

Sequencing of M.Tb directly from sputum

Professor Judy Breuer

MTb Drug susceptibility testing

Phenotypic

Still the gold standard

Very slow. Depending on type can take 7-10 days or 4 – 6 weeks



Molecular tests

- Gene Xpert

Molecular detection of MTB and drug resistance markers within 2 hours

Limited to rifampicin

Can't distinguish between synonymous and non-synonymous mutations

- Line probe assays

DNA strip test allows molecular detection of drug resistance markers directly from clinical samples within 5 hours

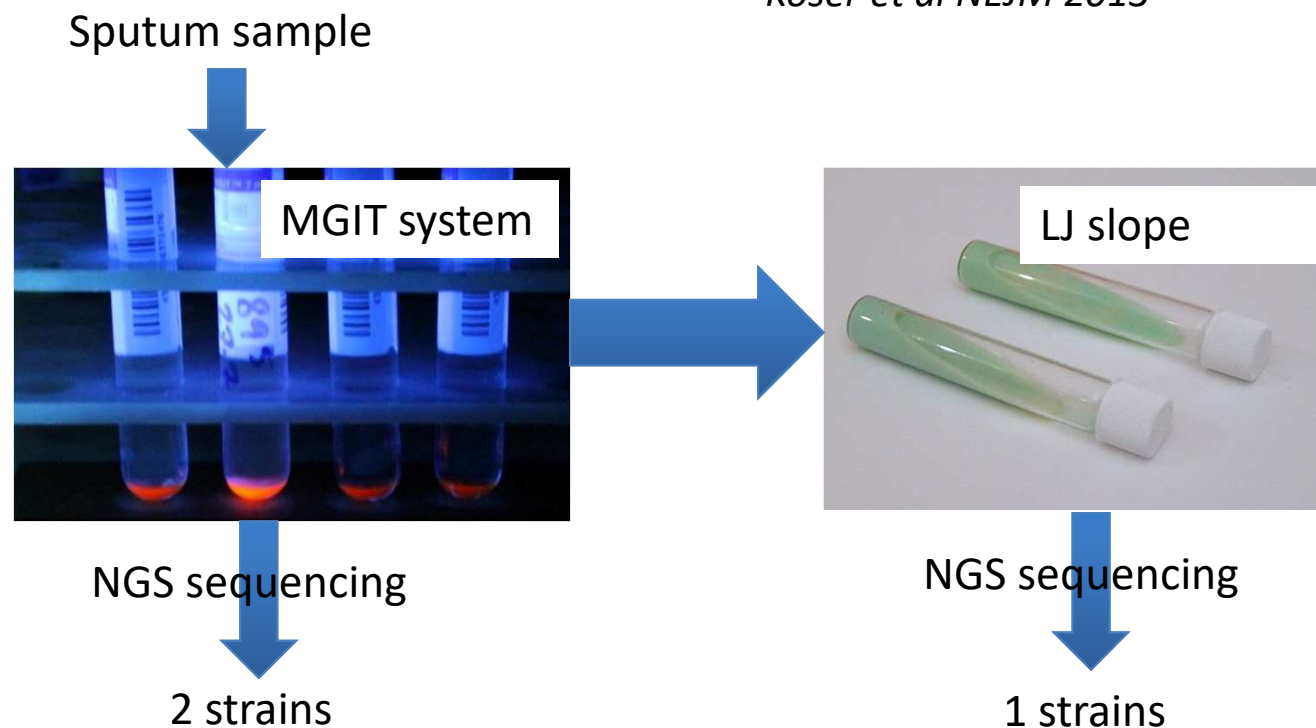
Limited number of mutations it can detect

Sequencing early MGIT culture as an alternative

(1) Overcomes the need for culture, which can take weeks

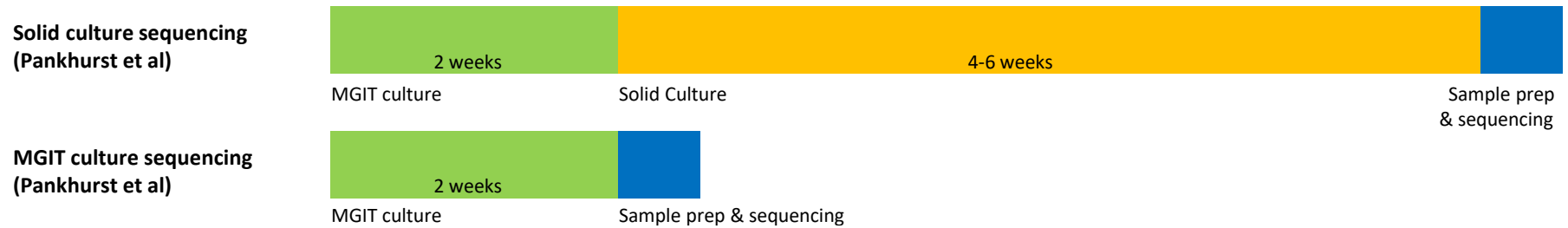
(2) Overcomes possible biasing of genetic diversity from culture

Koser et al NEJM 2013



Especially important in context of superinfections
Quicker than conventional culture

MGIT sequencing reduces time to AMR result



WGS directly on sputum samples

Possible without any enrichment

But very low coverage: 0.002 to 0.7 fold

Not enough to accurately call resistance

Culture-independent detection and characterisation of *Mycobacterium tuberculosis* and *M. africanum* in sputum samples using shotgun metagenomics on a benchtop sequencer

Emma L. Doughty¹, Martin J. Sergeant¹, Ifedayo Adetifa², Martin Antonio^{1,2}, Mark J. Pallen¹✉

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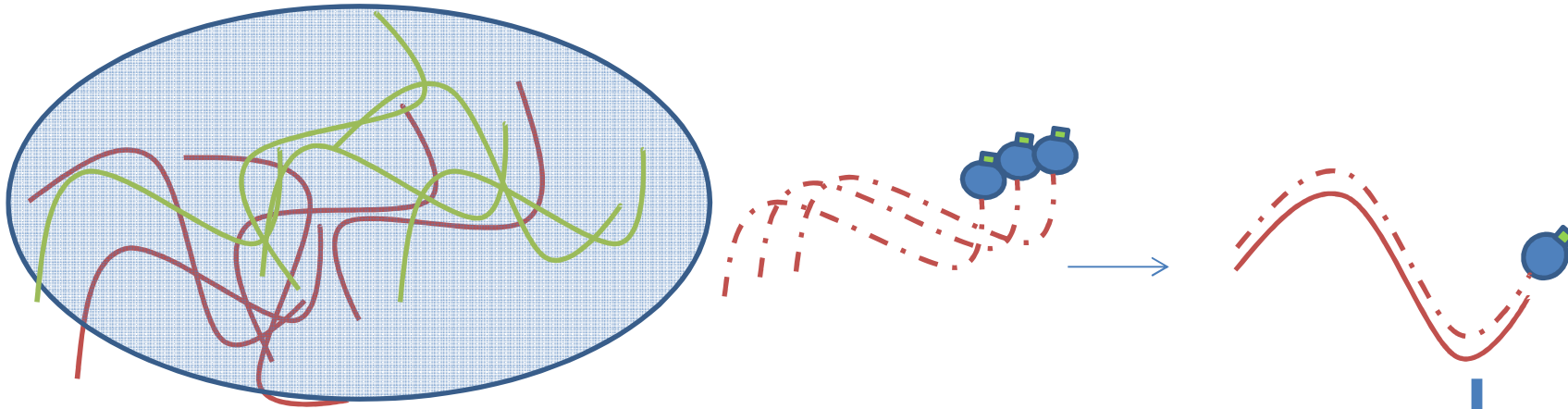
PeerJ
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Sequencing of enriched pathogen nucleic acid

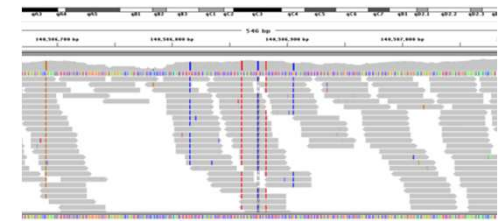


Pros

- Can be used directly on sputum samples
- Works for highly variable pathogens
- Works for all sizes of pathogens
- Good detection of mixtures
- Automated high throughput

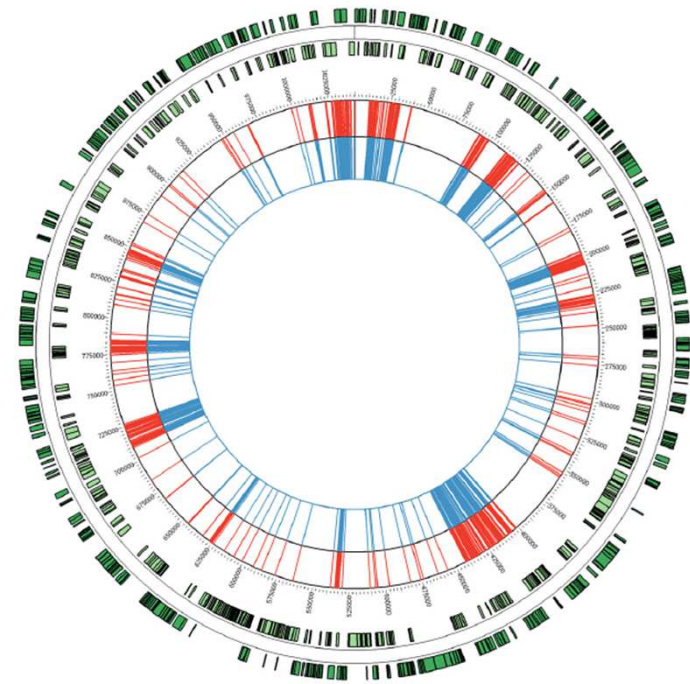
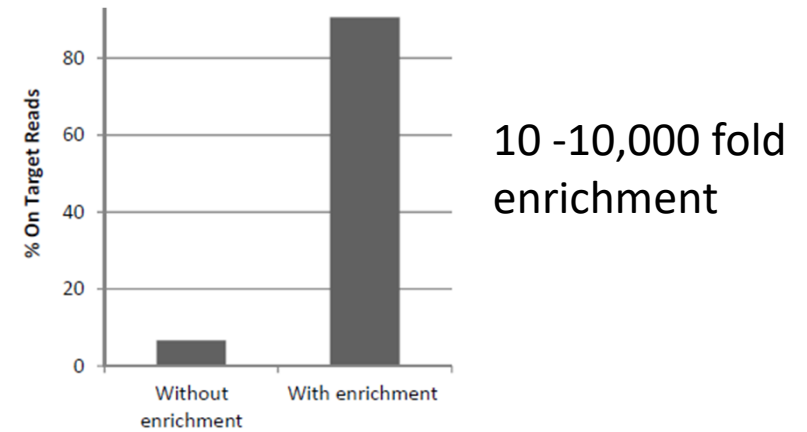
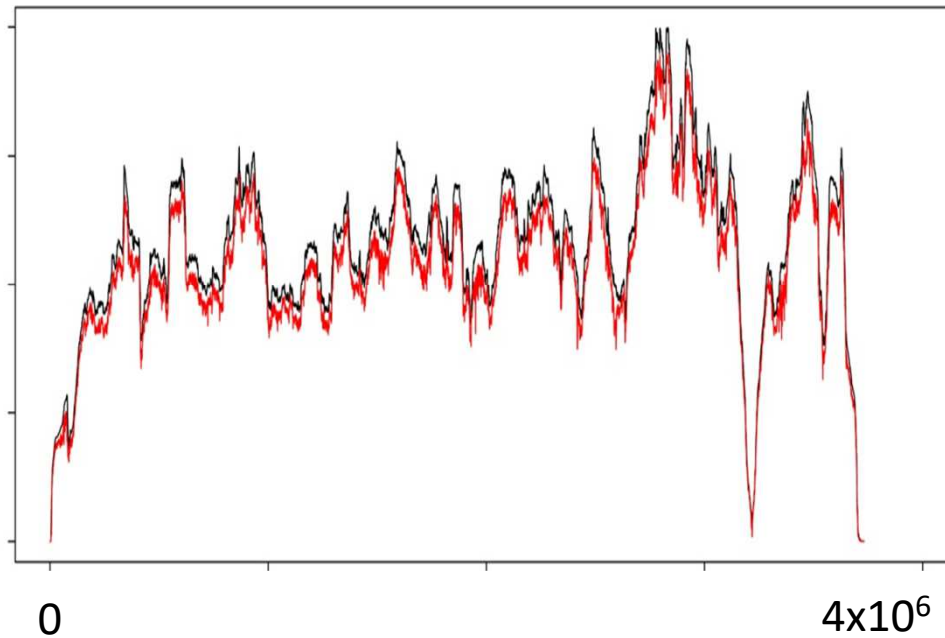
Cons

- Expensive to set up
- Expertise needed

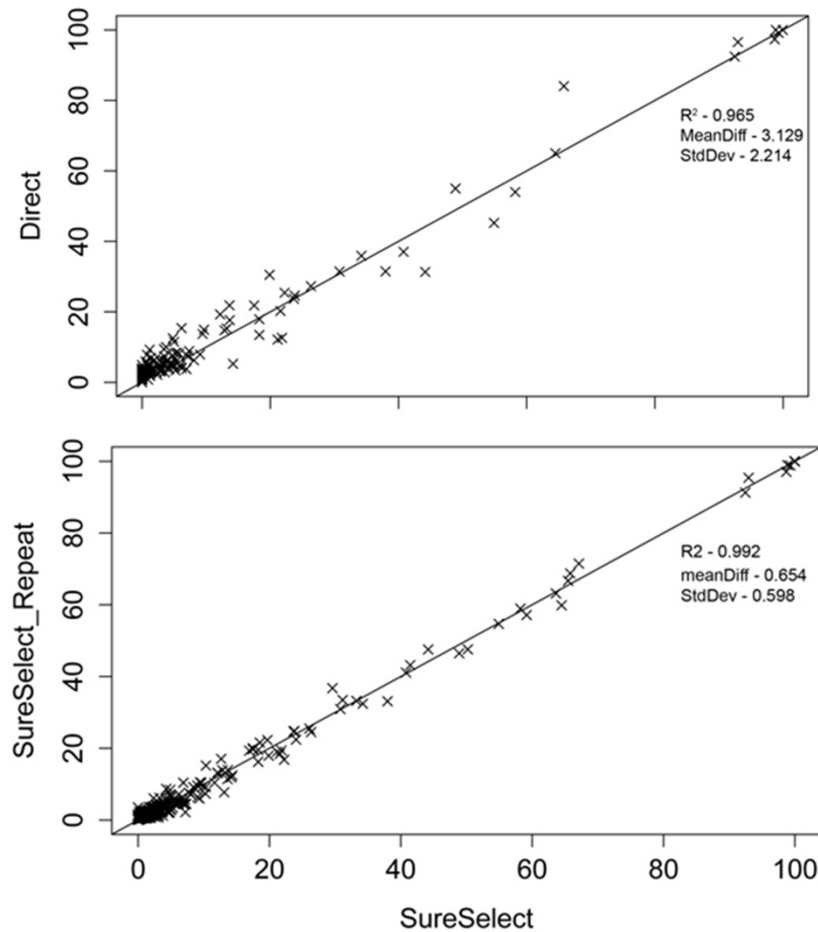


Targeted Enrichment Sequencing

- Semi automated method
- No prior PCR/culture
- Random access
- Sensitive – 100-1000 copies /ml

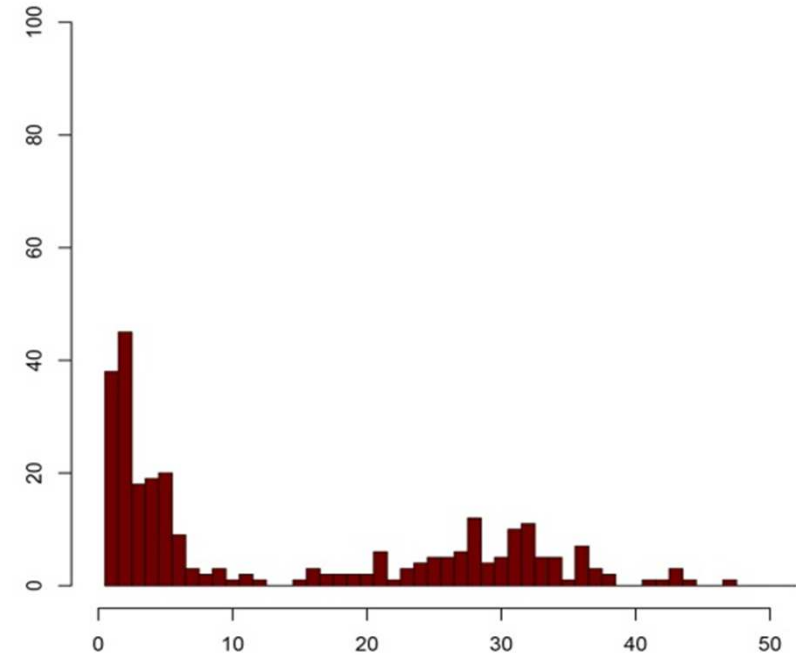


Targeted Enrichment Sequencing



Preserves variant frequencies

Depledge 2011 Plos One, Depledge 2014 MBE



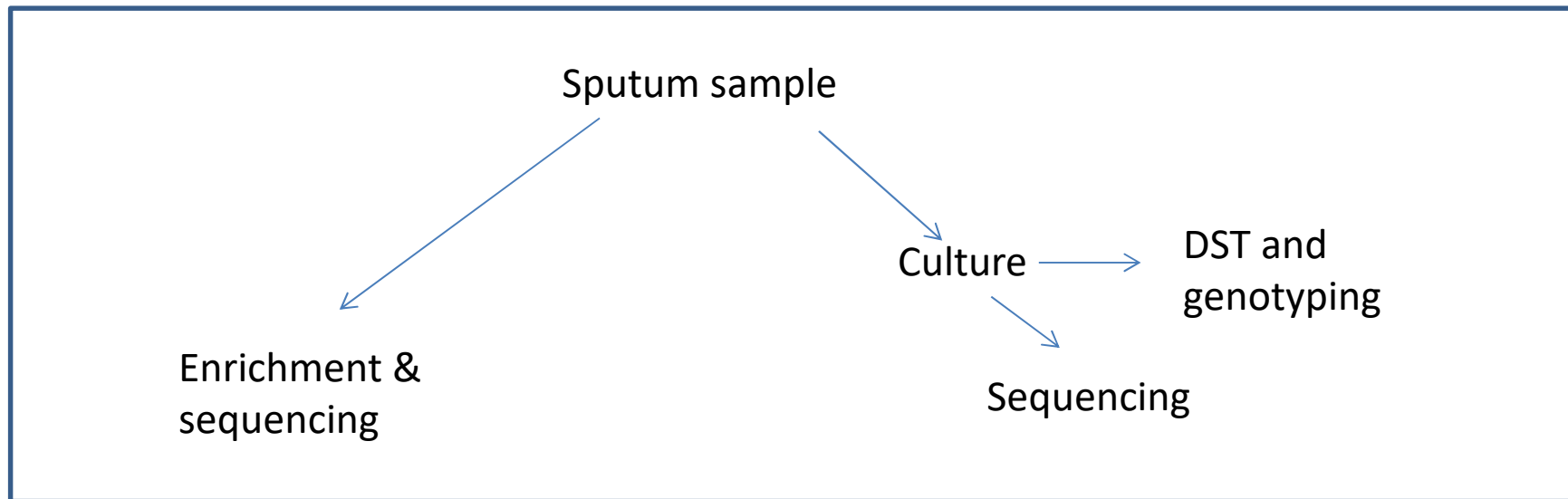
Enables detection of mixed infections

Depledge , Ruis, Bryant, Doyle unpublished

Pilot study to test Sure Select method on TB

Outcomes: Can we use targeted enrichment on TB?
Is it as good as culture?

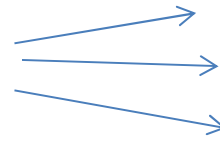
Secondary outcome:
Are there any differences in the diversity obtained
between sputum and culture?



Routine samples collected from UK and Lithuania:

(1) 24 subjects with drug resistance data:

All sputum positive, culture positive



9 sensitive

8 MDR

3 XDR

(2) 10 subjects without drug resistance data:

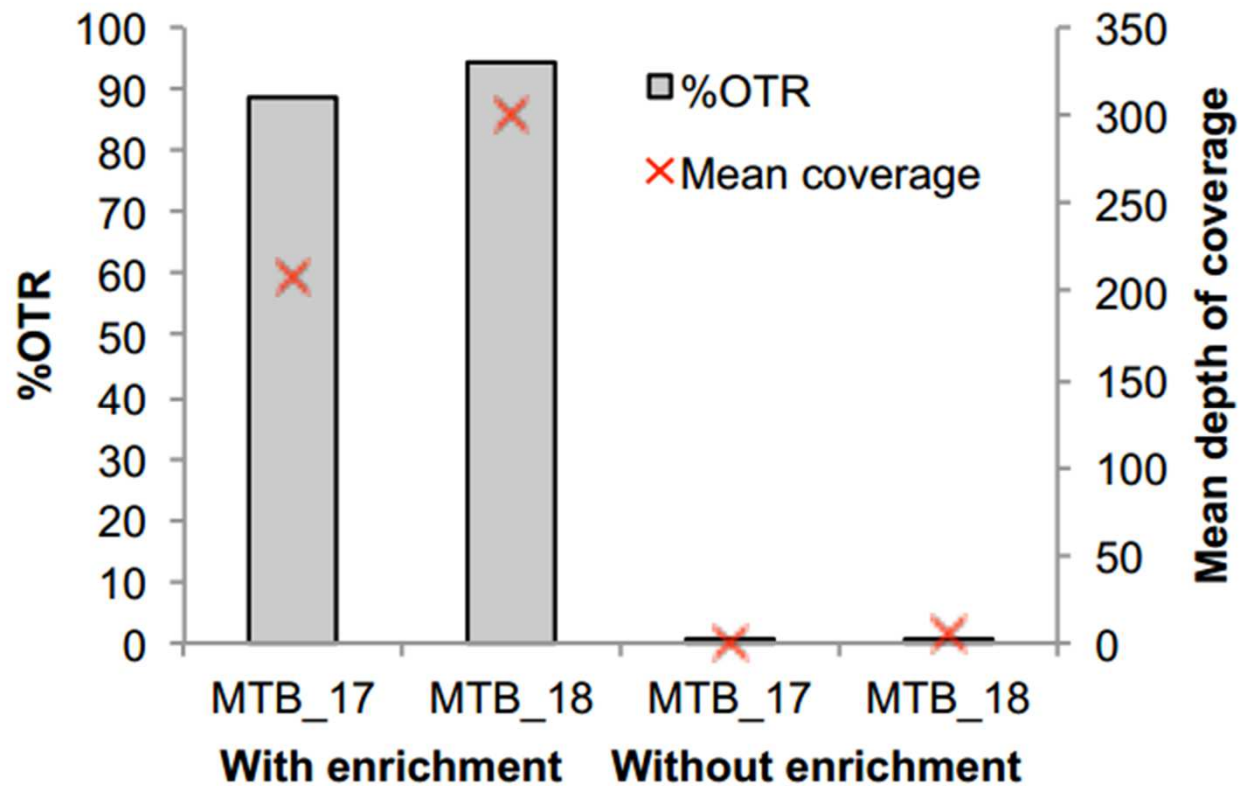
2 sputum positive, culture negative

8 sputum negative, culture negative

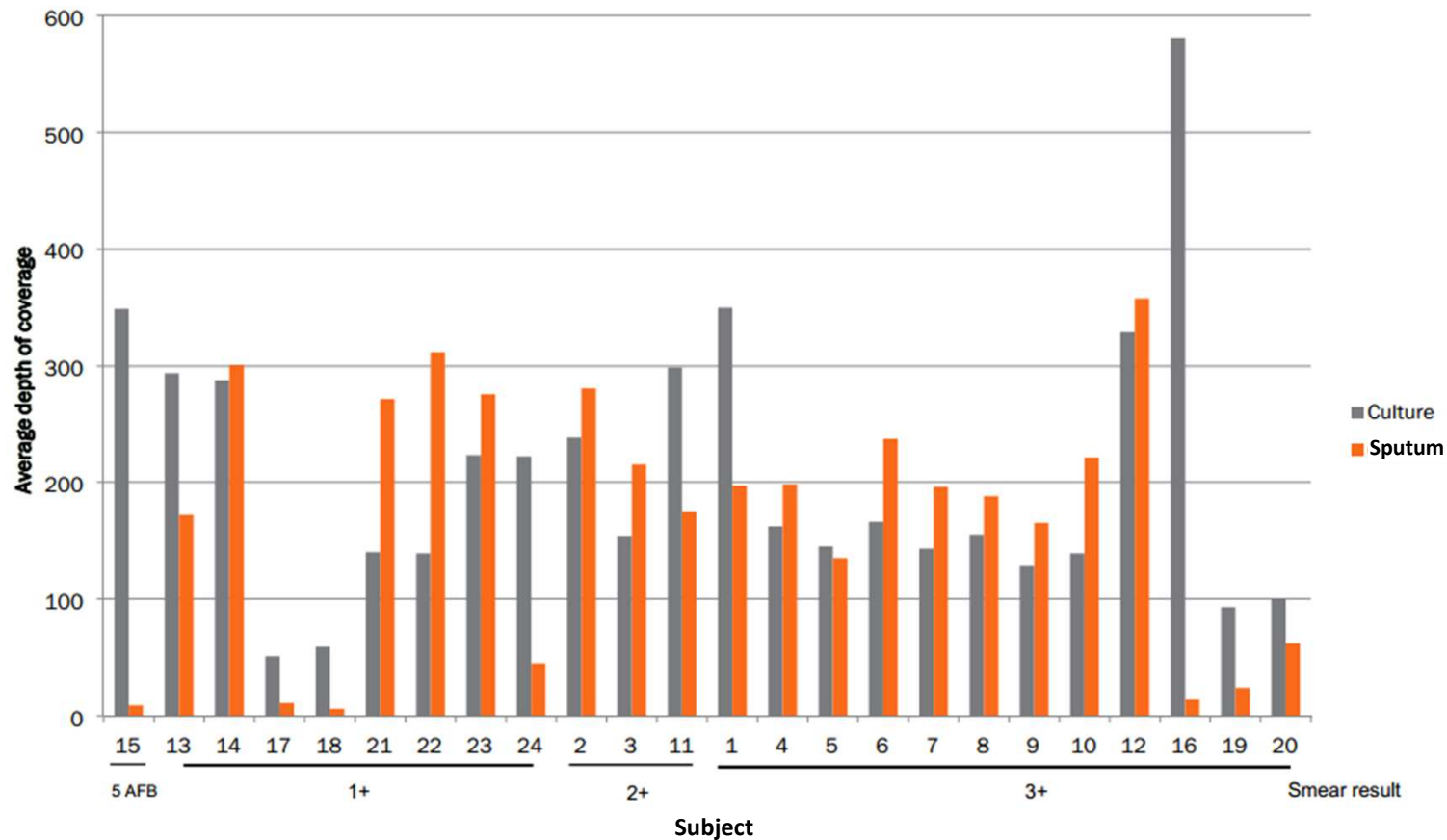


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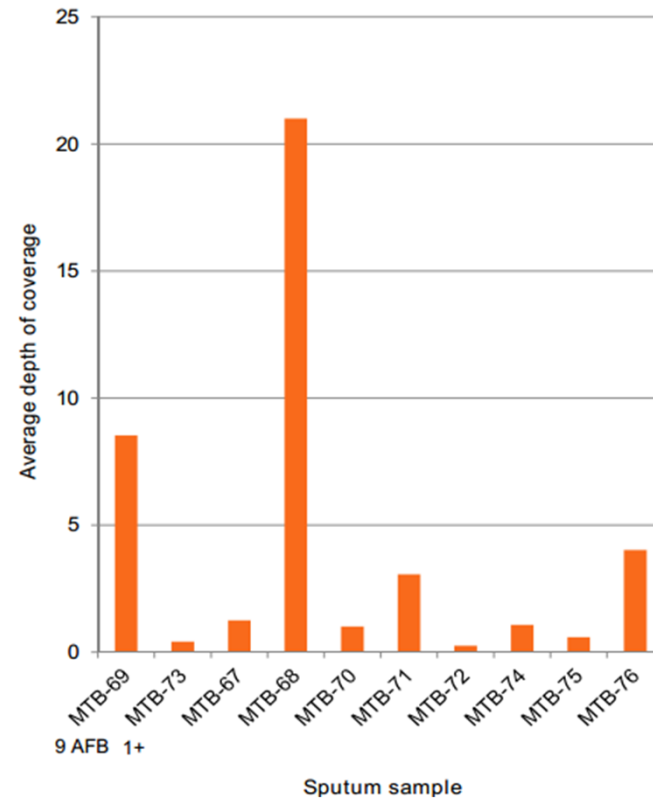
Does enrichment improve MTB recovery in absence of culture?



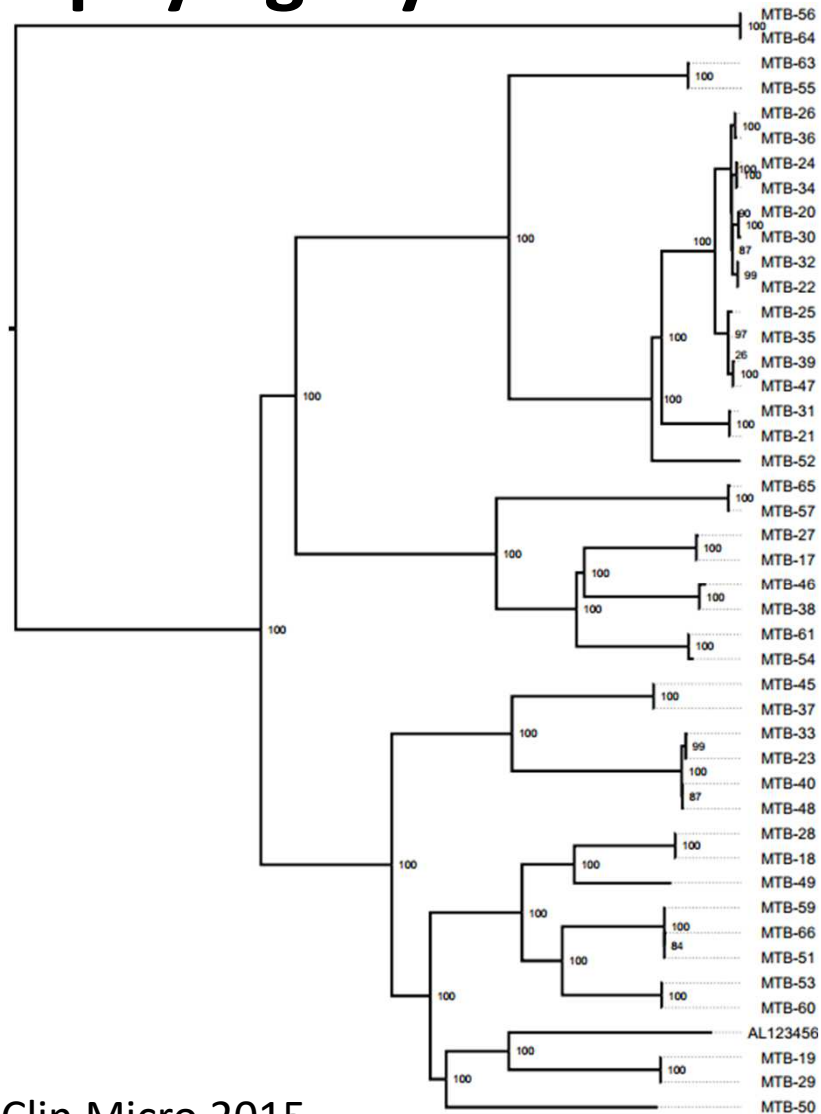
How does MTB sequence from enrichment compare with culture?



Can we recover MTB when culture doesn't work?



Is there enough information to construct a robust phylogeny?



Can we call resistance genotypes?

- Can only call resistance; (sensitivity can be inferred in the absence of a mutation)
- Used LSHTM drug resistance database
- 88 % of phenotypically resistance cases had a mutation
- 94 % of sensitive cases had no mutation
- With one exception all were homozygous

Discrepancies between phenotype and genotype

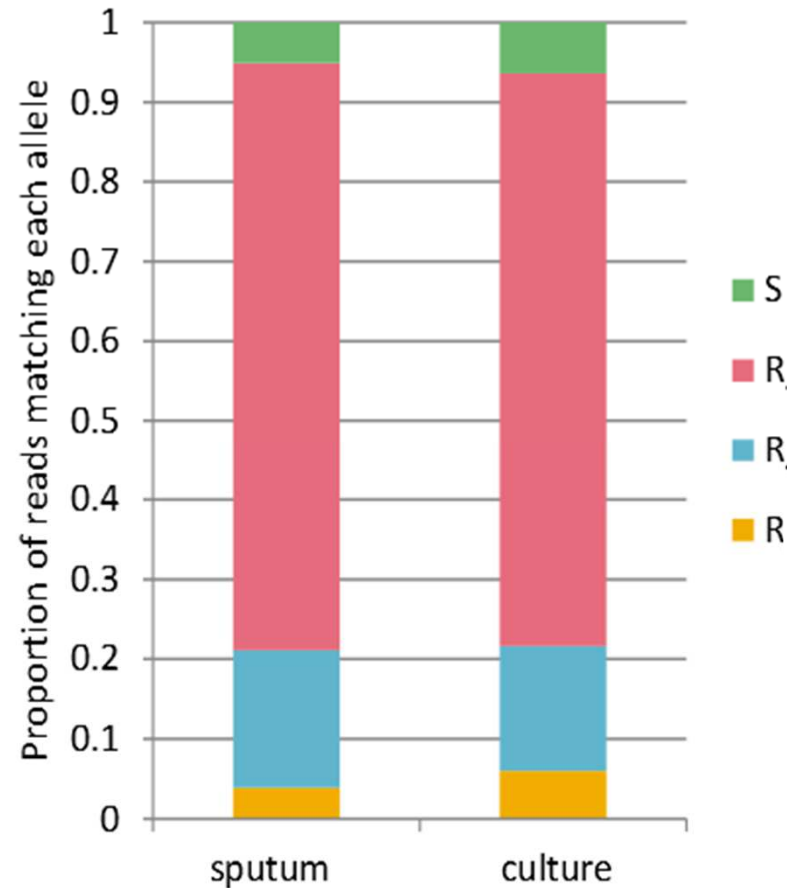
Patient	Sputum positivity	Sample	Type	Rif	Inh	Emb	Pza	Str*	Ofi*	Pas*	Amg*	Thi*
1	3+		Culture phenotype	S	S	S	S	NA	NA	NA	NA	NA
		MTB-27	Culture genotype									
		MTB-17	Sputum genotype									
2	2+		Culture phenotype	S	S	S	S	NA	NA	NA	NA	NA
		MTB-28	Culture genotype							R		
		MTB-18	Sputum genotype							R		
3	2+		Culture phenotype	S	S	S	S	NA	NA	NA	NA	NA
		MTB-29WE	Culture genotype									
		MTB-19	Sputum genotype									
4	3+		Culture phenotype	R	R	R	R	R	S	S	R (Kan)	S
		MTB-30WE	Culture genotype	R	R	Low R	R	R			R	
		MTB-20	Sputum genotype	R	R	Low R	R	R			R	
5	3+		Culture phenotype	S	R	S	R	R	R	S	R (Kan & Amk)	R
		MTB-31WE	Culture genotype	R	R	Low R		R	R		R	
		MTB-21	Sputum genotype	R	R	Low R		R	R		R (Kan)	
6	3+		Culture phenotype	R	R	S	R	R	R	S	R (Kan)	R
		MTB-32WE	Culture genotype	R	R	Low R	R	R	R		R	R
		MTB-22	Sputum genotype	R	R	Low R	R	R	R		R	R

phenotypically sensitive to rifampicin but has L452P mutation in the *rpoB* gene. This mutation has been associated with both high and low rifampicin resistance in the literature

Mutation in codon 306 of *embB* gene
Confers borderline MIC

No previously described mutation identified

Does sequencing from sputum reveal more genetic diversity?



gyrA gene in subject 10

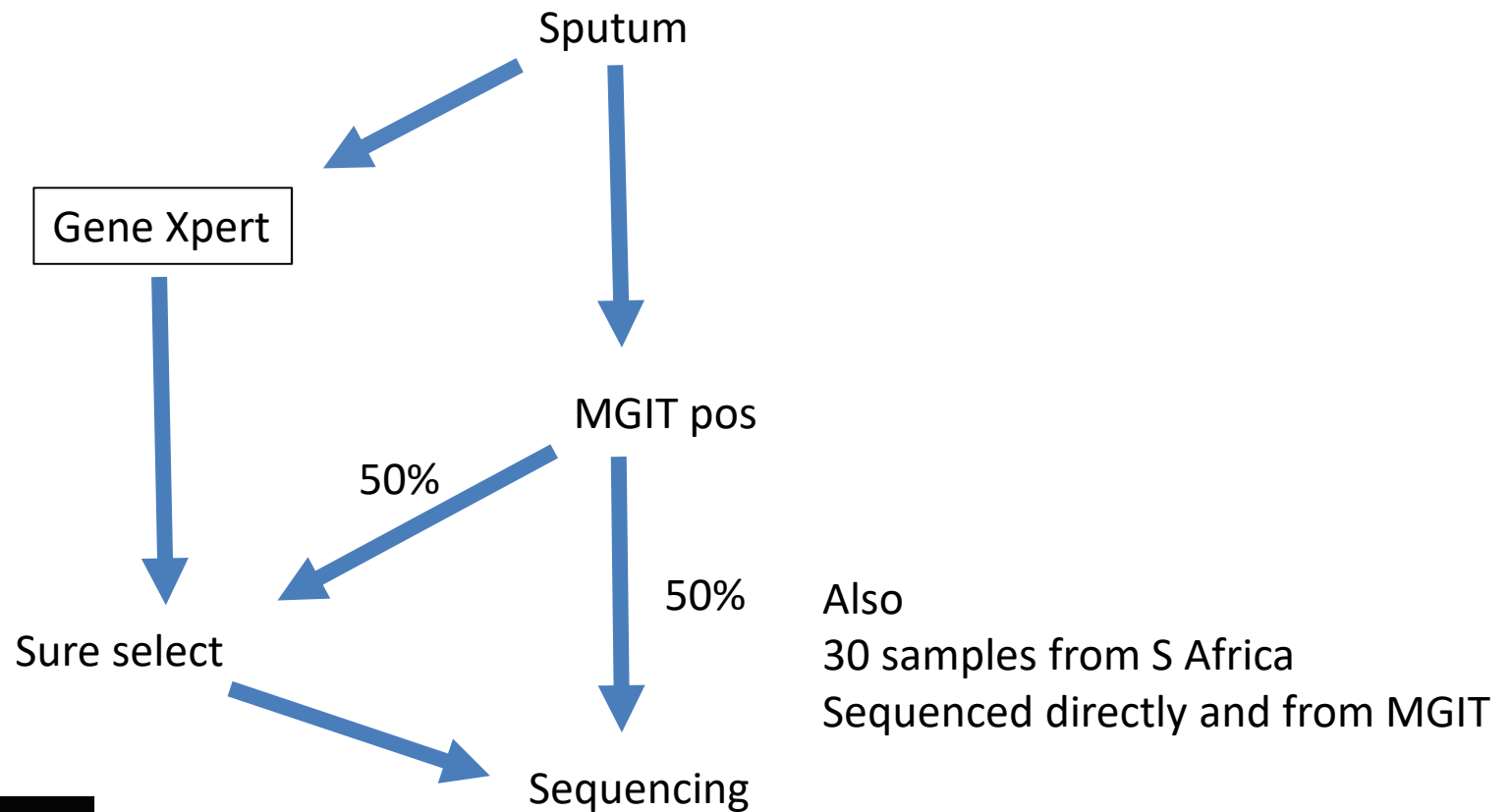


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Brown et al J Clin Micro 2015

Prospective study to evaluate sequencing directly from sputum versus MGIT culture

50 Patients with smear +M.tb



Conclusions

- Targeted enrichment successfully recovers genomes from sputum
- The data is at a high enough quality to accurately reconstruct phylogenies and call resistance mutations
- Consensus sequences are identical to MGIT and cultured samples
- Sensitivity is related to genome copy input (>90% for smear +)
- Can also recover genomes from smear negative sputum
- Turnaround times are faster than other methods for MTb AMR detection 1.5/2.5 days versus 14 days (MGIT) and 21-28 days (culture).

Acknowledgements

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