

DISTRIBUTION OF GENES ENCODING TETRACYCLINE RESISTANCE AND AMINOGLYCOSIDE MODIFYING ENZYMES IN STAPHYLOCOCCUS AUREUS STRAINS ISOLATED FROM A BURN CENTER

Emaneini M.,^{1*} Bigverdi R.,¹ Kalantar D.,¹ Soroush S.,¹ Jabalameli F.,¹
Noorazar Khoshnab B.,¹ Asadollahi P.,² Taherikalani M.²

¹ Department of Microbiology, School of Medicine, Tehran University of Medical Sciences Tehran, Iran

² Department of Microbiology, School of Medicine, Ilam University of Medical Sciences Ilam, Iran

SUMMARY. *Staphylococcus aureus* (*S. aureus*) is one of the most common organisms associated with infections among burn patients and has shown a frequent and rapid development of antibiotic resistance. The presence of genes encoding aminoglycoside modifying enzymes (AME) and tetracycline resistance were detected by PCR and multiplex-PCR. Among the 151 *S. aureus* isolates recovered from the burn patients, 96 (63.6%) were detected to have *mecA* gene. The rate of tetracycline resistance genes associated with *mecA* was 61% (92/151). Forty nine isolates (32.4%) contained *tetM*, 26 (17.2%) possessed only *tetK* and 21 (13.9%) contained both *tetM* and *tetK*. The presence of the *aac(6')-Ie-aph(2'')*-I gene was determined in 18 isolates, *aph(3')-IIIa* in 8 isolates, both the *aac(6')-Ie-aph(2'')*-I, *aph(3')-IIIa* and the *ant(4')-Ia* genes in 69 isolates, both *aac(6')-Ie-aph(2'')*-I and *ant(4')-Ia* in 6 isolates, and both the *aph(3')-IIIa* and the *ant(4')-Ia* genes in 8 isolates. Most of the strains which harboured the *mecA* gene also contained the *tet* and AME genes.

Keywords: *Staphylococcus aureus*, burn, antibiotic resistance

Introduction

Infection is one of the most serious problems in patients hospitalized with thermal injury, and still remains a leading cause of death among these patients.¹ Infections caused by antibiotic resistant bacteria should be considered as a potential risk and their resistance pattern should be identified as soon as possible. *Staphylococcus aureus* is known to be one of the major causes of infections acquired in hospitals and communities worldwide, and is one of the most common organisms associated with infections among burn patients.^{2,3} Since the introduction of antibiotics in medicine, *S. aureus* has shown a frequent and rapid development and spread of antibiotic resistance, and has developed resistance to all types of antibiotics.⁴

Tetracyclines are broad-spectrum antibiotics used in the treatment and prevention of bacterial infections.⁵ Most tetracycline resistant bacteria have acquired tetracycline resistance genes (*tet*). Two main mechanisms of resist-

ance to tetracycline have been described in *S. aureus*: active efflux, resulting from the acquisition of the plasmid-located *tetK* and *tetL* genes and ribosomal protection by elongation factor-like proteins that are encoded by chromosomal or transposonal *tetM* or *tetO* determinants.^{6,7}

Aminoglycosides are broad-spectrum antibiotics that are used in combination with other antibiotics such as β -lactams for treatment of *S. aureus* infections.⁸ Inactivation of aminoglycoside antibiotics by aminoglycoside modifying enzymes (AME), such as aminoglycoside phosphotransferase (APH), acetyl-transferases (AAC), and nucleotidyl-transferase (ANT) enzymes, is the most common mechanism of aminoglycoside resistance.^{8,9} The most common AME encoding genes among *S. aureus* are *aac(6')-Ie-aph(2'')*, *aph(3')-IIIa*, and *ant(4')-Ia*, which can be harbored on plasmid or chromosome and are often harbored on transposable elements.¹⁰

The results of an earlier investigation at the burn unit in Tehran have shown that the incidence of *S. aureus* is

* Corresponding author: Mohammed Emaneini, Department of Microbiology, School of Medicine, Tehran University of Medical Sciences, 100 Poursina St., Keshavarz Blvd., Tehran, Iran. Tel./Fax: 098021 8895 5810; e-mail: emaneyni@tums.ac.ir

high and the majority of the isolates were resistant to tetracycline and aminoglycoside antibiotics phenotypically.³ This study was conducted to investigate the incidence of tetracycline and aminoglycoside resistance determinants among a collection of *S. aureus* strains isolated from burn patients.

Materials and methods

Bacterial isolates

A total of 151 non duplicate (i.e., only one isolate per patient) and non-consecutive *S. aureus* isolates were collected, during September 2010 and June 2012, from clinical samples of burn patients, admitted to the burn ward at Shahid Motahari Hospital, Tehran, Iran. Isolates were identified to the species level by Gram staining, production of coagulase, catalase, DNase and oxidation, and fermentation of mannitol.

Antimicrobial susceptibility testing

Tests for susceptibility to oxacillin (1 µg), gentamicin (10 µg), amikacin (30 µg), kanamycin (30 µg), netilmicin (30 µg), tetracycline (30 µg), doxycycline (30 µg), and minocycline (30 µg) were performed by the disc diffusion method as recommended by the Clinical Laboratory Standards Institute (CLSI).¹¹ *S. aureus* ATCC 25923 was used as the control strain.

Amplification of *mecA*, AMEs and *tet* genes

Total DNA template was extracted from *S. aureus* isolates by the boiling method previously outlined.¹² Under the standard polymerase chain reaction (PCR) conditions, a series of primers (Table I) were used, according to the methods described below, for the detection of *mecA*, *tet* and AME genes. Recognition of genes encoding the AMEs enzymes (*aac(6')-Ie-aph(2'')*-I, *aph(2'')*-Ib, *aph(2'')*-Ic, *aph(2'')*-Id, *aph(3')*-IIIa, and *ant(4')*-Ia) and methicillin resistance (*mecA*) was performed as described previously.⁹ Amplification of *tet* genes (*tetK*, *tetL*, *tetM* and *tetO*) was performed using CinnaGen PCR master kit (CinnaGen Co.). PCR was performed in a final volume of 25 µl containing 0.5 µM of each primer. The PCR protocol consisted of an initial denaturation step at 94°C for 5 min; 30 amplification cycles at 94°C for 1 min, at 57°C for 1 min (for *tetO*, at 51°C for *tetM*, *tetL*, and *tetK*), and at 72°C for 1 min, followed by a final extension step at 72°C for 5 min. Amplified products were analyzed by electrophoresis on 1% agarose gel containing 0.5 µg/ml ethidium bromide and photographed under UV illumination.

Statistical analysis

Differences in the prevalence of genes among *S. aureus* isolates were calculated using the chi-square test for each gene. A *P* value of ≤ 0.05 was considered as statistically significant.

Table I - The oligonucleotide primers used for PCR amplified antimicrobial resistance

Gene	Primers (5'-3')	Size of the amplified product (bp)	Reference
<i>mecA</i>	F-TCCAGATTACAACCTCACCAGG R-CCACTTCATATCTTGTAACG	162	9
<i>aac(6')-Ie-aph(2'')</i> -I	F-CAGGAATTTATCGAAAATGGTAGAAAAG R- CACAATCGACTAAAGAGTACCAATC	369	10
<i>aph(2'')</i> -Ib	F-CTTGGACGCTGAGATATATGAGCAC R- GTTTGTAGCAATTCAGAAAACACCCTT	867	10
<i>aph(2'')</i> -Ic	F- CCACAATGATAATGACTCAGTTCCC R- CCACAGCTTCCGATAGCAAGAG	444	10
<i>aph(2'')</i> -Id	F-GTGGTTTTTACAGGAATGCCATC R-CCCTCTTCATACCAATCCATATAACC	641	10
<i>aph(3')</i> -IIIa	F-GGCTAAAATGAGAATATCACCGG R-CTTTAAAAAATCATAACAGCTCGCG	523	10
<i>ant(4')</i> -Ia	F-CAAAGTCTAAATCGGTAGAAGCC R-GGAAAGTTGACCAGACATTACGAACT	294	10
<i>tetK</i>	F- GTAGCGACAATAGGTAATAGT R- GTAGTGACAATAAACCTCCTA	360	13
<i>tetM</i>	F- AGTGGAGCGATTACAGAA R- CATATGTCCTGGCGTGTCTA	158	13
<i>tetL</i>	F-ATAAATTGTTTCGGGTCGGTAAT R- AACCAGCCAATAATGACAATGAT	1077	14
<i>tetO</i>	F-AACTTAGGCATTCTGGCTCAC R-TCCCACTGTTCCATATCGTCA	514	15

Results

All the isolates were investigated for the presence of genes encoding tetracycline, aminoglycoside and methicillin resistance. The results are summarized in *Tables II* and *III*.

The *mecA* gene encoding methicillin resistance was determined in 63.6% (96/151) of the *S. aureus* isolates included in this study.

The rate of tetracycline resistance genes associated with *mecA* was 61% (92/151). All the tetracycline resistant isolates, excluding 11 isolates, gave positive results for *tet* genes. Forty nine isolates (32.4%) contained *tetM*, 26 (17.2%) possessed *tetK* and 21(13.9%) included both *tetM* and *tetK* genes. Four isolates were sensitive to tetracycline but positive for the *tet* genes (two isolates contained both *tetM* and *tetK* and two isolates contained only *tetK*). None of the isolates were positive for *tetL* and *tetO* in the PCR assay.

The presence of the *aac(6')-Ie-aph(2'')*-I gene was determined in 18 isolates, the *aph(3')-IIIa* in 8 isolates, both the *aac(6')-Ie-aph(2'')*-I, *aph(3')-IIIa* and the *ant(4')-Ia*

genes in 69 isolates, both *aac(6')-Ie-aph(2'')*-I and the *ant(4')-Ia* in 6 isolates, and both the *aph(3')-IIIa* and the *ant(4')-Ia* genes in 8 isolates. The gene encoding AME was encountered in at least 95 isolates whilst it was absent in 56 of the isolates. Amplification of the *aph(2'')*-Ib, *aph(2'')*-Ic and *aph(2'')*-Id genes was negative for all the isolates.

Coexistence of the *tet* and AME genes were encountered in 55 of the isolates.

Discussion

Tetracyclines still remain the first-line treatment for a number of infections in many parts of the world, including Iran.^{3,16,17} According to the literature review, there is a limited amount of data regarding the prevalence rate of *tet* genes among *S. aureus* strains isolated from burn patients in Iran. In this study, the coexistence rate of *mecA* and *tet* genes was 61%, which is slightly higher than similar reports from Europe (57.1%) and lower than those from Japan (100%).¹⁶⁻¹⁹

In the current study, the most common tetracycline resistance mechanism is mediated by *tetM* and *tetK* genes, respectively. The resistance mechanism mediated by these genes is predominant among tetracycline resistant MRSA from Turkey, Malaysia, and most European countries, but not so in North America where there is a high prevalence rate of the *tetK* gene among MRSA isolates.^{5,16,18-21} The *tet* genes are contained within conjugative transposons that can be transferred horizontally and expressed in Gram-positive and Gram-negative bacteria.²²

Coexistence of *tetM* and *tetK* genes among the *S. aureus* isolates was detected in this study, as well as in the study of Trzcinski et al.¹⁴ Our results are also consistent with those reporting the *tetL* and the *tetO* genes to be rarely detected in *S. aureus* isolates.¹⁸⁻²¹

The *aac(6')-Ie-aph(2'')* gene encodes the AAC(6')-APH(2'') enzyme, a bifunctional enzyme with kinase activity, that inactivates a broad range of aminoglycosides and confers concomitant resistance to gentamicin and the

Table II - Distribution of tetracycline resistance genes among *S. aureus* isolates

Resistance patterns	<i>tet</i> genes present			No. of Isolates
	<i>tetM</i>	<i>tetK</i>	<i>mecA</i>	
T,	+	+	+	21
T,	+	-	+	46
T,	-	+	+	24
T,DXT	-	+	+	1
T,DXT	-	-	-	3
T	+	-	-	3
T	-	+		1
T	-	-	-	8
-	+	+	-	2
-	-	+		2
-	-	-	+	4

T; tetracycline, DXT; doxycycline, MN; minocycline

Table III - Distribution of aminoglycoside resistance genes among the *S. aureus* isolates

Resistance patterns	AME genes present			<i>mecA</i>	No. of Isolates
	<i>aac(6')-Ie-aph(2'')</i> -I	<i>aph(3')-IIIa</i>	<i>ant(4')-Ia</i>		
AK, GM, K, NET, TN	+	+	+	+	66
AK, GM, K, TN	+	+	+	+	3
AK, GM, K, NET, TN	+	-	+	+	6
AK, GM, K, NET, TN	+	-	-	+	10
AK, GM, K, NET, TN	-	+	+	+	8
-	-	-	-	+	3
-	+	-	-	-	2

AK; amikacin, GM; gentamicin, K; kanamycin, NET; netilmicin, TN; tobramycin

majority of aminoglycosides commonly used in medical practice.^{8,9,23} As also reported in other studies, the *aac(6')-Ie-aph(2'')* gene was the most common AME gene among the *S. aureus* isolates and was found either alone or with other AME or *tet* genes.^{9,23}

Remarkably, most of the strains which harboured the *mecA* gene also contained the *tet* and AME genes. These genes might be located on the same or associated genetic element. In MRSA, methicillin resistance is mediated by *mecA*, which is carried on Staphylococcal Cassette Chromosome *mec* (SCC*mec*). SCC*mec* type III is the dominant SCC*mec* type in Iran; this type includes not only the *mecA*

gene, but also the genes encoding resistance to several non-beta-lactam antibiotic classes, such as tetracyclines and aminoglycosides.²⁴

Conclusion

This study has shown that the *S. aureus* isolates recovered from burn patients contain a variety of tetracycline and amino glycoside resistance genes, and *tetM* and *aac(6')-Ie-aph(2'')* genes were the most common *tet* and AME genes among the *S. aureus* isolates, respectively.

RÉSUMÉ. *Staphylococcus aureus* (*S. aureus*) est l'un des organismes les plus communs associés à des infections chez les patients souffrant de brûlures et a montré une évolution fréquente et plus rapide de la résistance aux antibiotiques. La présence de gènes codant pour des enzymes de modification de l'aminoglycoside et de la résistance tétracycline a été détectée par PCR et PCR multiplexe. Parmi les 151 isolats de *S. aureus* récupérés des patients brûlés, 96 (63,6%) contenaient le gène *mecA*. Le taux de gènes de résistance à la tétracycline associés à *mecA* était de 61% (92/151). Quarante-neuf isolats (32,4%) contenaient *tetM*, 26 (17,2%) ne possédaient que *tetK* et 21 (13,9%) contenaient *tetM* et *tetK*. La présence du gène *aac(6')-Ie-aph(2'')* a été identifiée dans 18 isolats, et le gène *aph(3')-IIIa* dans 8 isolats. Les gènes *aac(6')-Ie-aph(2'')*-I, *aph(3')-IIIa* et *ant(4')-Ia* ont été identifiés dans 69 isolats, *aaC(6')-Ie-aph(2'')*-I et *ant(4')-Ia* dans 6 isolats, et l'*aph(3')-IIIa* et *ant(4')-Ia* dans 8 isolats. La plupart des souches qui hébergeaient le gène *mecA* contenait également des gènes *tet* et AME.

Mots-clés: *Staphylococcus aureus*, brûlure, résistance aux antibiotiques

BIBLIOGRAPHY

- Ribeiro NF, Heath CH, Kierath J, et al.: Burn wounds infected by contaminated water: Case reports, review of the literature and recommendations for treatment. *Burns*, 36:9-22, 2010.
- Chen X, Yang HH, Huangfu YC, et al.: Molecular epidemiologic analysis of *Staphylococcus aureus* isolated from four burn centers. *Burns*, 38:738-42, 2012.
- Shahsavan S, Emaneini M, Noorazar Khoshgnab B, et al.: A high prevalence of mupirocin and macrolide resistance determinant among *Staphylococcus aureus* strains isolated from burnt patients. *Burns*, 38:378-82, 2012.
- Boucher HW, Corey GR: Epidemiology of methicillin-resistant *Staphylococcus aureus*. *Clin Infect Dis*, 46: 344-9, 2008.
- Ardic N, Ozyurt M, Sareyyupoglu B, et al.: Investigation of erythromycin and tetracycline resistance genes in methicillin-resistant staphylococci. *Int J Antimicrob Agents*, 26:213-8, 2005.
- Esposito S, Leone S, Petta E, et al.: Treatment options for skin and soft tissue infections caused by methicillin-resistant *Staphylococcus aureus*: oral vs.parenteral; home vs. hospital. *Int J Antimicrob Agents*, 34:30-5, 2009.
- McCallum N, Berger-Bächli B, Senn MM: Regulation of antibiotic resistance in *Staphylococcus aureus*. *Int J Med Microbiol*, 300:118-29, 2010.
- Ramirez MS, Tolmasky ME: Aminoglycoside modifying enzymes. *Drug Resistance Updates*, 13:151-71, 2010.
- Fatholahzadeh B, Emaneini M, Feizabadi MM, et al.: Characterization of genes encoding aminoglycoside-modifying enzymes among methicillin-resistant *Staphylococcus aureus* isolated from two hospitals in Tehran, Iran. *Int J Antimicrob Agents*, 33:264-5, 2009.
- Emaneini M, Taherikalani M, Eslampour MA, et al.: Phenotypic and genotypic evaluation of aminoglycoside resistance in clinical isolates of staphylococci in Tehran, Iran. *Microb Drug Resist*, 15:129-32, 2009.
- Clinical and Laboratory Standards Institute. Performance Standards for Antimicrobial Susceptibility Testing; Twenty-First Informational Supplement. 31:100-21, 2011.
- Fatholahzadeh B, Hashemi FB, Emaneini M, et al.: Detection of Vancomycin Resistant Enterococci (VRE) isolated from urinary tract infections (UTI) in Tehran, Iran. *Daru J Pharm Sci*, 14:141-5, 2006.
- Strommenger B, Kettlitz C, Werner G, et al.: Multiplex PCR assay for simultaneous detection of nine clinically relevant antibiotic resistance genes in *Staphylococcus aureus*. *J Clin Microbiol*, 41:4089-94, 2003.
- Trzcinski K, Cooper BS, Hryniewicz W, et al.: Expression of resistance to tetracyclines in strains of methicillin-resistant *Staphylococcus aureus*. *J Antimicrob Chemother*, 45:763-70, 2000.
- Malhotra-Kumar S, Lammens C, Piessens J, et al.: Multiplex PCR for simultaneous detection of macrolide and tetracycline resistance determinants in streptococci. *Antimicrob Agents Chemother*, 49:4798-800, 2005.
- Jones CH, Tuckman M, Howe AY, et al.: Diagnostic PCR analysis of the occurrence of methicillin and tetracycline resistance genes

- among *Staphylococcus aureus* isolates from phase 3 clinical trials of tigecycline for complicated skin and skin structure infections. *Antimicrob Agents Chemother*, 50:505-10, 2006.
17. Roberts MC: Tetracycline therapy: Update. *Clin Infect Dis*, 36:462-7, 2003.
 18. Schmitz FJ, Krey A, Sadurski R, et al.: European SENTRY Participants: Resistance to tetracycline and distribution of tetracycline resistance genes in European *Staphylococcus aureus* isolates. *J Antimicrob Chemother*, 47:239-40, 2001.
 19. Sekiguchi J, Fujino T, Saruta K, et al.: Prevalence of erythromycin-, tetracycline-, and aminoglycoside- resistance genes in methicillin-resistant *Staphylococcus aureus* in hospitals in Tokyo and Kumamoto. *Jpn J Infect Dis*, 57:74-7, 2004.
 20. Lozano C, Porres-Osante N, Crettaz J, et al.: Changes in genetic lineages, resistance, and virulence in clinical methicillin-resistant *Staphylococcus aureus* in a Spanish hospital. *J Infect Chemother*. 19:233-42, 2013.
 21. Lim KT, Hanifah YA, Yusof M, et al.: *ermA*, *ermC*, *tetM* and *tetK* are essential for erythromycin and tetracycline resistance among methicillin-resistant *Staphylococcus aureus* strains isolated from a tertiary hospital in Malaysia. *Indian J Med Microbiol*, 30:203-7, 2012.
 22. Chopra I, Roberts M. Tetracycline antibiotics: Mode of action, applications, molecular biology, and epidemiology of bacterial resistance. *Microbiol Mol Biol Rev*, 65:232-60, 2001.
 23. Carneiro LA, Queiroz ML, Merquior VL: Antimicrobial-resistance and enterotoxin-encoding genes among staphylococci isolated from expressed human breast milk. *J Med Microbiol*, 53:761-8, 2004.
 24. Fatholahzadeh B, Emaneini M, Gilbert G, et al.: Staphylococcal cassette chromosome *mec* (SCC*mec*) analysis and antimicrobial susceptibility patterns of methicillin-resistant *Staphylococcus aureus* (MRSA) isolates in Tehran, Iran. *Microb Drug Resist*, 14:217-20, 2008.

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