolysins could be a useful future strategy to potentiate β-lactam antibiotics

against tolerant pathogens.

Multiple cell envelope stress responses systems collectively contribute to β-lactam

tolerance

Several well-characterized cell envelope stress response systems appeared in our

screen as top candidates that promote meropenem tolerance: the Rcs phosphorelay

system, the PhoPQ and CpxAR two-component systems, and the osmotic and acid stress

response system, OmpR/EnvZ. Of note, our previous study revealed the PhoPQ system

as a key meropenem tolerance determinant in *Enterobacter cloacae,* suggesting that

PhoPQ may be a widely conserved tolerance determinant [25]. To dissect the individual

and combined contributions of these systems to survival in meropenem, we created

deletions of all four systems in all combinations, including one quadruple system deletion

mutant lacking all four stress responses. These mutants were then exposed to

meropenem in time-dependent killing assays. These experiments revealed a 10 to

10,000-fold decrease in viability after 24 hours of exposure to meropenem in any

individual envelope stress response mutant compared to the wild type *K. pneumoniae*

parent strain (**Fig. 5AB**). We observed large differences in both magnitude and

consequences for lysis in the different mutants. The Δ*ompR/envZ* mutant, for example,

exhibited the most drastic reduction in viability of all the single mutants (10,000-fold vs.

10- to 100-fold for the others), pointing to a particularly important role of the OmpR/EnvZ

response in tolerance to meropenem. We also noticed that while most single mutants

exhibited both a drop in cfu/mL and in OD_{600} (indicative of cell lysis), the Δ*rcsF* mutant

was only defective in viability, but increased in OD during meropenem treatment,

suggesting a role for Rcs in spheroplast recovery, rather than structural maintenance.

Figure 5: Cell envelope stress response systems are essential for full meropenem tolerance

Cells were diluted 10fold into 5 mL of BHI medium containing 10 µg/mL meropenem. At the indicated timepoints, samples were withdrawn and OD_{600} (A) and CFU/mL (B) were measured. (C) Aliquots were removed from the experiment depicted in (A-B) and imaged.

We also investigated cell morphologies of each mutant before and after exposure

to meropenem for 24 hours of treatment, and upon recovery in strains capable of forming

spheroplasts. Wild type cells and all single deletion mutants appeared similar in shape

and morphology at the start of meropenem exposure experiments (**Fig. 5C**). However,

the Δ4 mutant cells exhibited slightly aberrant morphology (slightly larger cells with subtle

deformations) and spontaneous lysis, suggested by the presence of cell debris. After 24

hours of meropenem exposure, most single deletion mutants (with the exception of

ΔompR/envZ) formed spheroplasts with no clear difference in structure compared to the

wild type, albeit a much lower numbers (consistent with the decrease in OD_{600}).

Qualitatively, the microscopy analysis confirmed that the Rcs system does not appear to

be essential for structural maintenance of spheroplasts, as the $\Delta rcsF$ mutant showed little

evidence of lysis, and wild-type levels of spheroplasts (**Fig. 5C**). Thus, the Rcs system

may play a role in spheroplast recovery, rather than spheroplast cell envelope

maintenance, consistent with a role in spheroplast recovery in lysozyme-treated *E. coli*

[26]. Interestingly, the $\Delta ompR/envZ$ and $\Delta 4$ mutants were highly defective in spheroplast

formation or maintenance, as we failed to find any intact spheroplasts even upon 10-fold

concentration of meropenem-treated culture followed by imaging, consistent with the

drastic reduction in viability these strains experience in the presence of meropenem (**Fig.**

5B). We also constructed intermediate strains, including a suite of $\Delta 3$s with single two-

component systems left intact (**Fig. S3**). Interestingly, all $\Delta 3$s collapsed in viability almost

to the same degree as the $\Delta 4$, strongly suggesting an additive or synergistic effect

between the different systems, as no two-component system by itself could sustain

viability. Of note, among the $\Delta 2$ mutants, the combination of $\Delta ompR/envZ$ and Δrcs was

most detrimental, and the resulting mutant was, like the $\Delta 4$ mutant, nearly eradicated after

24 hours of exposure. Collectively, these results point to a hierarchical organization of

responses necessary for meropenem tolerance; OmpR/EnvZ as the primary response,

followed by Pho and Cpx to maintain spheroplast stability, and Rcs to aid in recovery.

The Rcs phosphorelay is induced by, and required for, meropenem tolerance

The Rcs phosphorelay as an apparent contributor to tolerance caught our attention. In *E.*

coli, Rcs is induced by β-lactams, and required for survival in low β-lactam concentrations

[27]. Additionally, Rcs is required for recovery of *E. coli* from a cell wall-deficient state

(generated by lysozyme treatment in osmostabilized medium, a condition that

morphologically mimics meropenem-treated spheroplasts) [26]. In apparent contrast, a

recent study has shown that Rcs is neither induced by, nor required for β-lactam

persisters [28]; however, this is likely because persisters are dormant and thus not

expected to be damaged by the antibiotic (obviating the need for a damage response) [3].

To clarify the role of Rcs in *K. pneumoniae*, we engineered a TS1 strain carrying an P_{rprA}-

lacZ transcriptional fusion (a well-established readout of Rcs signaling [29]) in a neutral

chromosomal locus (*lacZ*) and measured induction by meropenem. A first qualitative

assay using zone of inhibition on growth medium containing the chromogenic LacZ

substrate X-gal yielded a blue ring around the zone of inhibition when a meropenem disk

was placed on the agar surface, but not when the translation inhibitor kanamycin was

used (**Fig. S4A**). We then corroborated these results in liquid medium, where a

quantitative β-galactosidase activity assay (Miller assay) revealed strong (30fold), time-

dependent induction of the construct by meropenem (**Fig. 6A**). Thus, meropenem induces

the Rcs response. We also validated the role of Rcs in meropenem tolerance by creating

additional mutants in Rcs components, namely RcsF, RcsC and RcsD. All mutants

displayed a strong (10,000fold) reduction in tolerance, which could be fully complemented

by overexpression of the response regulator RcsB (**Fig. 6B**). The ability of RcsB

overexpression to induce the Rcs regulon was verified by measuring induction of the

chromosomal P_{rprA}-*lacZ* construct (**Fig. S4B**). Thus, the Rcs phosphorelay is both

responsive to meropenem exposure, and required for meropenem tolerance in *K.*

pneumoniae.

Figure 6: The Rcs phosphorelay is induced by meropenem and required for tolerance

(A) A strain carrying a chromosomal rprA-*lacZ* transcriptional fusion was exposed to meropenem, followed by quantification of beta-galactosidase activity via Miller assay (B) The indicated strains were exposed to meropenem (10 μg/mL). Survival fraction is CFU/mL after 24 hours normalized to starting cell density. Shown are averages of 3 independent experiments +/- standard error.

Fluctuation test reveals memory in tolerant subpopulation

The stress responses that contribute to meropenem tolerance may rely on deterministic

induction by the antibiotic for their protective impact, or they may be stochastically and

heterogeneously active within the population before exposure to a stress as a bet-hedging

strategy. To gain some insight into this distinction, we leveraged the classical Luria-

Delbrück experiment or the "Fluctuation Test" that has been recently expanded to

investigate reversible switching between cellular states within an isogenic cell population.

This fluctuation test has been used to gain insights into the non-genetic mechanisms by

which microbial and cancer cells survive lethal exposures to targeted drug therapy [30-

32]. For example, the application of the fluctuation test in both *Escherichia coli* [33] and

Bacillus megaterium [34] has shown individual cells to reversibly switch between an

antibiotic-sensitive and an antibiotic-tolerant state, with each state being maintained

transiently for several generations. This reversible switching happens continuously in the

absence of the drug as a result of stochastic fluctuations in underlying signaling and gene

regulatory networks and primes a rare subpopulation of cells as a bet-hedging

mechanism to survive lethal antibiotic exposure.

To conduct a fluctuation test, we first isolated single TS1 cells in 96-well plates

using serial dilution. Each cell was grown into a clonal population and exposed to

meropenem at an OD_{600} of 0.3 (**Fig. 7**). WT OD dropped sharply at first, followed by

slower increase in OD_{600} in the surviving subpopulation (spheroplasts). The clone-to-

clone fluctuations in cell viability after antibiotic exposure were quantified by using the

coefficient of variation (standard deviation divided by the mean) of OD_{600} (spheroplast

survivor fraction) across clones at 1.66 hours after drug exposure. This time point was

specifically chosen as it captures the OD_{600} drop-off in response to meropenem and

avoids the rebound in OD_{600} seen in WT cells as a result of changes in cell shape. We

then used mathematical modeling to predict how the kinetics of switching between drug-

sensitive and drug-tolerant cell states impact clone-to-clone fluctuations in the number of

cells surviving lethal stress, with slower switching (i.e., higher transient memory of a state

being retained across generation) resulting in a higher degree of interconal fluctuations

[32]. Our results show clone-to-clone fluctuations in cell integrity to be 0.153 ± 0.036 for

WT where $\pm$ denotes the 95% confidence intervals in the coefficient of variation of OD_{600}

as obtained by bootstrapping (**Fig. 7**). These observed fluctuations were significantly

higher than the technical noise of 0.086 ± 0.028 (control fluctuations). Technical noise

was estimated by performing a similar experiment, but with fluctuations quantified across

wells starting with a random population of 10,000 cells rather than a single cell-derived

population. Similar to observations in other bacteria, this fluctuation data is consistent

with a model of a multi-generation drug-tolerant state in *Klebsiella pneumoniae* that

preexists meropenem exposure.

Figure 7. Fluctuation test indicates memory in spheroplast population. Bacteria
were diluted to a starting density of 1 cell/well or 10,000 cells/well (control), and grown
in a microtiter plate. At $OD_{600} = 0.3$, meropenem (10 µg/mL) was added (red dotted line).

CV (coefficient of variation) calculations were performed at peak killing (blue dotted
line).

We hypothesized that the stochasticity originated from variance in background expression

of cell envelope stress responses. To test this, we repeated the fluctuation assay in the

Δ4 genotype where the observed fluctuations were interestingly much smaller compared

to WT with the coefficient of variation being 0.044±0.009, but still significant compared to

control fluctuations performed for this strain (**Fig. 7**). The lower value of the observed

clonal fluctuations in Δ4 points to faster-switching kinetics, and hence a shorter transient

memory of the drug-tolerant state.

Discussion

Infections with Enterobacterales continue to be an active and increasing threat to

public health due to their capacity to cause infection, and to gain and disseminate

antibiotic resistance genes, with particular risk for vulnerable populations. In this work, we

have found that antibiotic tolerance, the ability to sustain viability in the presence of

bactericidal antibiotics for extended time periods, is widespread among clinical isolates

of Gram-negative pathogens, particularly *Klebsiella pneumoniae*.

To uncover novel factors that modulate β-lactam tolerance in *K. pneumoniae* we

performed a genome-wide scan using a TnSeq approach. Because this approach

provides a readout of each gene's fitness during a challenge, we were able to identify

genes that contribute to meropenem tolerance, and genes that reduce tolerance in *K.*

pneumoniae. The screen overall was able to capture several regulatory systems and

individual factors that modulate tolerance along with the internal control PBP1b (a key

cell wall synthase required to rebuild the cell wall after catastrophic damage [23]), raising

confidence in our approach. This screen also pointed to several well-known and intensely

studied cell envelope stress responses that are partly responsible for this strain's ability

to undergo the entire process of spheroplast formation, maintenance, and recovery: the

Rcs, Pho, Cpx, and OmpR/EnvZ systems.

Interestingly, the OmpR/EnvZ system appears to exert an outsized effect on

tolerance. This system is induced by changes in pH and osmolarity, and controls the

switch from the larger diameter porin OmpF to the smaller diameter porin OmpC [35].

Formally, it is possible that the porin switch may delay diffusion of meropenem into the

cell; however, this is unlikely given that WT and Δ*ompR/envZ* MICs are within essential

agreement (**Table S2**). Future work will be directed at delineating the contribution of this

system to spheroplast maintenance. Conversely, the Pho and Cpx single system deletion

mutants appear to have similar net contributions to meropenem tolerance both in rate of

killing and final viability, while still forming detectable spheroplasts capable of recovery.

The versatile PhoPQ system senses Mg^{2+} deficiency, presence of antimicrobial peptides,

pH and other stresses [36]. Most relevant to the phenotype assayed here, we have

previously shown that PhoPQ is required for meropenem tolerance in the related

bacterium *Enterobacter cloacae*, via PhoPQ-controlled outer membrane modifications

[25]. The Cpx system is a general cell envelope health monitor [37], which controls,

among other things, L,D-transpeptidases that may help stabilize the outer membrane [38,

39], and respiratory chain functions [40, 41], which may contribute to ROS production in

spheroplasts [17]. Lastly, the Rcs system contributes to meropenem tolerance in a unique

way. Time-dependent killing revealed that viability dropped substantially in the Δ*rcsF*

mutant, but this strain's capacity to form spheroplasts and maintain optical density is

comparable to the WT parent strain. Interestingly, and consistent with previous work in *E.*

coli lysozyme-induced spheroplasts [26], Δ*rcsF* mutant spheroplasts were impaired in

their ability to reform successful dividing rods when meropenem is removed. Among other

genes, Rcs positively regulates the cell division component *ftsZ* [42], perhaps pointing to

a model where upon spheroplast recovery, cell division can commence sooner in WT

than in Δ*rcs* cells due to the increased availability of critical divisome components. Taken

together, the phenotypes of each individual mutant indicate that aspects of β-lactam

tolerance are mediated by distinct response systems, likely with some temporal distinction

(**Fig. 7**)

Figure 8: Model of meropenem tolerance as a net result of cell wall degradation and
cell envelope stress response induction

Meropenem treatment induces multiple cell envelope stress responses, whose regulons
contribute to survival. Lytic transglycosylases MltB and SltY contribute significantly to
sacculus degradation, which reduces efficiency of spheroplast recovery.

Because TnSeq has the benefit of also revealing gene disruptions that increase

fitness, we simultaneously probed for endogenous factors that reduce meropenem

tolerance. *K. pneumoniae* strain TS1's lytic transglycosylase *mltB* answered the screen

as a strong candidate that imparts a fitness increase when disrupted. Lytic

transglycosylases cleave glycosidic bonds of peptidoglycan strands [24], and have

specific and important functions in opportunistic pathogens. For example, in

Acinetobacter baumannii, *mltB* is a critical factor for pathogenesis by linking complex

envelope homeostasis functions with virulence [43]. In *Pseudomonas aeruginosa*,

eliminating this enzyme (also in combination with other lytic transglycosylases) increases

resistance to cell-wall targeting antibiotics via induction of an endogenous β-lactamase

[44, 45]. Disruption of *sltY* and *mltB* in *K. pneumoniae* strain KPNIH1 resulted in 10- 1000

fold increased tolerance to meropenem. Cell morphology around the poles in these

mutants was maintained after 24 hours of exposure to meropenem, possibly due to this

strain's inability to degrade the old peptidoglycan present when PBPs are inhibited. This

maintenance of the cell wall could be what increases survival by preserving the

peptidoglycan and envelope-spanning systems, leading to preservation of cell integrity

and potentially serving as a scaffold for new cell wall synthesis when meropenem is

removed. It is unclear why *mltB* and *sltY* specifically emerge as the only lytic

transglycosylases that have this effect on the cell when bacteria generally have multiple

redundant lytic transglycosylase paralogs in their genomes; strong phenotypes for single

deletion mutants are thus highly unusual.

This study presents a deeper insight into β-lactam tolerance and can inform further

investigations to understand other aspects of how these dangerous pathogens respond

to antibiotics and attain resistance. Attaining an understanding of the detailed workings

of this complex phenotype can inform approaches toward finding potential druggable

targets to reduce or abolish an organism's capacity for β-lactam tolerance, thus allowing

development of novel therapeutics and treatment strategies for tolerant pathogens.

Methods

Culture conditions, tolerance measurement, and complementation. Unless otherwise

stated, all strains were grown in shaking overnight cultures at 37ºC, and tolerance assays

were carried out in Brain Heart Infusion (BHI) broth at 37ºC. Tolerance assays were

conducted by inoculating overnight culture at a 1:10 ratio into fresh BHI medium

containing 10 μg/mL meropenem (TCI, Tokyo, Japan). Cultures were then incubated at

37˚C without shaking. Optical density was measured in a VWR V-1200

spectrophotometer and viable cells were quantified by serial dilution in BHI medium and

spot-titered onto BHI agar. The carbapenemase KPC-2 was purified and added to culture

samples at a final concentration of approximately 1 μg/mL prior to serial dilution to

deactivate meropenem, thus eliminating meropenem carryover effect.

MIC Determination. MICs for all strain backgrounds were determined by diluting overnight

cultures 10^7-fold in BHI medium. Diluted cultures were inoculated into BHI containing

successive 2-fold concentrations of meropenem in a 96 well microtiter plate at a final

volume of 200 µL per well, and incubated at 37°C overnight, leaving one well as an

uninoculated control, and one well with cells but without meropenem to ensure growth of

the strain. MICs were recorded as the lowest meropenem concentration free from

turbidity.

Purification of KPC-2 *enzyme*. The gene for KPC-2 was amplified from the genome of

Enterobacter cloacae strain 41952, a clinical isolate from WCM, and cloned into the

pET21 expression vector. The His-tagged KPC-2 enzyme was overexpressed in BL21

pLysS. A 500 ml culture of LB containing 100 µg/mL ampicillin was induced at OD=0.5

with 1 mM IPTG and incubated shaking at 30°C overnight. The following day, cultures

were centrifuged, and pellets were decanted and stored at -80°C until lysis and

purification. Pellets were resuspended in resuspension buffer (20 mM Tris, 150 mM NaCl,

5 mM imidazole) and sonicated using the QSonica with the largest tip attachment for 40

minutes total, alternating between 5 second pulses 5 second rests on ice. The lysate was

then centrifuged for 45 minutes at 16,000 rpm and the supernatant discarded. In

preliminary expression experiments, we found that KPC was mostly in the insoluble

fraction. The insoluble pellet was resuspended in binding buffer (20 mM Tris, 150 mM

NaCl, 5 mM imidazole, 3 M Urea), and incubated rotating overnight at 4°C to denature

and solubilize the KPC-2 protein. The next day, the denatured lysate was centrifuged

again at 16,000 rpm for 45 minutes, and the resulting supernatant passed through a

cobalt-charged NTA agarose resin column at room temperature. Six column volumes of

wash buffer (20 mM Tris, 150 mM NaCl, 30 mM imidazole, 3 M Urea) were then passed

through the column, and the protein eluted in 1.8 mL fractions with increasing

concentrations of imidazole in elution buffers (20 mM Tris, 150 mM NaCl, 50-600 mM

imidazole, 3 M Urea). Fractions with the highest protein concentrations were pooled, and

the total volume was dialyzed into a final storage buffer (20 mM Tris, 150 mM NaCl, 30%

glycerol) in three steps, each with decreasing concentrations of imidazole and increasing

concentrations of glycerol. Purity was determined by SDS-PAGE, and concentration was

estimated with Bio-Rad Bradford Assay kit.

Imaging. All images were taken on a Leica Mdi8 microscope (Leica Microsystems, GmbH,

Wetzlar, Germany) with a PECON TempController 2000-1 (Erbach, Germany), heated

stage at 37°C for growth experiments, or room temperature for static images. For

timelapse microscopy of spheroplast formation, cells were placed on a 0.8% agarose pad

containing BHI and 10 µg/mL meropenem within a gene frame (ThermoFisher, Waltham,

MA). For recovery timelapses, KPC-2 enzyme was added at 5 µg/mL to eliminate the

meropenem. Frames were taken using autofocus control every five minutes for up to 12

hours. Timelapse video stacks were processed in FIJI (NIH) using the Linear Stack

Alignment with SIFT under the Registration plugin (using all default settings with the

exception of Expected Transformation, which was changed to Translation) to center cells

in the cropped frame. Frame rates were set at 3-4 frames per second for supplemental

videos.

Transposon mutagenesis screen and data analysis. *K. pneumoniae* strain TS1 was

mutagenized with a Mariner transposon delivered via the *E. coli* donor strain MFD λpir to

generate a complex library of kanamycin-resistant transposon mutants. This initial library

was frozen as a glycerol stock, and an overnight culture from it was grown in BHI

containing kanamycin at 50 µg/mL to form an input library as the comparison for TnSeq

analysis. Overnight cultures of this input library were diluted 10-fold into 5 mL BHI

containing meropenem (10 ug/mL) and incubated for six hours at 37°C without shaking,

followed by plating on BHI agar plates after treatment with 5 µg/mLKPC-2 enzyme

(untreated controls were also generated mirroring the six-hour exposure and recovery

populations). Genomic DNA (gDNA) was extracted from all stages of the meropenem

challenge and recovery and prepared for Illumina sequencing. Briefly, gDNA extracted

from each library was sonicated to generate fragments mostly 200-800 base pairs long

which were blunted using NEB Quick Blunting Mix (#E1201L). After blunting, fragments

were given A-tails with Taq DNA polymerase to allow ligation of adapter sequences (full

lists of primers and reactions can be found in supplemental methods). Ligated fragments

were amplified with PCR to enrich transposon-adjacent regions, and then again were

PCR amplified with primers to add barcodes, spacer sequences, and Illumina chip

attachment ends. The library was run on agarose gel and all fragments 250-600 base

pairs were extracted for analysis on the BioAnylazer (Agilent, Santa Clara, CA) to assess

before Illumina sequencing. All libraries were sequenced as paired 150 bp reads, though

only forward reads were used in the final analysis.

Raw Illumina data were processed in Galaxy using the Cutadapt program to trim

reads for length and quality, then mapped with Bowtie2 using the *K. pneumoniae* TS1

FASTA reference genome available in NCBI (Biosample accession number

SAMN04014921) (full protocol available at this link:

https://usegalaxy.org/u/trevorcrossmicro/w/trimming). Mapped reads were analyzed by

TnSeq Explorer [46]to calculate insertion density of each gene from each library.

Insertion densities were used to calculate an insertion density ratio for each gene from

one library to another, thereby comparing essentiality across points in the meropenem

challenge. The comparison between library 2 (input) and library 6 (meropenem recovery)

was used as the basis for ranking genes in order of essentiality, with genes most essential

to meropenem tolerance appearing at the top of the list, while genes which impart a fitness

increase when disrupted appearing at the bottom of the list.

KPNIH1 validations. Candidate tolerance genes identified by TnSeq were first validated

using an arrayed *K. pneumoniae* KPNIH1 library constructed by the Manoil lab [21].

Transposon mutants were grown in 200 µL BHI medium overnight cultures in a 96 well

plate. The next day, the overnight culture was diluted 1:10 into BHI containing a final

concentration of 10 µg/mL meropenem. At the indicated time points, samples were taken

for cfu determination, while simultaneously measuring optical densities in a Spectramax

iX3 (Molecular Devices, San Jose, CA) plate reader, and then incubated at 37˚C without

shaking for six hours. Final optical density and cfu/mL were recorded and the ratio

between final and initial values were calculated to determine the effect of the gene

disruption when challenged with meropenem.

Strain constructions with pTOX. Strains and oligos are summarized in Table S3. Knock

out and reporter strains in *K. pneumoniae* TS1 were constructed using the pTOX5 allelic

exchange vector as described in [47]. Briefly, 800-1000 base pair regions flanking regions

were amplified using PCR or synthesized de novo and assembled via isothermal

assembly into the pTOX SmaI site. Assembled constructs were transformed into DH5α

λpir competent cells, plated on LB containing 100 µg/mL chloramphenicol and 1% glucose

(LB/CHL/gluc) (to repress the rhamnose inducible toxin gene) and screened for insertion

size with primers TC_82 and TC_83, followed by sequence verification through Sanger

sequencing. Correct constructs were transformed into conjugal MFD λpir and mated into

K. pneumoniae TS1 on LB containing 1% glucose and 1.2 mM DAP (LB/gluc/DAP) for 6

hours at 37°C. Transconjugants were isolated back on LB/CHL/gluc and a single colony

was grown out in LB containing 1% glucose until the OD reached 0.1-0.2, at which point

cells were washed with M9 medium containing 0.2% casamino acids and 1% rhamnose,

and plated on solid M9/rham/casamino acids to induce the counterselective toxin and

isolate allelic exchange constructs containing the desired modifications. Envelope stress

response system deletions were screened using primers flanking the loci of interest and

validated using internal primers. Other constructs were validated using primers specific

to the modification, or primers flanking the *lac*/Z locus where reporters were inserted.

Miller assay to detect RcsB function and induction. To assess function of the RcsB

response regulator, a reporter construct was made by inserting an *rprA-lacZ$_{MG1655}$*

reporter with the *E. coli* MG1655 lacZ gene (abbreviated to *rprA-lacZ*) into the TS1 native

lacZ locus, eliminating most of the native *lacI* and *lacZ* genes. This construct was

validated first by overexpressing native RcsB on a pBAD plasmid in the presence of 0.2%

arabinose on BHI medium from strain TS1 in the reporter background and qualitatively

comparing X-gal signal to the construct containing an empty vector. RcsB activation upon

meropenem exposure was measured by performing the Miller assay on cell pellets from

meropenem-exposed cells at 0, 1, 3, and 6 hours in BHI and control cultures to determine

relative units of β-galactosidase activity normalized to cfu/mL of either culture.

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618   **Supplementary Figures**

621   **Fig. S1 Tolerance screen validation with benchmark isolates**

Fig. S2 Tolerance phenotypes of CESR mutants

Supplementary Tables (preprint version: available upon request tdoerr@cornell.edu)

Table S1 – Bloodstream isolate panel with MIC data

Strain	MIC (µg/mL) (n=3 replicates)
TS1 WT	0.00625
TS1 ΔrcsF	0.00625

TS1 Δ*ompR/envZ*	0.003125
TS1 Δ*phoPQ*	0.00625
TS1 Δ*cpxPRA*	0.003125
TS1 Δ*4*	0.001563
KPNIH1 WT	0.05
KPNIH1 *mltB::tn*	0.8
KPNIH1 *sltY::tn*	0.2
MG1655 WT	0.003125

631   Table S2 – MICs of strains constructed in this study

632   Table S3 – Strains and Oligos

633   Table S4 – TnSeq hits raw data

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