

# Basics of Antimicrobial Resistance (AMR) Mechanisms and Antimicrobial Susceptibility Test (AST) Methods



Laboratory Training on AMR Surveillance in Terrestrial / Aquatic Food Animals

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**MAFF**

Veterinary AMR Center, NVAL, JMAFF



# Today's Topics

1. What is an Antimicrobial?
2. What is Antimicrobial Resistance?
3. How to determine Antimicrobial Resistance



# What is an Antimicrobial?

- An **ANTIMICROBIAL** agent means a naturally occurring, semi-synthetic or synthetic substance that exhibits antimicrobial activity (kill or inhibit the growth of micro-organisms) at concentrations attainable *in vivo*.
- **ANTIBIOTICS** are a specific type of antimicrobial that are used against bacteria.
- All antibiotics are antimicrobials, but not all antimicrobials are antibiotics.

# Antimicrobial Classes



- **Penicillins**; Ampicillin (ABPC)
- **Cephalosporins**; (1<sup>st</sup> generation) Cefazolin (CEZ)  
(3<sup>rd</sup> generation) Ceftiofur (CTF)
- **Aminoglycosides**; Streptomycin (SM), Kanamycin (KM), Gentamicin (GM)
- **Macrolides**; Erythromycin (EM), Tylosin (TS)
- **Tetracyclines**; Tetracycline (TC), Oxytetracycline (OTC)
- **(Am)Phenicol**; Chloramphenicol (CP)
- **Peptide (Polypeptide)**: Colistin (CL)
- **Quinolones**; Nalidixic acid (NA), (**Fluoroquinolones**) Enrofloxacin (ERFX)
- **Sulfonamides**; Sulfamethoxazole (SMX) (\*+Trimethoprim (TMP))

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# What are Antimicrobial-Resistant Bacteria? (1)

**They are bacteria capable of growth in the presence of antimicrobials.**

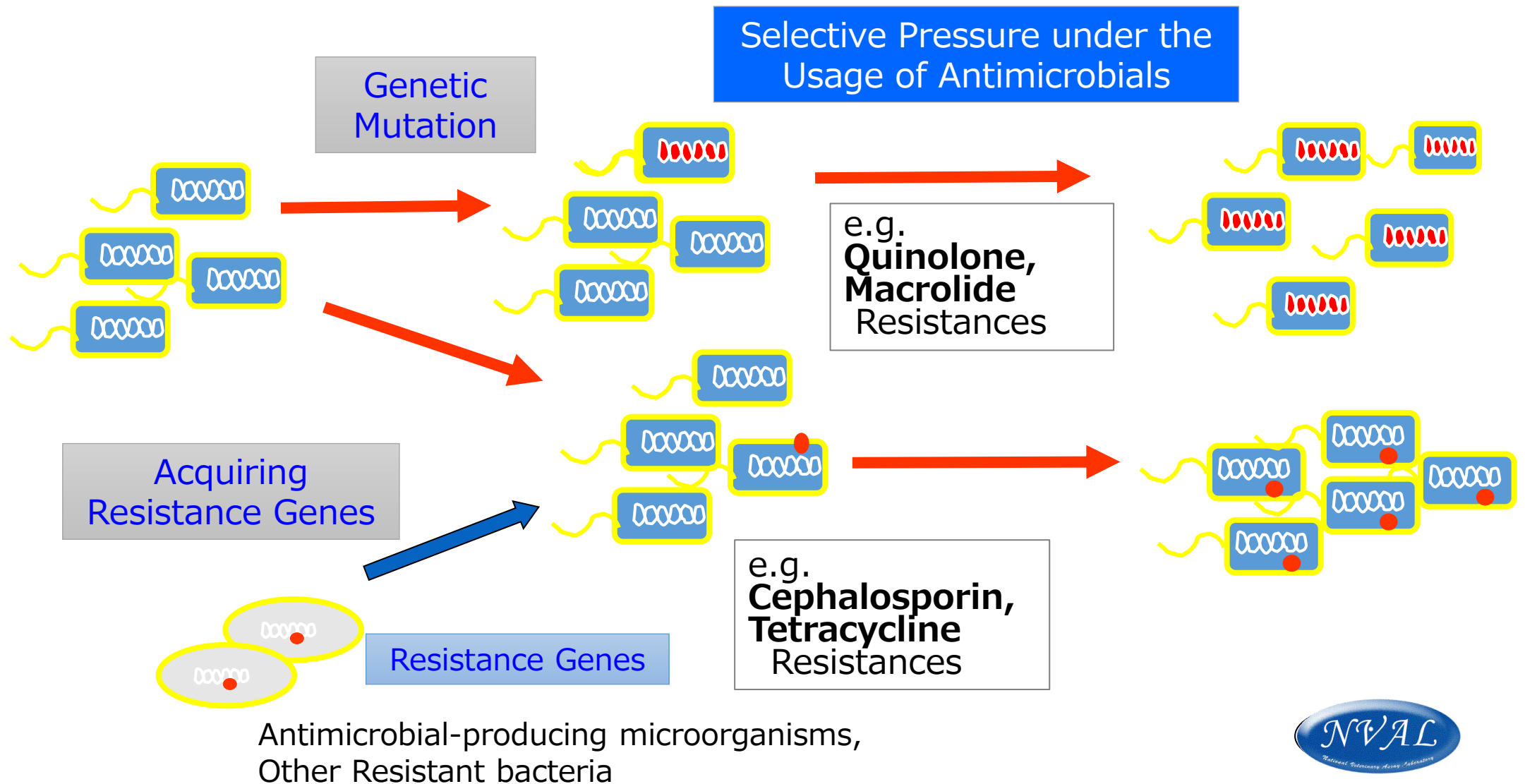
- Some bacteria are naturally resistant to certain types of antimicrobials (intrinsic resistance) .
- However, bacteria may also **become** resistant in two ways:
  - 1) by a **genetic mutation** (chromosomal mutation)
  - 2) by **acquiring resistance genes** from another bacterium (transmission of resistance).



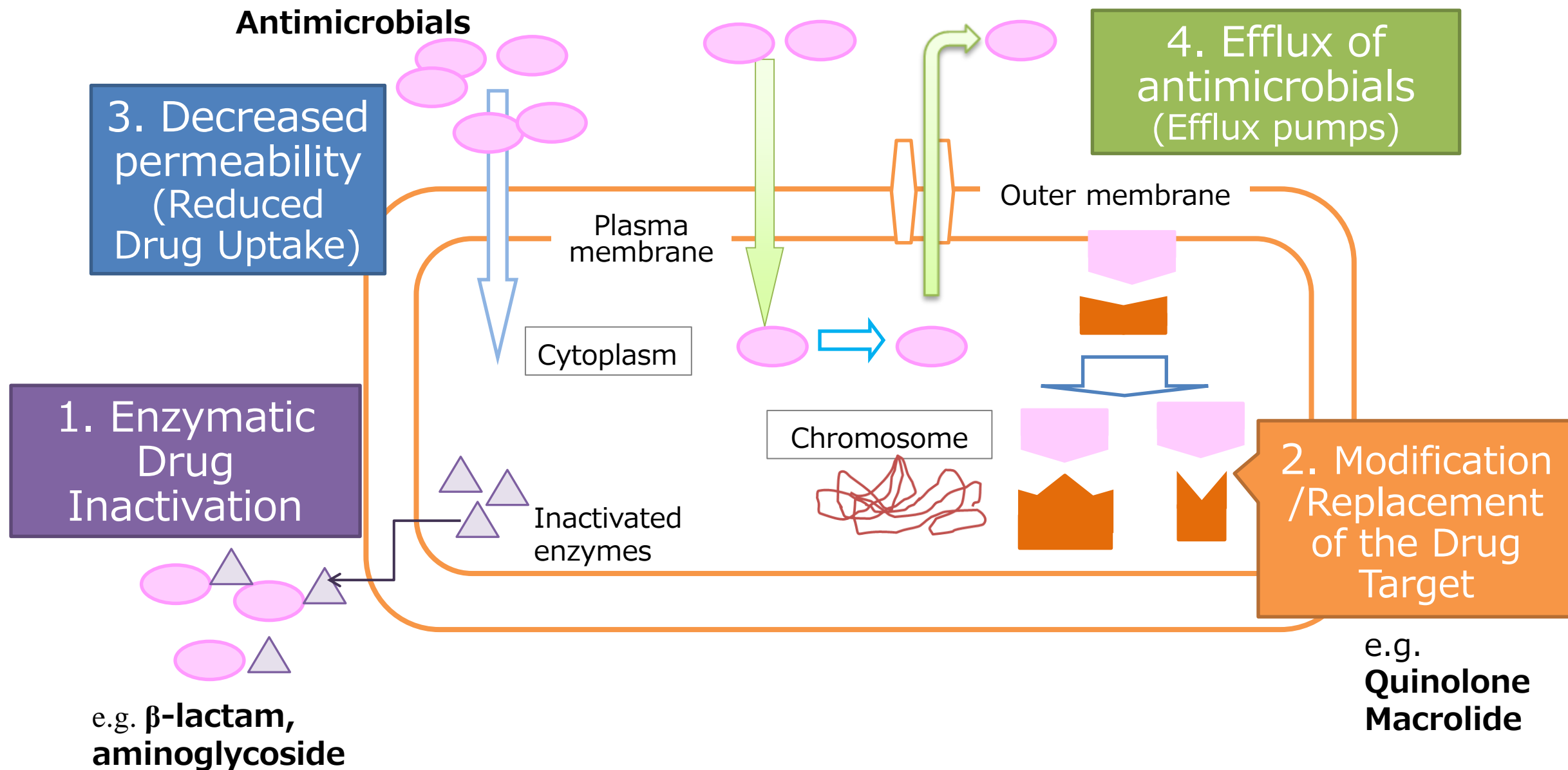
## What are Antimicrobial-Resistant Bacteria? (2)

- The acquisition of resistant genes is **occurring almost constantly irrespective** of the presence of antimicrobials.
- However, antimicrobial-resistant bacteria **can grow more advantageously** than non-resistant bacteria in the presence of that specific antimicrobial (on-resistant bacteria antimicrobial-resistant bacteria survive and proliferate while non-resistant ones die away)  
→ **“selection of antimicrobial-resistant bacteria”**.

# How does Antimicrobial Resistance Occur?



# Antimicrobial-Resistance Mechanisms of Bacteria



# Antimicrobial-Resistance Mechanisms of Bacteria

## 1. Enzymatic Drug Inactivation

- \* Enzyme inactivation is the main mechanism of resistance to  $\beta$ -lactams, aminoglycosides, and phenicols.
- \* Drug-inactivating enzymes are generally associated with mobile genetic elements.
- \* The most widespread and clinically important enzymes are the  $\beta$ -lactamases and aminoglycoside-modifying enzymes.
- \* The  $\beta$ -lactamases hydrolyze the  $\beta$ -lactam ring of penicillins, cephalosporins, and/or carbapenems.
- \* The aminoglycoside-modifying enzymes catalyze transfer of an acetyl group (*N*-acetyltransferases) to amino groups or of a phosphoryl group (*O*-phosphotransferases) or a nucleotide (*O*-nucleotidyltransferases) to amino or hydroxyl groups in the aminoglycoside molecule.

## 2. Modification /Replacement of the Drug Target

### 【Quinolone Action】

Nucleic acid synthesis is a vital function for the bacterial cell.

Quinolones act on DNA synthesis, by target two enzymes that are essential for DNA unzipping: topoisomerase II (=DNA gyrase) and topoisomerase IV.



Mutations in gyrase and topoisomerase IV. (Point mutations of quinolone binding sites.)

### 【Topoisomerase IV】

Tetrameric structure, two A and two B subunit (encoded *parC* and *parE* (G-) or *grlA* and *grlB* (G+))

## 3. Decreased permeability(Reduced Drug Uptake)

- \*In Gram-negative (G-) bacteria, **hydrophilic drugs enter the bacterial cells through porins** and hydrophobic drugs diffuse through the phospholipid layer.
- \*Mutation leading to loss, reduced size, or decreased expression of porins have been shown to confer acquired, **generally lower level resistance to various antibacterial agents**.
- \*For example, reduction in the expression of the OmpF porin has been shown to decrease the susceptibility of *E. coli* to quinolones,  $\beta$ -lactams, tetracyclines and chloramphenicol.

## 4. Activation of Drug Efflux pumps

- \*Active efflux is an energy-dependent mechanism used by bacteria as well as by eukaryotic cells and protozoa for extruding metabolites and foreign toxic compounds, including drugs.
- \*Some efflux pumps act on specific drugs (**specific-drug-resistance (SDR) pumps**), whereas others are active on **multiple drug-resistance (MDR) pumps**.
- \***SDR pumps** are the most important mechanisms of resistance to TC, especially in G- bacteria. (These pumps generally confer high-level resistance and are associated with mobile genetic elements.) **MDR pumps** generally confer low-level resistance and are frequently encoded by the chromosome.

# Cross-resistance and Co-resistance



- **Cross-resistance;** The situation in which resistance to one drug is associated with resistance to another drug and due to a single biochemical mechanism is defined as cross-resistance. Cross-resistance can occur between all members of a given antimicrobial class (e.g. sulfonamides), be limited to some of them (e.g. aminoglycosides), or involve antimicrobials belonging to different classes. Either target overlapping or unspecific drug efflux can cause the latter phenomenon.
- **Co-resistance;** which is due to the coexistence of genes or mutations in the same strain, each conferring resistance to a different class of drug. (e.g., gene cassette, genetic link on self-transferable plasmids.)

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# Antimicrobial Susceptibility Testing Methods

## Diffusion method

**Disk method:** Measures the diameters of inhibition zones by using disks containing a certain concentration of the antimicrobial.

**Gradient MIC strips (E-test) :** Measures the MIC by using a strip with stable gradient of antimicrobial concentrations.

## Dilution method

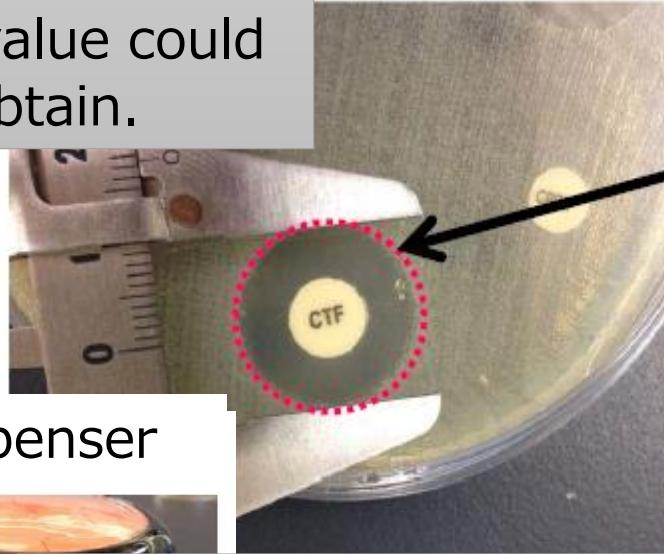
**Agar dilution method:** Measures the MIC by using agar plates with serial concentrations of the antimicrobial.

**Broth microdilution method:** Measures the MIC by using 96-well microplates containing liquid medium with serial concentrations of the antimicrobial.

## Whole Genome Sequence Analysis

\*Convenience,  
efficiency and  
the low cost.  
\*MIC value could  
not obtain.

# Disk diffusion methods

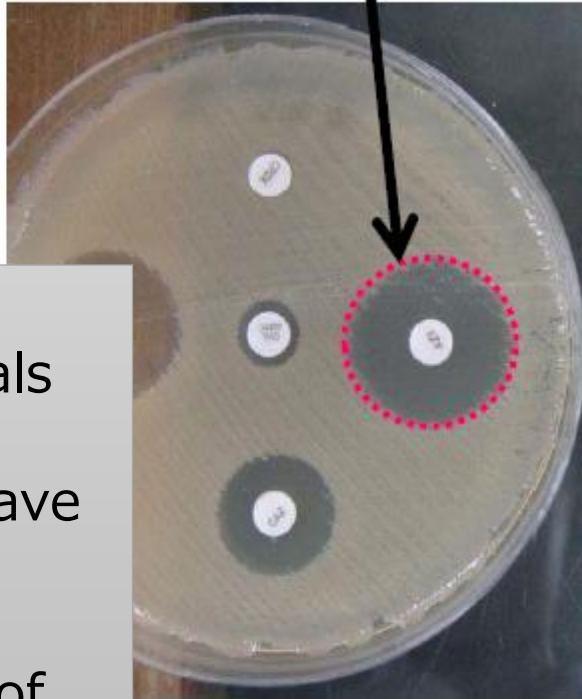


Dispenser



- 1) Filter-paper disks containing antimicrobials are placed on an agar plate where bacteria have been placed
- 2) Overnight incubation
- 3) Measure the diameter of inhibition zone.

Inhibition  
zone  
diameter

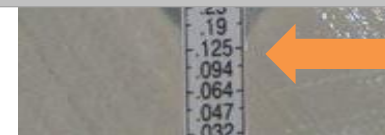


## Cf. Gradient MIC strips (E- test)



E-test is a reagent strip with a predefined gradient of antimicrobials for the determination of MIC values.

The MIC value is read from the scale in terms of  $\mu\text{g/mL}$  where the ellipse edge intersects the strip.

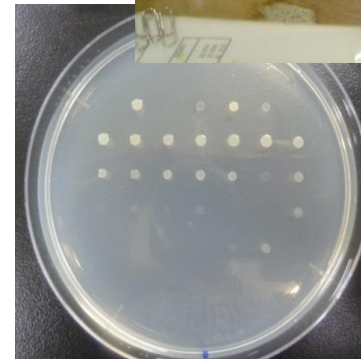
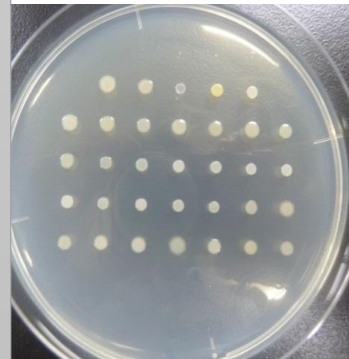


MIC  
0.19  $\mu\text{g/ml}$

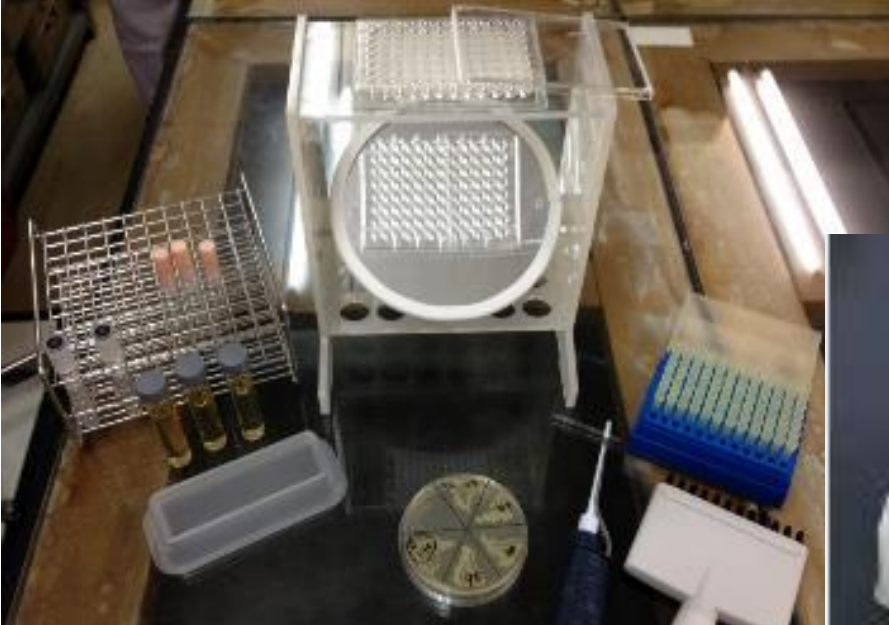
# Agar dilution method



- 1) Prepare the antimicrobials of known potency
- 2) Make serial dilutions of them
- 3) Make agar plates containing serial-diluted antimicrobials
- 4) Inoculate the tested isolates on the plates with several standard bacterial strains
- 5) Incubate overnight
- 6) Measure the MIC.



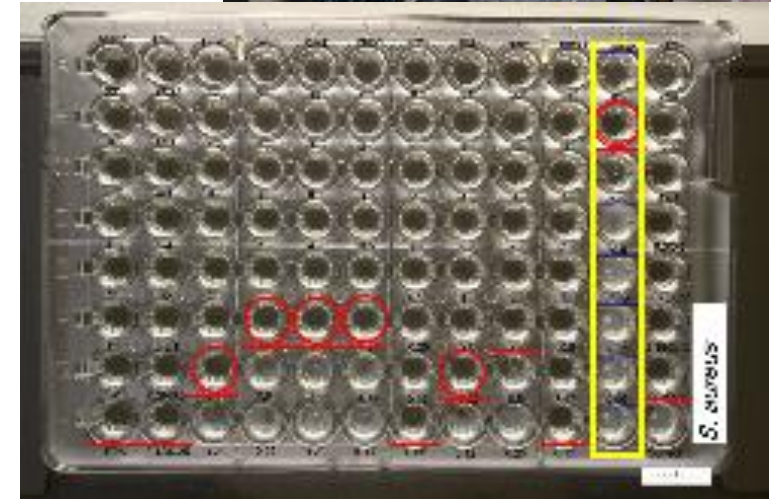
# Broth microdilution method



- \*We usually use **commercialized microplates**, which already contained a series of concentrations of antimicrobials.
- \*With these plate, MIC could be assayed **easily**
- \*But **expensive** (\$10/plate)



Semi-automatic Inoculator  
(Inoculator $\beta$  Eiken)



# Breakpoint/Cutoff

## Epidemiological cutoff values: ECV, ECOFF

MIC (Minimum Inhibitory Concentration) or zone diameter value that separates microbial populations into those with and without acquired and/or mutational resistance based on their phenotypes (non-wild type or wild type), with the epidemiological cut off value defining the highest MIC or smallest zone diameter for the wild type population of isolates.

## Clinical breakpoint: CBP

Clinical breakpoints are established using MIC distributions, pharmacokinetic/ pharmacodynamic data, clinical outcome data, when available.

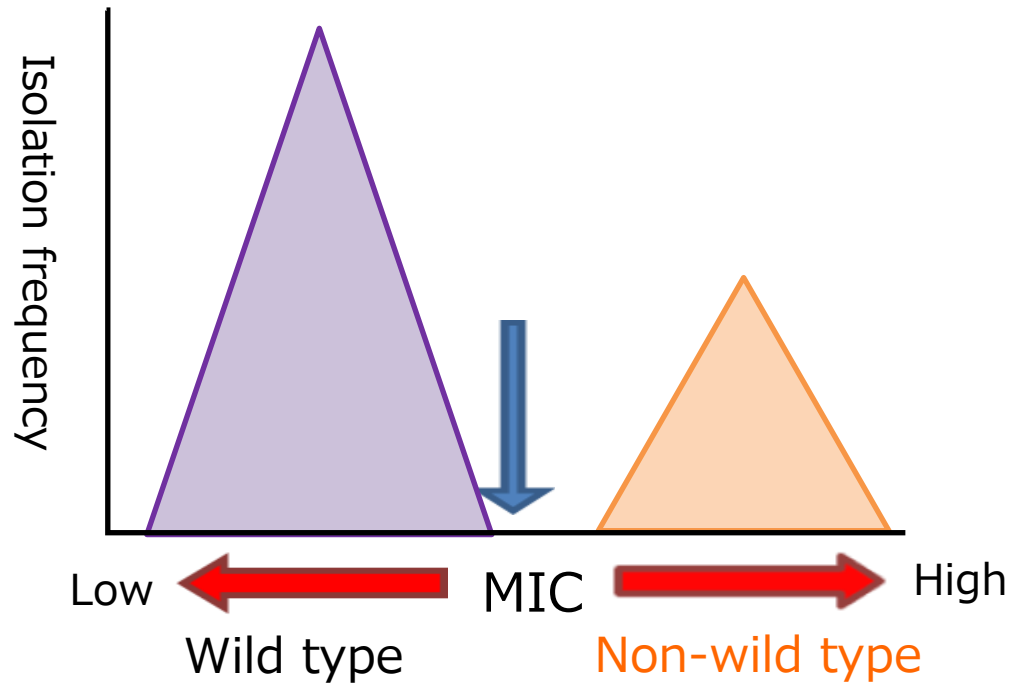
CLSI VET01S 6<sup>th</sup> ed. p.174



# Setting of breakpoints

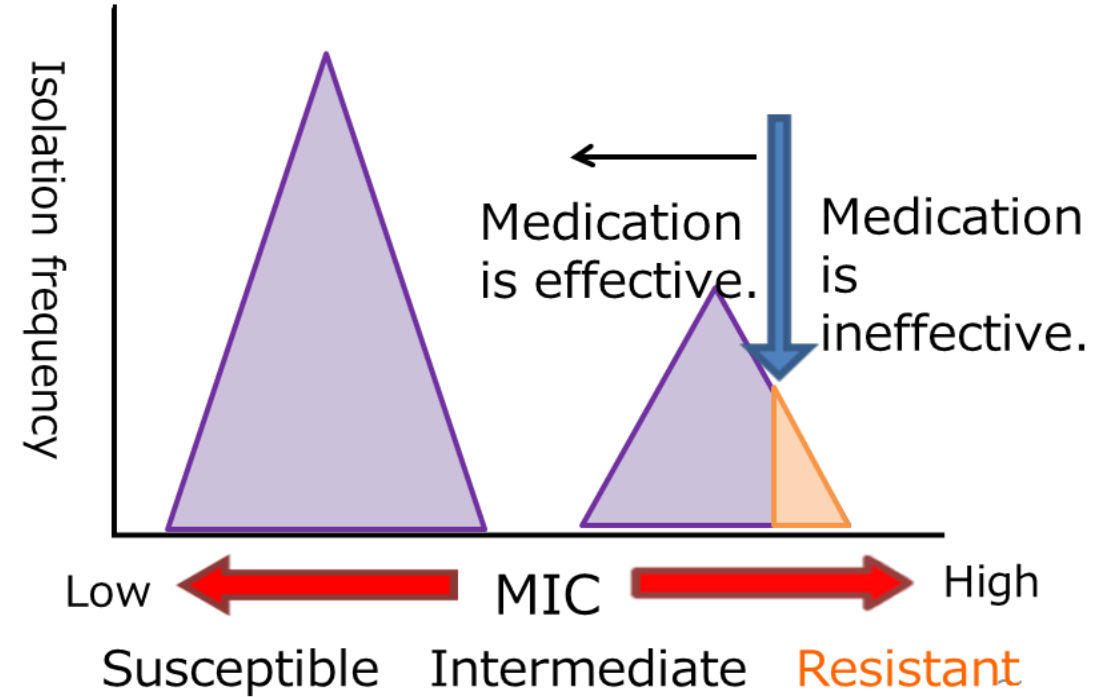
(Example)

ECV



(Example)

CBP



## S/I/R

Clinical breakpoints typically are categorized into three groups

**Susceptible:** The organism should respond to therapy using recommended antimicrobial dosage for the given site of infection and species.

**Intermediate:** The organism's MIC approaches or exceeds the threshold for normal antimicrobial dosing, but clinical response is possible with higher doses or if the antimicrobial concentrates at the site of infection.

**Resistant:** The patient's organism should NOT be inhibited by concentrations achieved with normal dosing.

