Title:

Comparative Genomics Shows Differences in the Electron Transport and Carbon Metabolic

Pathways of *Mycobacterium africanum* relative to *Mycobacterium tuberculosis* and suggests

an adaptation to low oxygen tension

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Summary:

The geographically restricted *Mycobacterium africanum* lineages (MAF) are primarily found

in West Africa, where they account for a significant proportion of tuberculosis. Despite this

phenomenon, little is known about the co-evolution of these ancient lineages with West

Africans. MAF and *M. tuberculosis* sensu stricto lineages (MTB) differ in their clinical, in vitro

and in vivo characteristics for reasons not fully understood. Therefore, we compared

genomes of 289 MAF and 205 MTB clinical isolates from the 6 main human-adapted *M.*

tuberculosis complex lineages, for mutations in their Electron Transport Chain and Central

Carbon Metabolic pathway in order to explain these metabolic differences. Furthermore, we

determined, in silico, whether each mutation could affect the function of genes encoding

enzymes in these pathways.

We found more mutations with the potential to affect enzymes in these pathways in MAF

lineages compared to MTB lineages. We also found that similar mutations occurred in these

pathways between MAF and some MTB lineages.

Generally, our findings show further differences between MAF and MTB lineages that may

have contributed to the MAF clinical and growth phenotype and indicate potential adaptation

of MAF lineages to a distinct ecological niche, which we suggest includes areas characterized

by low oxygen tension.

Running title: The *M. africanum* respiratory chain and carbon metabolic pathway

Keywords: Tuberculosis, *Mycobacterium africanum*, *Mycobacterium tuberculosis*, genome,

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1   Introduction

The *Mycobacterium tuberculosis* complex (MTBC) consists of a group of human–adapted ecotypes- *Mycobacterium tuberculosis* sensu stricto, *Mycobacterium africanum*, *Mycobacterium canetti* and animal-adapted ecotypes (1-4). There are seven known MTBC lineages (L) associated with particular geographic regions and adapted to specific human populations. These are the five lineages that make up *M. tuberculosis* sensu stricto (lineages 1-4 and lineage 7) and the two *M. africanum* lineages (lineages 5 and 6). Africa uniquely has a representation of all seven lineages.

MTBC strains from the seven lineages differ on average by about 1200 single nucleotide polymorphisms (5), with clear distinction between MAF and MTB lineages (6-8).

MTB Lineages 2 and 4 are more widespread geographically, more pathogenic and more transmissible, while MAF Lineages are exclusively found in West Africa and less transmissible (5, 9, 10). Clinically, MTB L4 is relatively more virulent than MAF L6 as evidenced by significantly faster progression, in contacts of infectious cases, to active disease (11). MAF lineages are associated with extrapulmonary disease and MAF L6 more commonly causes disease in immunocompromised persons and those with lower Body Mass Index, implying a more opportunistic pathogen (10, 12). Furthermore, MAF L5 and L6 grow markedly slower than MTB and prefer microaerobic growth conditions (13-15). Reasons for these differences are not completely known, although ours and other's previous studies have attempted to explain some of the observations. A study documented non-synonymous SNPs or frameshift mutations in some genes associated with growth attenuation in MAF and higher mutation frequency in genes necessary for transport of sulphur, ions and lipids/fatty acids across the cell membrane (14). Another reported under-expression of, and MAF L6 specific mutations in, dormancy regulon genes, a network of genes crucial for the survival of MTB during hypoxia or anaerobiosis (15, 16).

Genes that encode proteins involved in nutrient metabolism and respiration, which are closely linked and together govern bacterial growth and survival, and those of unknown function, the conserved hypotheticals, are highest among the 4173 MTB H37Rv genes reported, emphasizing the importance of the nutrient metabolic and respiratory pathways (17).

As obligate aerobes, the mycobacteria respire and produce energy from varied nutritional or

energy sources, such as carbon sources (18, 19). These enable the bacteria even to maintain

metabolism without growth. The nutritional demands of the mycobacteria have been a topic

of interest for over 100 years. Pioneering work throughout the 20th century elegantly showed

that mycobacteria had unique nutritional requirements (20-29). Central to these findings was

that different members of the MTBC were supported by different nutritional sources and

consistent results of multiple phenotypic studies led to differentiating members of the MTBC

based on their nutritional requirements (20, 30). For instance, it was observed that MTB

showed eugonic growth on glycerol, while colonies of MAF and *M. bovis* were dysgonic,

indicating an inability to properly utilize this carbon source. MAF and *M. bovis* were only able

to show luxurious growth in the presence of sodium pyruvate (20, 30). Furthermore, MAF was

found to grow small umbilicated colonies, which on paraffin embedded thin sections revealed

extension deep into the media, rather than the surface (31).

Almost all the energy used by the bacteria is derived from the Central Carbon Metabolic

Pathway. After nutrients are metabolized through this pathway, reducing equivalents are

generated that eventually enter into the Electron Transport Chain for the generation of

significant amounts of Adenosine Triphosphate (ATP) (18, 32).

Mycobacteria generate ATP via substrate level phosphorylation and oxidative

phosphorylation, which produces more ATP through the activity of the F_1-F_0 ATP synthase in

the Electron Transport Chain. Substrate level phosphorylation alone is insufficient to support

growth of these bacteria (18).

Genome sequencing analyses show that the mycobacteria possess a branched respiratory

pathway for electron transfer from electron donors to acceptors under different growth

conditions. However, it appears that the transfer of electrons to oxygen, which seems to be

the most preferred terminal electron acceptor, occurs with little plasticity, given that only two

terminal oxidases have been found in mycobacteria, the bioenergetically more efficient *aa3*-

type cytochrome c and the less efficient cytochrome *bd*-type menaquinol oxidases (33).

During hypoxia or anoxia, mycobacterial growth is inhibited, even in the presence of alternate

terminal electron acceptors within the branched respiratory chain such as fumarate and

nitrate reductase. However, mycobacteria are still able to adapt and maintain metabolic

functions (33).

Therefore, an intact Central Carbon Metabolic pathway and Electron Transport Chain are

essential to mycobacterial growth and survival.

The importance of comparative genomics in unravelling the basis of distinct metabolic

phenotypes in the MTBC has been shown. Using molecular genomic approaches, previous

authors found that the inability of *M. bovis* to use glycerol and carbohydrates as sole carbon

sources and its requirement for pyruvate in growth media was caused by a single nucleotide

polymorphism in the *pykA* gene, encoding pyruvate kinase, resulting in a Glu220Asp amino

acid substitution and causing the disruption of sugar catabolism (34). This mutation was also

found in 3 MAF strains tested in the same analysis. Additionally, the authors showed that a

frameshift at codon 191 of the *glpK* gene of the same *M. bovis* strain led to an incomplete

coding sequence and the inability to use glycerol, although this *glpK* mutation was not present

in all *M. bovis* strains.

Therefore, we aimed to investigate the genes involved in central carbon metabolism and

respiration in the MTB and MAF lineages using a whole genome sequencing approach coupled

with comparative genomics. We find important differences between the MAF and MTB

lineages in their energy and nutrient metabolic pathways that likely contributed to the

phenotypic differences observed between these lineages.

2   Materials and Methods

2.1   Ethical Statement

The study was conducted within the framework of an intervention trial of Enhanced Case

Finding (ECF) in the Greater Banjul Area of The Gambia (Clinicaltrials.gov NCT01660646),

piloted in 2012 and conducted between 2013 and 2017. This study was carried out in

accordance with the recommendations of the Joint Gambia Government/MRC Ethics

Committee and the Institute of Tropical Medicine, Antwerp Institutional Review Board. The

protocol, including bacterial sub-studies, was approved by the Joint Gambia

Government/MRC Ethics Committee and the Institute of Tropical Medicine, Antwerp

Institutional Review Board. Nigerian isolates were collected from Southwest Nigeria within

the West African Node of Excellence for TB, AIDS and Malaria (WANETAM) with the

recommendations of the University of Ibadan and University College Hospital, Ibadan Joint

Ethical Review Committees and the Nigerian Institute of Medical Research, Institutional Board

(35). All subjects gave written informed consent in accordance with the Declaration of Helsinki

and were anonymized.

2.2   Bacterial isolates

In The Gambia, MTB L4 followed by MAF L6 are the most isolated MTBC lineages. For almost

a decade, the prevalence of all the MTBC lineages isolated in The Gambia has remained

constant at 4.3% (L1), 2.5% (L2), 0.8% (L3), 57.2% (L4), 1.0% (L5), and 35.4% (L6) (36).

Within the framework of the ECF study conducted in the Greater Banjul Area, we sequenced

280 MAF L6 (32%), 3 MAF L5 (0.3%), 19 MTB L1 (2.2%), 36 MTB L2 (4%)(Beijing), 10 MTB L3

(1%) and 534 (60.5%) MTB L4 consisting of 85 MTB L4 Cameroon (9.6%), 15 MTB L4 Ghana

(1.7%), 224 MTB L4 Haarlem (25.3%), and 211 MTB L4 LAM (23.9%). Given that only 3 MAF

L5 were isolated from The Gambia within the period of analysis, we included 6 MAF L5 from

Nigeria (Eastern West Africa), to improve the representativeness of this lineage.

Of this dataset, we analyzed the whole genome sequences of all 280 MAF L6 strains, the 3

MAF L5 isolated from The Gambia and the 6 MAF L5 from Nigeria, resulting in a total 289

MAF strains. For the MTB lineages, we analyzed a total 205 strains consisting of all 19 MTB

L1, all 10 MTB L3 and 15 MTB L4 Ghana, 35 MTB L2 and a random number of L4 Haarlem

(44), Cameroon (36) and LAM (46), while ensuring that all MTB L4 sublineages isolated were

represented and isolates from each year of isolation, 2012 to 2014, were included.

2.3   DNA Extraction

Genomic DNA was extracted from loopfuls of pure MTBC colonies grown on Lowenstein-

Jensen media (37) using the Maxwell 16 DNA Purification Kit (Promega). DNA from Nigerian

strains was extracted using the Cetyl trimethylammonium bromide (CTAB) method (38).

2.4 Whole-genome sequencing

Sequencing of MTBC isolates was performed at MicrobesNG, Birmingham; GenoScreen, France; FISABIO, Valencia or the Beijing Genome Institute (BGI), Beijing. Sequencing reads were generated on a HiSeq or Miseq platform (Illumina). Quality control was performed for each provider to ensure adequate sequencing depth (>30X) and genome coverage (>95% of the H37Rv reference strain). Raw Illumina reads have been deposited in the ENA with accession <to be undertaken on acceptance>.

2.5 Bioinformatics Analysis

2.5.1 Mapping and Variant calling

We used Snippy version 3.1 for the analysis of genomes. Briefly, paired-end raw reads of each sample were mapped to the *M. tuberculosis* H37Rv reference genome (GenBank accession number: NC_000962.3) using BWA-MEM 0.7.12 (39). Mapped reads were converted to the SAM/BAM format and sorted using Samtools 1.3 1 (40). Variant calling was done using Freebayes 0.9.20 (41). Variants were called only if ≥10 reads covered variant positions and ≥90% of those reads differed from the reference. Genes were annotated with SnpEff 4.1 (42). Samples were assigned to MTBC lineages based on the classification of Coll and colleagues (43) using the VCF output of snippy and the PhyResSE SNP list (44).

2.5.2 Phylogenetic analysis

Using the Snippy output folders of all isolates and custom python scripts, a SNP alignment and a count of all excluded invariant sites were created. A maximum-likelihood (ML) phylogeny was inferred using RAxML version 8.2.9 (45) executing a thousand rapid bootstrap inferences under the general time-reversible (GTR) model, with ascertainment bias correction using the Stamatakis reconstituted DNA approach (46, 47). The resulting tree was exported to interactive Tree of Life (iTOL) for visualization (48).

2.5.3 Protein Predictions

The effect of amino acid substitutions were predicted using PROVEAN software tools at default settings (PROVEAN protein) (49-51). The PROVEAN NCBI non redundant 2012

database is a newer and larger sequence database than SIFT databases (52) but comparable
to SIFT in prediction accuracy. A PROVEAN score of $\leq$ -2.5 implies that the amino acid
substitution could impact negatively on protein function.

3   Results and Discussion

Given that generalists and specialists differ in the vastness of their ecological niches (53), and
thus carbon sources, we compared the specialist MAF lineages (289 strains) to the generalist
MTB lineages (205 strains) for genomic differences in their Electron Transport and Carbon
metabolic pathways. These pathways are intrinsically linked and are central to deriving energy
(ATP) from carbon sources (Figure 1).

Understanding differences in metabolism and respiration between the MTBC lineages is also
pertinent for tackling TB as mycobacterial central metabolism and respiration have re-
emerged as potential targets for TB chemotherapy. The new TB drug, Bedaquiline (TMC207)
and the drug candidate, Telacebec (Q203), both target the respiratory chain (54-56) and even
the repurposed drug Clofazimine, and another new drug, Delamanid, reportedly interfere
with redox cycling and cellular respiration by generating Reactive Intermediates (57-61). Thus
respiratory inhibitors may offer the next generation of core drugs against mycobacterial
diseases (62) and there is a pressing need to understand the differences in these processes
between the different lineages of the MTBC.

It is now increasingly apparent that genetic and metabolic differences between the MTBC
human-adapted lineages have the potential to affect transmission, diagnostics and treatment
(5, 63-68). Moreover, niche adaptation is influenced by the metabolic requirements of an
organism, a consequence of evolution. However, the extent of such genetic changes and their
potential metabolic effects has not been well explored. In this study, we found a large number
of mutations with the potential to negatively affect gene function (hereafter referred to as
harmful mutations), particularly in MAF lineages (Figure 2 and Figure 4). However, we also
observed that similarities in these pathways occurred between some MTB and MAF lineages
potentially due to convergent evolution.

3.1 Mutations in genes encoding Central Carbon Metabolic pathway enzymes.

We examined mutations in all genes in the glycolytic pathway, the Tricarboxylic Acid cycle and the Methylcitrate Cycle. Genes and enzymes in these pathways contribute directly to the growth and virulence of the MTBC, by generating products that feed directly into the Electron Transport Chain (69). Therefore, mutations, with the potential to affect proper function of these genes and their gene products, would have obvious consequences downstream, for energy generation, survival and ultimately, the virulence of members of the MTBC.

3.1.1 The Glycolytic Pathway

In MAF lineages, all genes leading to the breakdown of sugars to 2-phosphoglycerate at the seventh step (Figure 2 and Figure 3), were generally conserved. However, at the critical stage of pyruvate metabolism, mutations with the potential to affect the normal function of Enolase (*eno*), Pyruvate kinase (*pykA*) and Pyruvate carboxylase (*pca*) were detected. Enolase is responsible for the penultimate step of glycolysis, where 2-phosphoglycerate is converted to Phosphoenolpyruvate. Pyruvate kinase modulates the irreversible reaction converting Phosphoenolpyruvate to Pyruvate while Pyruvate carboxylase drives the conversion of Pyruvate to Oxaloacetate. Of these three genes, it had previously been shown, in *M. bovis* and 3 MAF strains, that the mutation in *pykA* rendered the critical enzyme pyruvate kinase inactive, resulting in a metabolic block at the level of pyruvate biosynthesis (34). We also confirm this mutation in the MAF strains we analyzed in our study (Figure 2). However, to the best of our knowledge this is the first report on lineage-specific mutations with potentially harmful effects in the essential gene *eno*, in MAF L6. *eno* is found on the surface of many pathogenic bacteria and beyond its primary role in glycolysis, aids in tissue remodeling and invasion of host cells (70). This gene was recently reported as a novel target for the 2-aminothiazoles of the aminothiazole (AT) series, that exerted its effect by inhibiting *eno* in MTB H37Rv (L4 strain). Therefore, the potentially harmful mutations we detected in *eno* may affect energy metabolism and potentially contributes to the metabolic block at the level of pyruvate biosynthesis, further reducing the fitness of L6.

Unlike the MAF lineages, MTB lineages, notably, did not have any potentially harmful mutations in *eno* and *pykA* (Figure 2 and Figure 3), implying a general ability to complete glycolysis. However, mutations were detected in Glucose-6-phosphate isomerase (*pgi*) in L4

LAM and in Phosphofructokinase B (*pfkB*) in MTB L3, at the second and third steps of glycolysis

respectively, where Glucose-6-phosphate is converted to Fructose-6-phosphate and

subsequently to Fructose-1-6-biphosphate (Figure 3). *pgi* is essential for the in vitro growth

of *M. tuberculosis*, and *M. smegmatis pgi* mutants are glucose auxotrophs. Moreover, an

additional role for *pgi* in cell wall biosynthesis was reported (37, 71-73). Therefore, *pgi* is

important and the effect of the predicted harmful mutations we detected in *pgi* in L4 LAM

should be investigated. However, the defect in *pfkB* in MTB L3 is unlikely to affect glycolysis

given that Phosphofructokinase activity has so far only been associated with *pfkA,* where a

pfkA deletion mutant was neither able to grow on glucose in vitro nor to have any detectable

Phosphofructokinase activity; the mutant could not be rescued by expressing *pfkB* (32, 74).

Interestingly, additional genes, Pyruvate carboxylase (*pca*) in MAF L5 and MTB L3 and

Phosphoenolpyruvate carboxylase (*pckA*) in MTB L4 Cameroon, were mutated at the level of

pyruvate metabolism (Figure 3). *pca* and *pckA* secrete enzymes that contribute significantly

to the control of metabolic flux to glycolysis, gluconeogenesis and anaplerosis. These genes

carry out functions related to cholesterol detoxification and lipogenesis during intracellular

survival and *pckA* was shown to be essential for virulence in *M. bovis* (75, 76).

3.1.2   The Tricarboxylic Acid Cycle

At the final stage of glycolysis, pyruvate is generated and converted to Acetyl Coenzyme A

(Figure 1 and Figure 3), that is fed into the critical Tricarboxylic Acid Cycle (TCA), for the release

of reducing equivalents into the Electron Transport Chain. Therefore, the ability to complete

this cycle, whether by progression through all stages of the cycle or via the crucial glyoxylate

by-pass, is essential for the generation of ATP.

Overall, genes encoding enzymes of the TCA cycle were largely conserved in MAF and MTB

lineages, however, in MTB L1-L3, L4 Haarlem, L4 Ghana and MAF lineages, we found

potentially harmful mutations in Isocitrate lyase (*icl2a*) and Isocitrate dehydrogenase (*icd2*).

Emphasizing the importance of the glyoxylate shunt, *M. tuberculosis* strains lacking both ICLs

are unable to grow on fatty acids in vitro, establish and maintain a chronic infection in mice

and were said to be the most severely attenuated strains (32, 77). In our analysis, we found

the frameshift mutation previously found in H37Rv, an L4 strain (78), which we, for the first

time to the best of our knowledge, also report in MTB L4 Haarlem and Ghana, MTB L1, L2, L3,

MAF L5 and L6, yet, interestingly, not in MTB L4 Cameroon and LAM (Figure 2, Figure 3 and
Table 1).

As stated earlier, in section 3.1.1, Pyruvate carboxylase (*pca*), that converts pyruvate to
oxaloacetate towards the final stage of glycolysis, was mutated in L5, however, at the last
step of the TCA cycle, malate dehydrogenase (*mdh*) that converts malate to oxaloacetate, was
also mutated (Figure 2, Figure 3 and Table 1), implying that both routes for the production of
oxaloacetate in MAF L5 have mutated genes. Given that oxaloacetate feeds not only into the
TCA cycle but also into the methylcitrate cycle, impaired function of *mdh* may affect energy
metabolism in MAF L5.

Overall, with major blocks in Central Carbon Metabolism in MAF lineages, the number of
reducing equivalents produced via the central carbon metabolic pathway for electron
transport may be lower. MTB lineages largely had a conserved glycolytic pathway and TCA
cycle, however, different MTB lineages have previously been shown to have different growth
rates and patterns (79-81). Notably, the growth rate of MTB L3 is reportedly lower compared
to other MTB lineages (79, 80). Therefore, in MTB lineages/sublineages where we found more
potentially harmful mutations, particularly in MTB L3, further investigations on the effect of
these mutations on energy metabolism need to be carried out as slower growth of these
lineages may be directly linked to impaired energy metabolism.

3.2   Mutations in genes encoding Electron Transport Chain enzymes
As reducing equivalents, like NADH, from the Central Carbon Metabolic Pathway deliver
electrons into the Electron Transport Chain, NADH dehydrogenases serve as the gateway of
the Electron Transport Chain in the MTBC and electrons are transferred from NADH oxidation
to quinone reduction and ultimately to ATP synthase for ATP production in greater quantities
(Figure 1). Therefore, defects in the Electron Transport Chain are bound to affect the net yield
of ATP generated.

Relative to MTB lineages, MAF lineages had multiple mutations predicted to affect the normal
function of genes encoding key enzymes of the Electron Transport Chain (Figure 4 and Figure
5).

Potentially harmful mutations were detected in *ndhA*, *pruB*, *qcrC*, *ctaB*, *frdA*, *atpHG*, *sdhA* and *ald* (Figure 4, Figure 5, Table 2 and Supplementary File S3). Interestingly, for some MTB lineages, mutations predicted to affect gene function were also found in *ndhA*, *Rv0249c*, *frdB*, *atpD*, and *nuoDHF* (Figure 4, Figure 5, Table 2 and Supplementary File S4).

3.2.1 NADH dehydrogenases

To receive NADH from central metabolism into the Electron Transport Chain, *M. tuberculosis* possesses two NADH dehydrogenases, NDH-1 and -2. NDH-1 has 14 subunits (*nuo*A-N) while two copies of NDH-2 exist in *M. tuberculosis*: *ndh* and *ndhA*. Between the two NADH dehydrogenases, an essential role of *ndh* for the growth of *M. tuberculosis* was reported previously and a function of *ndh* in recycling NADH and maintaining an energized membrane was documented (33, 82). Even though *ndhA* was previously reported to be dispensable for growth, it was recently shown that both *ndh* and *ndhA* differentially control oxygen consumption (82). In fact, *ndh* was also shown to be dispensable for growth of *M. tuberculosis* but deletion of both *ndh* and *ndhA* prevented growth altogether in standard media and resulted in attenuated growth in mice (82, 83). We found a potentially harmful mutation in *ndhA* in all MAF L5. Given the adaptation of MAF lineages towards a microaerophilic lifestyle, *ndhA* may be redundant in MAF L5 and defects in this gene may have coincided with the adaptation to a microaerophilic lifestyle (84).

No potentially harmful mutations were detected in the essential *ndh* in any analyzed genome. This implies that the function of *ndh* is likely conserved across the MTBC lineages.

3.2.2 Succinate dehydrogenases

Succinate dehydrogenase 1 (*Rv0247c-Rv0249c*, SDH-1) functions during aerobic respiration when oxygen and nutrients are abundant, while SDH-2 (*sdhABCD*) functions during hypoxia/anaerobiosis, when nutrients are limited (33, 85, 86) (Figure 5). Succinate dehydrogenases are a direct link between the TCA cycle and electron transport and typically reduce succinate to fumarate (87).

The only potentially harmful mutations we detected in the Succinate dehydrogenases were in *sdhA* of SDH2 in a clade of MAF L6 and in SDH1, *Rv0249c*, in a clade of MTB L1 (Figure 4). Given the essential role of SDH1 for growth and survival, where the deletion of SDH1 was

shown to impair the rate of respiration through the Electron Transport Chain and to reduce

cell viability (85), future studies should determine if electron transport and aerobic respiration

are affected in certain MTB L1 strains, as recent studies report slower growth and a lower

odds to grow in culture for MTB L1 and the MAF lineages (67, 79).

3.2.3 Cytochrome bc1-aa3 complexes and Cytochrome bd oxidase

Electrons from Succinate dehydrogenases, move into the quinone pool, ready for transfer to

the third and fourth complexes Cytochrome bc1-aa3 (*qcrABC* and *ctaBCDE*), during aerobic

respiration, when oxygen is abundant, and to the less efficient cytochrome bd oxidase

(*cydABCD*) when oxygen is limited (Figure 5).

The bc1-aa3 complexes are the major respiratory route in mycobacteria under standard

aerobic conditions and are essential for growth where they play a key role in oxidative

phosphorylation and electron transport that yields more ATP (33, 88), yet in our analysis, we

detected potentially harmful mutations in *qcrC* and *ctaB* of the bc1-aa3 complexes in MAF

lineages and intact gene complexes in MTB lineages (Figure 4 and Figure 5). To the best of our

knowledge, this is the first work demonstrating that the critical bc1-aa3 complex is mutated

in MAF lineages. This is perhaps crucial to understanding the difference in energy metabolism,

particularly oxidative phosphorylation, between the MTB and MAF lineages, especially

because MAF lineages preferentially grow microaerobically (15, 84, 89-91) and significantly

under-express the dormancy regulon required for adaptation to oxygen limitation (15).

Notably, the Imidazopyridine amide in Phase 2 clinical trials, Telacebec (Q203), inhibits *qcrB*

of Cytochrome bc1, further emphasizing the importance of this complex for the survival of

MTB. Therefore, the predicted harmful mutations we found in *qcrC*, the heme of the

cytochrome bc1-complex, in MAF L6 (Figure 4 and Figure 5) likely impairs aerobic respiration

and growth in this lineage severely, given that *qcrC*, like *qcrB*, is essential for survival (86).

Similarly, *M. smegmatis* strains that had mutations in the bc1-aa3 complex were significantly

growth impaired, confirming the essentiality of the bc1-aa3 respiratory pathway for

mycobacterial growth. Recently, it was also confirmed that *M. tuberculosis* requires the bc1-

aa3 complex to attain optimal growth rates and high titres in mice (83).

Taken together, our analysis provides further support for the view that MAF is adapted to a

distinct niche, less dependent on aerobic respiration and more adapted to a microaerobic

lifestyle (15). Reasons for this potential niche adaptation and the benefit to the pathogen in
its interaction with its host should be investigated further.

Ultimately, with an impaired bc1-aa3 complex, ATP yield will be reduced overall. This is likely
the case in MAF lineages. Therefore, we postulate that ATP yield through oxidative
phosphorylation in the MAF lineages is lower compared to the MTB lineages.

3.2.4   ATP Synthase

The F_1-F_0 ATP synthase itself, the target for Bedaquiline (54, 92), is rather conserved in the
different lineages. However, in MAF L5 and MTB L2 we detected potentially harmful
mutations in *atp* genes (Table 2). The F_1-F_0 ATP synthase operon is encoded by *atpIBEFHAGDC*
and is required for survival as all genes in the operon are essential (71, 93). A defective ATP
synthase may coincide with the microaerophilic lifestyle of MAF. However, for MTB L2, it is
not clear what the advantage is for acquiring mutations in genes encoding ATP synthase.
Interestingly though, compared to MTB L4, MTB L2 was found to have a lower growth rate
(79).

3.2.5   Fumarate reductase

The branched respiratory chain of *the* MTBC permits anaerobic survival. During hypoxic or
anaerobic conditions when oxygen is limited, Fumarate reductase (FRD, *frdABCD*) and Nitrate
reductase (NAR, *narGHJI*) can serve as terminal electron acceptors to maintain the membrane
potential. Therefore, these enzymes are critical. Moreover, further studies of *sdh* suggested
that FRD could partially compensate for a lack of SDH activity (94). Defects in any of the
subunits of *frd* could limit the overall function of the FRD complex. Notably, the attenuated
strain H37Ra grown under low-oxygen conditions showed a lag in gene expression of *frdA* and
frdB (95). The mutations we found in *frdA* and *frdB* in MAF L5 may be related to the adaptation
of this lineage to a hypoxic or microaerophilic lifestyle. Therefore, the effect of mutations on
gene function in MAF L5 and MTB L4 sublineage, Haarlem, should be determined
experimentally.

3.2.6   Alanine dehydrogenase and Proline dehydrogenase

Other key dehydrogenases that contribute to redox balance of NADH for initiation of electron
transport were also mutated in the MAF lineages (Figure 4 and Figure 5), indicating potential

redox imbalance in MAF lineages with the likelihood to impede electron transport. From our

analysis, all MAF lineages had potentially harmful mutations in Alanine dehydrogenase (*ald*)

and all MAF L5 had potentially harmful mutations in Proline dehydrogenase (*pruB*). Proline

dehydrogenase is associated with the adaptation to hypoxia, slow growth rate and is essential

for growth (71, 93, 96, 97). Alanine dehydrogenase has been shown to play a role in redox

balance during low oxygen conditions and the downshift of *M. tuberculosis* to the state of

nonreplicating persistence. *ald* mutants had altered NADH/NAD ratios and significant delays

in growth resumption after reaeration. Additionally, induction of *ald* rescued the bc1-aa3

complex mutant while its disruption made the growth defect of the mutant worse (97, 98).

Given that *ald* and the bc1-aa3 complex were mutated in all MAF in our analysis, MAF lineages

are most probably natural mutants of *ald* and the bc1-aa3 complex. It is possible that these

mutations in the MAF lineages contribute significantly to their slower growth compared to

MTB due to impaired energy production. Moreover, these polymorphisms further support

the adaptation of MAF to a hypoxic niche.

3.3   Additional Mutations and similarities between MTBC lineages in the Central

Carbon Metabolic Pathway and Electron Transport Chain

We detected several other mutations in genes of the Central Carbon Metabolic pathway and

Electron Transport Chain that could potentially impact on enzyme function (Supplementary

File S5). However, their PROVEAN scores were above the cut-off for harmful mutations and

thus any impact may be slight or only due to neutral evolution. *cydB* and *narG*, highly

important genes in the Electron Transport Chain also had several mutations, but none

predicted to be potentially harmful (Supplementary File S5).

For multiple genes in the Electron Transport Chain and the Central Carbon Metabolic

pathway, we either found the same mutation occurring in the same gene or different

mutations occurring in the same gene in the different MTBC lineages. These mutations may

confer a selective advantage and/or contribute to adaptation (Supplementary File S5).

Of these, only those mutations detected in *pca* in MTB L3 and MAF L5, those detected in *icl2a*

and those found in *ndhA* are potentially harmful.

Overall, more similarities occurred between MTB L1, MTB L3 and the MAF lineages. This is interesting as the MAF lineages, MTB L1 and L3 lineages all reportedly grow relatively slower than the MTB L2 and L4 lineages (14, 67, 79, 80, 99). We postulate that the slower growth rate of these lineages and the similarities we observe in their metabolic pathways, may be linked to their similar migration and dispersal patterns in Africa and Eurasia (100), where L2 and L4 have become widely dispersed, while L5, L6, and L7, had more geographically restricted expansion, adapting to more specific hosts. This may have influenced niche adaptation, where L2 and L4, in line with increased dispersion and range expansion, also increased their replicative/growth capacity and ability to transmit, while the more host restricted lineages maintained a lower replicative/growth potential in line with expansion in situ.

3.4   Limitations

Limitations of our analysis include the small sample size of MAF L5 analyzed. In the Gambia and other countries in Western West Africa, the prevalence of L5 is significantly lower than L6 (36). In our isolation of the 289 MAF strains included in this study, only 3 from The Gambia were MAF L5. However, to ensure that the mutations we detected in L5 from The Gambia were more representative of the MAF L5 lineage, we included L5 from Nigeria (Eastern West Africa), where the prevalence of L5 is high and L6 is significantly less likely to be isolated (101). Another limitation is that we did not experimentally confirm any of our in silico phenotype predictions.

4   Conclusion

In this comparative analysis, we describe genomic differences between the MTB and MAF lineages in genes encoding enzymes of the Electron Transport Chain and the Central Carbon Metabolic pathway, which may explain the differences in the clinical- and in vitro phenotype described for the MAF and MTB lineages. In vitro, MAF lineages grow significantly slower than MTB lineages and MAF L6 is, clinically, less virulent than MTB L4, as evidenced by significantly lower progression of MAF L6 infected individuals to active TB disease (11). Again, in vitro, MAF

lineages show microaerobic growth and clinically, are associated with extrapulmonary

disease, implying a preference for regions with low oxygen (10, 15). Furthermore, MAF L6

more commonly causes disease in immunocompromised persons, implying a more

opportunistic pathogen (12, 13). Generally, it appears from our analysis that compared to

MTB lineages, MAF lineages had the most mutated Central Carbon Metabolic and Electron

Transport Pathways, with mutations occurring in critical components of each pathway. The

combined effect of a defective Carbon Metabolic Pathway and Electron Transport Chain in

MAF lineages, likely contributes to the reduced fitness of the MAF lineages. We speculate that

our findings may contribute to 1 - the slower growth of MAF lineages, 2 - relative attenuation

of the MAF L6 lineage compared to MTB lineages and 3 - host specificity to West Africans.

It is intriguing that in the different MTBC lineages multiple harmful mutations occurred in the

same gene. These similarities largely found in MTB lineages 1, 2, 3 and the MAF lineages,

indicates there may be a selective advantage for this. Interestingly, these lineages, compared

to MTB L4 strains, have been associated with slower growth and cytokine induction patterns

suggestive of immune evasion (8, 14, 67, 79-81, 99, 102, 103).

If the potentially harmful mutations we report on in this analysis affect energy metabolism in

the different MTBC lineages, fitness will differ and ultimately the infection and transmission

potential of these lineages. Therefore, our findings are not only relevant for TB product

development but also for transmission studies and interventions. The literature already

provides credence to and evidence for our hypothesis (9, 81, 104, 105).

4.1 Future Proposed Investigations

4.1.1 Functional Studies

Significant genomic differences between MTB and MAF lineages presented in this analysis

warrant further studies in order to properly characterize the regulatory network of MAF.

Recently, the regulatory network of H37Rv (MTB L4) was characterized yet what pertains to

MAF lineages is not clearly defined, even though it has been shown that master regulators

like *PhoPR* and *Rv0081* as well as the DosR regulon are underexpressed and/or mutated in

MAF (15, 106-108). It is possible that the PhoPR system controls other components of the

respiratory and central metabolic pathway although this is yet to be shown. We suspect that

the potentially harmful mutations we report on will produce different growth phenotypes

(Table 3). Therefore, we propose functional genomic assays followed subsequently by in vitro

and in vivo characterization of mutants to confirm the contribution to growth and survival

that each gene makes. Such studies on the MAF lineages are limited, but not for MTB,

particularly the generalist MTB L4. Recent studies provide data describing functional

consequences of synonymous SNPs (109-111), i.e. caution needs to be taken in inferring the

relative significance or impact of observed genomic mutations from sequencing data alone.

Therefore, further studies to correlate genotype with phenotype are necessary and our

findings serve as a prelude to such experimental studies.

4.1.2 Investigate Bioenergetics in MAF lineages

It is highly plausible that adaptation of MAF lineages to growth under low oxygen

(microaerobic) conditions could be a strategy to escape the harmful effects of ROS

generated as electrons leak from a defective respiratory chain and react with built up

oxygen (112). Moreover, reduced aerobic respiration or oxygen consumption in the MAF

lineages could potentially affect the sensitivity of rapid diagnostics like the automated MGIT

960 system, that depends on oxygen consumption to detect growth (113). Interestingly, the

percentage of MAF in certain parts of West and Central Africa was reported to have

suddenly and sharply declined over the last decade (4, 114-117), which could possibly be

due to the introduction and use of new diagnostics like the MGIT 960 system. Of note, we

recently detected, in a retrospective analysis based on genotyping, that 84% of strains that

did not grow in the MGIT 960 system were MAF L6 (Ofori-Anyinam *et al.*, unpublished).

Since growth and survival, driven by nutrient and energy metabolism, sustain pathogen

transmission, and given that the success of drugs and phenotypic diagnostics rely on

metabolic properties of the bacteria, understanding metabolism in these bacteria is

essential. We hypothesize that MAF lineages generate less ATP and are more exposed to

ROS than MTB lineages (Table 3). Therefore, we propose studies to investigate energy

metabolism in MAF lineages relative to the MTB lineages, including whether MAF lineages

are more exposed to ROS during growth.

4.1.3 Host Genetics

One common feature of host specificity is genomic decay. Genomes of specialists usually

show signs of genome decay evidenced by gene deletions or gene inactivation via point

mutations. A driving force for the accumulation of mutations in some key electron transport

and carbon metabolism genes in the specialist/host-restricted MAF lineages could indicate

adaptation of the MAF lineages to a specific host, West Africans, or a niche within the host,

due to altered or loss of function of these genes. This potential niche adaptation could be

driven by a precise feature of the host environment that favors the association between MAF

lineages and West Africans such as has been described for some diseases (118). Some findings

have been made, including MAF lineage-specific mutations in genes and pseudogenes

involved in vitamin B12 and vitamin B3 metabolism, important cofactor biosynthetic

pathways for many cellular functions. Unlike MAF though, MTB is fully capable of synthesizing

vitamin B12. Therefore, it has been suggested that the mutations in the vitamin B12 pathway

of the MAF lineages may affect their host range to West Africans. According to a study in the

United States, black persons reportedly have higher levels of vitamin B12 relative to other

ethnicities (8, 10, 119-121). Future studies should investigate the molecular mechanisms

underlying host specificity.

535   5   Supplementary Information

536   Supplementary File S1

537   Supplementary File S2

538   Supplementary File S3

539   Supplementary File S4

540   Supplementary File S5

542   6   Author Contributions

543   BO, FG, BdJ and CM designed the study. BO, FG, AR, TJ, BS and CM undertook analyses. BO,

544   BdJ, FG and CM wrote the manuscript. All authors contributed discussion and reviewed the

545   final manuscript.

7 Competing financial interests

The authors declare no competing financial interests.

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References

1.	Brosch R, Gordon SV, Marmiesse M, Brodin P, Buchrieser C, Eiglmeier K, et al. A new evolutionary scenario for the *Mycobacterium tuberculosis* complex. Proceedings of the national academy of Sciences. 2002;99(6):3684-9.

2.	Comas I, Coscolla M, Luo T, Borrell S, Holt KE, Kato-Maeda M, et al. Out-of-Africa migration and Neolithic coexpansion of *Mycobacterium tuberculosis* with modern humans. Nature genetics. 2013;45(10):1176-82.

3.	Gagneux S, DeRiemer K, Van T, Kato-Maeda M, de Jong BC, Narayanan S, et al. Variable host-pathogen compatibility in *Mycobacterium tuberculosis*. Proceedings of the National Academy of Sciences of the United States of America. 2006;103(8):2869-73.

4.	Michel KG, Guislaine R, Serge PD, Sanou A, Antoinette K, Adama O, et al. Spoligotyping of Mycobacterium africanum, Burkina Faso. Emerging Infectious Disease journal. 2012;18(1):117.

5.	Coscolla M, Gagneux S. Consequences of genomic diversity in *Mycobacterium tuberculosis*. Semin Immunol. 2014;26.

6.   Bentley SD, Comas I, Bryant JM, Walker D, Smith NH, Harris SR. The Genome of
Mycobacterium Africanum West African 2 Reveals a Lineage-Specific Locus and Genome Erosion
Common to the M. tuberculosis Complex. PLoS Negl Trop Dis. 2012;6.
7.   Mostowy S, Onipede A, Gagneux S, Niemann S, Kremer K, Desmond EP, et al. Genomic
analysis distinguishes *Mycobacterium africanum*. Journal of clinical microbiology. 2004;42(8):3594-9.
8.   Winglee K, Manson McGuire A, Maiga M, Abeel T, Shea T, Desjardins CA, et al. Whole
Genome Sequencing of *Mycobacterium africanum* Strains from Mali Provides Insights into the
Mechanisms of Geographic Restriction. PLoS neglected tropical diseases. 2016;10(1):e0004332.
9.   Asare P, Asante-Poku A, Prah DA, Borrell S, Osei-Wusu S, Otchere ID, et al. Reduced
transmission of *Mycobacterium africanum* compared to *Mycobacterium tuberculosis* in urban West
Africa. International Journal of Infectious Diseases. 2018;73:30-42.
10.   Sharma A, Bloss E, Heilig CM, Click ES. Tuberculosis Caused by *Mycobacterium africanum*,
United States, 2004-2013. Emerging infectious diseases. 2016;22(3):396-403.
11.   De Jong BC, Hill PC, Aiken A, Awine T, Antonio M, Adetifa IM. Progression to Active
Tuberculosis, but Not Transmission, Varies by *Mycobacterium tuberculosis* Lineage in The Gambia. J
Infect Dis. 2008;198.
12.   de Jong BC, Hill PC, Brookes RH, Otu JK, Peterson KL, Small PM, et al. *Mycobacterium
africanum*: a new opportunistic pathogen in HIV infection? Aids. 2005;19(15):1714-5.
13.   de Jong BC, Adetifa I, Walther B, Hill PC, Antonio M, Ota M, et al. Differences between
tuberculosis cases infected with *Mycobacterium africanum*, West African type 2, relative to Euro-
American *Mycobacterium tuberculosis*: an update. FEMS immunology and medical microbiology.
2010;58(1):102-5.
14.   Gehre F, Otu J, DeRiemer K, de Sessions PF, Hibberd ML, Mulders W, et al. Deciphering the
growth behaviour of *Mycobacterium africanum*. PLoS neglected tropical diseases. 2013;7(5):e2220.
15.   Ofori-Anyinam B, Dolganov G, Van T, Davis JL, Walter ND, Garcia BJ, et al. Significant under
expression of the DosR regulon in *M. tuberculosis* complex lineage 6 in sputum. Tuberculosis.
2017;104:58-64.
16.   Leistikow RL, Morton RA, Bartek IL, Frimpong I, Wagner K, Voskuil MI. The *Mycobacterium
tuberculosis* DosR regulon assists in metabolic homeostasis and enables rapid recovery from
nonrespiring dormancy. Journal of bacteriology. 2010;192(6):1662-70.
17.   Lew JM, Kapopoulou A, Jones LM, Cole ST. TubercuList--10 years after. Tuberculosis
(Edinburgh, Scotland). 2011;91(1):1-7.
18.   Cook GM, Berney M, Gebhard S, Heinemann M, Cox RA, Danilchanka O, et al. Physiology of
mycobacteria. Advances in microbial physiology. 2009;55:81-319.
19.   Warner DF. *Mycobacterium tuberculosis* metabolism. Cold Spring Harbor perspectives in
medicine.5(4):a021121.
20.   David HL, Jahan MT, Jumin A, Grandry J, Lehman EH. Numerical taxonomy analysis of
Mycobacterium africanum. Int J Syst Bacteriol. 1978;28.
21.   Dubos RJ. The effect of lipids and serum albumin on bacterial growth. The Journal of
experimental medicine. 1947;85(1):9.
22.   Edson N. The intermediary metabolism of the mycobacteria. Bacteriological reviews.
1951;15(3):147.
23.   Goldman DS. ENZYME SYSTEMS IN THE MYCOBACTERIA XV. Initial Steps in the Metabolism of
Glycerol. Journal of bacteriology. 1963;86(1):30-7.
24.   Hunter G. The oxidation of glycerol by mycobacteria. Biochemical Journal. 1953;55(2):320.
25.   Merrill MH. Studies on Carbon Metabolism of Organisms of the Genus Mycobacterium: II.
Utilization of Organic Compounds in a Synthetic Medium. Journal of bacteriology. 1931;21(5):361.
26.   Pattyn SR, Portaels F, Spanoghe L, Magos J. Further studies on African strains of
Mycobacterium tuberculosis: comparison with *M. bovis* and *M.microti*. Annales des Societes belges
de medecine tropicale, de parasitologie, et de mycologie. 1970;50.

27. Tepper BS. Differences in the utilization of glycerol and glucose by *Mycobacterium phlei*.
Journal of bacteriology. 1968;95(5):1713-7.
28. Youmans AS, Youmans GP. STUDIES ON THE METABOLISM OF MYCOBACTERIUM
TUBERCULOSIS IV.: The Effect of Fatty Acids on the Growth of *M. tuberculosis* var. hominis1. Journal
of bacteriology. 1954;67(6):731.
29. Youmans GP, Youmans AS. STUDIES ON THE METABOLISM OF MYCOBACTERIUM
TUBERCULOSIS I.: The Effect of Carbohydrates and Alcohols on the Growth of *Mycobacterium*
tuberculosis var. hominis1. Journal of bacteriology. 1953;65(1):92.
30. Pattyn SR, Portaels F, Spanoghe L, Magos J. Further studies on African strains of
Mycobacterium tuberculosis: comparison with *M. bovis* and *M. microti*. Annales des Societes belges
de medecine tropicale, de parasitologie, et de mycologie. 1970;50(2):211-27.
31. de Medeiros D, Castets M, Diop S. [Comparative morphological aspects of *Mycobacterium*
tuberculosis, classical type, and *Mycobacterium africanus* (preliminary note)]. Bulletin de la Societe
medicale d'Afrique noire de langue francaise. 1973;18(4):477-84.
32. Baughn AD, Rhee KY. Metabolomics of Central Carbon Metabolism in *Mycobacterium*
tuberculosis. Microbiology spectrum. 2014;2(3).
33. Cook GM, Hards K, Vilcheze C, Hartman T, Berney M. Energetics of Respiration and Oxidative
Phosphorylation in Mycobacteria. Microbiology spectrum. 2014;2(3).
34. Keating LA, Wheeler PR, Mansoor H, Inwald JK. The pyruvate requirement of some members
of the *Mycobacterium tuberculosis* complex is due to an inactive pyruvate kinase: implications for in
vivo growth. Mol Microbiol. 2005;56.
35. Gehre F, Otu J, Kendall L, Forson A, Kwara A, Kudzawu S, et al. The emerging threat of pre-
extensively drug-resistant tuberculosis in West Africa: preparing for large-scale tuberculosis research
and drug resistance surveillance. BMC Medicine. 2016;14(1):160.
36. Gehre F, Kumar S, Kendall L, Ejo M, Secka O, Ofori-Anyinam B, et al. A Mycobacterial
Perspective on Tuberculosis in West Africa: Significant Geographical Variation of *M. africanum* and
Other M. tuberculosis Complex Lineages. PLoS neglected tropical diseases. 2016;10(3):e0004408.
37. Singhal N, Sharma P, Kumar M, Joshi B, Bisht D. Analysis of intracellular expressed proteins
of *Mycobacterium tuberculosis* clinical isolates. Proteome Science. 2012;10(1):14.
38. Hosek J, Svastova P, Moravkova M, Pavlik I, Bartos M. Methods of mycobacterial DNA
isolation from different biological material: a review. Veterinarni medicina. 2006;51(5):180-92.
39. Li H. Aligning sequence reads, clone sequences and assembly contigs with BWA-MEM. arXiv
preprint arXiv:13033997. 2013.
40. Li H, Handsaker B, Wysoker A, Fennell T, Ruan J, Homer N, et al. The Sequence
Alignment/Map format and SAMtools. Bioinformatics (Oxford, England). 2009;25(16):2078-9.
41. Garrison E, Marth G. Haplotype-based variant detection from short-read sequencing. arXiv
preprint arXiv:12073907. 2012.
42. Cingolani P, Platts A, Wang LL, Coon M, Nguyen T, Wang L, et al. A program for annotating
and predicting the effects of single nucleotide polymorphisms, SnpEff: SNPs in the genome of
Drosophila melanogaster strain w1118; iso-2; iso-3. Fly. 2012;6(2):80-92.
43. Coll F, McNerney R, Guerra-Assuncao JA, Glynn JR, Perdigao J, Viveiros M, et al. A robust SNP
barcode for typing *Mycobacterium tuberculosis* complex strains. Nature communications.
2014;5:4812.
44. Feuerriegel S, Schleusener V, Beckert P, Kohl TA, Miotto P, Cirillo DM, et al. PhyResSE: a Web
Tool Delineating *Mycobacterium tuberculosis* Antibiotic Resistance and Lineage from Whole-Genome
Sequencing Data. Journal of clinical microbiology. 2015;53(6):1908-14.
45. Stamatakis A. RAxML version 8: a tool for phylogenetic analysis and post-analysis of large
phylogenies. Bioinformatics (Oxford, England). 2014;30(9):1312-3.
46. Leache AD, Banbury BL, Felsenstein J, de Oca AN, Stamatakis A. Short Tree, Long Tree, Right
Tree, Wrong Tree: New Acquisition Bias Corrections for Inferring SNP Phylogenies. Systematic
biology. 2015;64(6):1032-47.

47.   Lewis PO. A likelihood approach to estimating phylogeny from discrete morphological
character data. Systematic biology. 2001;50(6):913-25.
48.   Letunic I, Bork P. Interactive Tree Of Life (iTOL): an online tool for phylogenetic tree display
and annotation. Bioinformatics (Oxford, England). 2007;23(1):127-8.
49.   Choi Y. A fast computation of pairwise sequence alignment scores between a protein and a
set of single-locus variants of another protein. Proceedings of the ACM Conference on
Bioinformatics, Computational Biology and Biomedicine; Orlando, Florida. 2382989: ACM; 2012. p.
414-7.
50.   Choi Y, Chan AP. PROVEAN web server: a tool to predict the functional effect of amino acid
substitutions and indels. Bioinformatics (Oxford, England). 2015;31(16):2745-7.
51.   Choi Y, Sims GE, Murphy S, Miller JR, Chan AP. Predicting the Functional Effect of Amino Acid
Substitutions and Indels. PloS one. 2012;7(10):e46688.
52.   Kumar P, Henikoff S, Ng PC. Predicting the effects of coding non-synonymous variants on
protein function using the SIFT algorithm. Nature protocols. 2009;4(7):1073-81.
53.   Stucki D, Brites D, Jeljeli L, Coscolla M, Liu Q, Trauner A, et al. *Mycobacterium tuberculosis*
lineage 4 comprises globally distributed and geographically restricted sublineages. Nature genetics.
2016;48(12):1535-43.
54.   Andries K, Verhasselt P, Guillemont J, Gohlmann HW, Neefs JM, Winkler H, et al. A
diarylquinoline drug active on the ATP synthase of *Mycobacterium tuberculosis*. Science (New York,
NY). 2005;307(5707):223-7.
55.   Koul A, Dendouga N, Vergauwen K, Molenberghs B, Vranckx L, Willebrords R, et al.
Diarylquinolines target subunit c of mycobacterial ATP synthase. Nature chemical biology.
2007;3(6):323-4.
56.   Pethe K, Bifani P, Jang J, Kang S, Park S, Ahn S, et al. Discovery of Q203, a potent clinical
candidate for the treatment of tuberculosis. Nat Med. 2013;19(9):1157-60.
57.   Barry VC, Belton JG, Conalty ML, Denneny JM, Edward DW, O'Sullivan JF, et al. A new series
of phenazines (rimino-compounds) with high antituberculosis activity. Nature. 1957;179(4568):1013-
5.
58.   Lechartier B, Cole ST. Mode of Action of Clofazimine and Combination Therapy with
Benzothiazinones against <span class="named-content genus-species"
id="named-content-1">*Mycobacterium tuberculosis*. Antimicrobial
Agents and Chemotherapy. 2015;59(8):4457.
59.   Lewis JM, Sloan DJ. The role of delamanid in the treatment of drug-resistant tuberculosis.
Therapeutics and clinical risk management. 2015;11:779-91.
60.   Xavier AS, Lakshmanan M. Delamanid: A new armor in combating drug-resistant
tuberculosis. Journal of pharmacology & pharmacotherapeutics. 2014;5(3):222-4.
61.   Yano T, Kassovska-Bratinova S, Teh JS, Winkler J, Sullivan K, Isaacs A, et al. Reduction of
clofazimine by mycobacterial type 2 NADH:quinone oxidoreductase: a pathway for the generation of
bactericidal levels of reactive oxygen species. The Journal of biological chemistry.
2011;286(12):10276-87.
62.   Van Deun A, Decroo T, Piubello A, de Jong BC, Lynen L, Rieder HL. Principles for constructing
a tuberculosis treatment regimen: the role and definition of core and companion drugs. The
international journal of tuberculosis and lung disease : the official journal of the International Union
against Tuberculosis and Lung Disease. 2018;22(3):239-45.
63.   Cohen T, Colijn C, Murray M. Modeling the effects of strain diversity and mechanisms of
strain competition on the potential performance of new tuberculosis vaccines. Proceedings of the
National Academy of Sciences. 2008;105(42):16302.
64.   Gagneux S, Small PM. Global phylogeography of *Mycobacterium tuberculosis* and
implications for tuberculosis product development. Lancet Infect Dis. 2007;7.

65. Homolka S, Niemann S, Russell DG, Rohde KH. Functional Genetic Diversity among
Mycobacterium tuberculosis Complex Clinical Isolates: Delineation of Conserved Core and Lineage-
Specific Transcriptomes during Intracellular Survival. PLoS pathogens. 2010;6(7):e1000988.
66. Ofori-Anyinam B, Kanuteh F, Agbla SC, Adetifa I, Okoi C, Dolganov G, et al. Impact of the
Mycobaterium africanum West Africa 2 Lineage on TB Diagnostics in West Africa: Decreased
Sensitivity of Rapid Identification Tests in The Gambia. PLoS neglected tropical diseases.
2016;10(7):e0004801.
67. Sanoussi CN, Affolabi D, Rigouts L, Anagonou S, de Jong B. Genotypic characterization
directly applied to sputum improves the detection of *Mycobacterium africanum* West African 1,
under-represented in positive cultures. PLoS neglected tropical diseases. 2017;11(9):e0005900.
68. Sanoussi CN, de Jong BC, Odoun M, Arekpa K, Ali Ligali M, Bodi O, et al. Low sensitivity of the
MPT64 identification test to detect lineage 5 of the *Mycobacterium tuberculosis* complex. Journal of
medical microbiology. 2018;67(12):1718-27.
69. Iqbal IK, Bajeli S, Akela AK, Kumar A. Bioenergetics of Mycobacterium: An Emerging
Landscape for Drug Discovery. Pathogens. 2018;7(1):24.
70. Rahi A, Matta SK, Dhiman A, Garhyan J, Gopalani M, Chandra S, et al. Enolase of
Mycobacterium tuberculosis is a surface exposed plasminogen binding protein. Biochimica et
biophysica acta General subjects. 2017;1861(1 Pt A):3355-64.
71. Griffin JE, Gawronski JD, Dejesus MA, Ioerger TR, Akerley BJ, Sassetti CM. High-resolution
phenotypic profiling defines genes essential for mycobacterial growth and cholesterol catabolism.
PLoS pathogens. 2011;7(9):e1002251.
72. Sassetti CM, Boyd DH, Rubin EJ. Genes required for mycobacterial growth defined by high
density mutagenesis. Molecular microbiology. 2003;48(1):77-84.
73. Tuckman D, Donnelly RJ, Zhao FX, Jacobs WR, Jr., Connell ND. Interruption of the
phosphoglucose isomerase gene results in glucose auxotrophy in *Mycobacterium smegmatis*. Journal
of bacteriology. 1997;179(8):2724-30.
74. Phong WY, Lin W, Rao SP, Dick T, Alonso S, Pethe K. Characterization of phosphofructokinase
activity in *Mycobacterium tuberculosis* reveals that a functional glycolytic carbon flow is necessary to
limit the accumulation of toxic metabolic intermediates under hypoxia. PloS one. 2013;8(2):e56037.
75. Collins DM, Wilson T, Campbell S, Buddle BM, Wards BJ, Hotter G, et al. Production of
avirulent mutants of *Mycobacterium bovis* with vaccine properties by the use of illegitimate
recombination and screening of stationary-phase cultures. Microbiology (Reading, England).
2002;148(Pt 10):3019-27.
76. Liu K, Yu J, Russell DG. pckA-deficient *Mycobacterium bovis* BCG shows attenuated virulence
in mice and in macrophages. Microbiology (Reading, England). 2003;149(Pt 7):1829-35.
77. Munoz-Elias EJ, McKinney JD. *Mycobacterium tuberculosis* isocitrate lyases 1 and 2 are jointly
required for in vivo growth and virulence. Nat Med. 2005;11(6):638-44.
78. Nandakumar M, Nathan C, Rhee KY. Isocitrate lyase mediates broad antibiotic tolerance in
Mycobacterium tuberculosis. Nature communications. 2014;5:4306.
79. Sarkar R, Lenders L, Wilkinson KA, Wilkinson RJ, Nicol MP. Modern Lineages of
Mycobacterium tuberculosis Exhibit Lineage-Specific Patterns of Growth and Cytokine Induction in
Human Monocyte-Derived Macrophages. PloS one. 2012;7(8):e43170.
80. Tanveer M, Hasan Z, Kanji A, Hussain R, Hasan R. Reduced TNF-α and IFN-γ responses to
Central Asian strain 1 and Beijing isolates of *Mycobacterium tuberculosis* in comparison with H37Rv
strain. Transactions of The Royal Society of Tropical Medicine and Hygiene. 2009;103(6):581-7.
81. Yimer SA, Norheim G, Namouchi A, Zegeye ED, Kinander W, Tønjum T, et al. <span
class="named-content genus-species" id="named-content-
1">Mycobacterium tuberculosis Lineage 7 Strains Are Associated with
Prolonged Patient Delay in Seeking Treatment for Pulmonary Tuberculosis in Amhara Region,
Ethiopia. Journal of clinical microbiology. 2015;53(4):1301.

82. Vilcheze C, Weinrick B, Leung LW, Jacobs WR, Jr. Plasticity of *Mycobacterium tuberculosis*
NADH dehydrogenases and their role in virulence. Proceedings of the National Academy of Sciences
of the United States of America. 2018;115(7):1599-604.
83. Beites T, O'Brien K, Tiwari D, Engelhart CA, Walters S, Andrews J, et al. Plasticity of the
Mycobacterium tuberculosis respiratory chain and its impact on tuberculosis drug development.
Nature communications. 2019;10(1):4970-.
84. De Jong BC, Antonio M, Gagneux S. *Mycobacterium africanum*—Review of an Important
Cause of Human Tuberculosis in West Africa. PLoS Negl Trop Dis. 2010;4.
85. Hartman T, Weinrick B, Vilchèze C, Berney M, Tufariello J, Cook GM, et al. Succinate
dehydrogenase is the regulator of respiration in *Mycobacterium tuberculosis*. PLoS pathogens.
2014;10(11):e1004510.
86. Minato Y, Gohl DM, Thiede JM, Chacón JM, Harcombe WR, Maruyama F, et al. Genome-wide
assessment of Mycobacterium tuberculosis conditionally essential metabolic
pathways. bioRxiv. 2019:534289.
87. Goldberg I, Lonberg-Holm K, Bagley EA, Stieglitz B. Improved conversion of fumarate to
succinate by *Escherichia coli* strains amplified for fumarate reductase. Applied and environmental
microbiology. 1983;45(6):1838-47.
88. Matsoso LG, Kana BD, Crellin PK, Lea-Smith DJ, Pelosi A, Powell D, et al. Function of the
cytochrome bc1-aa3 branch of the respiratory network in mycobacteria and network adaptation
occurring in response to its disruption. Journal of bacteriology. 2005;187(18):6300-8.
89. Frothingham R, Strickland PL, Bretzel G, Ramaswamy S, Musser JM, Williams DL. Phenotypic
and Genotypic Characterization of *Mycobacterium africanum* Isolates from West Africa. Journal of
clinical microbiology. 1999;37(6):1921-6.
90. Niemann S, Richter E, Rusch-Gerdes S. Differentiation among members of the
Mycobacterium tuberculosis complex by molecular and biochemical features: evidence for two
pyrazinamide-susceptible subtypes of M. bovis. Journal of clinical microbiology. 2000;38(1):152-7.
91. Parsons LM, Brosch R, Cole ST, Somoskovi A, Loder A, Bretzel G, et al. Rapid and simple
approach for identification of *Mycobacterium tuberculosis* complex isolates by PCR-based genomic
deletion analysis. Journal of clinical microbiology. 2002;40(7):2339-45.
92. Trauner A, Sassetti CM, Rubin EJ. Genetic Strategies for Identifying New Drug Targets.
Microbiology spectrum. 2014;2(4):Mgm2-0030-2013.
93. Zhang YJ, Ioerger TR, Huttenhower C, Long JE, Sassetti CM, Sacchettini JC, et al. Global
Assessment of Genomic Regions Required for Growth in *Mycobacterium tuberculosis*. PLoS
pathogens. 2012;8(9):e1002946.
94. Guest JR. Partial replacement of succinate dehydrogenase function by phage- and plasmid-
specified fumarate reductase in *Escherichia coli*. Journal of general microbiology. 1981;122(2):171-9.
95. Li AH, Lam WL, Stokes RW. Characterization of genes differentially expressed within
macrophages by virulent and attenuated *Mycobacterium tuberculosis* identifies candidate genes
involved in intracellular growth. Microbiology (Reading, England). 2008;154(8):2291-303.
96. Berney M, Cook GM. Unique flexibility in energy metabolism allows mycobacteria to combat
starvation and hypoxia. PloS one. 2010;5(1):e8614.
97. Giffin MM, Shi L, Gennaro ML, Sohaskey CD. Role of alanine dehydrogenase of
Mycobacterium tuberculosis during recovery from hypoxic nonreplicating persistence. PloS one.
2016;11(5):e0155522.
98. Jeong J-A, Park SW, Yoon D, Kim S, Kang H-Y, Oh J-I. Roles of Alanine Dehydrogenase and
Induction of Its Gene in <span class="named-content genus-species"
id="named-content-1">Mycobacterium smegmatis under Respiration-
Inhibitory Conditions. Journal of bacteriology. 2018;200(14):e00152-18.
99. Reiling N, Homolka S, Walter K, Brandenburg J, Niwinski L, Ernst M, et al. Clade-Specific
Virulence Patterns of <span class="named-content genus-species" id="named-

content-1">*Mycobacterium tuberculosis* Complex Strains in Human Primary
Macrophages and Aerogenically Infected Mice. mBio. 2013;4(4):e00250-13.
100.   O'Neill MB, Shockey A, Zarley A, Aylward W, Eldholm V, Kitchen A, et al. Lineage specific
histories of *Mycobacterium tuberculosis* dispersal in Africa and Eurasia. Molecular ecology. 2019.
101.   Molina-Moya B, Gomgnimbou MK, Spinasse L, Obasanya J, Oladimeji O, Dacombe R, et al.
Mycobacterium tuberculosis complex genotypes circulating in Nigeria based on spoligotyping
obtained from Ziehl-Neelsen stained slides extracted DNA. PLoS neglected tropical diseases.
2018;12(2):e0006242.
102.   Ates LS, Dippenaar A, Sayes F, Pawlik A, Bouchier C, Ma L, et al. Unexpected Genomic and
Phenotypic Diversity of *Mycobacterium africanum* Lineage 5 Affects Drug Resistance, Protein
Secretion, and Immunogenicity. Genome Biology and Evolution. 2018;10(8):1858-74.
103.   Newton SM, Smith RJ, Wilkinson KA, Nicol MP, Garton NJ, Staples KJ, et al. A deletion
defining a common Asian lineage of *Mycobacterium tuberculosis* associates with immune
subversion. Proceedings of the National Academy of Sciences of the United States of America.
2006;103(42):15594-8.
104.   Albanna AS, Reed MB, Kotar KV, Fallow A, McIntosh FA, Behr MA, et al. Reduced
Transmissibility of East African Indian Strains of *Mycobacterium tuberculosis*. PloS one.
2011;6(9):e25075.
105.   Nebenzahl-Guimaraes H, Verhagen LM, Borgdorff MW, Van Soolingen D. Transmission and
progression to disease of *Mycobacterium tuberculosis* phylogenetic lineages in The Netherlands.
Journal of clinical microbiology. 2015;53(10):3264-71.
106.   Broset E, Martín C, Gonzalo-Asensio J. Evolutionary Landscape of the <span
class="named-content genus-species" id="named-content-
1">*Mycobacterium tuberculosis* Complex from the Viewpoint of PhoPR:
Implications for Virulence Regulation and Application to Vaccine Development. mBio.
2015;6(5):e01289-15.
107.   Gonzalo-Asensio J, Malaga W, Pawlik A, Astarie-Dequeker C, Passemar C, Moreau F, et al.
Evolutionary history of tuberculosis shaped by conserved mutations in the PhoPR virulence
regulator. Proceedings of the National Academy of Sciences of the United States of America.
2014;111(31):11491-6.
108.   Gonzalo-Asensio J, Mostowy S, Harders-Westerveen J, Huygen K, Hernandez-Pando R, Thole
J, et al. PhoP: a missing piece in the intricate puzzle of *Mycobacterium tuberculosis* virulence. PloS
one. 2008;3(10):e3496.
109.   Capon F, Allen MH, Ameen M, Burden AD, Tillman D, Barker JN, et al. A synonymous SNP of
the corneodesmosin gene leads to increased mRNA stability and demonstrates association with
psoriasis across diverse ethnic groups. Human molecular genetics. 2004;13(20):2361-8.
110.   Duan J, Wainwright MS, Comeron JM, Saitou N, Sanders AR, Gelernter J, et al. Synonymous
mutations in the human dopamine receptor D2 (DRD2) affect mRNA stability and synthesis of the
receptor. Human molecular genetics. 2003;12(3):205-16.
111.   Golby P, Nunez J, Witney A, Hinds J, Quail MA, Bentley S, et al. Genome-level analyses of
Mycobacterium bovis lineages reveal the role of SNPs and antisense transcription in differential gene
expression. BMC genomics. 2013;14:710-.
112.   Baez A, Shiloach J. Effect of elevated oxygen concentration on bacteria, yeasts, and cells
propagated for production of biological compounds. Microbial cell factories. 2014;13:181-.
113.   Siddiqi SaR-G, S. MGIT™ Procedure Manual, For BACTEC™ MGIT 960™ TB System

(Also applicable for Manual MGIT), Mycobacteria Growth Indicator Tube (MGIT)

Culture and Drug Susceptibility Demonstration Projects. 2006.
114.   Godreuil S, Torrea G, Terru D, Chevenet F, Diagbouga S, Supply P, et al. First molecular
epidemiology study of *Mycobacterium tuberculosis* in Burkina Faso. Journal of clinical microbiology.
2007;45(3):921-7.

115.   Groenheit R, Ghebremichael S, Svensson J, Rabna P, Colombatti R, Riccardi F, et al. The
Guinea-Bissau family of *Mycobacterium tuberculosis* complex revisited. PloS one. 2011;6(4):e18601.
116.   Niobe-Eyangoh SN, Kuaban C, Sorlin P, Cunin P, Thonnon J, Sola C, et al. Genetic Biodiversity
of *Mycobacterium tuberculosis* Complex Strains from Patients with Pulmonary Tuberculosis in
Cameroon. Journal of clinical microbiology. 2003;41(6):2547-53.
117.   Ouassa T, Borroni E, Loukou GY, Faye-Kette H, Kouakou J, Menan H, et al. High prevalence of
shared international type 53 among *Mycobacterium tuberculosis* complex strains in retreated
patients from Cote d'Ivoire. PloS one. 2012;7(9):e45363.
118.   Campbell MC, Tishkoff SA. African genetic diversity: implications for human demographic
history, modern human origins, and complex disease mapping. Annual review of genomics and
human genetics. 2008;9:403-33.
119.   Amouzou EK, Chabi NW, Adjalla CE, Rodriguez-Gueant RM, Feillet F, Villaume C, et al. High
prevalence of hyperhomocysteinemia related to folate deficiency and the 677C-->T mutation of the
gene encoding methylenetetrahydrofolate reductase in coastal West Africa. The American journal of
clinical nutrition. 2004;79(4):619-24.
120.   Gagneux S. Strain variation in the *Mycobacterium tuberculosis* complex: its role in biology,
epidemiology and control. Springer, Heidelberg. 2017.
121.   Moore SE, Mansoor MA, Bates CJ, Prentice AM. Plasma homocysteine, folate and vitamin
B12 compared between rural Gambian and UK adults. British Journal of Nutrition. 2008;96(3):508-
15.

Figure 1: Link between central carbon metabolism and the Electron Transport Chain.
Reducing equivalents like NADH and FADH2 enter into the Electron Transport Chain that
drives   the   production   of   high   amounts   of   ATP   for   cellular   processes

Figure 2: Mutations detected in the Central Carbon Metabolic Pathway of a) MAF L6 and MAF L5 and b) MTB L4 Ghana, L4 Haarlem, L1, L3, L2, L4 Cameroon and L4 LAM. Red and blue coloured bars represent nonsynonymous mutations detected in 50-100% of strains per lineage in the associated genes shown below each set of bars indicating mutations. Genes emboldened red have mutations detected predicted to be harmful in MAF lineages, genes emboldened blue have mutations detected predicted to be harmful in MTB lineages and genes emboldened purple have mutations detected predicted to be harmful in the same gene in MTB and MAF lineages. Grey bars indicate that no nonsynonymous and/or predicted harmful mutations were detected in the corresponding gene below each set of grey bars. First column colour indicates the lineage: a) MAF L6 (green) and MAF L5 (brown), b) MTB L4 Ghana (brown), L4 Haarlem (red), L1 (lilac), L3 (purple), L2 (blue), L4 Cameroon (pink) and L4 LAM (dark red).

Figure 3: Mutations in the Central Carbon Metabolic Pathway of MAF and MTB. Genes with a **red** colour code have harmful mutations in MAF lineages, indicated next to the gene. Genes with a **blue** colour code have harmful mutations in MTB lineages, while genes in **purple** have harmful mutations in the same gene in MAF and MTB lineages.

Figure 4: Mutations detected in the Electron Transport Chain of a) MAF L6 and MAF L5 and b) MTB L4 Ghana, L4 Haarlem, L1, L3, L2, L4 Cameroon and L4 LAM. Red and blue coloured bars represent nonsynonymous mutations detected in 50-100% of strains per lineage in associated genes shown below each set of bars indicating mutations. Genes emboldened red have mutations detected predicted to be harmful in MAF lineages, genes emboldened blue have mutations detected predicted to be harmful in MTB lineages and genes emboldened purple have mutations detected predicted to be harmful in the same gene in MTB and MAF lineages. Grey bars indicate that no nonsynonymous and/or predicted harmful mutations were detected in the corresponding gene below each set of grey bars. First column colour indicates the lineage: a) MAF L6 (green) and MAF L5 (brown), b) MTB L4 Ghana (brown), L4 Haarlem (red), L1 (lilac), L3 (purple), L2 (blue), L4 Cameroon (pink) and L4

LAM (dark red).

Figure 5: The core and alternate respiratory chain of mycobacteria during in vitro exponential growth when oxygen is abundant and when oxygen is limited. Mutations in MAF lineages are indicated in **red** boxes next to each affected complex. Mutations in MTB are indicated in **blue** boxes next to the affected gene while mutations found in the same gene in both MAF and MTB are shown in **purple** boxes. The core chain consists of type I NADH:menaquinone oxidoreductase (NuoA-N), succinate: menaquinone oxidoreductase 1 (SDH1), cytochrome aa3-bc supercomplex (Qcr-Cta) and F1F0-ATPase while the route used during oxygen limitation is composed of Type II NADH:menaquinone oxidoreductase (Ndh); succinate:menaquinone oxidoreductase (SDH2); nitrate reductase (Nar); Fumarate Reductase (Frd) and cytochrome bd oxidase (Cyd), a high affinity terminal oxidase allowing hypoxic survival.

NDH-2 (*ndhA*) -
Ala341fs - L5
Met325Thr - L1
Gly229Val - L3

frdA - Gly16Asp - L5

frdB - Ser157Leu - L4 Haarlem

Mqo
(*mqo*)

NDH2
(*ndh/ndhA*)

SDH2
(*sdhABCD*)

Nar
(*narGHJI*)

Cyd
(*cydABCD*)

Frd
(*frdABCD*)

Hypoxia

Malate   oxaloacetate   NADH   NAD$^+$ + H$^+$ Succinate   Fumarate   N0$_3^{3-}$ + 2H$^+$ N0$_2^{2-}$ + H2O   2H2O   Succinate   Fumarate

6 H$^+$ O$_2$

e   e   e   e   e   e

4 H$^+$ 2 H$^+$ 6 H$^+$ PMF

nuoD - Gly392Ala - L4 LAM
nuoF - Pro19Leu - L3
nuoH - Gly5_His6insArg - L4 LAM

e   e   e

O$_2$ Unlimited

NDH1
(*nuoA-N*)

SDH1
(*Rv0247c -
Rv0249c*)

MQ/MQH
Pool

Qcr-Cta
(*qcrABC* and
ctaBCDE)

F1-F0 ATP
Synthase
(atp*IBEFHAGDC)*

NADH   NAD$^+$ + H$^+$ Succinate   Fumarate

qcrC - Lys228Gln - L6
ctaB - Ala68Thr - L5, L6

Rv0249c - Thr17fs- L1

Alanine
dehydrogenase
(*ald*)

pruB - Arg257Cys - L5
ald - Asp198Val , Ala123_Asp124del, Gln89fs - L5, L6

Proline
dehydrogenase
(*pruAB*)

ADP+ Pi   ATP

atpG - Tyr220Ser - L5
atpH - Gly403Asp, Ser434Leu -L5

atpD - Val371Ala - L2

Table 1: Potentially deleterious mutations in genes encoding enzymes in the Central Carbon Metabolic Pathway. List of all mutations found to be potentially harmful by PROVEAN (marked by a *) are listed. The full list of mutations is given in supplementary table S5.

Gene	MTB amino acid change	MTB Lineage	MAF amino acid change	MAF Lineage
pgi*	Arg546His	clade of L4 LAM		
pfkB*	Leu221Phe	L3		
eno*	Arg8Gly Lys429Gln	L1, L2, L3	Arg8Gly Arg179Ser	L5, L6
pykA*			Glu220Asp	L5, L6
pca*	Ala406Thr	L3	Ala926Thr	L5
icd2*	Gly655Ser Leu254Val	L3	Val447Met Lys117Asn	L6
mdh*			Leu326Ile Ala112Thr Asp253Ala	L5, L6
icl2a*	Gly179Asp Thr296fs	L1,L2,L3,L4 Haarlem, L4 Ghana	Ala146Thr His151Arg Gly179Asp Thr296fs	L5, L6
pckA*	Met108Ile Ala536Gly	L4 Cameroon, clade of L4 LAM	Lys422Thr	L5

Table 2: Potentially deleterious mutations in genes and gene subunits encoding Electron Transport Chain enzymes. List of all mutations found to be potentially harmful by PROVEAN (marked by a *). The full list of mutations is given in supplementary table S5.

Gene	MTB amino acid change	MTB Lineage	MAF amino acid change	MAF Lineage
ndhA*	Asn360Ser	clade of L2	Ala341fs	L5
	Met325Thr	L1		
	Gly229Val	L3		
pruB*			Arg257Cys	L5
qcrC*			Lys228Gln	L6
ctaB*			Ala68Thr	L5, L6
cydB			Met98Ile	L6
frdA*			Gly16Asp	L5
frdB*	Ser157Leu	L4 Haarlem		
atpG*			Tyr220Ser	L5
atpH*			Gly403Asp	L5
			Ser434Leu	
atpD*	Val371Ala	L2		
nuoD*	Gly392Ala	clade of L4 LAM		
nuoH*	Gly5_His6insArg	clade of L4 LAM		
nuoF*	Pro19Leu	L3		
Rv0249c*	Thr17fs	clade of L1		
ald*			Gln89fs	L5, L6
			Asp198Val	
			Ala123_Asp124del	

Table 3: Future proposed experiments.

Examination	Proposed Experiments	Predicted Phenotype/ Expected outcome
Experimentally determine if mutations detected in *eno*, *pca*, *pgi*, *pckA*, *korB*, *fba*, *aceE* and *glpK* of the Glycolytic Pathway and TCA cycle contribute to slow growth.	Mutagenesis experiments, complementation studies, Growth studies. Mutagenesis studies would involve introducing the mutations detected into L2, L4 or H37Rv and testing for attenuated growth through growth studies or by complementing MAF and MTB L1 and L3 with a wild-type allele and testing for complementation of growth.	It is expected that the reported mutations will lead to attenuated growth.
Experimentally determine if mutations detected in *ndhA*, *pruB*, *qcrC*, *ctaB*, *frdAB*, *sdhA*, *atpDHG*, *ald*, *Rv0249c*, *narG* and *cydB* of the respiratory pathway contribute to slow growth.	Mutagenesis experiments, complementation studies, Growth studies. Mutagenesis studies would involve introducing the mutations detected into L2, L4 or H37Rv and testing for attenuated growth in growth studies or by complementing MAF and MTB L1 and L3 with a wild-type allele and testing for	It is expected that the reported mutations will lead to attenuated growth.

	complementation of growth.	
Energy generation, in the form of ATP, for cellular processes	ATP quantitation assays.	MAF lineages will generate less ATP via the respiratory chain compared to MTB lineages
ROS accumulation and DNA damage in MAF cultures relative to MTB	Flow cytometry experiments and terminal deoxynucleotidyl transferase dUTP nick end labelling (TUNEL) assay.	Higher levels of ROS in MAF cultures and greater DNA damage of MAF relative to MTB.
Host-Pathogen interactions driving geographic restriction of MAF lineages to West Africa	Host genetics and Genome-wide association studies.	Specific genes in West Africans have undergone strong positive selection and increased the susceptibility of West Africans to MAF infection, permitting host restrictedness.