Revealing virulence potential of clinical and environmental *Aspergillus fumigatus* isolates using Whole-genome sequencing

F. Puértolas-Balint[1,2], J.W.A. Rossen[1], C. Oliveira dos Santos[1], M.A. Chlebowicz[1], E. Raangs[1], M.L. van Putten[1], P.J. Sola-Campoy[4], L. Han[5], M. Schmidt[2,3], S. García-Cobos[1#]

[1] University of Groningen, University Medical Center Groningen, Department of Medical

Microbiology and Infection Prevention, Groningen, The Netherlands

[2] University of Groningen, Department of Molecular Pharmacology, The Netherlands.

[3] University Medical Center Groningen, GRIAC research institute, The Netherlands.

[4] Reference and Research Laboratory on Antimicrobial Resistance and Healthcare Infections,

National Microbiology Centre, Institute of Health Carlos III, Majadahonda, Madrid, Spain.

[5] Institute of Disease Control and Prevention, Academy of Military Medical Sciences, Beijing,

China.

Corresponding Author: S. García-Cobos; Email: s.garcia.cobos@umcg.nl. Address: University of Groningen, University Medical Center Groningen, Department of Medical Microbiology and Infection Prevention EB80, Hanzeplein 1, P.O. Box 30.001, 9700 RB Groningen, The Netherlands.

Abstract

Aspergillus fumigatus is an opportunistic airborne pathogen and the most common causative agent of human fungal infections. A restricted number of virulence factors have been described but none of them lead to a differentiation of the virulence level among different strains. In this study, we analyzed the whole-genome sequence of a set of *A. fumigatus* isolates from clinical and environmental origin to compare their genomes and to determine their virulence profiles. For this purpose, a database containing 244 genes known to be associated with virulence was built. The genes were classified according to their biological function into factors involved in thermotolerance, resistance to immune responses, cell wall structure, toxins and secondary metabolites, allergens, nutrient uptake and signaling and regulation. No difference in virulence profiles was found between clinical isolates causing an infection and a colonizing clinical isolate, nor between isolates from clinical and environmental origin. We observed the presence of genetic repetitive elements located next to virulence related gene groups, which could potentially influence their regulation. In conclusion, our genomic analysis reveals that *A. fumigatus*, independently of their source of isolation, are potentially pathogenic at the genomic level, which may lead to fatal infections in vulnerable patients. However, other determinants such as genetic variations in virulence related genes and host-pathogen interactions most likely influence *A. fumigatus* pathogenicity and further studies should be performed.

Importance

Aspergillus spp. infections are among the most clinically relevant fungal infections also presenting treatment difficulties due to increasing antifungal resistance. The lack of key virulence factors and a broad genomic diversity complicates the development of targeted diagnosis and novel treatment strategies. A widely spread variability in virulence has been reported for experimental, clinical and environmental isolates. Here we provide supporting evidence that members of this species are fully capable of establishing an infection in immunosuppressed hosts according to their virulence content at the genomic level. Due to the possible clinical complications, studies are urgently required linking strain's virulent phenotype with the genotype to better understand the virulence activation of this important fungal pathogen.

Introduction

Aspergillus fumigatus (*A. fumigatus*) is an opportunistic fungal pathogen that poses one of the major threats to immunocompromised individuals in the clinic. High risk patients include neutropenic patients, hematopoietic stem cell transplant recipients, patients receiving a prolonged steroid treatment and critically-ill patient in the intensive care unit (ICU) with chronic obstructive pulmonary disease (COPD), liver cirrhosis, viral infections or microbial sepsis (1-3). In the context of an impaired immune function, inhaled airborne spores of *A. fumigatus* will not be effectively eliminated and will remain in human airways to cause a range of infections that include allergic bronchopulmonary aspergillosis (ABPA), aspergilloma (chronic aspergillosis) and invasive aspergillosis (IA) (1,4). IA is the most serious infection, with a global prevalence of 250,000 cases per year with mortality rates up to 90-95% (5,6). In addition to the increasing burden of patients with impaired immunity (1), another major challenge is the treatment of these fungal infections due to the antifungal resistance to triazoles, the most indicated drugs against *Aspergillus* species infections. Resistance is characterized by the presence of a point mutation (L98H) in the azole target *Cyp51A* and a 34-base pair (bp) tandem repeat (TR34) in its promoter region (7) and the most common cause of resistance acquisition is the widespread azole-based fungicide use against fungal plant pathogens in the agricultural practice (7-9).

In order to overcome the therapeutic challenges and threats posed by *A. fumigatus* infections, there is a need to further understand the mechanisms of adaptability and infection of the fungus to develop better and early diagnostic tools and uncover novel therapeutic strategies. The virulence of *A. fumigatus* is multifactorial, a trait that has been developed by the fungus as a need to survive the encountered selective pressures in decaying vegetation (10). Whole-genome and transcriptome analysis have allowed the discovery and study of new components of *A. fumigatus* biology and pathogenesis, providing a better understanding of the genetic content of *Aspergillus spp*. Genomic analyses identified that *A. fumigatus* contains 8.5% of lineage-specific (LS) genes with accessory functions for carbohydrate and amino acid metabolism, transport, detoxification, or secondary metabolite biosynthesis, suggesting this microorganism has particular genetic determinants that can facilitate an *in vivo* infection (11). Nevertheless, the study of *A. fumigatus* virulence has been hampered by the lack of a standard wild-type (WT) strain, next to a broad isolate-dependent variability in virulence as shown in murine infection models of IA (12). *A. fumigatus* isolates can be divided in three different categories depending on the source of isolation: 1) environmental, obtained from decaying

vegetation, air sampling, crops, etc.; 2) clinical, originally found in patient samples, and 3)

experimental, which refers to isolates that were first obtained from a patient setting but are

now used as reference strains by many research groups (i.e. Af293 or CEA10). Some

experimental infection studies have reported clinical isolates to be more virulent than

environmental isolates (13-15). Moreover, two environmental isolates retrieved from an

International Space Station were more virulent than the experimental strains Af293 and

CEA10 (16). Additionally, an in-host study that analyzed the microevolution of 13 isogenic

isolates of *A. fumigatus* obtained from the same patient over a period of 2 years, reported both

increases and decreases in virulence among the isolates (17). The latter, most likely as a result

of the adaptation of this microorganism to the human niche to allow its persistence (17).

These different observations highlight the need to recognize the intraspecies genotypic and

phenotypic variety among *A. fumigatus* populations, as this could determine the progression

and fulminant outcome of diseases produced by this fungus.

To increase the knowledge on molecular factors contributing to the development of diseases

caused by *A. fumigatus*, the present study aimed to determine the underlying genetic traits

that characterize a virulent strain. We evaluated if differences in the afore mentioned strain-

specific virulence can be explained through abundance of virulence factors at the genomic

level, with special interest in clinical isolates obtained from patients with different clinical

outcomes. A database containing 244 *A. fumigatus* virulence related genes (VRGs), reported

by different studies, was created and used to define the pathogenic potential of investigated

isolates. In total nine *A. fumigatus* sequences were used in our study: two experimental, five

clinical and two environmental isolates. Among these isolates, the whole-genome sequences

of three clinical isolates and one experimental strain B5233 were generated at the University

Medical Center Groningen (UMCG), and further used for strain genotyping and to perform a

comparative genomic analysis to identify genomic differences.

Results

Virulence related genes screening showed that all *A. fumigatus* isolates included in this

study are potentially pathogenic. The genome sequences of nine *A. fumigatus* isolates

(Table 1) were screened for the presence of particular VRGs using our in-house database (see

Table S2). We identified the presence of all 244 VRGs (>90% coverage and >90% identity) in

the genome of seven isolates P1MR, P1MS, P2CS, Af293, 12-7505054, 08-19-02-30 and 08-19-

02-46. In addition, 243 genes were present in the genomes of B5233 and 08-12-12-13, and

both isolates lacked the *Afu5g12720* gene. This gene codes for a putative ABC transporter and

is a member of the Biosynthetic gene cluster 17 (BGC17), consisting of in total 10 genes,

described by Bignell *et al* (18). The product of this BGC is a non-ribosomal peptide synthetase

(NRPS), which is thought to be structural (19). However, no clear link between this ABC

transporter and the function of this NRPS has been described before, thus it is not known how

its absence could affect the overall function of this cluster and its possible role in virulence.

TRESP genotyping identified a distinct genetic background of the isolates. Out of four

investigated isolates, two were isolated from the same patient suffering from an influenza A

H1N1 infection with IA (Figure 1). Given that P1MR, a resistant strain, was isolated nine days

after a susceptible isolate P1MS was obtained, the question arose as to whether these isolates

were genetically related and if the resistant phenotype developed after azole treatment. To

determine their genetic relatedness, we used the recently described TRESP method that

identifies the alleles of specific tandem repeats in the exon sequence of surface proteins CSP,

MP2 and CFEM (Table 2) (20). The four isolates presented different allelic combinations and

thus, different TRESP genotypes, P1MS and P1MR having t03m1.1c08A and t11m1.1c09

TRESP genotypes, respectively. In this study, CSP alleles appeared to best differentiate the

isolates (Table 2).

Comparative genomics illustrates differences in the genome structure. The genomes of

our four isolates were compared to *A. fumigatus* Af293 chromosomes. The compared genomic

sequences of the 8 chromosomes are displayed in Figure 2, in which investigated VRGs

locations are highlighted in yellow. Small deletions (100 kpb) were observed at the end of

chromosomes 5 and 6, and large deletions (>300 kbp) were identified at the beginning of

chromosome 1 and at the end of chromosome 7. Multiple small deletions and large-scale

deletions in *A. fumigatus* genomes have been reported previously, and particularly these

>300kbp large-scale deletions were previously described in chromosome 1 (21, 22) and

chromosome 7 (21). A region with a high dissimilarly with respect to the reference Af293

between 1,698 kbp and 2,058 kbp is observed in chromosome 7 for all the isolates, where

only the P2CS isolate had a certain degree of similarity (Figure 2). In addition, sequence gaps

with no assigned CDS, (indicated by a red line in Figure 2), represent putative centromeres in

all chromosomes and in the case of chromosome 4, a region of ribosomal DNA (represented

by a dark blue line) (11). Notably, repeat rich sequence areas were identified in

chromosomes 1, 2, 4, 6 and 8. These areas can be seen in Figure 2 by the alignment of many

small contigs which coincides with a low GC content. In the case of chromosome 4, a group of

virulence genes appears to be flanked by these repetitive regions on both sides, whereas some

groups are only flanked on one side as depicted in chromosomes 6 and 8.

Genomic variability among the fungal genomes. Variant calling using as reference the *A.*

fumigatus Af293 genome, identified a total number of 68,352; 48,590; 56,362 and 56,422

variants in the genome of B5233, P1MS, P1MR and P2CS isolates, respectively (Table 3). High

and moderate impact variants were retrieved, and their predicted effect is displayed in Table

S3. Among variations with a predicted moderate- and high-impact, a high number of missense

variants, ranging from 9,804 to 12,067, was identified. Single nucleotide polymorphism (SNP)

analysis in VRGs with respect to reference Af293 revealed the presence of a range of 1,015 –

1,122 SNPs in all the analyzed isolates (Table 3). Examples of some variants present in the

VRGs are listed in Table 4 and a more detailed description is given in supplementary Table S4.

No clear pattern of variant distribution was found regarding the source the isolates. Rather,

we observed some cases where all isolates had common variants as demonstrated in genes

thtA, sidC and *msdS.* Genes associated to resistance to the immune response *rodB*, *cat1* and

afpmt2 had only one or no variants suggesting they are highly conserved genes. The *gliZ gene*

required for the regulation of gliotoxin and the *gli* cluster, and the *sidC* gene*,* with an

important role in iron acquisition, are examples of genes with several variants.

Additionally, a comparative analysis between P1MS and P1MR isolates from the same patient

was performed and 45,335 variants were found, corresponding to 38,319 SNPs, 868 multiple

nucleotide polymorphisms (MNPs), 1,768 insertions, 1,842 deletions and 2,538 complex

(combination of a SNPs and MNPs).

Discussion

A. fumigatus is a major fungal opportunistic pathogen capable of causing chronic and deadly

invasive infections. The development of an infection seems to be primarily determined by the

host immune status. Here, we performed a genomic analysis to investigate the role of the

pathogen in the development and progression of the infection. We hypothesized that *A.*

fumigatus isolates recovered from a patient who died after an infection with influenza A H1N1

and IA and, an isolate from a patient with human immunodeficiency virus (HIV) and COPD

with no reported Aspergillus infection, would reveal a distinct virulence profile. In addition to

our clinical isolates, we studied the known virulent *A. fumigatus* experimental strain B5233

and five unrelated isolates available in public databases with different sources of isolation

(Table 1). Our analysis identified the presence of 244 VRGs in all *A. fumigatus* isolates tested,

with the exception of *Afu5g12720* gene in B5233 and 08-12-12-13, indicating all isolates have

the potential to be or become pathogenic. Thus, differences in the microorganisms' capacity to

cause damage most likely do not only rely on the presence or absence of virulence factors at

the genomic level of *A. fumigatus*. Moreover, a high variability in the studied *A. fumigatus*

genomes, reflects the enormous capacity of adaptation of the fungus to different

environments.

The only gene amongst the 244 VRGs included in our in-house database, not found in the

isolates B5233 and 08-12-12-13 was *Afu5g12720*. Interestingly, this gene was reported to be

absent in 21 out of 66 *A. fumigatus* samples in a population genomics study that investigated

the genomic variation of secondary metabolites in this species (23). This gene is a member of

the BGC 17, and its absence could have a functional impact on the synthesis of the final

product of this cluster, a NRPS, which is thought to have a structural function (19).

Afu5g12720 codes for an ABC transporter located in the BGC17 with another 9 genes (18) and

was curiously absent in B5233, a strain that has been described as highly virulent. It would be

interesting to further study the link between the lack of this gene and a possible increase in

virulence, since disruption of another gene member included in this BGC17, *pes3*, resulted in a

hypervirulent strain (19).

Additional changes in the genome structure of our isolates were found in our comparative

genomic analysis. We identified deleted segments in relation to the reference that were

located at the beginning of chromosome 1 and at the end of chromosomes 5, 6 and 7.

Fedorova *et al*, identified these subtelomeric regions to be enriched for the presence of

pseudogenes, transposons and other repetitive elements, and corresponding to areas that

contain genes specific to the *A. fumigatus* species. (11) It was hypothesized that these genes

have most likely evolved from big duplication and diversification events and not horizontal

gene transfer. (11) It seems isolates B5233, P1MS and P1MR also do not have these genes. Our

hypothesis is that these segments, are insertion-prone regions that are contributing to the

diversification of the species.

Nucleotide variant analysis of our four isolates, identified a total number of variations ranging

from 48,590 to 68,352 compared to reference strain Af293. This range fits in the genetic

diversity for *A. fumigatus* reported previously and determined in 95 sequences ranging from

36 - 72,000 SNPs (16). The large number of identified variants and differences in the genome

structure displays a broad genetic diversity in the studied isolates. This diversity is

hypothesized to directly influence the fungus virulence by allowing an adaptation to an in-

host environment, the evasion of the host immune system and the acquisition of antifungal
resistance (17,24,25,27). The presence of SNPs in the VRGs of the clinical isolates, particularly
those to be predicted to have a high impact, could be of major influence for the virulence of
the isolates. However, in this study we could not link the presence of genetic changes in VRGs
to isolates with a common origin of isolation. In addition, some repetitive elements were
located on the sides of some groups of VRG as exemplified on chromosomes 6 and 8. It is
possible they could play a role in how some of these genes are expressed, since these elements
are recognized to shape the genomes of fungi (28). Follow-up studies using RNA sequencing
could help to elucidate how and under what circumstances these virulence genes are
expressed, as well as to determine the impact of genomic variations on expression levels.
Subsequent infection model studies could be used to correlate these genomic variations and
changes with specific pathogenic phenotypes.
The genome sequence of isolates P1MS and P1MR differed by 45,335 variants and they were
confirmed to have different genotypes, supporting the hypothesis that resistance did not
develop from the initial susceptible isolate. It is also unlikely that in a period of nine days the
susceptible isolate would have been able to mutate to acquire azole resistance since the
median time of development of azole resistance has been reported to be 4 months (29).
Moreover, gain of the resistant phenotype within the host is observed in chronic infections
whereas acquisition of resistance during IA continues to be unreported (24). In a similar case
of post-influenza aspergillosis, four *A. fumigatus* isolates were obtained from a patient that
received an allogeneic stem cell transplant and developed IA after the influenza virus infection
which was initially treated with voriconazole (30). The patient passed away 4 months later.
The first three isolates were susceptible to azole treatment but the last one, demonstrated
triazole-resistance. It was confirmed that the resistant isolate was different from the first
isolates by STR*Af* microsatellite genotyping (30). It is likely that the resistant phenotype of the
resistant isolate in both our study and the post-influenza study (30), was of environmental
origin and that this isolate had coexisted with the susceptible isolates in a mixed population
that was not detected during the first sampling. Treatment with voriconazole most probably
eradicated the initial susceptible strain and through selective pressure, allowed the resistant
A. fumigatus strains to persist in the patient's airways. Because of this possibility, a change of
practice regarding *A. fumigatus* isolation has been applied at the diagnostics laboratory at the
UMCG where antifungal susceptibility testing is now applied to at least five colonies obtained
from a single respiratory sample. Influenza virus infection has been recently described as an

independent risk factor for invasive pulmonary aspergillosis and, therefore, extreme care for

patients admitted into the ICU with a severe influenza virus infection is advised (31).

The use of TRESP genotyping in this study identified the isolates to be genetically different.

This approach was easy and accessible and only required the whole-genome sequence of the

isolates, in contrast to other traditional typing methods with much lower discriminatory

power (MLST) (32), laborious microsatellite determination (STR*Af*) (33), and the most novel

whole-genome SNP based typing method which is highly dependent on the quality of

sequencing, variant calling parameters and selection of a genetically close reference strain

(21).

We show evidence that supports the observation that all fungi have the ability to cause

disease and that members of the *A. fumigatus* species lack the sophisticated virulence factors,

commonly used to describe differences in virulence in species of the bacterial kingdom, that

could explain differences in their pathogenic traits (25,34). In order to define what makes a

virulent *A. fumigatus* isolate many researchers have attempted characterizing different

aspects of the fungus: differences in the colonial and spore color phenotype (25), the strain-

dependent immunomodulatory properties induced in the host (25), the clinical or

environmental source of the isolate (13, 25,26), the strains ability to adapt and grow in

stressful conditions like low oxygen microenvironments where hypoxia fitness was strongly

correlated with an increase in virulence (26), and the ability of the fungus to adjust its gene

expression to survive in different immunosuppressive conditions inside the host (3). These

are all aspects that influence how fit a strain will be to produce an infection and further

research on the virulence of this microorganism should take all these aspects into

consideration when characterizing an experimental and/or clinical strain. The combined

results of these studies could be used to explore the link between the virulent phenotype and

genotype to better understand the mechanisms of infection of this important human

pathogen.

There are some limitations to be considered in this study. First, the number of isolates was

small, however three different *A. fumigatus* population sources (clinical, environmental and

experimental) were included. Nevertheless, we encourage our findings to be confirmed in a

larger population to fully confirm the observation that all members of this species are

potentially pathogenic. Second, we included 244 genes in our in-house database and we do

not rule out the possibility that other genes that have not yet been characterized/described

could also be considered as VRG.

In conclusion, we developed an in-house database with 244 VRG and found them all (except

Afu5g12720) in the whole-genome sequence of nine *A. fumigatus* isolates, five clinical, two

environmental and two experimental. This indicates, the strain-specific virulence genomic

profile cannot be explained by the source of isolation when looking at differences in virulence

related gene content or sequence variations. Understanding under what circumstances VRGs

are expressed and utilized may ultimately contribute to explain how they regulate their

virulence. Moreover, a broad genomic variability and the convenient location of transposable

elements that are acknowledged to be shaping the genome, evidences a very efficient capacity

of adaptation and challenges the development of specific diagnostic tools and effective

treatments.

Methods

***A. fumigatus* isolates and background**. *A. fumigatus* samples evaluated in this study are

summarized in Table 1. Four clinical isolates were included: three isolates (P1MS, P1MR and

P2CS) obtained at the University Medical Center Groningen (UMCG), Groningen, the

Netherlands, and the strain B5233, kindly provided by the Institute for Disease Control &

Prevention of the Academy of Military Medical Sciences, Beijing, China. B5233 is a clinical

isolate that demonstrated a high virulence in murine infection studies, and it has been used as

an experimental strain in *A. fumigatus* pathogenicity studies (35,36). The four isolates were

initially identified as *A. fumigatus* by microscopic morphological description and sequencing

of the internal transcribed spacer (ITS) region using Sanger sequencing.

P1MS and P1MR were originally isolated from the sputum of the same patient at different

time points during a complicated Influenza A H1N1 virus infection, and were regarded as

mixed infection isolates (Figure 1). This patient had no relevant underlying disease, was

diagnosed with Influenza A H1N1 virus and was admitted to the UMCG. Two days after

admission, a positive sputum culture of *A. fumigatus* prompted the initiation of treatment with

voriconazole. Later, at day five after admission, the patient developed IA and passed away

sixteen days after the diagnosis of the fungal infection. Throughout the course of the IA

infection (21 days), a total of seven *A. fumigatus* isolates were recovered, where the first five

isolates were susceptible to azole treatment and the last two were resistant. We selected the

first susceptible and the first resistant isolates to determine their genetic relatedness.

The remaining isolate, P2CS, was recovered from an individual diagnosed with HIV and COPD.

The *A. fumigatus* was cultured during a COPD exacerbation event. Chronic pulmonary

aspergillosis was discarded after a chest imaging study without the radiological

characteristics of pulmonary aspergillosis. Since no indicative symptoms of aspergillosis were

identified, the patient was regarded as colonized by this strain. The patient is still under

treatment with antiviral therapy ODEFSEY (emtricitabine/tenofovir alafenamide/rilpitvirine)

and treatment for COPD with fluticason, cotrimoxazol, formeterol and ipratropium.

In addition, the raw sequencing data of five unrelated Dutch and English isolates with an

environmental or clinical origin (22), were downloaded from the European Nucleotide

Archive (ENA) and included in the study (Table 1).

Antifungal susceptibility testing To determine the *in vitro* susceptibility of the clinical

isolates to triazole antifungal drugs the agar-based gradient technique for quantitative

antifungal susceptibility E-test (AB BIODISK, Solna, Sweden) was used for isolates B5233 and

P1MS, the agar-based method VIPcheck™ test (Nijmegen, The Netherlands) was used for

isolate P2CS and the susceptibility of P1MR was determined with the in vitro EUCAST broth

microdilution reference method (37).

DNA isolation Isolates were grown on Potato Dextrose Agar for 7 days at 35°C. DNA

extraction was performed with the DNeasy UltraClean Microbioal Kit (Qiagen, Hilden,

Germany) with some modifications to the initial steps of the manufacturer's protocol. The

initial fungal starting material was obtained using a pre-wetted sterile swab rubbed against

the sporulating colony, that was dissolved in 700 µl sterile saline solution. The suspension

was centrifuged at 10,000 rcf for 4 min. The supernatant was discarded, and the pellet was

resuspended in 300 µl of Power Bead solution. This solution was used to resuspend a second

pellet containing the same sample. The final concentrated solution was transferred to a

microtube containing Pathogen lysis tube L beads (Qiagen, Hilden, Germany), 50 µl of Solution

SL and 200 µl of sterile saline solution to homogenize. Disruption was carried out in a Tissue

Homogenizer Precellys 24 (Bertin, Montigny-le-Bretonneux, France), set to 3 times 30

seconds at 5,000 rpm separated by 30 seconds. The disruption preps were heated to 65°C as

suggested in the Troubleshooting Guide of the protocol to increase the final DNA yield

Library preparation and whole genome sequencing. The whole procedure was performed

according to the manufacturer's protocol (Illumina, California, United States of America). One

ng of fungal gDNA per specimen was used as input DNA for library preparation with

NexteraXT DNA Library Prep Kit. Library quality was determined by measuring fragment size

on a 2200 TapeStation System with D5000 Screen tape (Agilent Technologies) and quantified

with Qubit 2.0 Fluorometer using Qubit dsDNA HS Assay Kit (Life Technologies, ThermoFisher

Scientific, Waltham, Massachusetts, EUA). Before sequencing NexteraXT libraries were

denatured and diluted to the required (equi)molarity for Illumina platform and two pools

were made each containing two libraries. Whole-genome sequencing was performed in two

separate runs using the MiSeq Reagent Kit v2 500-cycles Paired-End on a MiSeq Sequencer

(Illumina). The raw reads generated in this study have been submitted to the European

Nucleotide Archive under project accession number PRJEB28819.

Quality control and *de-novo* assembly. The raw sequencing reads were quality trimmed

using the CLC Genomics Workbench software version v10.1.1 using default settings except for

the following modifications: "trim using quality scores was set to 0.01". Assembly quality data

of the nine *A. fumigatus* isolates is shown in Table S1. *De-novo* assembly produced acceptable

results that surpassed a >100 coverage with >90% of reads used.

Identification of virulence related genes. A database with genes associated with virulence

was generated based on Abad *et al* review (38). In addition, these genes were validated using

the online gene database AspGD (http://www.aspgd.org/). To increase the number of genes

and update the database, we added secondary metabolite (SM) genes from Biosynthetic Gene

Clusters (BGCs) 3, 5, 6, 14, 15 and 25, that showed a differential gene expression in murine

infection studies reported by Bignell *et al* (18). A list of allergens recently revised was also

included (39). A database with a total of 244 genes was created with genes categorized into

seven big groups according to their site and the process they are involved in, as follows:

thermotolerance, resistance to immune responses, cell wall, toxins and secondary

metabolites, allergens, nutrient uptake and signaling and regulation. (Table S2) The *de-novo*

assemblies of our isolates were screened with ABRicate v0.3 software tool

(https://github.com/tseemann/abricate) to detect the presence or absence of VRGs included

in the database. The thresholds were set to >90% coverage and >90% identity to determine

the presence of a virulence gene.

TRESP genotyping. This method is based on hypervariable Tandem Repeats located within

Exons of Surface Protein coding genes (TRESP) encoding cell wall or plasma membrane

proteins (20). The allele sequence repeats of three TRESP targets is combined to assign a

specific genotype: an MP-2 antigenic galactomannan protein (MP2), a hypothetical protein

with a CFEM domain (CFEM) and a cell surface protein A (CSP). The allele repeats of these

previously described proteins were used to Create a Task Template by Allele Libraries in

SeqSphere+ software v5.1.0 (Ridom GmbH, Münster, Germany) with import option: use as

reference sequence "best matching allele", which enabled a dynamic reference sequence. The

assembled genomes were imported into SeqSphere+ and the specific target repetitive

sequences of each protein were analyzed for each UMCG isolate using the Seqsphere+ "find in

sequence" tool to identify the specific genotype.

Comparative genomics. Genome assemblies of novel isolates were aligned using blast+ v2.6

(40) and reads were mapped with bowtie2 v2.2.5 (41) to the eight reference chromosomal

genomes of Af293 (NC_007194 -NC_007201). For each contig, local alignment coordinates

were extended to their whole length using the highest bitscore with an in-house script. Mean

coverage were calculated every 5 Kb using bedtools v2.17 (42). VRGs location were

determined by local alignment and GC percentage were calculated every 100 bp with

https://github.com/DamienFr/GC-content-in-sliding-window-script. Coding sequences, their

location and frame where extracted from the reference sequence genbank files. All gathered

information was represented in a circular image using circos v0.69-3 (43).

Identification of variants. The variant analysis was performed for the four UMCG isolates

and two Dutch environmental isolates 08-19-02-30 and 08-19-02-46. Variants were called

against the reference genome *A. fumigatus* Af293 (release 37, FungiDB) using the web-based

platform EuPathDB Galaxy Site(https://eupathdb.globusgenomics.org/) (44). The raw reads

were quality controlled with FastQC (version 0.11.3, Brabraham institute), trimmed with

Sickle (Galaxy version 070113) for quality and length thresholds of 20, aligned to reference

with Bowtie2 (Align version 2.1.0 64) (45) using the "very sensitive" alignment preset option,

BAM file sorted with SAMtools and variant calling performed with Freebayes (v0.9.21-19-

gc003c1e) and SAMtools (46). The resulting variants were annotated using SnpEff to predict

the impact of a variant on the effect of a gene, by classifying them in different categories: high,

moderate, low and modifier (47). (http://snpeff.sourceforge.net/SnpEff_manual.html)High

impact variants are predicted to have a disruptive effect in the protein (e.g. frameshift

variants, inversion), moderate impact variants could change the protein effectiveness (e.g.

missense variant, in frame deletion), low impact variants are not expected to have a big

impact in the protein function (e.g. synonymous variant) and finally, modifier variants are

non-coding changes where predictions are difficult or there is no evidence of impact (e.g. exon

variant, downstream gene variant). SnpSift was used to extract the variants with moderate

and high impact by filtering the resulting variant call format (VCF) files from SnpEeff.

In addition, identification of SNPs present in VRGs of our isolates, was performed using CLC

Genomics Workbench software version v11.0.1. For this approach, trimmed reads of each

genome were mapped to a concatenated sequence consisted of 244 VRG genes described in

Table S2. SNPs were called with a minimum read coverage of 10 and with a minimum

frequency of 90%. The used virulence gene sequences to create the concatenated sequence

belonged to the reference *A. fumigatus* Af293.

Snippy v. 4.3.5 (https://github.com/tseemann/snippy) was used to determine the number of

variants between isolate P1MS and P1MR. The trimmed reads of isolate P1MR were aligned to

the assembly of P1MS for variant calling. In this case, P1MS draft genome assembly, used as

reference, is not annotated and therefore, a functional prediction of the determined variants

was not possible and only a quantitative analysis is presented.

Acknowledgements

F.P.B was supported by the Erasmus Mundus Joint Master Degree (EMJMD) scholarship of the

Erasmus+ EU-Programme awarded under the International Master in Innovative Medicine

(IMIM) programme. We thank Xuelin Han and Li Han from the Institute for Disease Control &

Prevention of the Academy of Military Medical Sciences, Beijing, China for providing strain

B5233 and K. J. Kwon-Chung for providing information about the origin of this isolate.

This work was partly supported by the INTERREG VA (202085) funded project EurHealth-

1Health, part of a Dutch-German cross-border network supported by the European

Commission, the Dutch Ministry of Health, Welfare and Sport (VWS), the Ministry of Economy,

Innovation, Digitalisation and Energy of the German Federal State of North Rhine-Westphalia

and the German Federal State of Lower Saxony.

Conflicts of interest.

J.W.A.R consults for IDbyDNA. All other authors declare no conflicts of interest. IDbyDNA did

not have any influence on interpretation of reviewed data and conclusions drawn, nor on

drafting of the manuscript and no support was obtained from them.

References

1.   Hohl TM, Feldmesser M. 2007. *Aspergillus fumigatus*: Principles of pathogenesis and

host defense. Eukaryot Cell 6:1953-1963. https://doi.org/10.1128/EC.00274-07.

2.   Taccone FS, Van den Abeele AM, Bulpa P, Misset B, Meersseman W, Cardoso T, Paiva JA,

Blasco-Navalpotro M, de Laere E, Dimopoulos G, Rello J, Vogelaers D, Blot SI, AspICU

study investigators. 2015. Epidemiology of invasive aspergillosis in critically ill

patients: clinical presentation, underlying conditions, and outcomes. Crit Care 19:7.

https://doi.org/10.1186/s13054-014-0722-7.

3.   Kale SD, Ayubi T, Chung D, Tubau-Juni N, Leber A, Dang HX, Karyala S, Hontecillas R, Lawrence CB, Cramer RA, Bassaganya-Riera J. 2017. Modulation of immune signaling and metabolism highlights host and fungal transcriptional responses in mouse models of invasive pulmonary aspergillosis. Sci Rep 7:17096. https://doi.org/10.1038/s41598-017-17000-1.

4.   van De Veerdonk FL, Gresnigt MS, Romani L, Netea MG, Latgé JP. 2017. *Aspergillus fumigatus* morphology and dynamic host interactions. Nat Rev Microbiol 15:661-674. https://doi.org/10.1038/nrmicro.2017.90.

5.   Lin SJ, Schranz J, Teutsch SM. 2001. Aspergillosis case-fatality rate: systematic review of the literature. Clin Infect Dis 32:358-366. https://doi.org/10.1086/318483.

6.   Maschmeyer G, Haas A, Cornely OA. 2007. Invasive aspergillosis: epidemiology, diagnosis and management in immunocompromised patients. Drugs 67:1567-1601. http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=ovfti&NEWS=N&AN=00003495-200767110-00004.

7.   Snelders E, Huis in 't Veld RA, Rijs AJ, Kema GH, Melchers WJ, Verweij PE. 2009. Possible environmental origin of resistance of *Aspergillus fumigatus* to medical triazoles. Appl Environ Microbiol 75:4053-4057. https://doi.org/10.1128/AEM.00231-09.

8.   Meis JF, Chowdhary A, Rhodes JL, Fisher MC, Verweij PE. 2016. Clinical implications of globally emerging azole resistance in *Aspergillus fumigatus*. Philos Trans R Soc B Biol Sci 371:20150460. https://doi.org/10.1098/rstb.2015.0460.

9.   Hagiwara D, Watanabe A, Kamei K, Goldman GH. 2016. Epidemiological and genomic landscape of azole resistance mechanisms in *Aspergillus* fungi. Front Microbiol 7:1382. https://doi.org/10.3389/fmicb.2016.01382.

10.   Askew DS. 2008. *Aspergillus fumigatus*: virulence genes in a street-smart mold. 2008. Curr Opin Microbiol 11:331-337. https://doi.org/10.1016/j.mib.2008.05.009.

11.   Fedorova ND, Khaldi N, Joardar VS, Maiti R, Amedeo P, Anderson MJ, Crabtree J, Silva JC, Badger JH, Albarraq A, Angiuoli S, Bussey H, Bowyer P, Cotty PJ, Dyer PS, Egan A, Galens K, Fraser-Liggett CM, Haas BJ, Inman JM, Kent R, Lemieux S, Malavazi I, Orvis J, Roemer T, Ronning CM, Sundaram JP, Sutton G, Turner G, Venter JC, White OR, Whitty BR, Youngman P, Wolfe KH, Goldman GH, Wortman JR, Jiang B, Denning DW, Nierman WC. 2008. Genomic islands in the pathogenic filamentous fungus *Aspergillus fumigatus*.

PLoS Genet 4:e1000046. https://doi.org/10.1371/journal.pgen.1000046.

12.   Keller NP. 2017. Heterogeneity confounds establishment of "a" model microbial strain.

MBio 8:1-4. https://doi.org/10.1128/mBio.00135-17.

13.   Mondon P, De Champs C, Donadille A, Ambroise-Thomas P, Grillot R. 1996. Variation in

virulence of *Aspergillus fumigatus* strains in a murine model of invasive pulmonary

aspergillosis. J Med Microbiol 45:186-191. https://doi.org/10.1099/00222615-45-3-

186.

14.   Amarsaikhan N, O'Dea EM, Tsoggerel A, Owegi H, Gillenwater J, Templeton SP. 2014.

Isolate-dependent growth, virulence, and cell wall composition in the human pathogen

Aspergillus fumigatus. PLoS One 9:e100430.

https://doi.org/10.1371/journal.pone.0100430.

15.   Alshareef F, Robson GD. 2014. Genetic and virulence variation in an environmental

population of the opportunistic pathogen *Aspergillus fumigatus*. Microbiology 160:742-

751. https://doi.org/10.1099/mic.0.072520-0.

16.   Knox BP, Blachowicz A, Palmer JM, Romsdahl J, Huttenlocher A, Wang CC, Keller NP,

Venkateswaran K. 2016. Characterization of *Aspergillus fumigatus* isolates from air and

surfaces of the international space station. mSphere 1:e00227-16.

https://doi.org/10.1128/mSphere.00227-16.

17.   Ballard E, Melchers WJG, Zoll J, Brown AJP, Verweij PE, Warris A. 2018. In-host

microevolution of *Aspergillus fumigatus*: A phenotypic and genotypic analysis. Fungal

Genet Biol 113:1-13. https://doi.org/10.1016/j.fgb.2018.02.003.

18.   Bignell E, Cairns TC, Throckmorton K, Nierman WC, Keller NP. 2016. Secondary

metabolite arsenal of an opportunistic pathogenic fungus. Philos Trans R Soc B Biol

371:20160023. https://doi.org/10.1098/rstb.2016.0023.

19.   O'Hanlon KA, Cairns T, Stack D, Schrettl M, Bignell EM, Kavanagh K, Miggin SM, O'Keeffe

G, Larsen TO, Doyle S. 2011. Targeted disruption of nonribosomal peptide synthetase

pes3 augments the virulence of *Aspergillus fumigatus*. Infect Immun 79:3978-3992.

https://doi.org/10.1128/IAI.00192-11

20.   Garcia-Rubio R, Gil H, Monteiro MC, Pelaez T, Mellado E. 2016. A new *Aspergillus*

fumigatus typing method based on hypervariable tandem repeats located within exons

of surface protein coding genes (TRESP). PLoS One 11:e0163869.

https://doi.org/10.1371/journal.pone.0163869.

21.   Garcia-Rubio R, Monzon S, Alcazar-Fuoli L, Cuesta I, Mellado E. 2018. Genome-wide

534 comparative analysis of *Aspergillus fumigatus* strains: The reference genome as a

535 matter of concern. Genes (Basel) 9:E363. https://doi.org/10.3390/genes9070363.

536 22. Abdolrasouli A, Rhodes J, Beale MA, Hagen F, Rogers TR, Chowdhary A, Meis JF,

537 Armstrong-James D, Fisher MC. 2015. Genomic context of Azole-resistance mutations in

538 *Aspergillus fumigatus* using whole-genome sequencing. MBio 6:1-11.

539 https://doi.org/10.1128/mBio.00536-15.

540 23. Lind AL, Wisecaver JH, Lameiras C, Wiemann P, Palmer JM, Keller NP, Rodrigues F,

541 Goldman GH, Rokas A. 2017. Drivers of genetic diversity in secondary metabolic gene

542 clusters within a fungal species. PLoS Biol 15:1-26.

543 https://doi.org/10.1371/journal.pbio.2003583.

544 24. Verweij PE, Zhang J, Debets AJM, Meis JF, van de Veerdonk FL, Schoustra SE, Zwaan BJ,

545 Melchers WJG. 2016. In-host adaptation and acquired triazole resistance in *Aspergillus*

546 *fumigatus*: a dilemma for clinical management. Lancet Infect Dis 16:e251-e260.

547 https://doi.org/10.1016/S1473-3099(16)30138-4.

548 25. Rizzetto L, Giovannini G, Bromley M, Bowyer P, Romani L, Cavalieri D. 2013. Strain

549 dependent variation of immune responses to *A. fumigatus*: definition of pathogenic

550 species. PLoS One 8:2-14. https://doi.org/10.1371/journal.pone.0056651.

551 26. Kowalski CH, Beattie SR, Fuller KK, McGurk EA, Tang YW, Hohl TM, Obar JJ, Cramer RA

552 Jr. 2016. Heterogeneity among isolates reveals that fitness in low oxygen correlates

553 with *Aspergillus fumigatus* virulence. MBio 7: e01515-16.

554 https://doi.org/10.1128/mBio.01515-16.

555 27. Hagiwara D, Takahashi H, Watanabe A, Takahashi-Nakaguchi A, Kawamoto S, Kamei K,

556 Gonoi T. 2014. Whole-genome comparison of *Aspergillus fumigatus* strains serially

557 isolated from patients with aspergillosis. J Clin Microbiol 52:4202-4209.

558 https://doi.org/10.1128/JCM.01105-14

559 28. Muszewska A, Steczkiewicz K, Stepniewska-Dziubinska M, Ginalski K. 2017. Cut-and-

560 paste transposons in fungi with diverse lifestyles. Genome Biol Evol 9:3463-3477.

561 https://doi.org/10.1093/gbe/evx261

562 29. Camps SM, van der Linden JW, Li Y, Kuijper EJ, van Dissel JT, Verweij PE, Melchers WJ.

563 2012. Rapid induction of multiple resistance mechanisms in *Aspergillus fumigatus*

564 during azole therapy: A case study and review of the literature. Antimicrob Agents

565 Chemother 56:10-16. https://doi.org/10.1128/AAC.05088-11

566 30. Talento AF, Dunne K, Murphy N, O'Connell B, Chan G, Joyce EA, Hagen F4, Meis JF, Fahy

R, Bacon L, Vandenberge E, Rogers TR. 2018. Post-influenzal transplantation triazole-
resistant aspergillosis following allogeneic stem cell transplantation. Mycoses 61: 570-
575. https://doi.org/10.1111/myc.12770

31.   Schauwvlieghe AFAD, Rijnders BJA, Philips N, Verwijs R, Vanderbeke L, Van Tienen C,
Lagrou K, Verweij PE, van de Veerdonk FL, Gommers D, Spronk P, Bergmans DCJ,
Hoedemaekers A, Andrinopoulou ER, van den Berg CHSB, Juffermans NP, Hodiamont
CJ, Vonk AG, Depuydt P, Boelens J and Wauters J. 2018. Invasive aspergillosis in
patients admitted to the intensive care unit with severe influenza: a retrospective
cohort study. Lancet Respir 2600:1-11. https://doi.org/10.1016/S2213-
2600(18)30274-1

32.   Vanhee LME, Symoens F, Jacobsen MD, Nelis HJ, Coenye T. 2009. Comparison of
multiple typing methods for *Aspergillus fumigatus*. Clin Microbiol Infect 15:643-650.
https://doi.org/10.1111/j.1469-0691.2009.02844.x

33.   Klaassen CHW, Osherov N. 2007. *Aspergillus* strain typing in the genomics era. Stud
Mycol 59:47-51. https://doi.org/10.3114/sim.2007.59.06

34.   Mccormick A, Loeffler J, Ebel F. 2010. *Aspergillus fumigatus*: Contours of an
opportunistic human pathogen. Cell Microbiol 12:1535-1543.
https://doi.org/10.1111/j.1462-5822.2010.01517.x Discussion

35.   Sugui JA, Pardo J, Chang YC, Zarember KA, Nardone G, Galvez EM, Müllbacher A, Gallin
JI, Simon MM, Kwon-Chung KJ. 2007. Gliotoxin is a virulence factor of *Aspergillus
fumigatus*: GliP deletion attenuates virulence in mice immunosuppressed with
hydrocortisone. Eukaryot Cell 6:1562-1569. https://doi.org/10.1128/EC.00141-07

36.   Jackson JC, Higgins LA, Lin X. 2009. Conidiation color mutants of *Aspergillus fumigatus*
are highly pathogenic to the heterologous insect host Galleria mellonella. PLoS One
4:e4224. https://doi.org/10.1371/journal.pone.0004224

37.   The European Committee on Antimicrobial Susceptibility Testing. Antifungal agents.
Breakpoint tables for interpretation of MICs, version 9.0, 2018.
http://www.eucast.org/clinical_breakpoints

38.   Abad A, Fernández-Molina JV, Bikandi J, Ramírez A, Margareto J, Sendino J, Hernando
FL, Pontón J, Garaizar J, Rementeria A. 2010. What makes *Aspergillus fumigatus* a
successful pathogen? Genes and molecules involved in invasive aspergillosis. Rev
Iberoam Micol 27:155-182. https://doi.org/10.1016/j.riam.2010.10.003

39.   Kjærbølling I, Vesth TC, Frisvad JC1, Nybo JL, Theobald S, Kuo A, Bowyer P, Matsuda Y,

Mondo S, Lyhne EK, Kogle ME, Clum A, Lipzen A, Salamov A, Ngan CY, Daum C, Chiniquy

J, Barry K, LaButti K, Haridas S, Simmons BA, Magnuson JK, Mortensen UH, Larsen TO,

Grigoriev IV, Baker SE, Andersen MR. 2018. Linking secondary metabolites to gene

clusters through genome sequencing of six diverse *Aspergillus* species. Proc Natl Acad

Sci 115: E753-E761. https://doi.org/10.1073/pnas.1715954115

40. Camacho C, Coulouris G, Avagyan V, Ma N, Papadopoulos J, Bealer K, Madden TL. 2009.

BLAST+: architecture and applications. BMC Bioinformatics 10:421.

https://doi.org/10.1186/1471-2105-10-421

41. Langmead B, Salzberg SL. 2012. Fast gapped-read alignment with Bowtie 2. Nat

Methods 9:357–359. https://doi.org/10.1038/nmeth.1923

42. Quinlan AR, Hall IM. 2010. BEDTools: A flexible suite of utilities for comparing genomic

features. Bioinformatics 26:841–842. https://doi.org/10.1093/bioinformatics/btq033

43. Krzywinski M, Schein J, Birol I, Connors J, Gascoyne R, Horsman D, Jones SJ, Marra MA.

2009. Circos: An information aesthetic for comparative genomics. Genome Res

19:1639-45. https://doi.org/10.1101/gr.092759.109

44. Giardine B, Riemer C, Hardison RC, Burhans R, Elnitski L, Shah P, Zhang Y, Blankenberg

D, Albert I, Taylor J, Miller W, Kent WJ, Nekrutenko A. 2005. Galaxy: a platform for

interactive large-scale genome analysis. Genome Res 15:1451-1455.

https://doi.org/10.1101/gr.4086505

45. Langmead B, Trapnell C, Pop M, Salzberg S. 2009. Ultrafast and memory-efficient

alignment of short DNA sequences to the human genome. Genome Biol 10:R25.

https://doi.org/10.1186/gb-2009-10-3-r25

46. Li H, Handsaker B, Wysoker A, Fennell T, Ruan J, Homer N, Marth G, Abecasis G, Durbin

R; 1000 Genome Project Data Processing Subgroup. 2009. The Sequence

Alignment/Map format and SAMtools. Bioinformatics 25:2078-2079.

https://doi.org/10.1093/bioinformatics/btp352

47. Cingolani P, Platts A, Wang le L, Coon M, Nguyen T, Wang L, Land SJ, Lu X, Ruden DM.

2012. A program for annotating and predicting the effects of single nucleotide

polymorphisms, SnpEff. *Fly (Austin)* 6:80-92. https://doi.org/10.4161/fly.19695

TABLE 1. Characteristics of *A. fumigatus* isolates investigated in this study.

Isolate	Country	Source	Resistance	Resistance mutation	Reference
B5233	The United States	Clinical/Experimental	Susceptible	-	(35,36)
P1MR	The Netherlands	Clinical (UMCG)	Resistant	TR34/L98H	This study
P1MS	The Netherlands	Clinical (UMCG)	Susceptible	-	This study
P2CS	The Netherlands	Clinical (UMCG)	Susceptible	-	This study
Af293 reference	Unknown	Clinical/Experimental	Susceptible	-	(22)
12-7505054	UK	Clinical	Susceptible	-	(22)
08-12-12-13	The Netherlands	Clinical	Resistant	TR34/L98H	(22)
08-19-02-30	The Netherlands	Environmental	Susceptible	-	(22)
08-19-02-46	The Netherlands	Environmental	Resistant	TR34/L98H	(22)

TABLE 2. TRESP genotype based on repetitive sequences in the exons of surface proteins CSP, MP2 and CFEM.

Sample	Allele CSP	Allele MP2	Allele CFEM	TRESP genotype
B5233	t02	m1.2	c09	t02m1.1c09
P1MR	t11	m1.1	c09	t11m1.1c09
P1MS	t03	m1.1	c08A	t03m1.1c08A
P2CS	t02	m1.1	c19	t02m1.1c19

TABLE 3. Variant analysis of the novel *A. fumigatus* isolates against reference *A. fumigatus* Af293.

Isolates	SnpEff Total number of variants	SnpSift Filter MODERATE	HIGH	SNPs present in the virulence genes (CLC Genomics Workbench)
B5233	68,352	12,085	884	1122
P1MS	48,590	10,109	752	1107

P1MR	56,362	11,718	870	1015
P2CS	56,422	12,085	884	1158

636
637
638

TABLE 4. Examples of shared and unique moderate and high impact variants in genes associated to thermotolerance, resistance to the immune response, toxins and secondary metabolites, allergens and nutrient uptake.

Gene	Conserved in all	Per strain					
		B5233	**P1MR**	**P1MS**	**P2CS**	**08-19-02-30**	**08-19-02-46**
thtA	c.3698T>C c.3458T>C	c.3277C>T	-	c.2828C>T c.2188C>T c.1010G>T	c.3277C>T c.-598G>A	c.272C>A c.2128C>T HIGH stop gained p.Arg710*	-
pmt1	-	-	c.442G>A	-	-	-	-
rodB	-	-	-	-	-	-	-
cat1	-	-	-	-	-	-	-
catA	-	-	c.1385G>A	c.1385G>A c.982G>A	-	-	-
afpmt2	-	-	-	-	-	-	-
laeA	-	-	-	c.189G>A HIGH stop codon gained p.Trp63* c.400C>T	-	-	-
gliZ	-	c.1177C>G c.425_427delCAA disruptive_inframe_ deletion p.Thr142del	c.79A>G c.99_101dupTGC c.388A>G c.405_406insACAAC AACAACA c.406_409delGCAGi nsACAA	c.388A>G	c.388A>G	c.388A>G	c.1177C>G

			c.464T>G c.612C>T c.718T>G c.1087T>C	c.464T>G c.1087T>C c.397_409delGCAGCAGCAGCAGinsACAACAACAACAAAAACAA missense_variant&disruptive_inframe_insertion	c.464T>G c.1087T>C c.99_101dupTGC disruptive_inframe_insertion c.411_412insGCAACAACA c.412A>G c.1338_1340delCTC disruptive_inframe_deletion c.1435A>G	c.464T>G c.397_409delGCAGCAGCAGCAGCAGinsACAACAACAACAAAAA missense_variant&disruptive_inframe_insertion	c.412A>G c.406_411dupGCAGCA c.415A>G c.1404A>C
msdS	c.295T>C HIGH stop_lost p.Ter99Glnext*?	c.328C>G c.208T>A		c.328C>G c.208T>A	c.328C>G c.208T>A		c.328C>G c.208T>A c.1043C>T
sidC	c.3391A>G c.9598G>A c.9727T>C c.11935T>G c.14222G>A	c.577A>G c.1569C>G c.2311G>A c.3820A>G c.7174A>G c.11326A>G	c.577A>G c.1569C>G c.2311G>A c.3820A>G c.7174A>G c.3401C>T				c.577A>G c.1569C>G c.2311G>A c.3820A>G c.7174A>G

			c.13019A>T	c.751C>G c.13019A>T	c.878C>T c.11341C>T c.11935T>G	c.1781T>C c.4771C>A c.5798T>C	c.9769C>A c.13067A>C

FIG 1. Time line of the influenza A H1N1 patient staying in the hospital and the course of infection. A total of seven *A. fumigatus* isolates were obtained from sputum samples, five susceptible (S) and two resistant (R) ones. The patient remained in the hospital for a period of 21 days until the time of death. Isolates P1MS and P1MR included in this study are indicated in the figure.

Identity
>99% >90% >85%

B5233
P1MR
P1MS
P2CS

Virulence factors
GC percentage
CDS Fwrd/Rev
Mapping

FIG 2. Graphical representation of assemblies and reads of B5233 (green), P1MR (blue), P1MS (orange) and P2CS (purple) isolates aligned to Af293 reference chromosomes (I, II, II, IV, V, VI, VII, VIII). Outer track indicates all CDS in forward (dark grey) or reverse (light grey) strand. Two different tracks are

represented per isolate: one corresponding the mapping coverage and another one corresponding to contig alignment (minimum ID 85%). The complete contigs are represented with transparency in accordance to the local alignment identity. Genes related to virulence are highlighted in yellow with its names in the innermost track. GC% is represented every 100 bp. Red lines indicate putative centromeres and the dark blue line (chromosome 4) represents ribosomal DNA.