1	Evaluation of two Sigma Transwab $^{\ensuremath{\mathbb{R}}}$ systems for Maintenance of Viability of
2	pathogenic Candida spp. Using the Clinical and Laboratory Standards Institute M40-
3	A2 Standard
4	
5	E. Elcocks <sup>a</sup> and E.C. Adukwu <sup>a</sup> #
6	
7	<sup>a</sup> Centre for Research in Biosciences, Faculty of Health and Applied Sciences,
8	University of the West of England, Bristol, United Kingdom, BS16 1QY.
9	
10	Running Head: Recovery of Candida spp. Using Swab Transport Systems
11	
12	# Address correspondence to E. Adukwu, Emmanuel.Adukwu@uwe.ac.uk
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

#### 26 ABSTRACT

27 A key aspect to routine microbiology processes include the retrieval, transport and 28 maintenance of specimens. Swab transport systems (STS) can be utilised for their low 29 cost, ease of use and their ability to recover and maintain specimens over long 30 durations. An increase in healthcare complications due to fungal infections raises the 31 requirement for STS to efficiently recover and preserve pathogens of yeast origin. The 32 Clinical and Laboratory Standards Institute (CLSI) M40-A2 protocol is used to assess 33 the compliance of STS to a quality control standard but at present does not include 34 the recovery of yeast. The aim of this study was to compare the results of two commercial STS and their ability to recover and maintain viability of five clinical and 35 36 reference strains of Candida spp., including C. auris, when stored at room temperature 37 and 4°C, over 48 h, using the qualitative roll plate method. Findings from this study 38 indicate that the STS used in this study are suitable for the collection and maintenance 39 of the Candida spp. tested, and is very suitable for the recovery of clinical C. auris. 40

- 41
- 43

42

- 44
- 45
- \_
- 46
- 47
- 48
- 49
- 50

2

# 51 **INTRODUCTION**

There has been a global increase of infections caused by invasive fungi, with molds and yeasts repeatedly described as pathogens (1). Of these infections, it is indicated that *Candida* spp. are a leading cause, and candidiasis effects more than a quarter of a million patients worldwide every year (2). This increase in opportunistic fungal pathogens can be linked to the progression of medical actions such as chemotherapy and transplants which results in an increase in immuno-compromised patients (3).

58 One species of *Candida* that is of particular concern is *C. auris*. Since the discovery 59 of *C. auris* in 2009 (4) there have been rising concerns due to its rapid spread across 60 the globe in the short time since its discovery (5); common misidentification for other 61 Candida spp. (6–9); the serious associated infections including reports of isolation 62 from the bloodstream, urinary tract, ear canal, wounds, heart muscle and bone (10); 63 high mortality rate (10–12); and it's antifungal resistance (6, 13). Rapid and efficient 64 isolation and identification of these infectious agents are paramount to successful 65 treatment, thus swab transport systems (STS) are often used for their low cost, ease 66 of use and ability to maintain microorganism viability over extended periods of time 67 (14). The Clinical and Laboratory Standards Institute (CLSI) M40-A2 is an approved standard which outlines testing procedures for liquid transport systems and provides 68 69 manufacturers and end-users with a criteria for compliance (15). This protocol 70 indicates the methodology to be used, storage conditions and length of incubation time 71 for testing various STS. The protocol also outlines a list of organisms to be used for 72 quality control, though amongst these organisms, yeasts are only indicated for urine 73 transport systems. The compliance criteria of an STS in M40-A2 is described as no 74 greater than 3 log decrease when stored at 4 °C or room temperature, or 1 log increase 75 when stored at 4 °C. The enumeration should also be ≥5 CFU from the same dilution

as used in time-zero plate counts after the specified holding period. The aim of this
study is to investigate and evaluate the efficiency of two commercial transport swabs
to recover several *Candida* spp., including *C. auris*, using the qualitative roll-plate
method outlined by the M40-A2.

80

## 81 METHODS

82 The method in this study followed the CLSI M40-A2 protocol with some minor

83 adaptations. The STS used in this study were both manufactured by Medical Wire

84 and Equipment (MWE; Corsham, UK) and included their Sigma Transwab®

85 (MW176S) and Sigma Transwab® Purflock® (MW176PF). Both STS utilise a liquid

86 amies carrying media. The Gram stain procedure was carried out on all species of

87 Candida. Candida spp. stored on microbank beads at -80°C were grown on

88 Sabouraud Dextrose Agar (SDA; EO Labs, Bonnybridge, UK) at 30°C for 48 h and

used to inoculate 0.85% physiological saline (OXOID, Basingstoke, UK) until turbidity

90 reached McFarland Standard 0.5 (OD<sub>625nm</sub> 0.08 – 0.1). Serial dilutions were made in

saline and 100  $\mu$ l of 10<sup>-2</sup> and 10<sup>-3</sup> dilutions were used to inoculate swabs aiming to

92 achieve an approximate inoculation spike of 10<sup>5</sup> and 10<sup>6</sup> CFU/mL. Initial inocula was

93 verified by plate count to determine CFU/ml. Three swabs were used per condition

and incubated at either room temperature or 4°C for 0, 24 and 48 hours

95 (T0/T24/T48). Swabs were plated using the roll plate method outlined in M40-A2

96 onto SDA agar and incubated at 30°C for 48 h and then enumerated.

97

## 98 **RESULTS**

99 Results from Gram staining *Candida* spp. can be seen in Figure 1. All show the
100 expected Gram positive appearance with typical round/oval budding morphology. All

strains of *Candida*, including *C. auris*, were successfully recovered by both STS. Both
STS used were compliant with the M40-A2 criteria for all *Candida* spp. tested (Table
1). No overgrowth of organisms is shown when stored at 4°C with most of the STS
showing a slight decrease in CFU after 48 h, whilst all STS show an increase in CFU
after 48 h when stored at room temp (Figure 2).

106

#### 107 **DISCUSSION**

108 Both swab transport systems have demonstrated successful and efficient recovery 109 and maintenance of Candida spp. and of particular interest is the recovery of C. 110 auris. Considering the recent increase in global concern for C. auris and its 111 associated implications, as previously mentioned, and in light of the findings from 112 this study, MWE Sigma Transwab® and Sigma Transwab® Purflock® can be 113 described as very suitable for the recovery of *C. auris* and can be implemented in the 114 viability and transport of this opportunistic pathogen and aid in the timely treatment of 115 associated infections. In a recent study (16) several Candida spp. were recovered 116 using other commercial STS based on the M40-A2 protocol, however, the study did 117 not investigate three of the Candida spp. in this study including the *C. auris*. 118 To our knowledge, this study is the first to evaluate STS efficiency and recovery of C. 119 auris using the M40-A2 protocol. The M40-A2 does not currently directly address the 120 recovery of yeasts, with the exception of guidance for urine transport systems (15). 121 In this study it was found that when using the protocol for adjusting initial inocula. 122 enumeration was lower than that of bacteria, as expected, due to the difference in 123 size of yeast and bacterial cells. Of the Candida spp. used within this study, only C. 124 auris is a known clinical isolate. Though using a panel of clinically isolated bacteria 125 would better reflect the use of STS in clinical situations, the use of reference strain

126 cultures is in-line with the M40-A2 protocol which utilises quality control strains for 127 testing STS. With regards to a direct comparison of each STS, though the swab tip 128 of each STS used in this study varied, the results from the foam or flocked swab 129 were similar. One study (17) claims that foam swabs are superior to flocked swabs. 130 though this preference was due to foam swabs ability to perform better when used in 131 antigen testing experiments and not a reflection of the specimen recovery and 132 maintenance. 133 Within this study, overgrowth was seen in both swabs for *C. auris* and in the Sigma 134 swab for *C. albicans* at room temperature. When stored at 4°C, no overgrowth was 135 seen in either STS. With an increase of transport delays being seen due to 136 increasing costs for containment and movement of services to more central

137 laboratories <sup>[18]</sup>, transport in cool temperatures is suitable, particularly for specimens

138 of pathogenic yeast origin, and specimen maintenance would be ensured.

139

# 140 **ACKNOWLEDGEMENTS**

This work was funded by Medical Wire and Equipment, Corsham, UK and supported
by the Faculty of Health and Applied Sciences, University of the West of England,
Bristol, UK. The funders had no role in data collection and interpretation, or the
decisions involved with submitting the work for publication.

145

- 146
- 147
- 148

149

150

#### 151 **REFERENCES**

- Yapar N. 2014. Epidemiology and risk factors for invasive candidiasis. Ther
   Clin Risk Manag 10:95–105.
- 154 2. Arendrup MC, Patterson TF. 2017. Multidrug-Resistant Candida:
- 155 Epidemiology, Molecular Mechanisms, and Treatment. J Infect Dis 216:S445–156 S451.
- 157 3. Vecchione A, Florio W, Celandroni F, Barnini S, Lupetti A, Ghelardi E. 2017.
- 158 Comparative evaluation of six chromogenic media for presumptive yeast
- identification. J Clin Pathol 70:1074–1078.
- 160 4. Satoh K, Makimura K, Hasumi Y, Nishiyama Y, Uchida K, Yamaguchi H. 2009.
- 161 Candida auris sp. nov., a novel ascomycetous yeast isolated from the external
- 162 ear canal of an inpatient in a Japanese hospital. Microbiol Immunol 53:41–44.
- 163 5. Lockhart SR, Etienne KA, Vallabhaneni S, Farooqi J, Chowdhary A, Govender

164 NP, Colombo AL, Calvo B, Cuomo CA, Desjardins CA, Berkow EL,

- 165 Castanheira M, Magobo RE, Jabeen K, Asghar RJ, Meis JF, Jackson B,
- 166 Chiller T, Litvintseva AP. 2017. Simultaneous emergence of multidrug-resistant
- 167 candida auris on 3 continents confirmed by whole-genome sequencing and
- 168 epidemiological analyses. Clin Infect Dis 64:134–140.
- 169 6. Kathuria S, Singh PK, Sharma C, Prakash A, Masih A, Kumar A, Meis JF,
- 170 Chowdhary A. 2015. Multidrug-resistant Candida auris misidentified as
- 171 Candida haemulonii: Characterization by matrix-assisted laser desorption
- 172 ionization-time of flight mass spectrometry and DNA sequencing and its
- antifungal susceptibility profile variability by vitek 2, CL. J Clin Microbiol

174 53:1823–1830.

175 7. Lockhart SR, Jackson BR, Vallabhaneni S, Ostrosky-Zeichner L, Pappas PG,

176	Chiller T. 2017. Thinking beyond the common <i>Candida</i> species: Need for
177	speciation of Candida due to the emergence of multidrug resistant Candida
178	auris. J Clin Microbiol 55:JCM.01355-17.

- 179 8. Lockhart SR, Berkow EL, Chow N, Welsh RM. 2017. Candida auris for the
- 180 Clinical Microbiology Laboratory: Not Your Grandfather's Candida
- 181 Species. Clin Microbiol Newsl 39:99–103.
- 182 9. Kordalewska M. 2017. Rapid and Accurate Molecular Identification of the
- 183 Emerging Multidrug-Resistant Pathogen Candida auris 55:2445–2452.
- 184 10. Sarma S, Upadhyay S. 2017. Current perspective on emergence, diagnosis
- and drug resistance in Candida auris. Infect Drug Resist 10:155–165.
- 186 11. Tsay S, Kallen A, Jackson BR, Chiller TM, Vallabhaneni S. 2018. Approach to
- 187 the Investigation and Management of Patients with Candida auris, an
- 188 Emerging Multidrug-Resistant Yeast. Clin Infect Dis 66:306–311.
- 189 12. Sears D, Schwartz BS. 2017. Candida auris: An emerging multidrug-resistant
  190 pathogen. Int J Infect Dis 63:95–98.
- 191 13. Chowdhary A, Voss A, Meis JF. 2016. Multidrug-resistant Candida auris: 'new
- 192 kid on the block' in hospital-associated infections? J Hosp Infect 94:209–212.
- 193 14. Gizzie N, Adukwu E. 2016. Evaluation of liquid-based swab transport systems
- against the new approved CLSI M40-A2 standard. J Clin Microbiol 54:1152–
- 195 1156.
- 196 15. Clinical and Laboratory Standards Institute C. 2014. M40-A2: Quality Control
  197 of Microbiological Transport Systems; Apprved Standard Second Edition,
  198 2nded.
- 199 16. Scansen KA, Bonsu BK, Stoner E, Mack K, Salamon D, Leber A, Marcon MJ.
- 200 2010. Comparison of polyurethane foam to nylon flocked swabs for collection

- 201 of secretions from the anterior nares in performance of a rapid influenza virus
- antigen test in a pediatric emergency department. J Clin Microbiol 48:852–856.
- 203 17. Van Horn KG, Audette CD, Sebeck D, Tucker KA. 2008. Comparison of the
- 204 copan ESwab system with two amies agar swab transport systems for
- 205 maintenance of microorganism viability. J Clin Microbiol 46:1655–1658.

206 Table 1 - Qualitative results of bacterial recovery of Candida spp. isolated from the Sigma Transwab® (MW176S) and Sigma

207	Transwab® Purflock®	(MW176PF)	at room temperature and at 4°C.
-----	---------------------	-----------	---------------------------------

			Dilution 10 <sup>-2</sup>			Dilution 10 <sup>-3</sup>				
Organism	Swab Tem	Temp.	0hr	24hr	48hr	Compliance	0hr	24hr	48hr	Compliance
	Sigma	RT	TNTC	TNTC	TNTC	$\checkmark$	51	50	TNTC	$\checkmark$
Candida auris	Sigma	4°C	TNTC	179	183	$\checkmark$	51	16	20	$\checkmark$
NCPF 8971	Purflock	RT	TNTC	TNTC	TNTC	$\checkmark$	35	55	TNTC	$\checkmark$
	Purflock	4°C	TNTC	TNTC	208	$\checkmark$	35	43	29	$\checkmark$
Candida albianna	Sigma	RT	164	TNTC	TNTC	$\checkmark$	14	117	255	$\checkmark$
Candida albicans	Sigma	4°C	164	153	134	$\checkmark$	14	14	13	$\checkmark$
NCPF 3179	Purflock	RT	176	TNTC	TNTC	$\checkmark$	14	92	200	$\checkmark$
	Purflock	4°C	176	100	133	$\checkmark$	14	12	17	$\checkmark$
Condido tronicolio	Sigma	RT	128	TNTC	TNTC	✓	14	143	TNTC	$\checkmark$
Candida tropicalis	Sigma	4°C	128	71	66	$\checkmark$	14	4	5	$\checkmark$
NCPF 3111	Purflock	RT	102	TNTC	TNTC	$\checkmark$	12	67	146	$\checkmark$
	Purflock	4°C	102	77	55	$\checkmark$	12	5	9	$\checkmark$
	Sigma	RT	158	TNTC	TNTC	$\checkmark$	7	46	236	$\checkmark$
Candida parapsilosis	Sigma	4°C	158	58	109	$\checkmark$	7	10	6	$\checkmark$
ATCC 22019	Purflock	RT	135	TNTC	TNTC	$\checkmark$	13	46	121	$\checkmark$
	Purflock	4°C	135	120	154	$\checkmark$	13	9	13	$\checkmark$
	Sigma	RT	198	96	269	✓	16	8	20	$\checkmark$
Candida glabrata	Sigma	4°C	198	71	113	$\checkmark$	16	4	10	$\checkmark$
ATCC 2001	Purflock	RT	171	182	260	$\checkmark$	18	21	36	$\checkmark$
	Purflock	4°C	171	197	165	$\checkmark$	18	17	23	$\checkmark$

208 TNTC – too numerous to count; RT – Room temperature. (n=3)

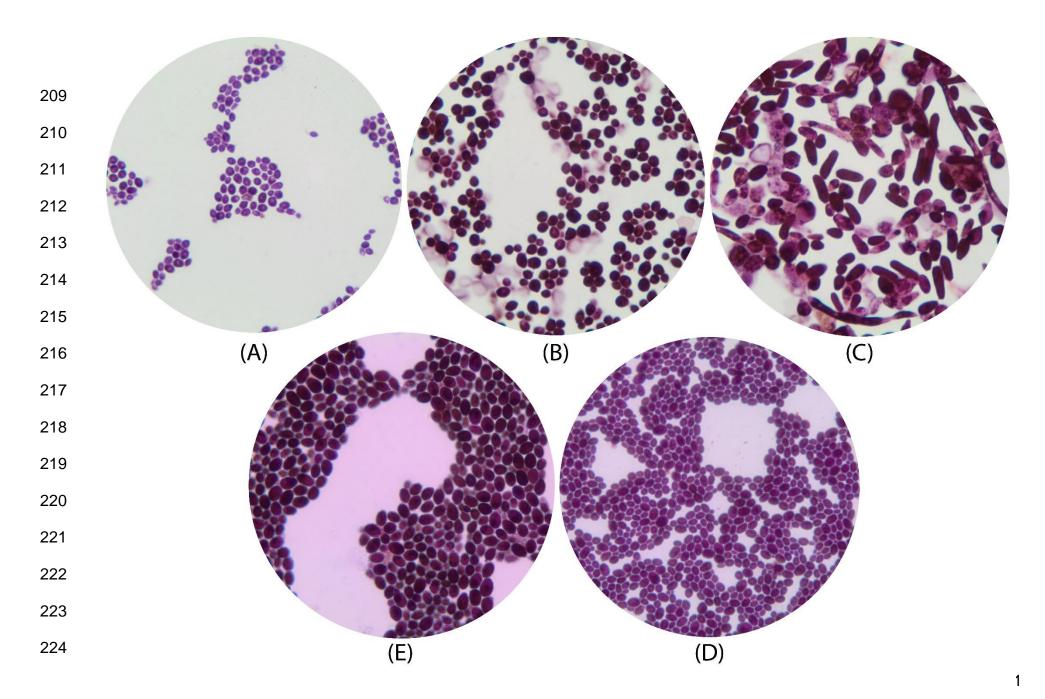


Figure 1 – Gram strain images of: (A) C. auris NCPF 8971; (B) C. albicans NCPF 3179; (C) C. tropicalis NCPF 3111; (D) C.

glabrata ATCC 2001; (E) C. parapsilosis ATCC 22019. 100x magnification.

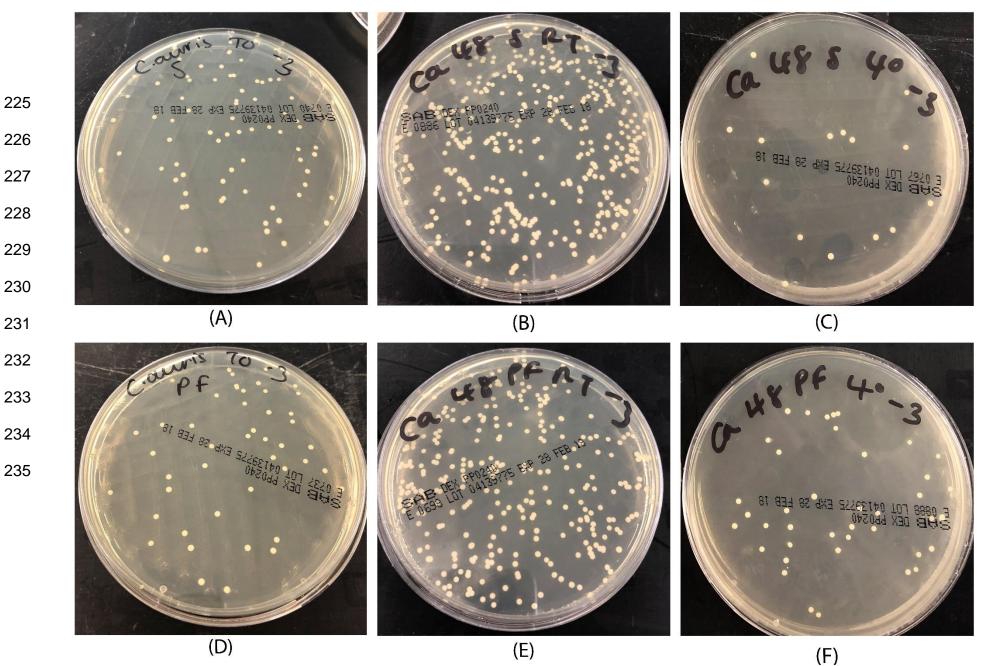


Figure 2 – Enumeration plates showing growth of Candida auris on SDA for (A) Sigma STS at T0; (B) Sigma STS at T48 and RT; (C)

Sigma STS at T48 and 4°C; (D) Sigma Purflock STS at T0; (E) Sigma Purflock STS at T48 and RT; (F) Sigma Purflock STS at T48