Detection of Mutation in 23S rRNA in Isolates of Streptococcus pyogenes Resistant to Erythromycin

Z Sepehrizadeh¹,*G Zarrini², M Bahrololoumi Shapourabadi¹, M Tabatabaei Yazdi¹, M Hosseini shad¹

¹Dept. of Pharmaceutical Biotechnology, Faculty of Pharmacy, Tehran University of Medical Sciences, Iran ² Dept. of Animal Sciences, Faculty of Natural Sciences/University of Tabriz, Iran

(Received 25 Apr 2008; accepted 17 Nov 2008)

Abstract

Background: In this study, erythromycin resistance isolates from the students with aged 12-15 yr old were studied and the mutations in the 23S rRNA were identified by sequencing.

Methods: Throat samples of 327 students with 12-15 years old from 3 schools of Tehran were cultured on the selective Streptococcus pyogenes medium and 23 strains were primarily selected as S. pyogenes.

Results: All strains were susceptible to penicillin and bacitracin (0.04U). Minimum inhibitory of concentrations (MICs) for erythromycin were determined in which 5 strains were found intermediate, 2 strains resistance and the remaining 16 strains susceptible to erythromycin. MIC for the erythromycin-resistance strains, BT₃ and BT₄, were 8.2 and 12.4 µg/ml, respectively. PCR was performed for each six 23S rRNA operons and a fragment with 550 bp was sequenced. For two resistance strains, BT₃ and BT₄ there were a mutation in position 2059 (A to G). Also another mutation in position 2529 (G to A) was detected in BT3. Conclusion: In addition to mutation at the position 2058 other point mutations in different positions of domain V involve in the resistance to macrolides.

Keywords: Streptococcus pyogenes, 23S rRNA, erythromycin-resistance

Introduction

Streptococcus pyogenes (group A streptococcus, GAS) is an important pathogen causing pharyngitis in children, scarlet fever, erysipelas, cellulitis, impetigo & necrotizing fasciitis (1-3). Although penicillin is uniformly active against GAS and first choice for treatment of pharyngial and most of the infections caused by this organism, in the second line drug of choice, erythromycin, which was recommended as an alternative treatment for penicillin-hypersensitive patients (3, 4). Macrolide antibiotics such as erythromycin inhibit protein synthesis in a wide range of pathogenic bacteria. The antibiotics bind to a single site in the large ribosomal subunit located near the entrance to nascent peptide tunnel and are thought to sterically hinder the growth of the polypeptide chain (2, 5). Macrolide binding site is composed primarily of 23S rRNA, in central loop of domain V and loop of hairpin from domain II (5). Mutation in these loops cause the macrolide

resistance due to inability in antibiotic binding. Additional mechanisms for macrolide resistance are target modifications by the erm (erythromycin ribosome methylation) genes and the macrolide efflux that was performed by increasing the transport of 14-and 15-membered macrolides from cells of *S. pyogenes* (2, 5).

S. pyogenes has six 23S rRNA operons, so mutations in rRNA genes might escape detection because the mutations are recessive or alter only a small fraction of the ribosome. Mutations at the domains V and II of 23S rRNA are known to cause macrolide resistance in S. pyogenes. A 2 kb length DNA fragment from the beginning of the 23S rRNA includes these domains. According to some reports mutation in a region around 550 bp (near the position A2058, numbered in E. coli) results in resistance to macrolides. This region is macrolide binding site and all mutation in the resistance strains have converting in (2, 5).

Material and Methods

Bacterial strains and Media

A total of 327 students from ranged 12-15 yr old were studied and their throat samples were cultured on the selective *S. pyogenes* medium (5% sheep blood agar with sulfamethoxazole-trimethoprim added to suppress the growth of other organisms). Identification of the isolated strains were based on the colony morphology, catalase reaction, beta-hemolysis on Colombia agar base (Merck) with 5% sheep blood, as well as resistance to bacitracin (MAST) and positive reaction in pyrrolidonyl arylamidase (PYR) test (MAST).

Susceptibility test for erythromycin

Initially, disk susceptibility testing was performed according to the quid lines in NCCLS document M2-A5. Muller-Hinton sheep blood agar was inoculated with a suspension of each strain equivalent to a 0.5 Mac farland turbidity standard. Disks with 15 μg of erythromycin (MAST) were dispensed on the agar and zone diameters were measured after 20 to 24 h of incubation at 35° C. Bacitracin susceptibility was measured by the disk containing 0.04 U of bacitracin in the same method.

Agar dilution method for MIC

MICs were determined by agar dilution method. The antibiotic was added to the Muller-Hinton sheep blood agar in serial concentrations. Then, 10^4 to 10^5 cfu of the strains inoculated on the medium in a 5 μ l spots.

PCR of 23S rRNA Selective sequence

Each operon was amplified by two-step PCR reaction. The first PCR was performed using a common forward primer (U₁) and reverse specific primers for each operon (P₁ to P₆). The second was done on resulted PCR (First) product using one pair of common primers (U₁and U₂). All primers were selected based on the 23S rRNA gene sequences in Genbank.

The primers were used in these PCRs including: U₁ ⁵ GAGAGACTCGGTGAAATTTTAG ³ ⁷ U₂ ⁵ GTCCTCTCGTACTAGGAGCAG ³ P₁ ⁵ AAGACGTATTGAAGCTTACTCTA ³ P₂ ⁵ AGCTACTTCCCGAACTGATGCA ³

 P_3 5 CATAACCGTCTTCTTTCCCCTTTA 3 P_4 5 CATATTTCTAACACGGGCAGTAG 3 P_5 5 CACTGCCACGCTATCTAAACGTA 3 P_6 5 CAATTGAATAGCCTTCACGTTCG 3 Sequencing of the 23S rRNA

The second PCR products were purified by high pure gel extraction kit (Qiagen) and were sequenced (MWG, Germany). The blast software was used to check the alignment of resulted sequences of the sensitive and erythromycin resistance strains were performed with the blast in NCBI.

Results

Throat samples of 327 students with 12-15 yr old from three schools of Tehran were cultured on the selective S. pyogenes medium and 23 strains were primarily selected as S. pyogenes. Identification of the strains was studied by several morphological and physiological properties. Typical colonies were observed on the sheep blood agar with beta-hemolysis. In addition, the colonies were catalase negative and PYR positive. All strains were susceptible to penicillin and bacitracin (0.04 U). The strains were tested against erythromycin. MICs for erythromycin were determined in which five strains were found intermediate, two strains resistance and the remaining 16 strains susceptible to erythromycin. MIC for erythromycin-resistance strains, BT_3 and BT_4 , were 8.2 and 12.4 µg/ml (Table.1). The resistance strains were cultured in BHI medium and the cell masses were harvested and subjected for total DNA extraction procedure. The purified DNA was used as template for PCR. The first PCR resulted fragments around 2 kb sized of each operon (Fig.1). In the second step, the nested PCR using those fragments resulted 550 bp fragments (Fig.2) which were used for sequencing. The sequences were compared with the sequences of susceptible strain. The results showed three mutations in two operons of strain BT₃ corresponding to 2059 (A to G) and 2529 (G to A) in one of the operons and 2059 (A to G) in the other one. For the strain BT₄, three mutations according to 2059 (A to G) in three different operons were demonstrated.



Fig. 1: Lane 1: PCR product for operons (2kb) and Lane 2: Nested PCR product (550bp)

BT3-1

BT4-1

BT4-2

Fig. 2: The sequences of mutated operons of BT3 and BT4. The bold letters are showing the mutated ones.

Table 1: MICs (μg/ml) of Erythromycin and Penicillin for *Streptococcus pyogenes* isolates

| Isolated strains | Erythromycin | Penicillin |
|-------------------------|--------------|------------|
| BT1 | 0.40 | 0.001 |
| BT2 | 0.1 | 0.001 |
| BT3 | 8.20 | 0.004 |
| BT4 | 12.40 | 0.002 |
| BT5 | 1.20 | 0.001 |
| BT6 | 0.10 | 0.001 |
| BT7 | 0.40 | 0.002 |
| BT8 | 2.40 | 0.001 |
| BT9 | 0.80 | 0.004 |
| BT10 | 0.60 | 0.001 |
| BT11 | 0.40 | 0.001 |
| BT12 | 3.00 | 0.004 |
| BT13 | 0.60 | 0.002 |
| BT14 | 0.20 | 0.002 |
| BT15 | 0.40 | 0.001 |
| BT16 | 0.10 | 0.002 |
| BT17 | 1.60 | 0.001 |
| BT18 | 1.20 | 0.002 |
| BT19 | 0.80 | 0.001 |
| BT20 | 0.20 | 0.002 |
| BT21 | 0.20 | 0.001 |
| BT22 | 0.40 | 0.002 |
| BT23 | 0.40 | 0.001 |

Discussion

Macrolide resistance usually results from over use of these drugs for treatment of pharyngitis. It also could be a result of the unsuccessful treatment of infections with macrolide antibiotics and self-treating without physician prescription (1, 4, 6). Three types of erythromycin resistance mechanisms in S. pyogenes have been reported. The first ones that modify the ribosome, which is target of the antibiotic; the second ones modify the antibiotic itself; and the last ones that affect the rate of transport of the antibiotic across the cell membrane. Target modification is performed by methyl transferase enzymes encoded by the erm (erythromycin resistance methylase). Other groups of the resistance genes are the genes increase macrolide transportation from cells of S. pyogenes. These genes were known as mef (macrolide efflux) and believed to encode a membrane protein that pumps macrolides from the interior of the cell (2, 5, 7, 8).

The major component of macrolide binding site on the ribosome is a 2058 and several neighboring positions in the central loop of domain V. Mutations of this part of rRNA confer resistance to erythromycin. These mutations reduce the affinity of macrolides for the ribosome. In addition, several reports were shown the mono-or dimethylation of the A2058 dramatically reduces the affinity of various macrolides (2, 5, 9). However, it should be mentioned that some other mutations have been also reported in domain V of 23S rRNA as a cause of macrolide resistance in Streptococcus pyogenes (9-11).

In this study in young Iranian population, we found a number of point mutations in position 2059 (A to G) of two operons of BT_3 three operons of BT_4 , which are in agreement with the previous studies (2, 5).

The other point mutation in position 2529 (G to A) was detected just in one operon in BT₃. It might be involved in erythromycin resistance but is not proved experimentally. Conclusively the data obtained in this study demonstrates different point mutations in addition to the reported positions involve in erythromycin resistance of the strains isolated from Iranian children.

Acknowledgements

This research was carried out using Tehran University of Medical Sciences research grant. The authors are grateful to Tehran Education Organization, for kindly providing the possibility of sample collection.

The authors declare that they have no conflict of interests.

References

- Cunningham MW (2000). Pathogenesis of group A Streptococcal infections. Clin Microbiol Rev, 13(3): 470-511.
- 2. Jalava J, Vaara M, Huoviene P (2004). Mutation at the position 2058 of the 23S rRNA as a cause of macrolide resistance in *Streptococcus pyogenes*. *Ann Clin Microbiol Antimicrob*, 3(5): 1-6

- 3. Etesse HC, Roger PM, Dunais B, Durgeat S, Mancini G, Bensoussan M et al. (1999). Gradient plate method to induce *Streptococcus pyogenes* resistance. *J Antimicrob Chemother*, 44: 439-43.
- 4. York MK, Gibbs L, Remington FP, Brooks GF (1999). Characterization of antimicrobial resistance in *Streptococcus pyogenes* isolates from the San Francisco Bay erea of northern California. *J Clin Microbiol*, 37(6): 1727-31.
- 5. Ramos GG, Xiog L, Zhong P, Mankin A (2001). Binding site of macrolide antibiotics on the ribosome: new resistance mutation identifies a specific interaction of ketolides with rRNA. *J Bacteriol*, 183(23): 6898-6907.
- 6. Cochella L, Green R (2004). Isolation of antibiotic resistance mutations in the rRNA by using an in vitro selection system. *PNAS*, 101(11): 3786-91.
- 7. Giovanetti E, Brenciani A, Burioni R, Varaldo PE (2002). A novel efflux system in inducibly erythromycin-resistant strains of *Streptococcus pyogenes*. *Antimicrob Agents chemother*, 46(12): 3750-55.
- 8. Jones HE, Brenwald NP, Owen KA, Gill MJ (2003). A multidrug efflux phenotype mutant of *Streptococcus pyogenes*. *J Antimicrob Chemother*, 51: 707-10.

- 9. Grivea IN, Al-Lahham A, Katopodis GD, Syrogiannopoulos GA, Reinert RR (2006). Resistance to Erythromycin and Telithromycin in *Streptococcus pyogenes* Isolates Obtained between 1999 and 2002 from Greek Children with Tonsillopharyngitis: Phenotypic and Genotypic Analysis. *Antimicrob Agents Chemother*, 50(1): 256-61.
- 10. Douthwaite S, Jalava J, Jakobsen L (2005). Ketolide resistance in *Streptococcus pyogenes* correlates with the degree of rRNA dimethylation by Erm. *Mol Microbiol*, 58(2): 618-22.
- 11. Farrell DJ, Shackcloth J, Barbadora KA, Green M D (2006). *Streptococcus pyogenes* Isolates with High-Level Macrolide Resistance and Reduced Susceptibility to Telithromycin Associated with 23S rRNA Mutations. *Antimicrob Agents Chemother*, 50(2): 817-18.