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4 Application of nanopore sequencing to identify antimicrobial resistance
5 genes, mobile genetic elements and virulence factors in clinical isolates.
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7 Rachel Kimani¹¶, Sebastian Musundi¹¶, Patrick Wakaba¹, David Mbogo², Suliman Essuman³,
8 Bernard N. Kanoi¹, Jesse Gitaka^{1*}

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12 ¹Centre for Research in Infectious Diseases, Institute of Tropical Medicine, Mount Kenya University,
13 Thika, Kenya

14
15 ²Department of Clinical Services, Thika Level Five Hospital, Thika, Kenya

16
17 ³Department of Microbiology, School of Medicine, Mount Kenya University, Thika, Kenya

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20
21 * Corresponding author

22 Email: jgitaka@mku.ac.ke

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24 ¶ These authors contributed equally to this work.

25 Abstract

26 The global health challenge posed by the emergence of antibiotic resistance pathogen is further
27 exacerbated in African countries by the indiscriminate use of antibiotics, poor surveillance and lack of
28 stewardship programs. To address this issue, we employed the Oxford Nanopore Technologies (ONT)
29 to sequence 17 clinical isolates from a referral hospital in Kenya. Our comprehensive bioinformatics
30 approach facilitated the assembly, identification of sequence types and prediction of antimicrobial
31 resistance genes, mobile genetic elements (plasmids and integrons) and virulence genes. Of the 17
32 isolates, five were *A. baumannii*, four *E. coli*, three *S. haemolyticus*, three were *E. cloacae*, while *S.*
33 *aureus* and *E. faecalis* were single isolates. For the detection of AMR genes, *A. baumannii* isolates
34 harbored genes such as *blaOXA-23* which mediates resistance to carbapenems, *E. coli* and *E. cloacae*
35 carried *blaCTX-M-15* which confers resistance to cephalosporins and *S. haemolyticus* harbored *blaZ*,
36 responsible for resistance against *penicillins*. *S. aureus* co-haboured *mecA* and *blaZ* genes. In addition,,
37 various other different AMR genes to chloramphenicol, macrolides, aminoglycosides, tetracycline
38 were also observed. For plasmid replicons, *E. coli* carried the most number of plasmids and shared
39 ColRNAI_1 and IncFIB(pB171)_1_pB171 with *A. baumannii* and IncR_1 with *E. cloacae*. Many
40 genes encoding various virulence factors including *fimA-I* and *ompA*, *senB* were identified in *E. coli*,
41 *hlgA-C* and *hla/hly*, *hly*, *hly*, *hly*, *hly* in *S. aureus* and *efaA*, *ebpA-C* in *E. faecalis*. In conclusion, most isolates
42 contained a combination of different AMR genes harbored in plasmids and integrons and virulence
43 genes. This study provides significant information on genetic determinants of antibiotic resistant
44 pathogens in clinical isolates and could assist in developing strategies that improve patient treatment.

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49 **Author Summary**

50 Antimicrobial resistance remains a major health challenge across the globe. The continued misuse and
51 lack of proper monitoring has worsened the problem of antibiotic resistant infections. In this study, we
52 sought to use nanopore sequencing to identify antibiotic resistance genes, mobile genetic elements and
53 virulence factors from clinical isolates which showed resistance against commonly used antibiotics.
54 We found the presence of resistance genes to multiple different antibiotics including beta-lactams,
55 macrolides, tetracycline and aminoglycosides across multiple bacterial species. We also identified
56 plasmid replicons and class I integrons which facilitate the spread of antimicrobial resistant genes.
57 Furthermore, several virulence factors that help resistant bacteria to survive were identified. Overall,
58 this study highlights the widespread issue of antibiotic resistance, factors contributing to its persistence
59 in clinical isolates and utility of nanopore sequencing for monitoring genetic determinants of
60 antimicrobial resistance.

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73 **Introduction**

74 Over the past 70 years, treatment and control of bacterial diseases has greatly relied on use of antibiotics
75 [1]. However, the rise in antimicrobial resistance (AMR) in the past decades has emerged as a major
76 public health challenge globally[2]. With the escalating spread of multi-drug resistant bacteria, widely
77 used combinations of empirical antibiotic treatment regimens are being challenged [3]. In particular,
78 infections caused by methicillin resistant *Staphylococcus aureus* (MRSA), extended-spectrum beta-
79 lactamases (ESBLs) producing gram negative bacteria and Carbapenem-resistant Enterobacterales
80 (CREs), poses a major health concern. These bacteria are not only resistant to all penicillin and third
81 generation cephalosporins, but also frequently express resistance against carbapenem. As a result,
82 treatment failure may occur leading to longer hospital stays and at worst death.

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84 Early identification and routine epidemiological surveillance of AMR is necessary so as to provide
85 informed use of antibiotics and hence prevent further spread of AMR [4]. Phenotypic identification of
86 antimicrobial susceptibility profiles of bacterial isolates is commonly performed by microbiological
87 procedures based on isolation and growth of pure cultures of individual bacterial isolates in the
88 presence of an antimicrobial agent. These methods suffer from long turn-around time and the methods
89 only allow assessment of resistance to known antibiotics. Whole genome sequencing offers several
90 advantages over traditional culture-based approaches including its ability to accurately identify strains
91 and comprehensively identify AMR genes, plasmids, and virulence factors [5]. Already the use of
92 WGS to identify and characterize antimicrobial resistant bacterial strains has significantly increased
93 over the past years [6,7]. Nonetheless, several limitations, key among them cost hinder the adoption
94 and deployment of WGS in resource constrained settings.

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96 In April 2014, the Oxford Nanopore Technologies (ONT) launched a portable long-read nanopore
97 sequencing MinION device that has comparable performance to standard short-read sequencing
98 platforms. ONT sequencing offers unique advantages to short-read sequencing including lower
99 equipment costs, reduced turnaround times from days to hours, real-time base-calling, enrichment of
100 samples via adaptive sampling and high portability [8,9]. To date, ONT MinION sequencer has been
101 widely applied in research to detect bacteria, parasites and viruses in both clinical and environmental
102 samples [10–12]. The MinION device has been used in detecting bacterial pathogens including
103 *Salmonella typhirium* [13], *Salmonella enterica* and MRSA [14]. In this study, we performed whole
104 genome sequencing for 17 clinical samples that harbored isolates such as *A. baumannii*, *E. cloacae*, *E.*
105 *faecalis* and *Staphylococcus spp* using ONT to screen for genes that confer resistance against
106 commonly used antibiotics. We identified antimicrobial genetic determinants such as plasmids,
107 integrons, and virulence genes harbored by the bacterial isolates.

108 **Results**

109 **Genome Assembly Quality and Completeness**

110 The total number of contigs from the draft genomes ranged from 2 to 61, with the largest contig being
111 approximately 4,948,395 bases. The N50 value ranged from 236,330 to 4,948,395, while the average
112 GC% content ranged from 32.78% to 55.89 (S1 Table). Genome completeness before polishing by
113 BUSCO using the proteobacteria database ranged from 37.9% to 99% (S1 Fig). After four rounds of
114 polishing using Racon followed by Medaka and Homopolish, the BUSCO completeness score ranged
115 from 44.7% to 100% (S2 Fig).

116 **Sequence Types**

117 MLST analysis of the 17 isolates revealed different bacterial species with varying sequence types. Of
118 the 17 isolates, 5 were *A. baumannii*, 4 were *E. coli*, 3 were *S. haemolyticus*, 3 were *E. cloacae*, while

119 *S. aureus* and *E. faecalis* were single isolates (S2 Table). One sequence type in *A. baumannii* isolates
120 could be identified as ST1. The other *A. baumannii* isolates showed high similarity ~98% and coverage
121 ~99% with other sequence types (S2 Table). For *E. coli* isolates, ST53 was present in 3/4 isolates, with
122 one isolate showing close similarity to ST-110,143 and 121 due to 4 gaps in *fumC*. The *S. haemolyticus*
123 isolates were of ST30 and ST1, while the remaining isolate showed close similarity to ST65,15 or ST1.
124 The three *E. cloacae* isolates were ST88, ST98, and ST78, *S. aureus* isolate was ST6, and the *E. faecalis*
125 isolate was ST538 (S2 Table).

126 **Antimicrobial resistance Genes**

127 Identification of AMR genes determinants from whole genome sequencing data revealed different
128 AMR determinants for various bacterial species. All 17 sequenced bacterial isolates carried a number
129 of antibiotic resistant genes. Notably, *A. baumannii* isolates carried the most ARG's and this was also
130 observed phenotypically in terms of resistance to more than three different antibiotics class. *A.*
131 *baumannii* isolates carried beta-lactamase resistance genes including *blaOXA-23*, *blaOXA-276*,
132 *blaOXA-304*, *blaOXA-317*, *blaOXA-507*, and *blaOXA-69*. Additionally, we found other beta-lactamase
133 resistance genes, namely; *blaADC-134*, *blaADC-174*, *blaADC-5*, *blaADC-73*, *blaCMY-127*, and
134 *blaPER-7*. Moreover, some isolates showed resistance to Macrolide, Lincosamide, Streptogramins
135 (MLS) (*mph(E)* and *msr(E)*), Amphenicols (*Cat1* and *cmlA5I*), tetracycline (*tet(B)* and *tet(X)*),
136 aminoglycosides (*armA*, *aph(6)-Id* and *aph(3'')-Ib*), rifamycin (*arr-2*), quinolone (*qnrB29*) and
137 sulfonamides (*sul1* and *sul2*). Most *A. baumannii* isolates (4/5) contained *ant(3'')-IIa*, which confer
138 resistance against aminoglycosides spectinomycin and streptomycin (Fig 1A).

139 In the four *E. coli* isolates, we identified beta-lactam resistance genes *blaTEM-1*, *blaTEM-148*,
140 *blaCTX-M-15*, and *blaOXA-1*. Other beta lactam resistance genes were also identified including
141 *blaEC-5*, *blaDHA-1*, *blaCTX-M-143*, and *blaCMY-152*. Additionally, resistance genes against
142 amphenicol chloramphenicol (*catB3*), aminoglycosides gentamicin (*aac(3)-IIe*), kanamycin(*aac(6')*-

143 *Ib-cr5*, *aac(6')-Ib-D181Y*), streptomycin(*aph(3'')-Ib*, *aph(6)-Id*, *aadA1*), tobramycin (*aac(6')-Ib-*
144 *D181Y*, *aac(6')-Ib-cr5*), as well as MLS (*mph(A)*), quinolones (*qnrB4*, *qnrS1*), tetracycline (*tet(A)*,
145 *tet(B)*), trimethoprim(*dfrA14*, *dfrA14*, *dfrA17*), rifamycin (*arr-3*), and sulfonamides (*sul1* and *sul2*)
146 were present in *E. coli* isolates (Fig 1B). Similar to *A. baumannii*, most *E. coli* isolates exhibited
147 multidrug resistance.

148 A total of 26 different antimicrobial resistance genes were observed among the four isolates of *S.*
149 *haemolyticus*. The detected genes included those encoding resistance against beta-lactam including
150 *blaI_of_Z*, *blaR1*, *blaPC1*, *blaZ*, *blaOXA-250* and *blaADC-174* and *MecA*. Other resistance genes
151 present in the *S. haemolyticus* isolates conferred resistance against aminoglycosides amikacin (*aph(2'')*-
152 *Ih*), kanamycin (*aph(2'')*-*Ih*, *aph(3')-Ia*), gentamicin (*aph(2'')*-*Ih*, *aac(3)-Ia*), streptomycin (*aadA1* and
153 *ant(3'')-IIa*), and spectinomycin (*ant(3'')-IIa*). In addition, resistance genes were also detected against
154 amphenicols (*catA1*), fusidic acid (*fusB*), MLS (*mph(C)*, *msr(A)*), tetracycline (*tet(K)*, *tet(A)*, and
155 *tet(M)*), and trimethoprim (*dfrG*) (Fig 1C).

156 The *E. cloacae* isolates demonstrated a diverse array of 44 different ARG. They included resistance
157 genes against beta-lactam *blaCTX-M-15*, *blaOXA-1*, *blaACT-16*, *blaACT-24*, *blaACT-7*, *blaCMY-4*,
158 *blaOXA-10*, *blaTEM-1*, and *blaTEM-150*. Additionally, resistance genes that were observed in *E.*
159 *cloacae* isolate conferred resistance against aminoglycosides amikacin (*aac(6')-Ib-cr5*, and *aac(6')-Ib-*
160 *D181Y*), kanamycin(*aac(6')-Ib-cr5*, *aac(6')-Ib-D181Y*), streptomycin(*aph(3'')-Ib*, *aph(6)-Id*, *aadA1*),
161 tobramycin (*aac(6')-Ib-cr5*, *aac(6')-Ib-D181Y*) and gentamicin(*aac(3)-IId*, *aac(3)-IIe*). Furthermore,
162 resistance genes against Amphenicols chloramphenicol (*catB3*, *floR*, *catA1*), phenicols (*oqxA9*, *oqxB9*,
163 *oqxA10*, *oqxB5*), florfenicol(*floR*), fosfomycin(*fosA*), as well as MLS (*mph(A)*, *mph(E)*, *msr(E)*),
164 quinolones (*aac(6')-Ib-cr5*, *oqxA9*, *oqxB9*, *qnrB1*, *oqxA10*, *oqxB5*, *qnrVC1*), rifampicin (*arr-3*),
165 sulfonamides (*sul2*, *sul1*), tetracycline(*tet(A)*), and trimethoprim (*dfrA14*) were also identified (Fig
166 1D). The single *S. aureus* isolates carried resistance genes against methicillin (*MecA*),
167 tetracycline(*tet(38)*), fosfomycin(*fosB-Saur*), as well as other beta-lactam resistance genes *blaR1*, *blaZ*

168 and *blaI_of_Z* (Fig 1E). *E. faecalis* isolate carried the resistance gene *dfrE*, resulting in resistance
169 against trimethoprim and *lsa(A)*, which confers resistance to streptogramin and lincosamide (Fig 1F).

170 **Plasmids and Integrons**

171 Plasmid replicons were identified in 8 out of 17 isolates spanning different bacterial species.
172 Specifically, plasmid replicons were found in *A. baumannii* (1/5), *E. coli* (3/4), *E. cloacae* (3/3), *S.*
173 *aureus* (1/1), and *S. haemolyticus* (3/3). IncF plasmids were identified as the most common replicon
174 type and were present in *E. coli*, *E. cloacae* and *A. baumannii* isolates. Other plasmids types present in
175 *E. coli* isolates included Col, IncI, IncR, and RepA. In *A. baumannii*, the other identified replicon type
176 was Col while pENTAS02, IncR, IncA replicon types were present in *E. cloacae*. The replicon types
177 repUS43, rep7a and rep39 were present in the *S. haemolyticus* isolates while rep5a and rep16 were
178 present in *S. aureus* (Fig 4A). Interestingly, some plasmids were shared across different bacterial
179 species. For example, ColRNAI_1 and IncFIB(pB171)_1_pB171 replicons were present in both *A.*
180 *baumannii*, and *E. coli* isolates, while IncR_1 was present in *E. coli* and *E. cloacae* (Fig 2A). In *E. coli*,
181 plasmids Col156_1, IncFIA_1, IncFIB(AP001918)_1, and IncI1_1_Alpha were present in all three
182 isolates (Fig 3). In addition, the plasmids RepA_1_pKPC-CAV1321 and IncFII(Yp)_1_Yersenia were
183 present in individual isolates of *E. coli* and *A. baumannii*, respectively. Notable plasmids identified in
184 *E. cloacae* included IncA/C2_1, IncFIA(HI1)_1_HI1, IncFIB(K)_1_Kpn3,
185 IncFIB(pECLA)_1_pECLA, IncFIB(pHCM2)_1_pHCM2 and pENTAS02_1. The plasmids
186 rep39_1_repA (SAP110A) and rep7a_16_repC (Cassette) were present in 2 *S. haemolyticus* isolates,
187 while repUS43_1_CDS12738(DOp1) was present in a single isolate. The *S. aureus* isolates contained
188 the plasmid replicons rep5a_1_repSAP001(pN315) and rep16_3_rep(pSaa6159) (Fig 2B).

189 For integrons, the *E. cloacae* isolates contained three different integron class 1 integron, which
190 contained various AMR genes, including *blaOXA-1*, *qnrVC*, *arr*, *QacE*, *catB*, *blaOXA-10* which
191 conferred resistance to beta-lactams, quinolones, rifampicin, chloramphenicol, and quaternary

192 compounds (Fig 3A-C). *S. haemolyticus* isolate carried a class 1 integron containing the resistance
193 genes *aac* and *aadAI* (Fig 3D), associated with resistance to aminoglycoside, streptomycin, and
194 spectinomycin, respectively. Furthermore, the *E. coli* isolate class 1 integron carried the genes *blaOXA-*
195 *I*, *catB*, *arr*, and *qacE*, conferring resistance to beta-lactams, chloramphenicol, rifampicin, and
196 quaternary compounds, respectively (Fig 3E). Lastly, the *A. baumannii* isolate contained an integron
197 that carried the resistance gene *aar*, responsible for rifampicin resistance (Fig 3F).

198 **Virulence Genes**

199 Virulence-associated genes associated with adherence, immune evasion, secretion systems, iron
200 acquisition, iron acquisition systems and siderophores, nutrient acquisition, secretion systems, and
201 surface coats were identified across *E. coli*, *E. faecalis*, and *S. aureus* isolates. The majority of virulence
202 genes were detected in *E. coli* isolates (n=79), followed by *S. aureus* (n=51) and *E. Faecalis* (n=18)(Fig
203 4). Common type 1 fimbriae that mediate adhesion, including *fimA-I* and *ompA*, were present in *E. coli*
204 isolates (S3 Fig). Other common virulence factors present in *E. coli* isolates include Yersiniabactin
205 virulence factors *YbtA*, *YbtE*, *YbtP*, *YbtU*, *YbtX*, *YbtO*, enterotoxin *senB*, and aerobactin virulence. We
206 identified many capsular polysaccharides in the *S. aureus* isolate, including (*cap8A-P*), iron-related
207 proteins *isdA-G*, and enterotoxins *hlgA-C* and *hla/hly*, *hly*, *hly*, *hly*, *hly*. Among the *E. faecalis* isolates, adhesins
208 such as *efaA*, *ebpA-C*, and capsular polysaccharides *cpsB-I* were detected (S3 Fig).

209

210 **Discussion**

211 In this study, we employed Nanopore Sequencing technology to comprehensively profile the
212 antimicrobial resistance (AMR) mechanisms present in clinically resistant isolates. The application of
213 Nanopore sequencing offers real-time, high-resolution genetic analysis that allowed us to uncover
214 novel insights into the genetic basis of AMR in these isolates.

215

216 Based on the results, ST53 was the most common identified strain in *E. coli*. ST53 has been previously
217 identified in *E. coli* isolates across different parts of the world that showed resistance to colistin [15,16].
218 In *E. cloacae*, previously identified ST78, ST88 and ST98 were also observed in this study. ST78 is
219 recognized as one of the global resistant clones of Extended-spectrum β -lactamase (ESBL) producing
220 *Enterobacter cloacae* complex (ECC) and carbapenem-resistant *E. cloacae* complex (CREC). ST78
221 clones in the United States and Japan have been shown to harbor different carbapenemases genes
222 highlighting their unique ability to acquire multidrug resistant plasmids [17,18]. *S. haemolyticus* was
223 assigned to ST30 and ST1 which have been detected in different clinical samples such as pus, blood
224 and sputum [19]. ST30 found in this study has been previously implicated in vancomycin resistance
225 [20]. Among the *A. baumannii* isolates, ST1 clone which previously has been predicted to show
226 resistance against beta-lactams, fluoroquinolones, aminoglycosides, sulfamethoxazole and carbapenem
227 resistance was reported in the study [21]. Unfortunately, the sequence type of some isolates could not
228 be assigned to any scheme due to the presence of single nucleotide substitutions and therefore the
229 nearest ST were provided.

230 Our analysis revealed a diverse array of genetic elements associated with antimicrobial resistance.
231 Notably, we identified a range of known resistance genes, including those encoding beta-lactamases,
232 efflux pumps, and modifying enzymes. All *A. baumannii* isolates sequenced in this study harboured
233 carbapenemase genes belonging to class D beta-lactamases. The carbapenem-hydrolyzing β -
234 lactamases in *A. baumannii* are either metallo- β -lactamases (MBLs) or oxacillinases (carbapenem-
235 hydrolyzing class D β -lactamases [CHDLs]). However, in this study, we didn't detect any MBL's in
236 our study similar to another study in Morocco and Turkey(32-33). Intriguingly, we observed instances
237 of co-occurring resistance mechanisms within individual isolates. Three out of five isolates of *A.*
238 *baumannii* co-harboured carbapenemase and extended spectrum beta-lactamase genes. This
239 occurrence of double or multiple carbapenemase genes in a single isolates is a finding demonstrated in

240 other studies [22] as well as co-existence of carbapenemase and extended-Spectrum β -Lactamase genes
241 in single isolate [24]. One gram-positive isolate harboured carbapenems hydrolyzing oxacillinase
242 which has been described elsewhere [25]. Interestingly, all *E. coli* isolates (4/4) harbored more than
243 three ESBL genes with one isolate demonstrating presence of 7 ESBL genes belonging to three classes
244 of ESBLs (Class A, C, D). This phenomenon highlights the complexity of AMR and the potential for
245 multiple mechanisms to synergistically contribute to resistance. Understanding these interactions is
246 crucial for devising effective treatment strategies.

247 Besides beta-lactam resistance genes, we also found other genes which confer resistance to a wide
248 variety of antibiotics including aminoglycosides, tetracycline, sulfonamides, chloramphenicol,
249 macrolides, and fosfomycin. This points out to the existence of multidrug resistance isolates especially
250 in the case of *A. baumannii*, *E. coli*, *E. cloacae* and *S. haemolyticus*. *A. baumannii* infections are
251 commonly treated using different antibiotics including aminoglycosides, carbapenems, sulbactam,
252 tigecycline, piperacillin/tazobactam, and polymyxins E and B. Already studies have shown increased
253 resistance of *A. baumannii* to aminoglycosides and tetracyclines [26–28]. The *A. baumannii* isolates
254 harbored aminoglycoside resistance genes (*aph(6)-Id* and *aph(3'')-Ib* and tetracycline resistance genes
255 (*tet(B)* and *tet(X)*), a finding similar to previous studies [29–32]. In addition, an isolate contained the
256 resistance gene *armA* which has previously been shown to show high level of resistance against several
257 aminoglycosides including gentamicin, tobramycin, and amikacin [33]. In addition, we identified
258 macrolide resistance genes *mphE* and *msr(E)* which commonly associates with multidrug resistance in
259 *A. baumannii* isolates [33]. Among the *E. coli*, aminoglycoside resistance genes identified included
260 *aac(3)-IId*, *aac(3)-IIe*, *aac(6')-Ib-D181Y*, *aac(6')-Ib-cr5*, *aph(3'')-Ib*, and *aph(6)-Id*, concordant with
261 previous studies [26–28]. Resistance genes present in *E. coli* isolates against other commonly used
262 inexpensive and readily available drugs such as quinolones, trimethoprim and sulfonamide and
263 increase the risk of rendering these drugs ineffective in the long run. Furthermore, the emergence of
264 methicillin resistant *S. aureus* and *S. haemolyticus* strains is particularly concerning and increases the

265 risk of nosocomial and community acquired infections. The coexistence of multi-drug resistance
266 underscores and compounds the challenge associated with treating infections caused by these
267 pathogens.

268 Nanopore Sequencing enabled the detection of genetic elements such as mobile genetic elements
269 (MGEs) and plasmids. In the present study a high proportion of clinical bacterial isolates from
270 inpatients at Thika Level V hospital was found to carry plasmid replicons. The present findings are in
271 concordance with previous studies elsewhere [34]. The observed high carriage of plasmid replicons by
272 the analyzed isolates might plausibly be a reflection of resistance selection pressure due to high
273 antibiotic exposure in hospital settings. Plasmids are infectious double stranded DNA molecules that
274 are found within bacteria. Horizontal gene transfer promotes successful spread of different types of
275 plasmids within or among bacteria species, making their detection an important task for guiding clinical
276 treatment. Plasmid replicon type IncF predominantly identified in *E. coli* is frequently associated with
277 genes encoding carbapenemases, aminoglycoside-modifying enzymes and plasmid-mediated
278 quinolone resistance [35]. Various MDR plasmids predicted in this study associated with conjugative
279 plasmid replicons IncFIB(K)_1_Kpn3, IncFIB(AP001918)_1__AP001918, IncI1_1_Alpha, and
280 RepA_1_pKPC-CAV1321_CP011611. These plasmids are known to be associated with different
281 several resistance profiles and carry both AMR and VF genes[36]. The largest number of plasmid types
282 were found amongst *E. coli* strains. These strains acquire such as they are essential for
283 pathogenicity[37]. Specific plasmids types such as ColRNAI_1 have been found in both *A. baumannii*
284 and *E. coli* isolates and its implicated to carry the bla-CMY gene, which is an ampC type ESBL [38].
285 In terms of integrons, we found the presence of class 1 integrons in *E. cloacae*, *E. coli* and *A. baumannii*
286 isolates. The AMR genes *blaOXA-10*, *QnrVC* and *arr* in *E. cloacae*, *blaOXA-1*, *catB*, *arr* and *qacE* in
287 *E. coli* and *aar* in *A. baumannii* were encoded within an integron-integrase gene (Int1). Class 1
288 integrons cassettes carry antibiotic resistance genes making them a significant player in the spread of
289 AMR[39]. Our analysis uncovered the presence of diverse MGEs carrying resistance determinants,

290 emphasizing their role in disseminating AMR genes within and between bacterial populations. These
291 findings underscore the need for continued surveillance and control of MGE-mediated spread of
292 resistance.

293 Apart from AMR genes, pathogenic bacteria have developed virulence factors against host defense
294 mechanisms. In our study we identified and classified various different types of virulence factors (i.e
295 immune evasion, adhesion, iron acquisition systems, surface coats, secretion systems enterotoxins).
296 The presence of these virulence factors serves to increase the pathogenicity of different bacterial
297 species and may also be spread to other bacterial organisms via horizontal gene transfer. Some key
298 virulence genes identified in *E. coli* such as *fimA-I* and *ompA* which mediate adhesion. The expression
299 of these surface adhesins increases the virulence of *E. coli* strains by ensuring close contact between
300 the bacteria and host cell. In addition, Yersiniabactin virulence factors commonly associated with
301 urinary tract infections were also identified in *E. coli* isolates[40]. In addition, the presence of senB
302 enterotoxin implicated in the development of severe diarrhea among patient infected with
303 enteroinvasive *E. coli* and *shigella* was also reported [41]. In the *S. aureus* isolate, capsular
304 polysaccharide, *cap8A-P* identified. These capsular polysaccharides are covalently attached to
305 peptidoglycan and play several roles including biofilm formation, colonization and evading phagocytes
306 uptakes and protecting important bacterial cell wall constituents [42]. Other virulence factors such as
307 enterotoxins *hlgA-C* is a cytolytic pore forming toxin that kills polymorphonuclear phagocytes, disrupt
308 endothelial and epithelial barriers [41].

309 In conclusion, this study demonstrates the utility of Nanopore Sequencing in unraveling the intricate
310 landscape of antimicrobial resistance in clinically resistant isolates. Our findings provide valuable
311 genetic insights into the mechanisms underpinning resistance, including the detection of novel
312 mutations and the role of MGEs. These results contribute to our broader understanding of AMR and
313 have implications for guiding clinical management and public health efforts in combatting
314 antimicrobial resistance. Future directions include expanding this approach to larger and more diverse

315 sample sets to further explore the breadth of resistance mechanisms. Additionally, functional studies
316 will be essential to validate the impact of newly identified mutations and better understand their clinical
317 significance. As Nanopore Sequencing technology continues to evolve, it holds promise for continued
318 advancements in our understanding of antimicrobial resistance and its implications for global health.

319

320 **Materials and Methods**

321 **Ethics statement**

322 This study was approved by the Institutional Scientific and Ethics Research Committee (ISERC) of
323 Mount Kenya University (MKU/ERC/1687) and licensed by National Commission for Science,
324 Technology, and Innovation (NACOSTI) (NACOSTI /P/21/7678). Before enrolment, informed
325 consent was obtained from all participants or their legal guardian.

326 **Bacterial isolates and DNA extraction**

327 Bacterial isolates (n=202) collected between March and November 2021 from patients at Thika Level
328 V Hospital were retrieved from frozen growth in glycerol stocks from the MKU research laboratory.
329 The bacterial isolates had been previously identified by Vitek Machine. Antimicrobial susceptibility
330 testing was carried out using the Kirby-Bauer disk diffusion method. Isolates were tested against
331 carbapenems (imipenem and meropenem), cephalosporins (cefuroxime, ceftriaxone, cefepime and
332 ceftazidime, cefotaxime), cephamycins (cefoxitin), monoamides (aztreonam), quinolones
333 (ciprofloxacin and levofloxacin), aminoglycosides (erythromycin, gentamicin and amikacin), beta-
334 lactams (penicillin, cloxacillin, piperacillin, amoxicillin, and ampicillin), lincosamides (clindamycin),
335 glycopeptides (vancomycin) tetracyclines (Minocycline and tetracycline) and sulfonamides
336 (sulfamethoxazole). Diffusion diameters were interpreted based on the Clinical Laboratory Standards
337 and Institute (CLSI) guidelines as resistant (R), susceptible (S), or intermediate (I).

338 For genomic surveillance, 17 isolates which showed resistance against multiple antibiotics were
339 selected for whole genomic sequencing (Supp A). The isolates were grown on nutrient agar for 18
340 hours at 37⁰C. After that, colonies were picked to create a culture suspension in 1X PBS, followed by
341 genomic DNA extraction using Zymogen® bacterial and fungal DNA extraction kit. The quality and
342 quantity of genomic DNA was then assessed using the NanoDrop and Qubit 3.0 fluorometer.

343

344 **ONT library preparation and sequencing**

345 DNA library preparation was carried out using the SQK-LSK109 ligation sequencing kit. The
346 fragmented DNA was first repaired using the NEBNext FFPE DNA Repair Mix and NEBNext Ultra
347 II End Repair/dA-Tailing Module (New England BioLabs). Subsequently, individual barcodes were
348 incorporated into the dA-tailed DNA using the EXP-NBD104 and EXP-NBD114 native barcoding
349 expansion kit following the ONT protocol with NEB Blunt//TA Ligase Master Mix (New England
350 Biolabs). Barcoded DNA samples were then equimolarly pooled, and adapters were attached using the
351 Quick T4 DNA Ligase Quick Ligation Module (New England Biolabs). Before sequencing, the
352 number of active pores on the flow cell R9.5(FLO-MIN106) was assessed, and equimolar pooling of
353 samples was performed. Finally, sequencing was then carried out on the MinKNOW for 48 hours.

354 **Quality control**

355 Basecalling of the raw Fast5 files produced after sequencing was performed using Guppy version 6.4.6
356 with the high accuracy mode option without quality filtering options. The multiple FASTQ files were
357 merged into one and demultiplexed using Guppy barcoder [43]. FastQC was used to check the quality
358 of the sequences. Afterward, Porechop (<https://github.com/rrwick/Porechop>) was used to trim adapters,
359 while Filtlong (<https://github.com/rrwick/Filtlong>) filter reads with less than 500 base pairs. These
360 steps contribute to the generation of high-quality sequences for downstream analysis.

361 **De novo assembly, polishing, and annotation**

362 Flye. 2.9.1 (<https://github.com/fenderglass/Flye>) generated the draft assembly from the processed
363 FASTQ reads [44]. The resulting draft assembly was then indexed and mapped against the individual
364 reads using BWA-MEM (<https://github.com/bwa-mem2/bwa-mem2>) [45]. The generated SAM files
365 were sorted, indexed, and converted to BAM format using Samtools
366 (<https://github.com/samtools/samtools>). To improve the assembly quality, a three-step polishing
367 approach was employed. Four rounds of Racon (<https://github.com/isovic/racon>) were first employed
368 to polish the assembly using the mapped nanopore reads [46]. Subsequently, Medaka 1.7.2
369 (<https://github.com/nanoporetech/medaka>) and Homopolish were subsequently used to improve polih
370 the resulting reads. The quality of the draft genome assembly was then assessed using Quast
371 (<https://github.com/ablab/quast>), which provides comprehensive metrics including assembly accuracy
372 and contig statistics [47]. Completeness of the draft assembly was evaluated using BUSCO
373 (<https://github.com/WenchaoLin/BUSCO-Mod>), which checks the presence of evolutionarily
374 conserved genes providing insights into genome completeness [48]. Genome completeness was
375 expressed as BUSCO scores and included complete, fragmented, and missing BUSCOs, indicating
376 /high-identity, partially present, and absent genes, respectively. Finally, the draft genome was
377 annotated using Prokka (<https://github.com/tseemann/prokka>), which predicts coding sequences and
378 other genomic features from bacterial genomes [49].

379 **Species identification**

380 The multi-locus sequence typing (MLST) predicted bacterial species and sequence types in individual
381 samples. Genomes were scanned against the traditional PubMLST typing schemes based on the
382 existence of seven housekeeping genes. Default settings of the MLST scheme including 95% minimum
383 identity of a complete allele, 10% as the minimum coverage of a partial allele, and 50 as the minimum
384 score to match a scheme, were used.

385 **In-silico prediction of ARG, virulent genes, MGEs, plasmids, and** 386 **integrons**

387 Prediction of antimicrobial resistance genes was conducted using Abricate 1.0.1
388 (<https://github.com/tseemann/abricate>). The latest updated NCBI and VFDB databases were loaded in
389 Abricate using the default setting and used to predict antimicrobial resistance and virulence genes[50].
390 Plasmids and integrons were predicted using Integron Finder and PlasmidFinder, respectively [51,52].
391 AMR genes, virulence genes, and plasmids with $\geq 90\%$ sequence identity and $\geq 90\%$ coverage and
392 integrons with an e-value less than 0.0001 were analysed. The workflow from basecalling to identifying
393 AMR genes is summarized below (S4 Fig).

394

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398 technical assistance.

399

400 **Supporting information**

401 **S1 Fig. Genome completeness score using BUSCO before polishing.**

402 **S2 Fig. Genome completeness score using BUSCO after polishing.**

403 Completeness score after four rounds of polishing using Racon followed by one round of Medaka
404 and Homopolish.

405 **S3 Fig. Virulence genes and classes present in *E. coli*, *E. faecalis*, and *S. aureus* isolates**

406 **S4 Fig. Flow diagram from reads pre-processing to the identification of AMR genes**

407 **S1 Table. Genome assembly summary statistics after multiple rounds of polishing.**

408 **S2 Table. MLST table revealing different organisms and sequence types (ST).**

409 **Author Contributions**

410 **Conceptualization:** Jesse Gitaka, Bernard N. Kanoi, Rachel Kimani, Sebastian Musundi

411 **Data Curation:** Sebastian Musundi, Rachel Kimani

412 **Formal Analysis:** Sebastian Musundi, Rachel Kimani, Patrick Wakaba

413 **Funding acquisition:** Jesse Gitaka, Bernard Kanoi

414 **Investigation:** Rachel Kimani, Sebastian Musundi, Patrick Wakaba, David Mbogo, Suliman

415 Essuman, Bernard N. Kanoi, Jesse Gitaka

416 **Methodology:** Sebastian Musundi, Rachel Kimani, Patrick Wakaba, David Mbogo, Suliman

417 Essuman, Bernard N. Kanoi, Jesse Gitaka

418 **Project Administration:** Jesse Gitaka

419 **Resources:** Jesse Gitaka, Bernard Kanoi

420 **Supervision:** Jesse Gitaka, Bernard N. Kanoi, David Mbogo, Suliman Essuman

421 **Validation:** Jesse Gitaka, Bernard N. Kanoi, Rachel Kimani, Sebastian Musundi

422 **Visualization:** Sebastian Musundi

423 **Writing - original draft:** Rachel Kimani, Sebastian Musundi, Patrick Wakaba

424 **Writing - review & editing:** Jesse Gitaka, Bernard N. Kanoi, David Mbogo, Suliman Essuman

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428 technical assistance.

429

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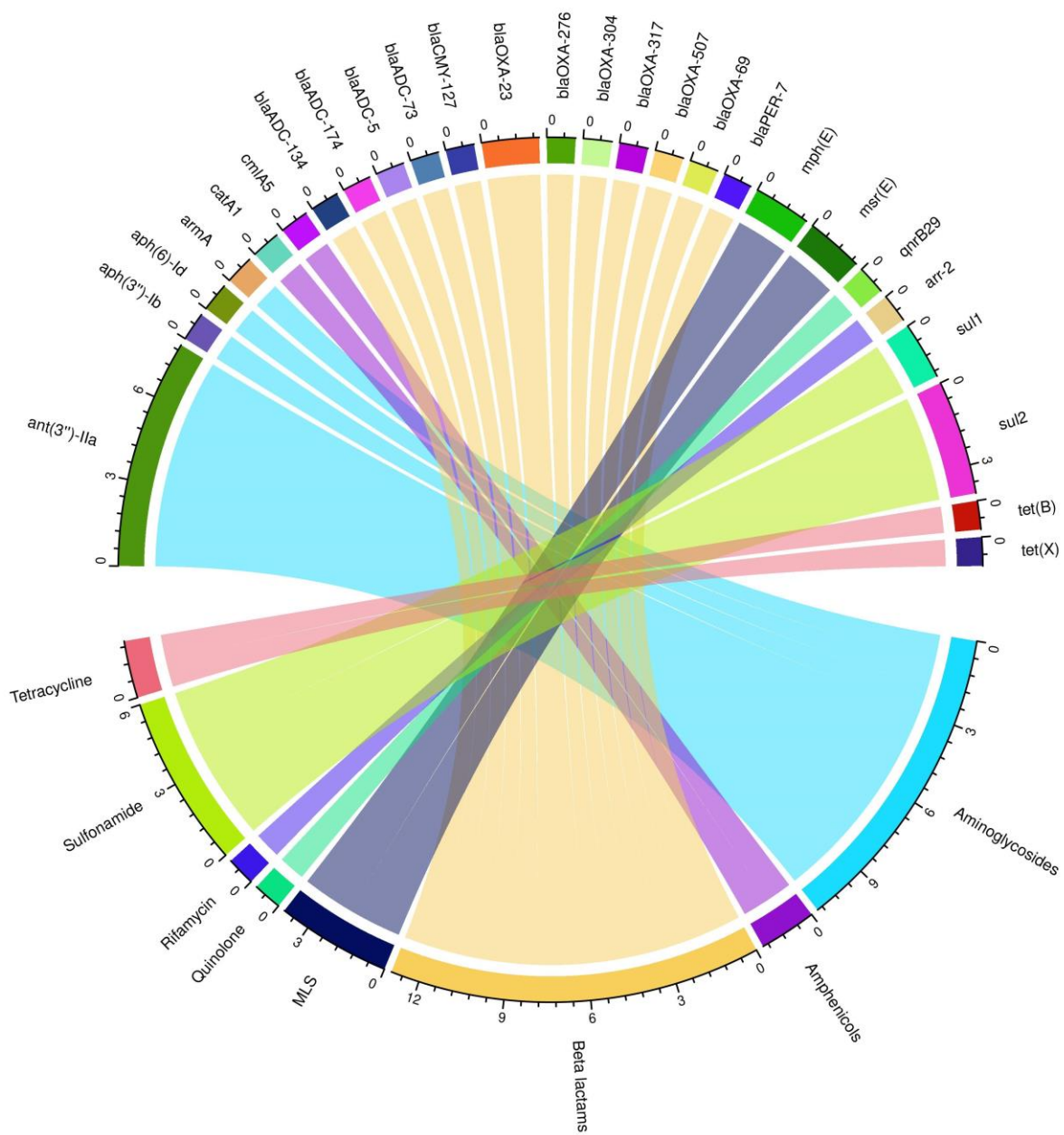
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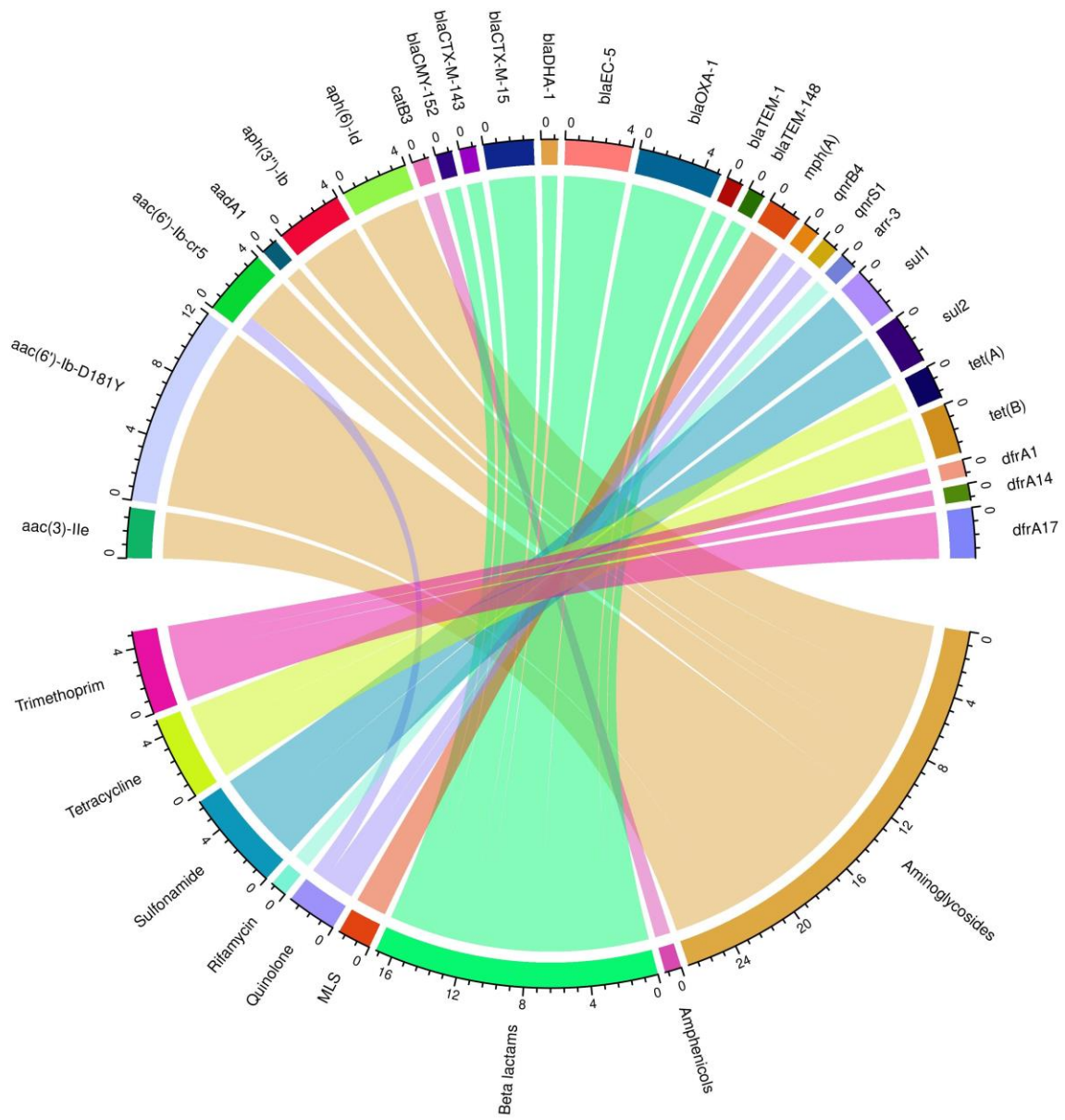
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602 **B**



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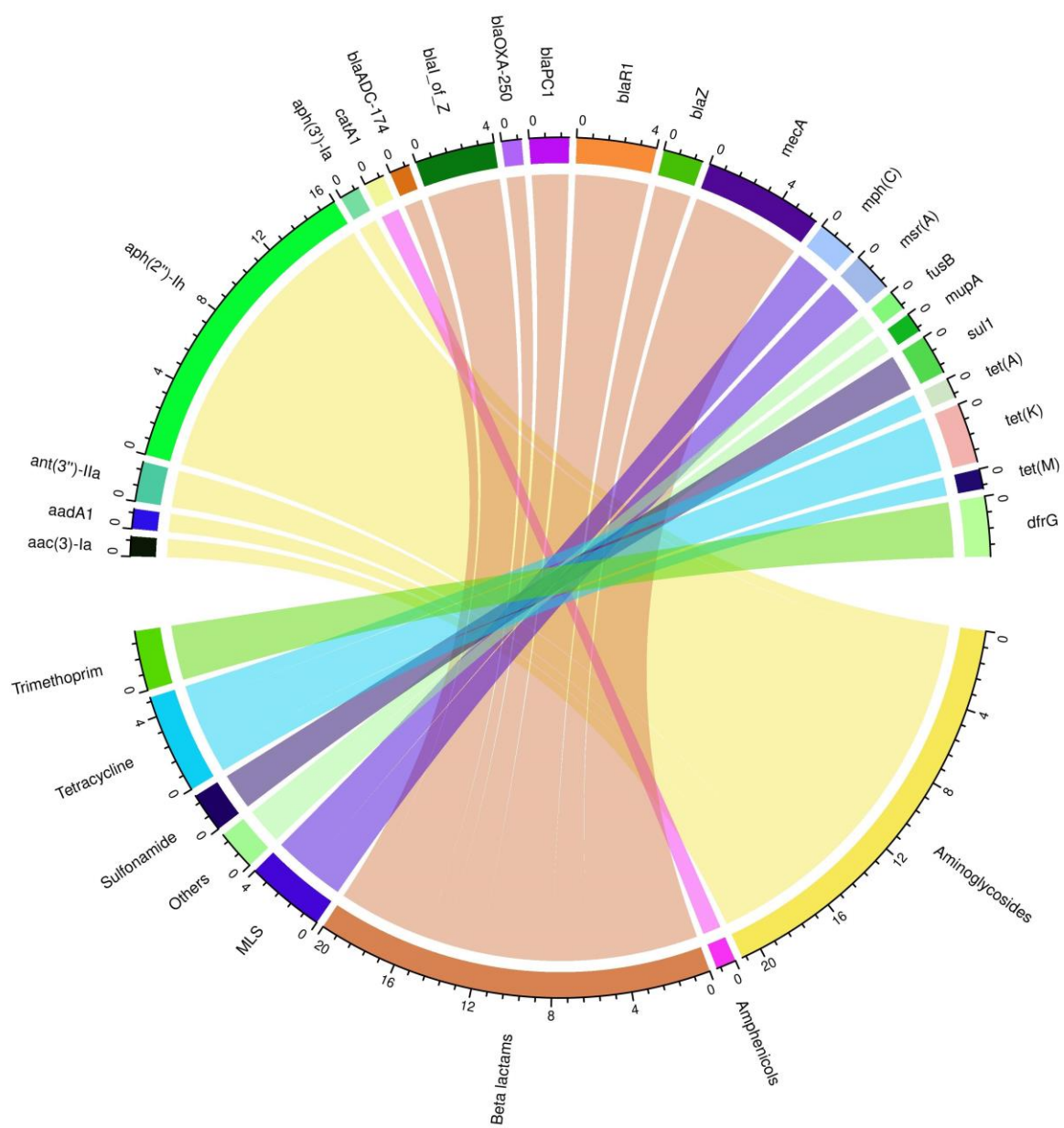
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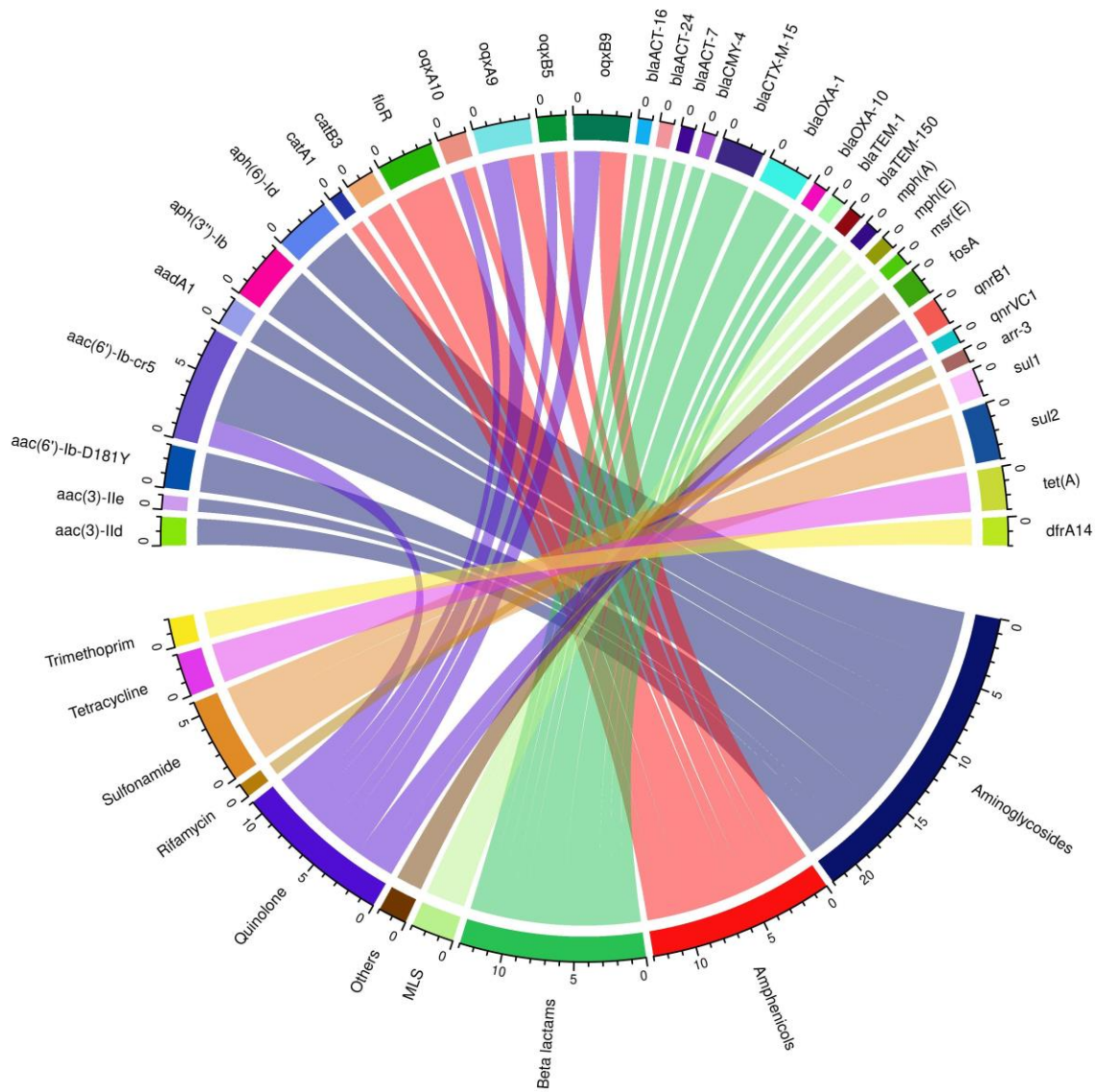
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615 **D**



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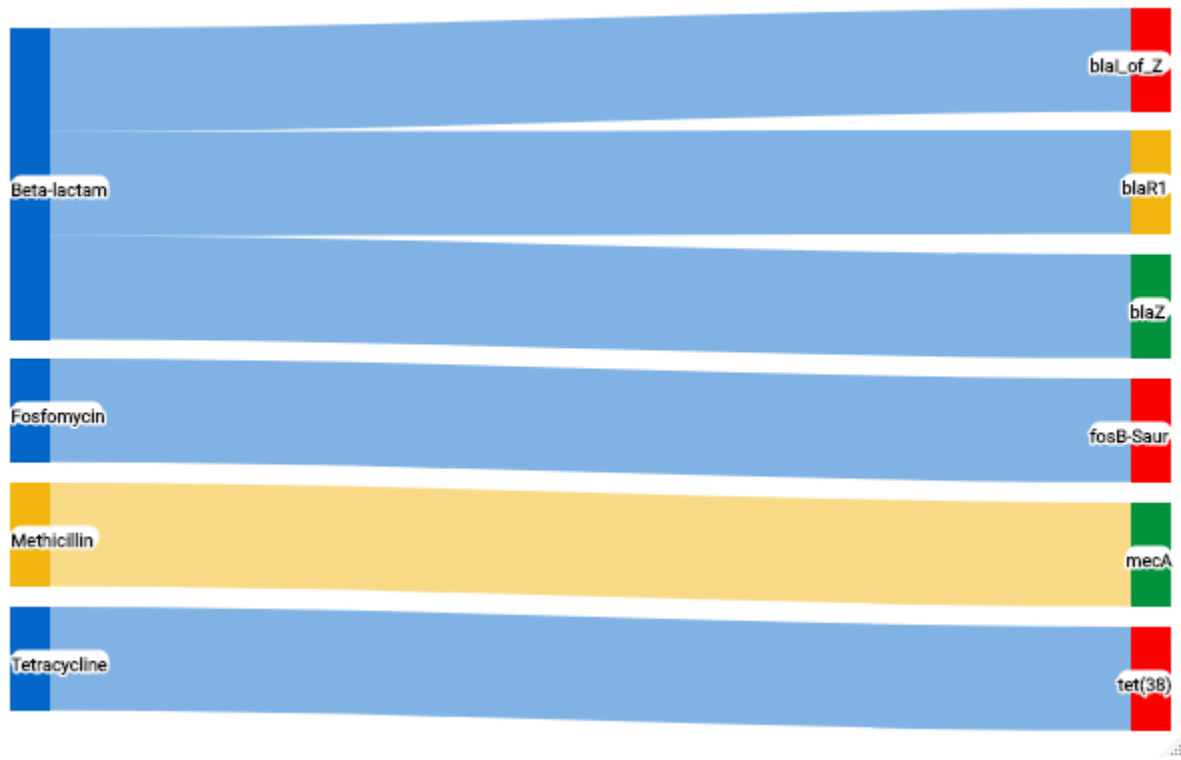
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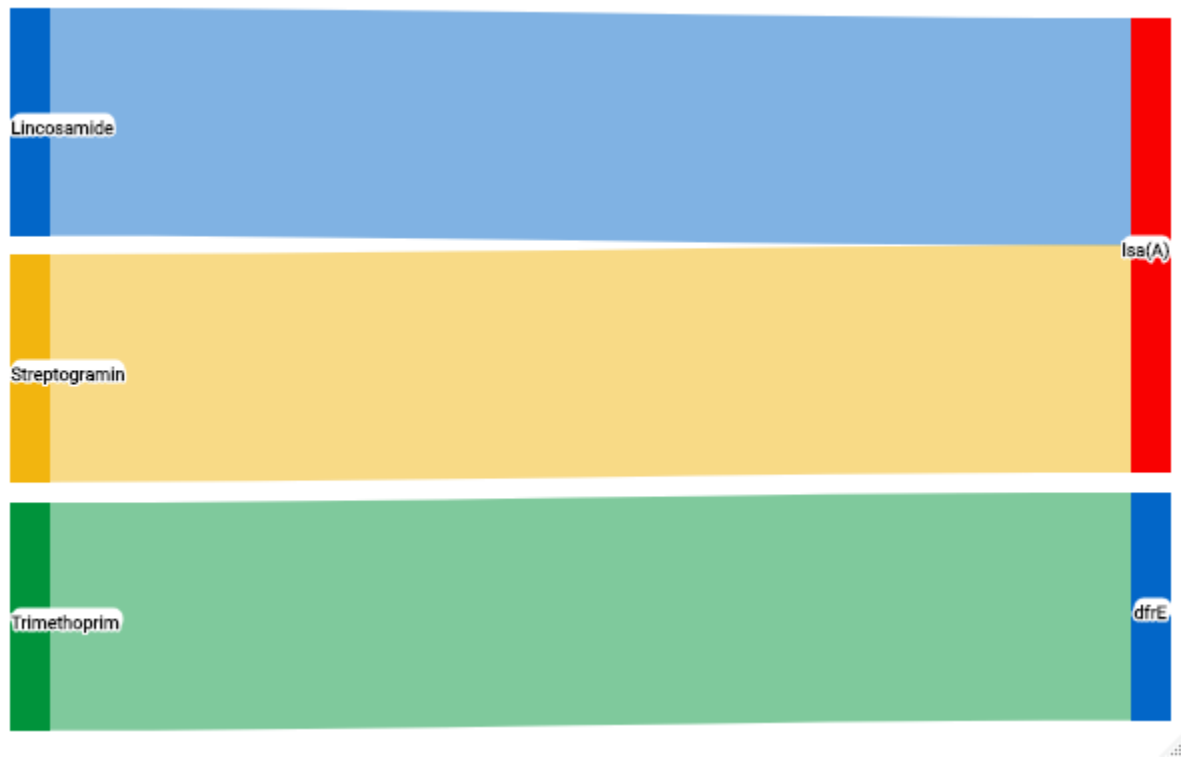
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622 **E**



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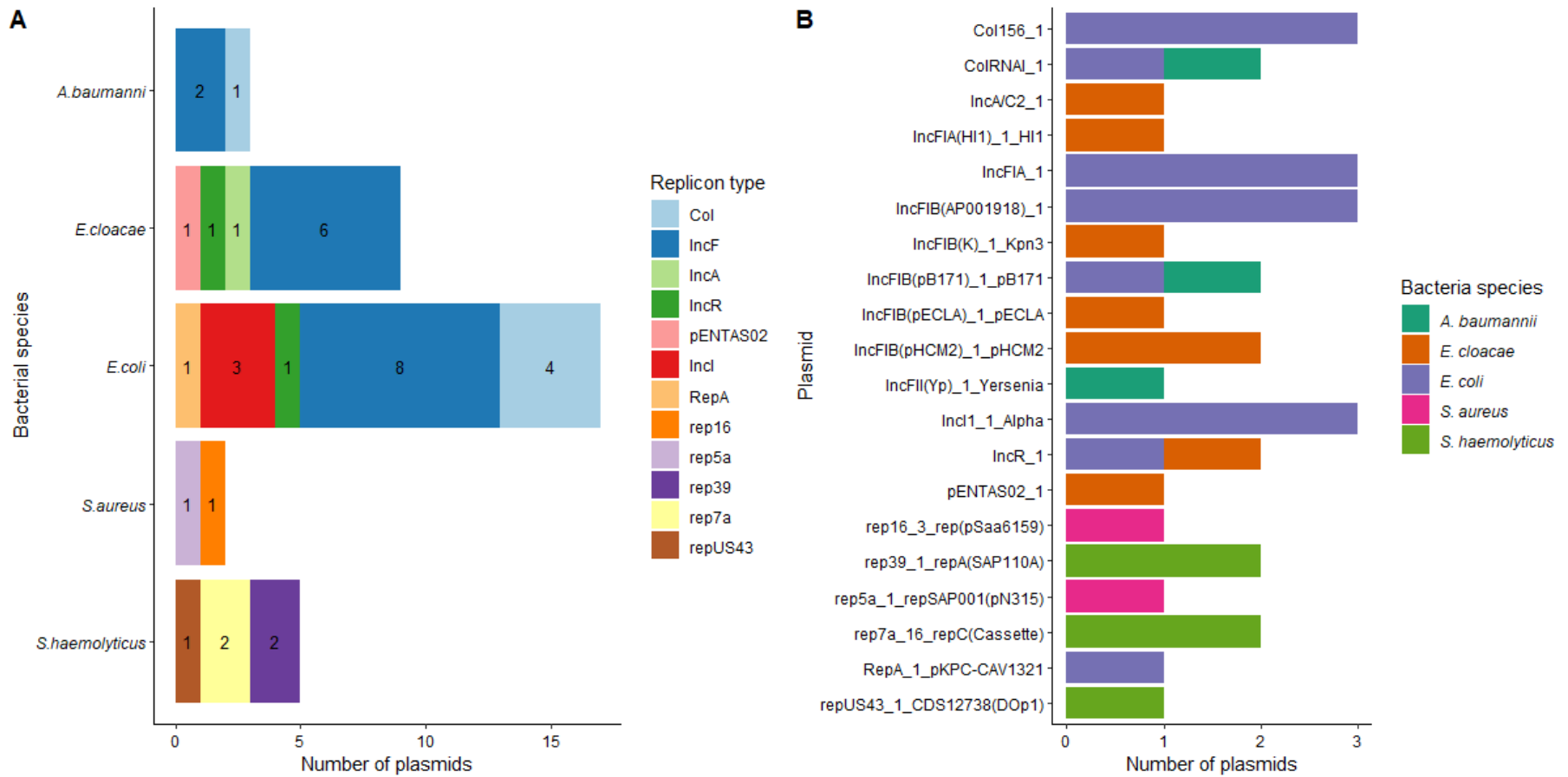
624 **F**



625

626 **Fig 1. Predicted antimicrobial resistance genes and their antibiotic class.** Circos plot linking the
627 number of antimicrobial resistance genes and class in **A)** *A. baumannii* **B)** *E. coli* **C)** *S. haemolyticus*

628 **D)** *E. cloacae*. Sankey chart linking the antimicrobial resistance gene and class in **E)** *S. aureus* **F)** *E.*
629 *faecalis*



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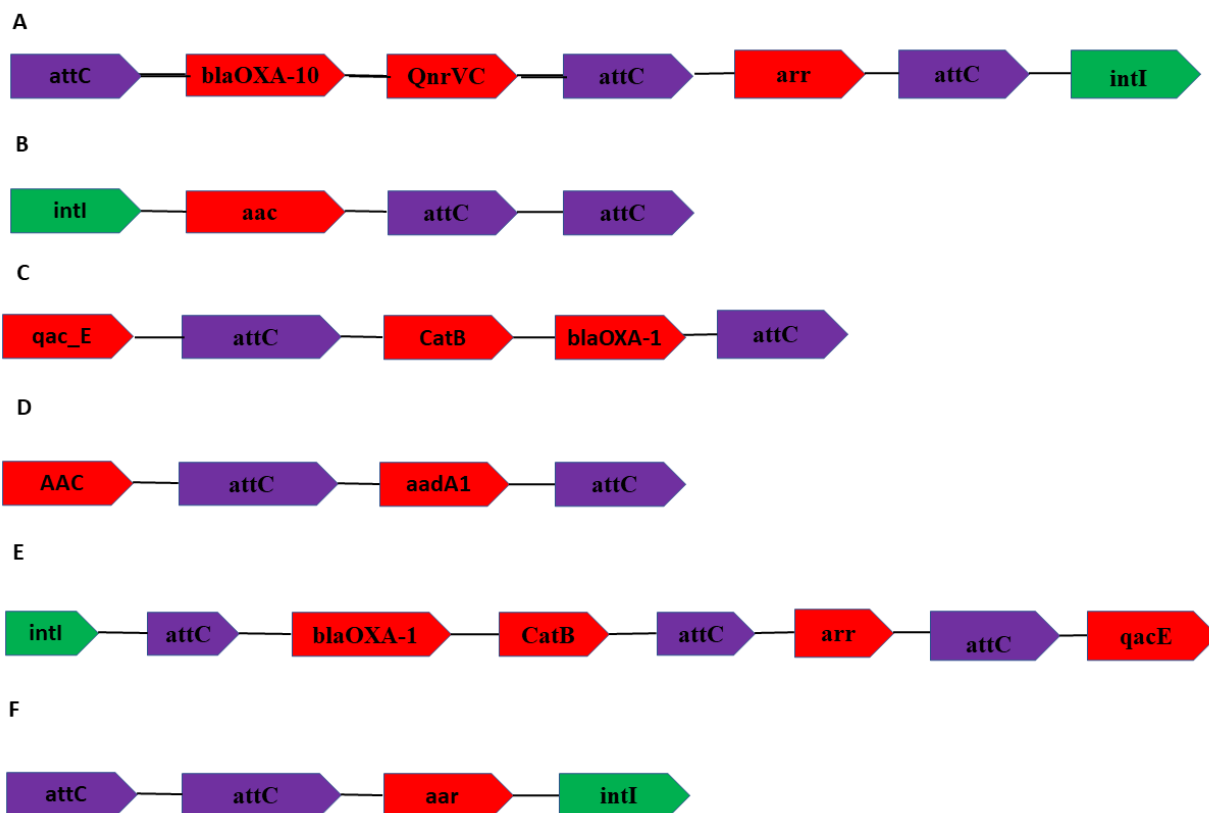
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632 **Fig 2. Plasmids identified in different clinical isolates.**

633 **A) Species distribution of individual plasmid types. B). Number of individual plasmid types identified across different bacterial species.**

634

635



636

637 **Fig 3. Distribution of different integrons identified in bacterial isolates.**

638 The integrons have been identified from **A-C)** *E. cloacae*, **D)** *S. haemolyticus*, **E)** *E. coli*, **F)** A.

639 *baumannii*. Class I integrons consists of three parts including IntI (Integron integrase), enzyme

640 responsible for site specific recombination, attC site which are recognized and recombined by IntI to

641 incorporate new gene cassettes. The attC sites are essential for class I integron ability to capture and

642 express various gene cassettes including those that confer antibiotic resistance to beta-lactamases

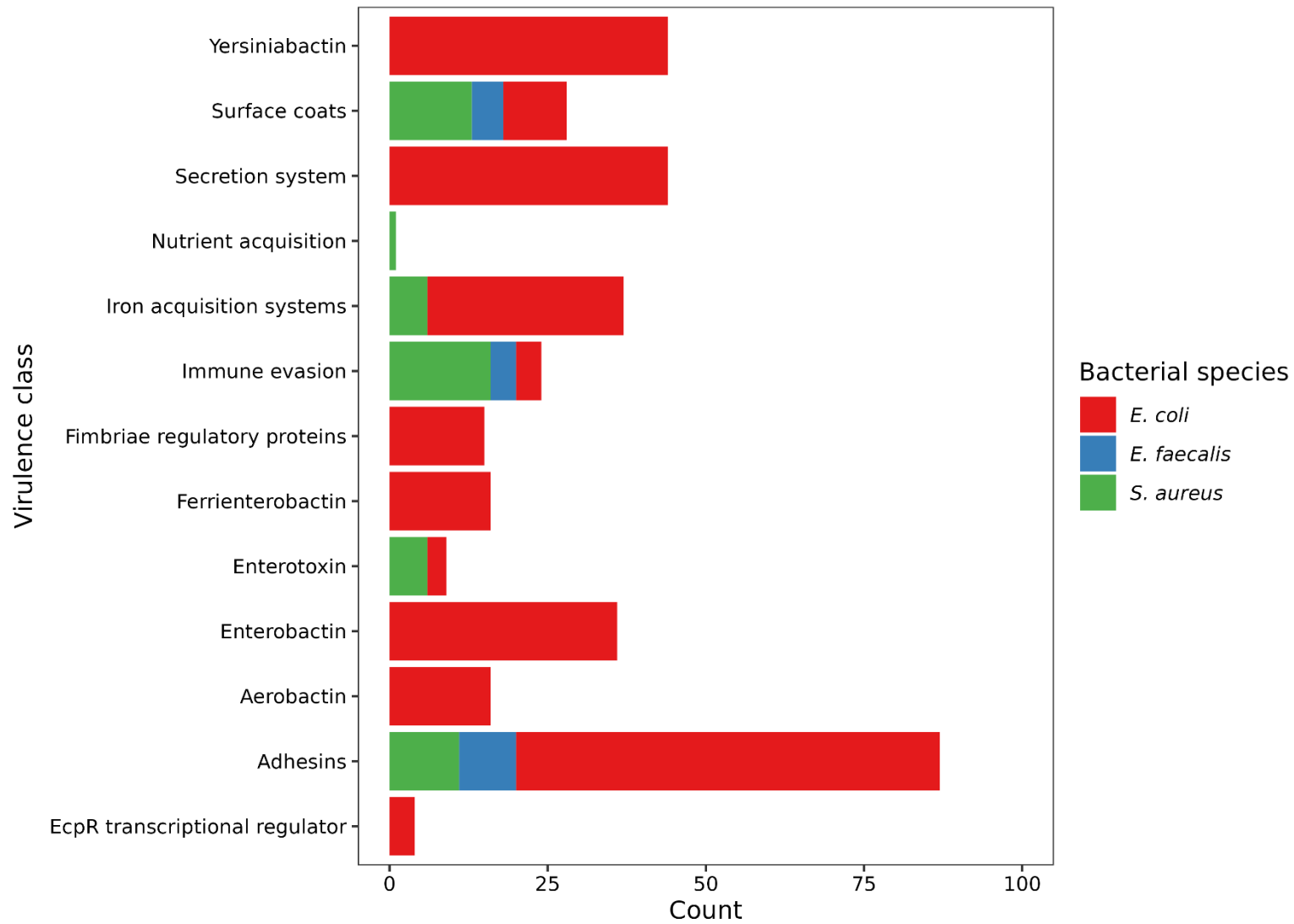
643 (*blaOXA-10*, *blaOXA-1*), quinolones (*QnrVc*), aminoglycosides (*arr*, *aac*, *aadA1*), disinfectants and

644 antiseptics(*qac_E*), and chloramphenicol (*CatB*)

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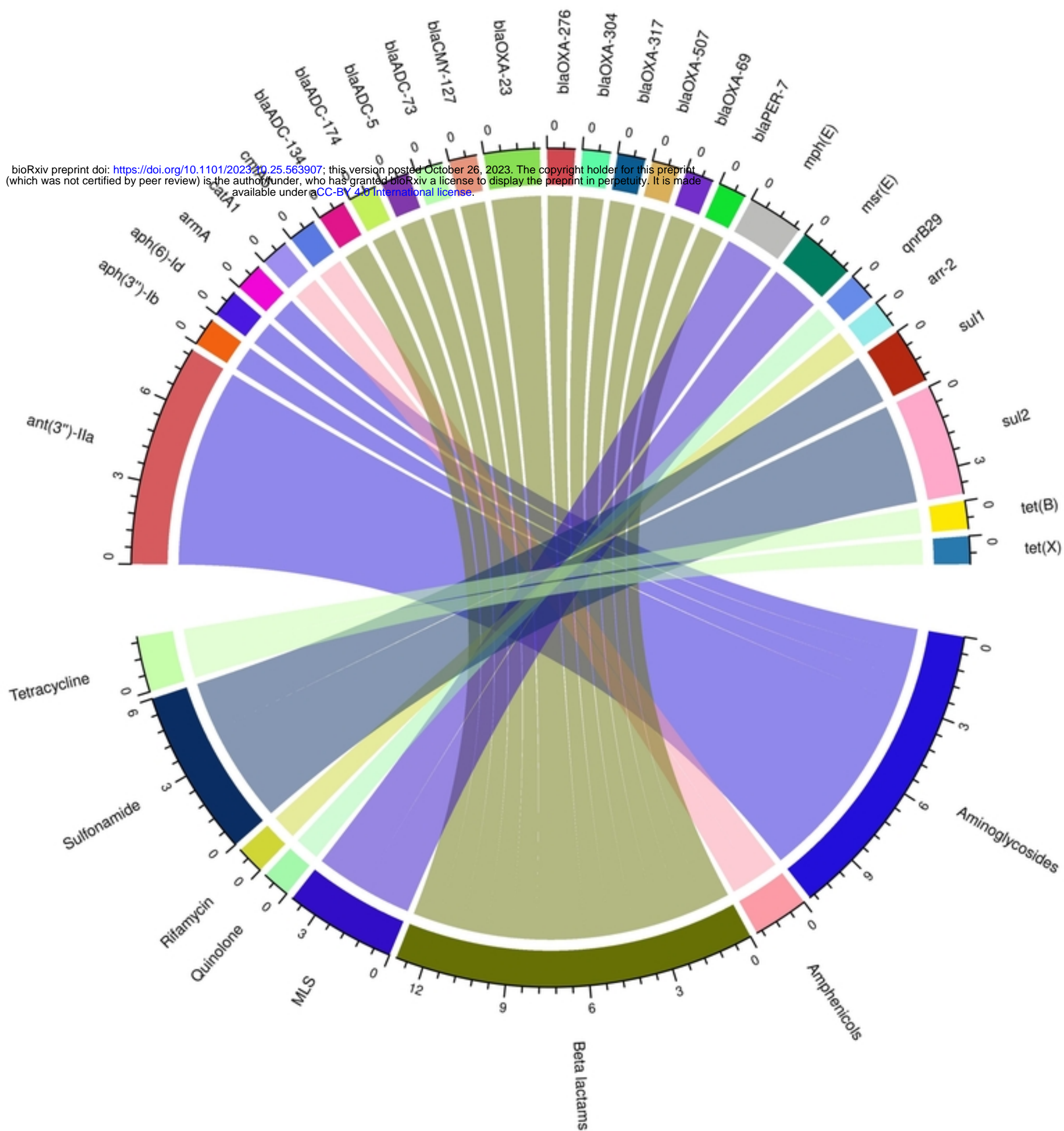


648

649 **Fig 4. Virulence gene classes identified in *E. faecalis*, *S. aureus*, and *E. coli* isolates.**

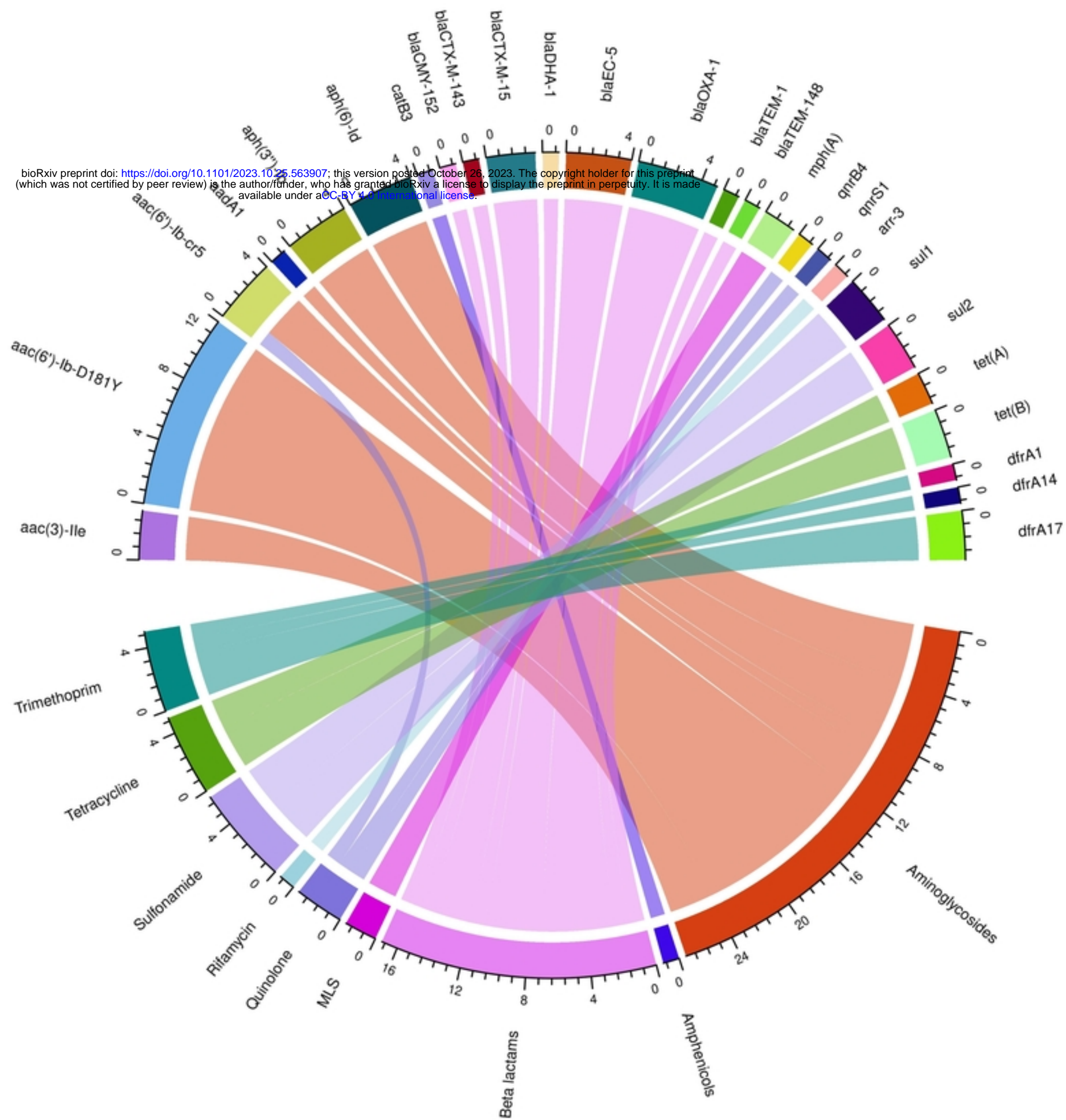
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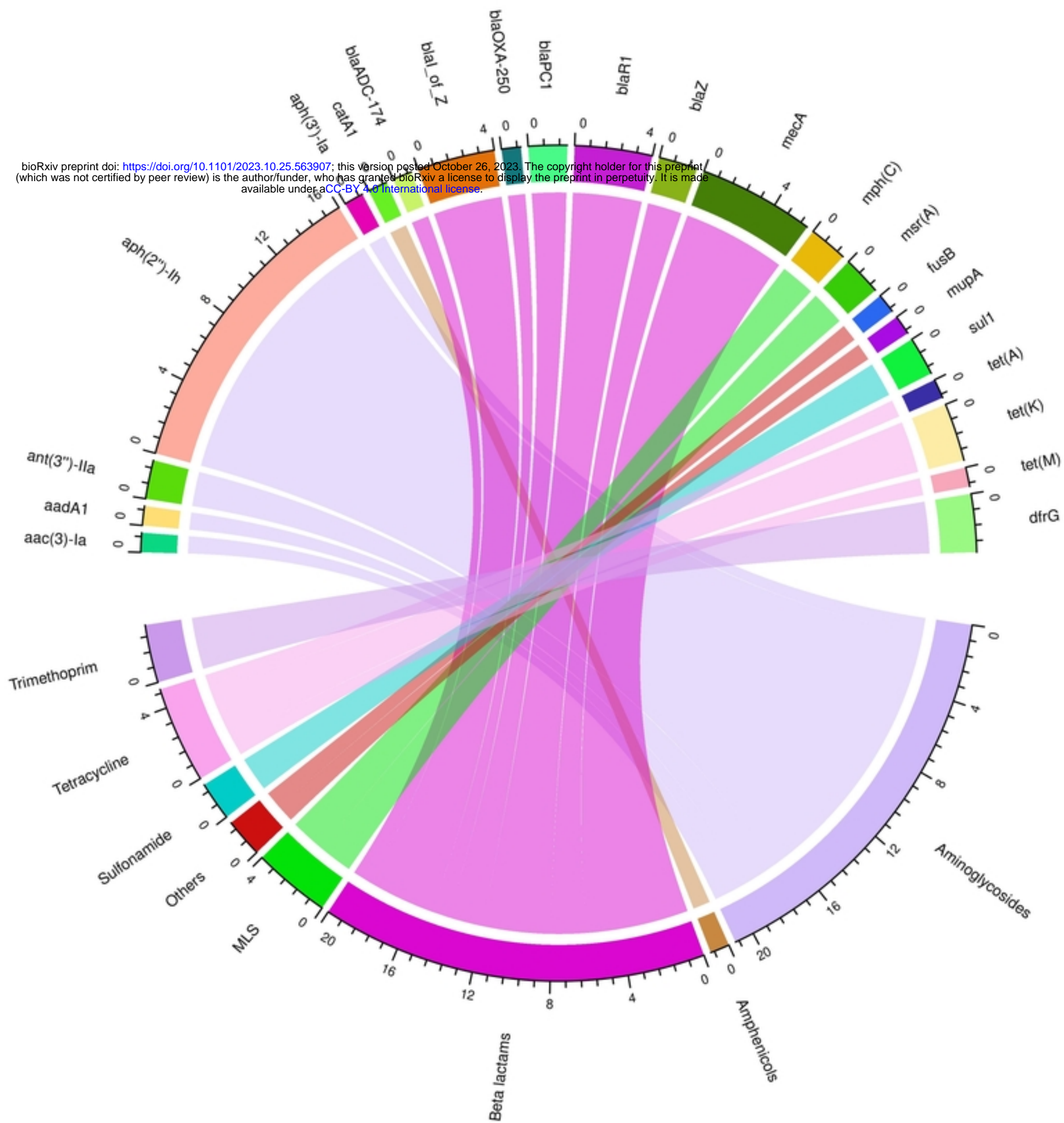
Figure

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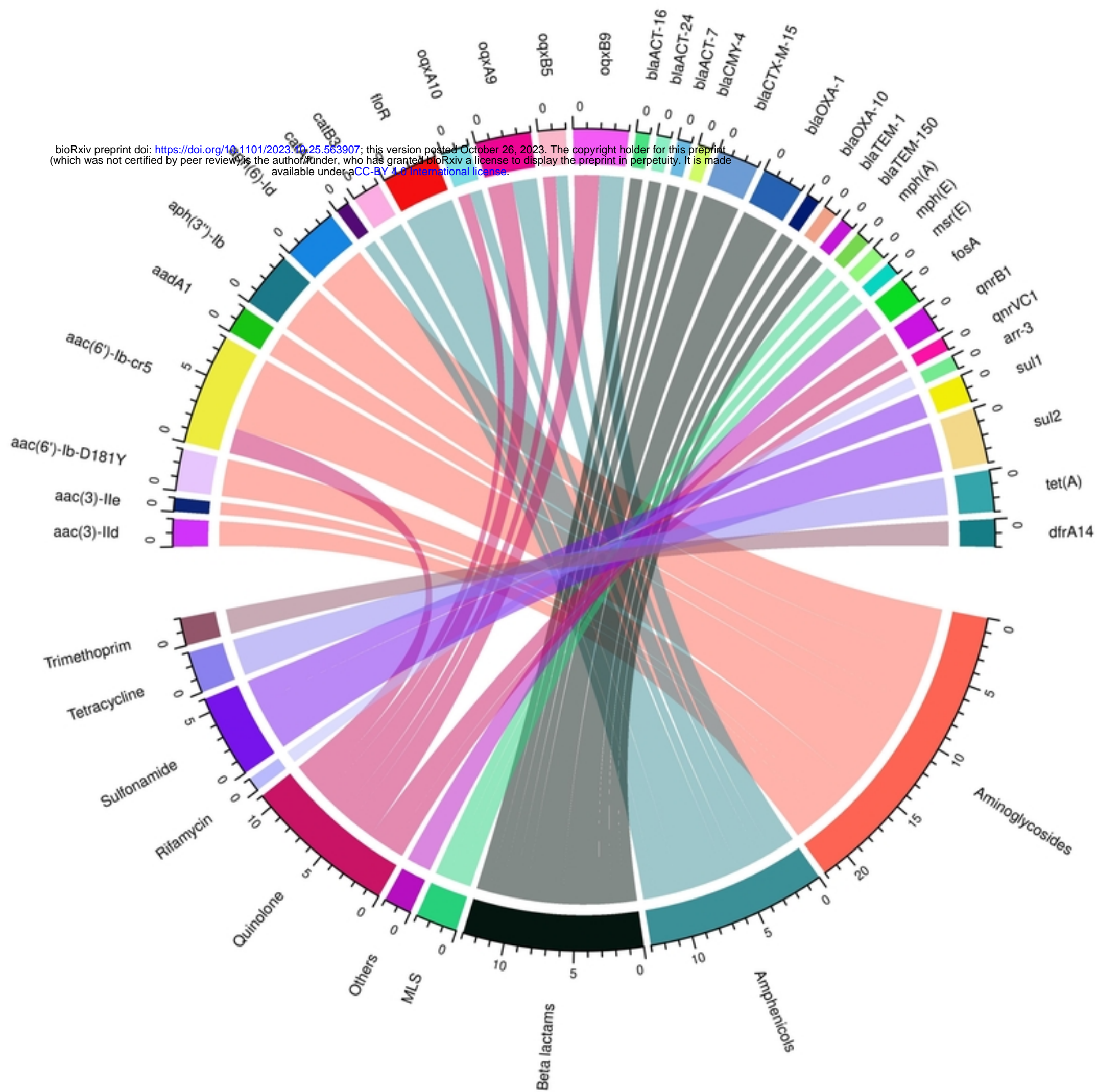
Figure

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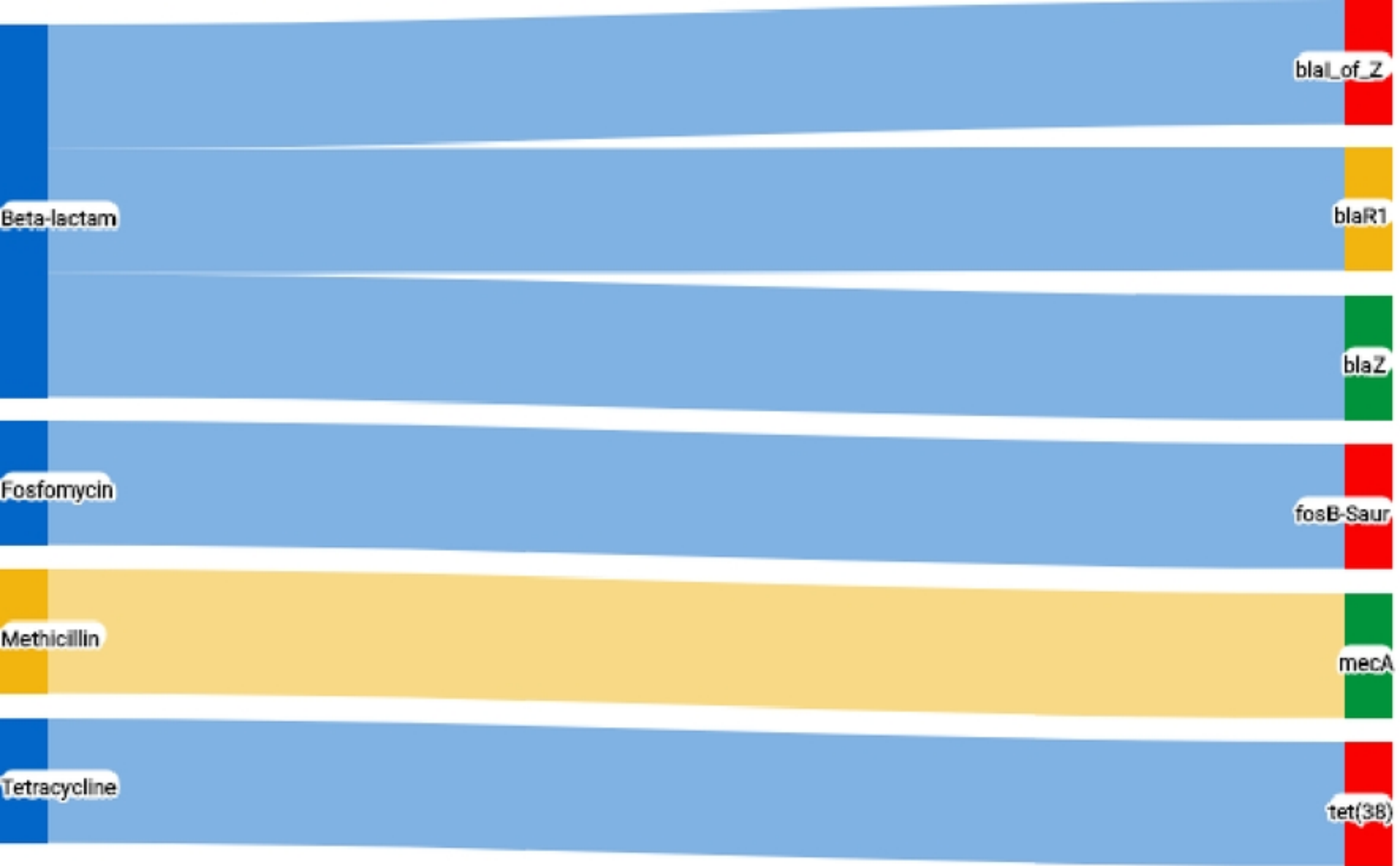


Figure

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Figure



Figure

Lincosamide

lsa(A)

Streptogramin

dfrE

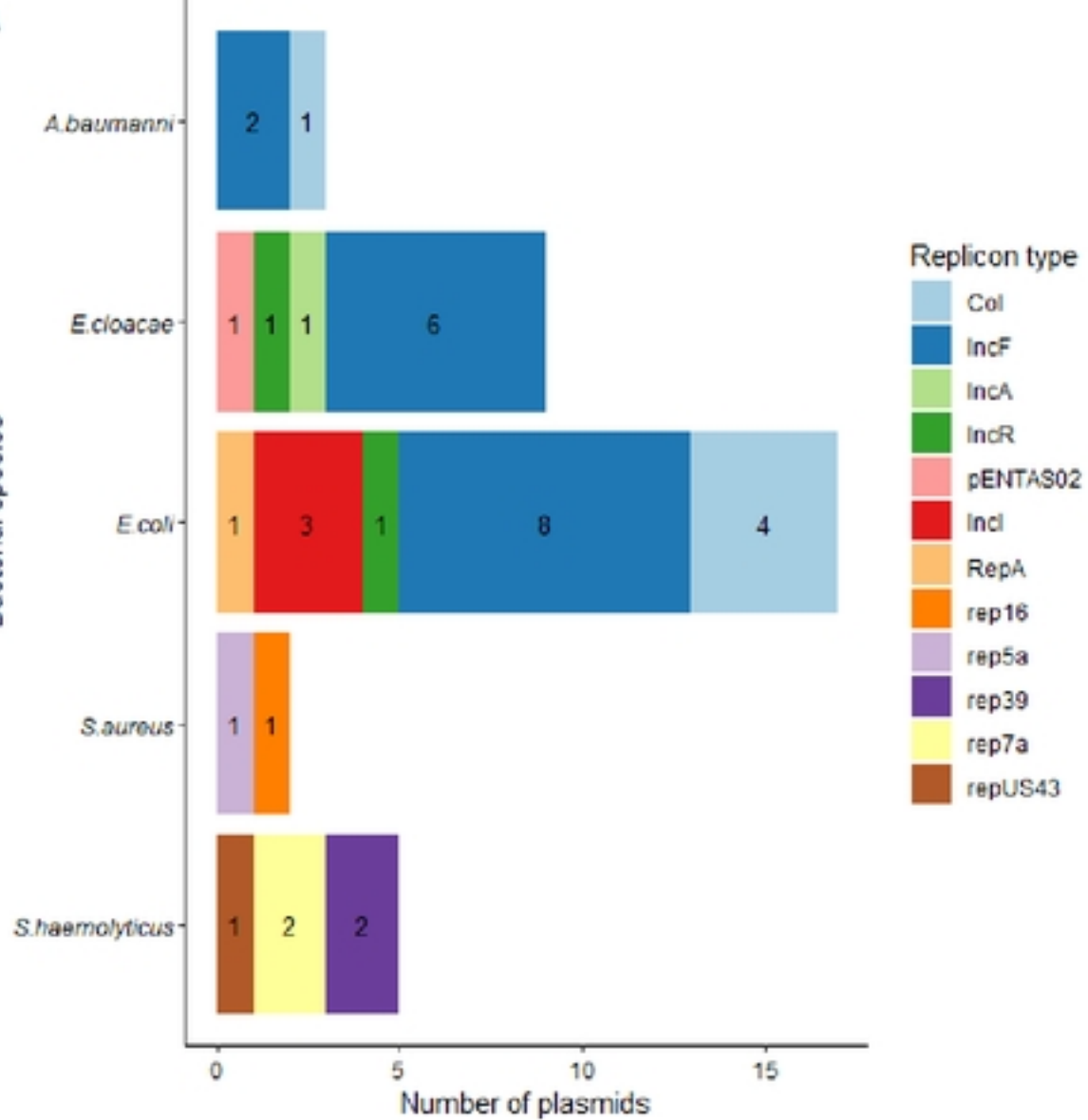
Trimethoprim

Figure

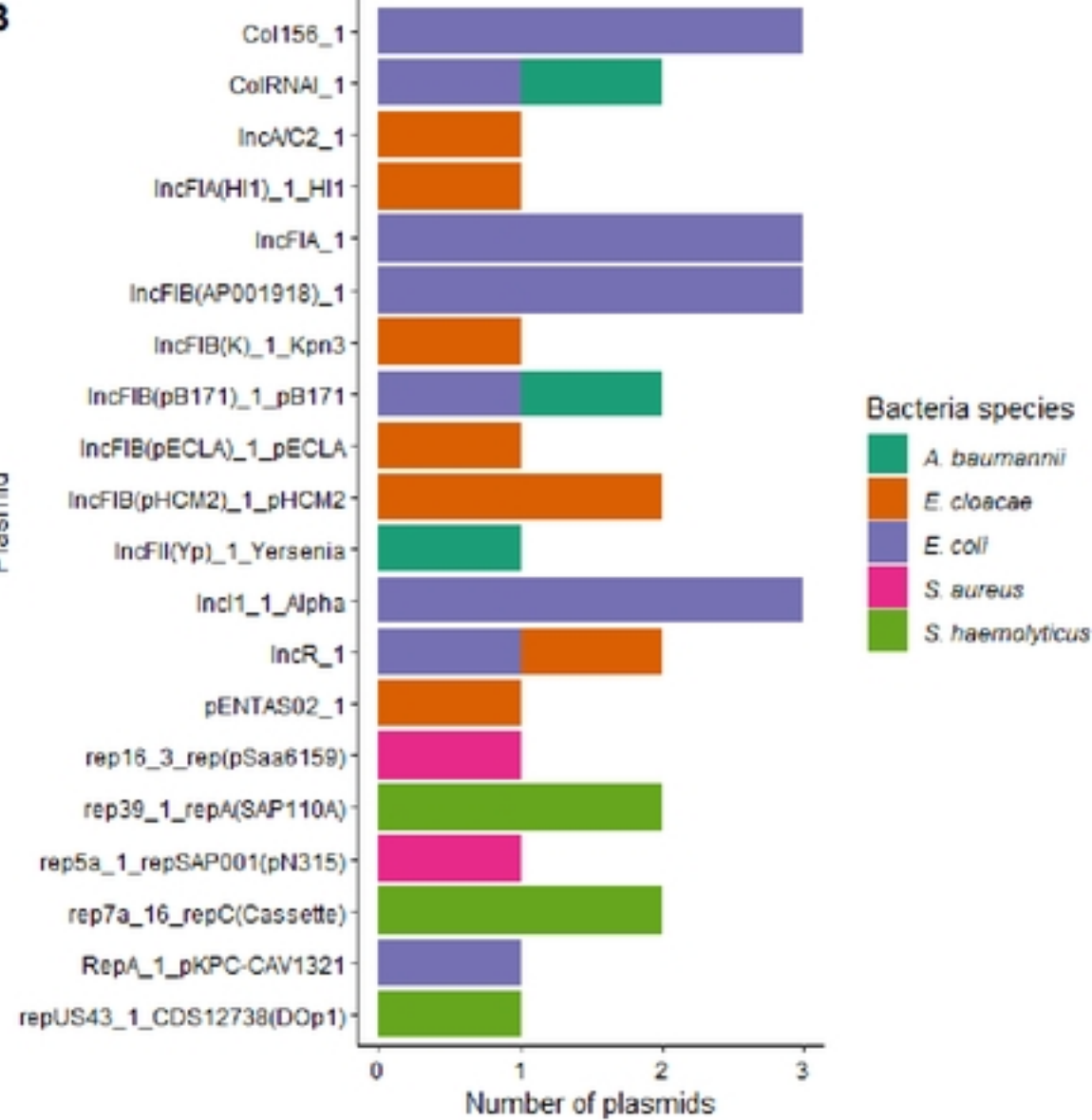


A

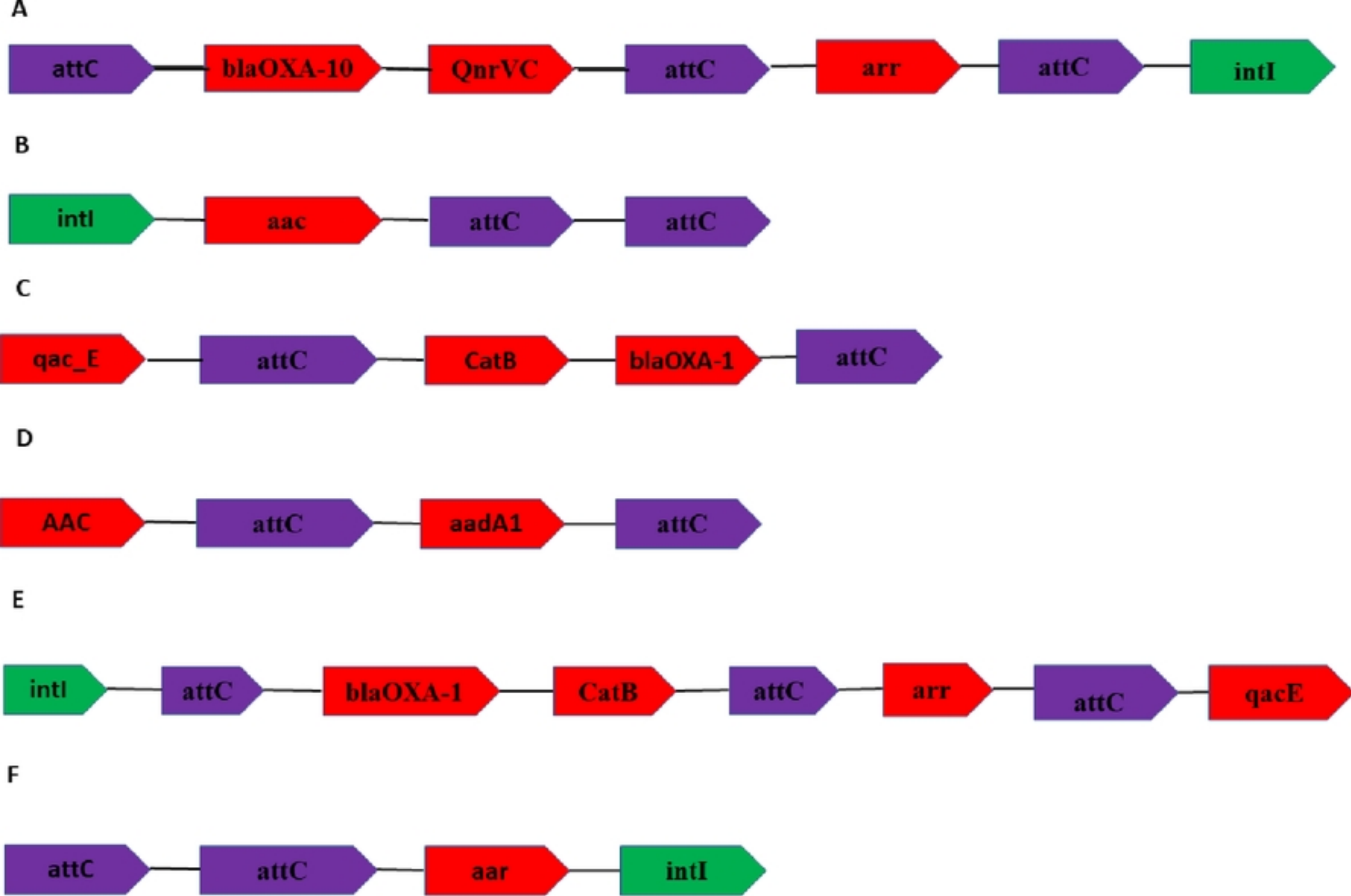
Bacterial species

**B**

Plasmid

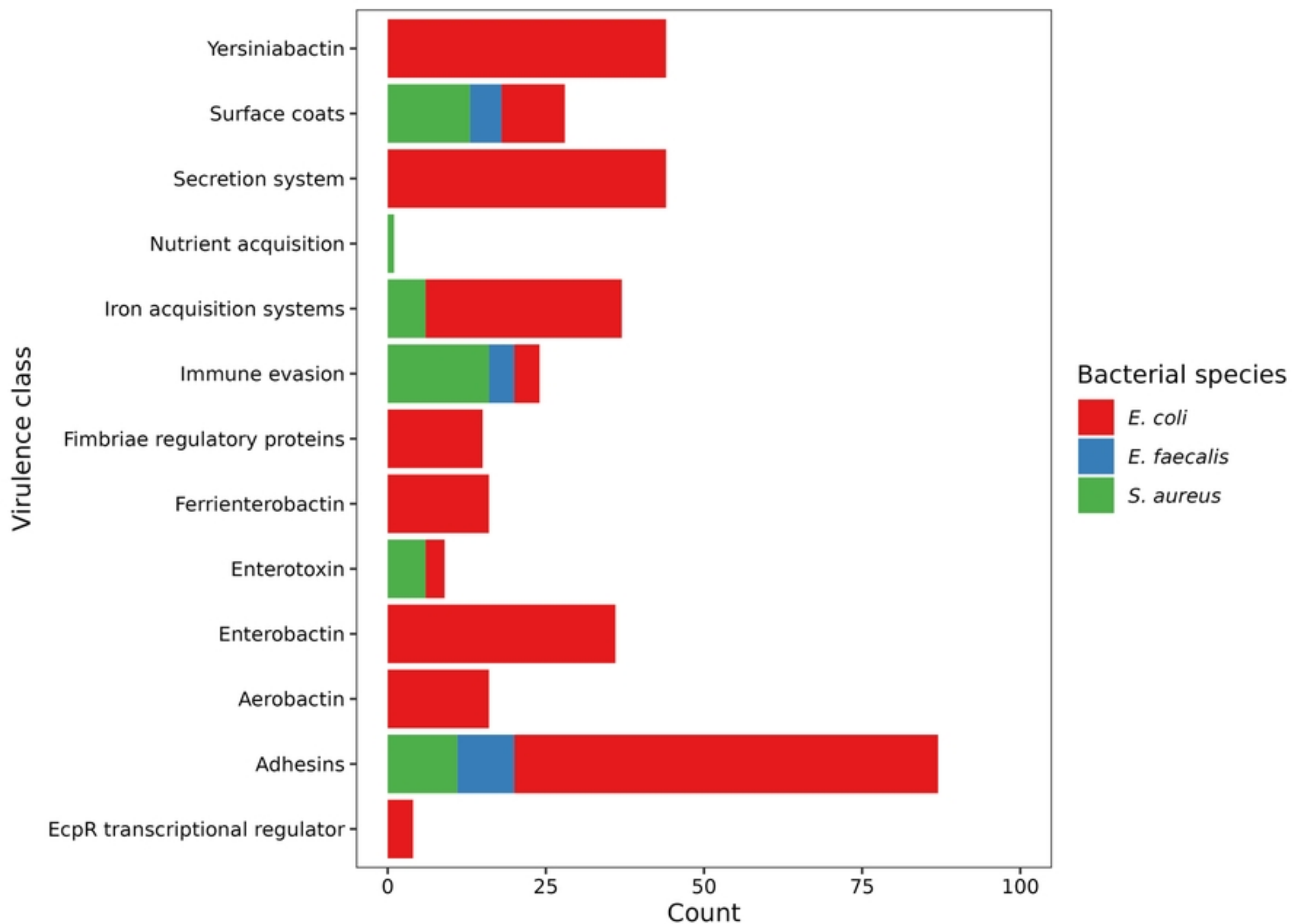


Figure



Figure

Bacterial virulence factors identified from the Virulence factor database (VFDB)



Figure