Whole genome sequence analysis of *Clostridium difficile* ribotype 017 strains in hospital patients in Cape Town, South Africa

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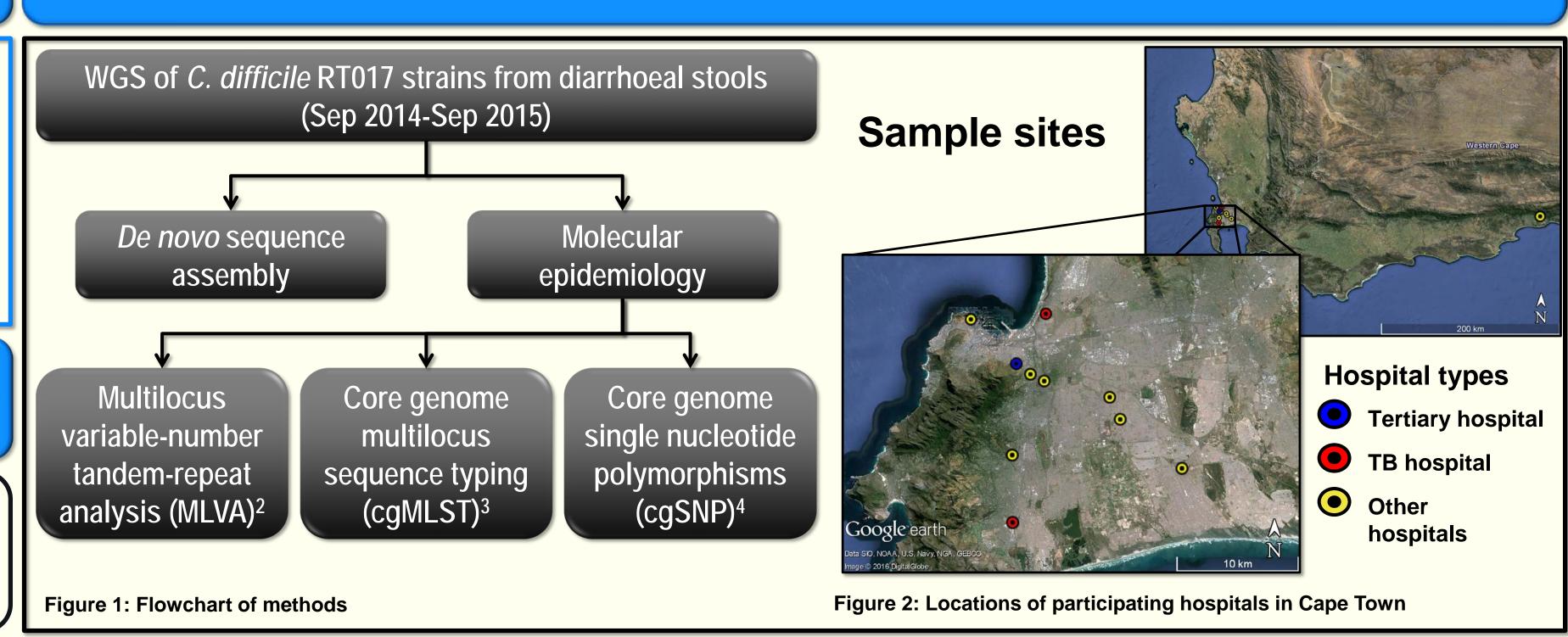
Introduction

- Clostridium difficile PCR ribotype (RT) 017 was the predominant RT in patients attending hospitals in the Cape Town metropole in 2014-2015¹
- Preliminary multilocus variable-number tandem-repeat analysis showed a high level of inter-strain relatedness, indicative of possible patient-to-patient transmission
- In vitro antimicrobial susceptibility testing revealed multidrug resistance for the majority of the isolates

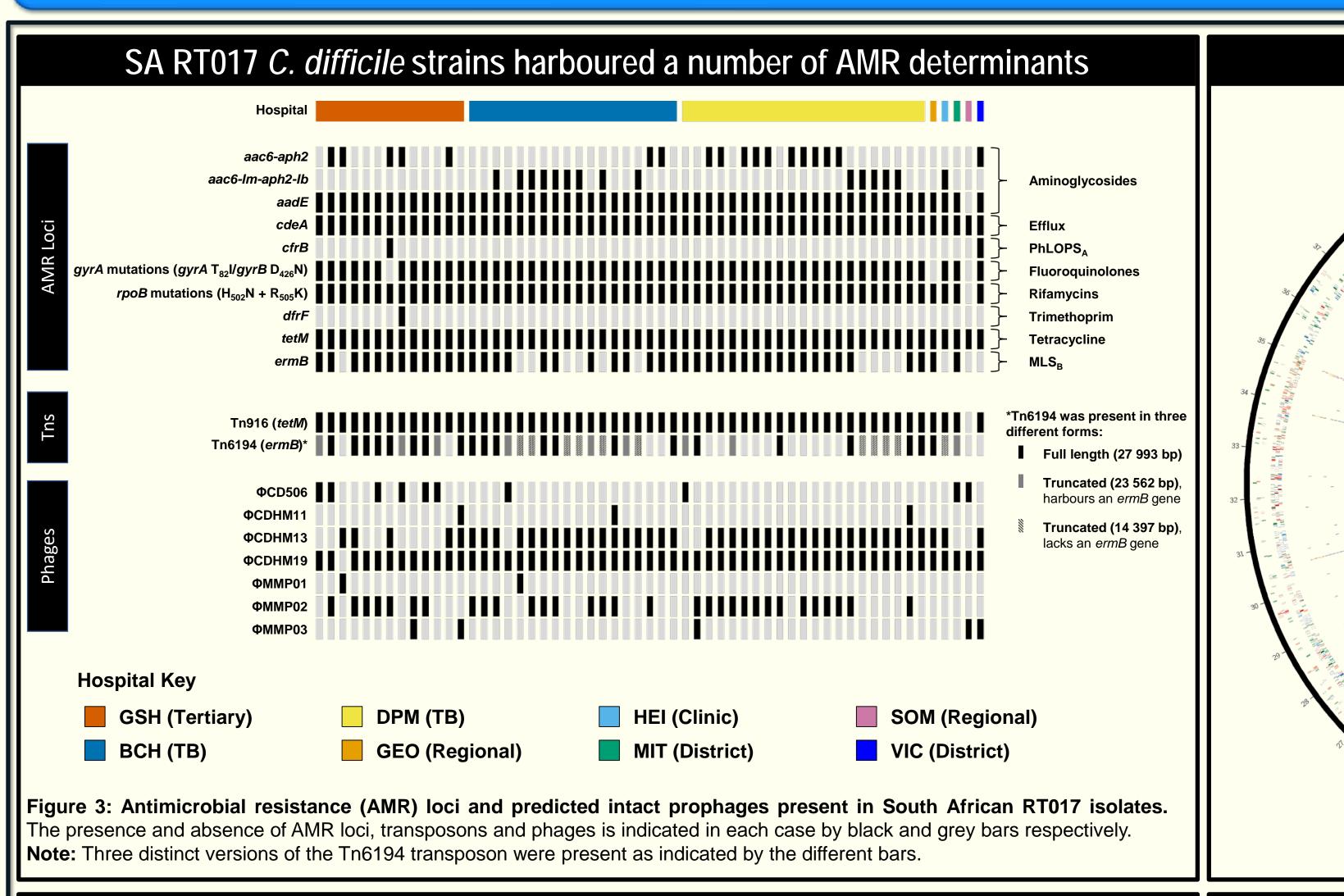
Aims

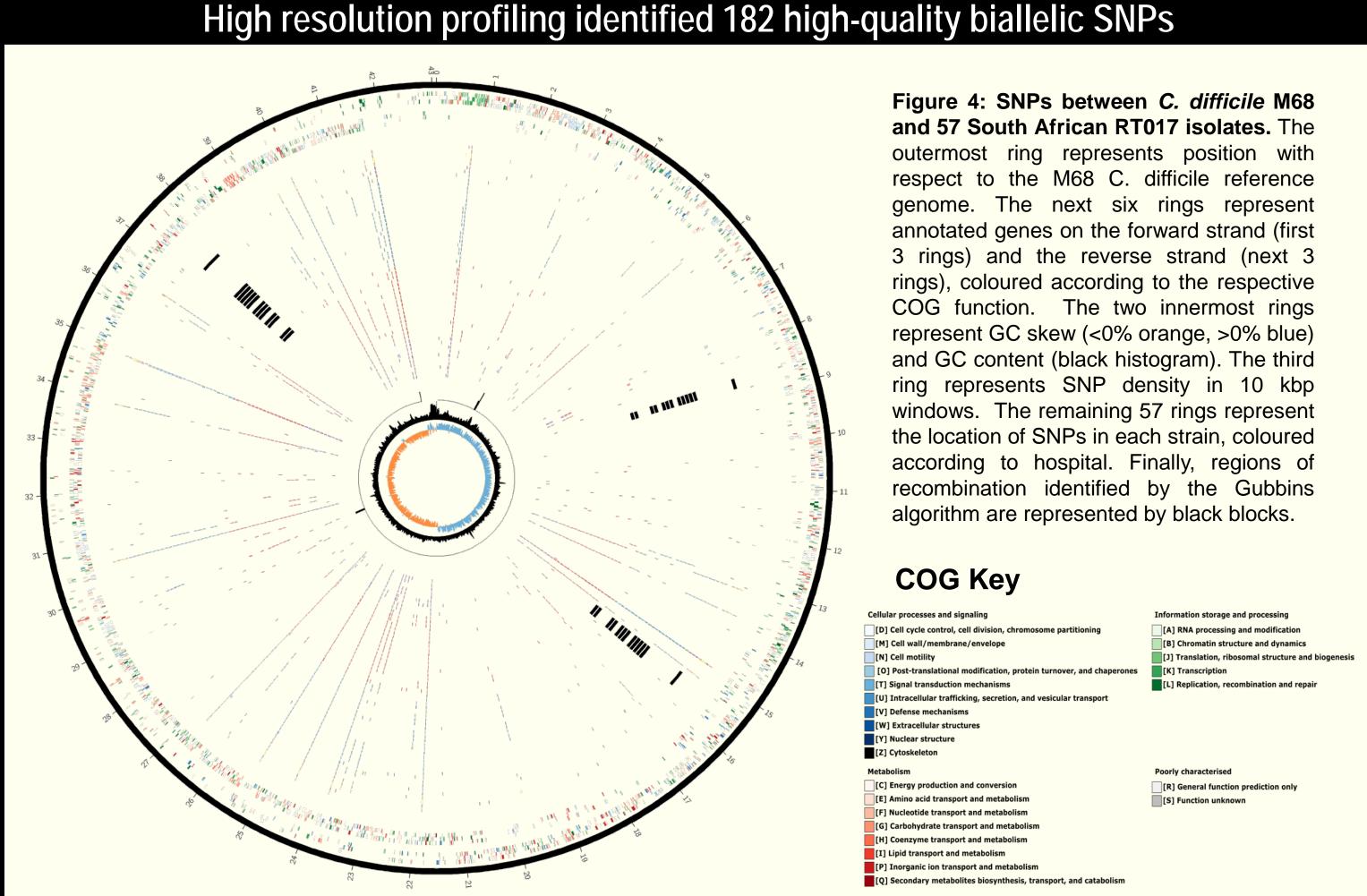
To carry out WGS analysis of *C. difficile* RT017 strains from Cape Town hospitals to examine strain transmission and the genetic basis of antimicrobial resistance (AMR)

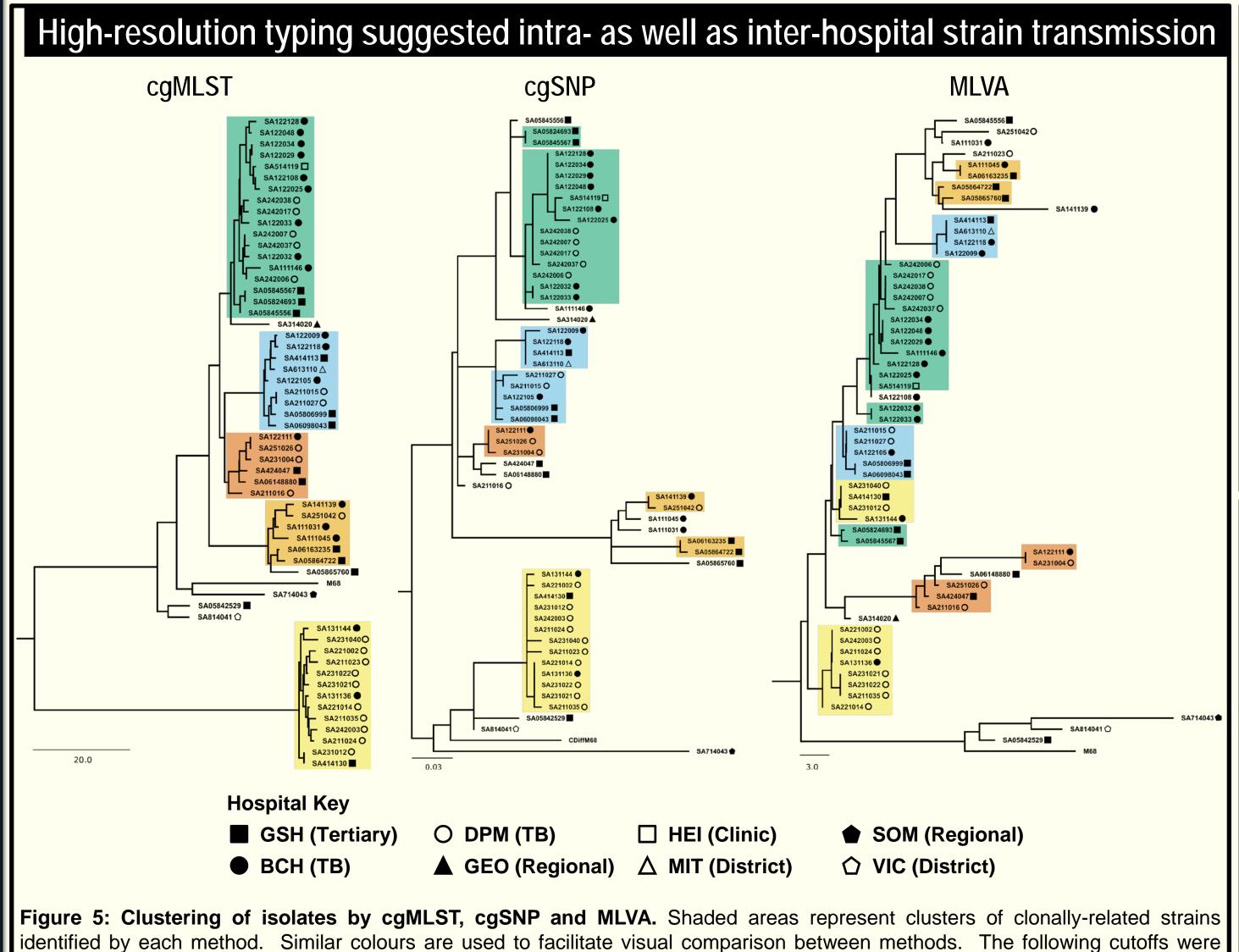
Methods



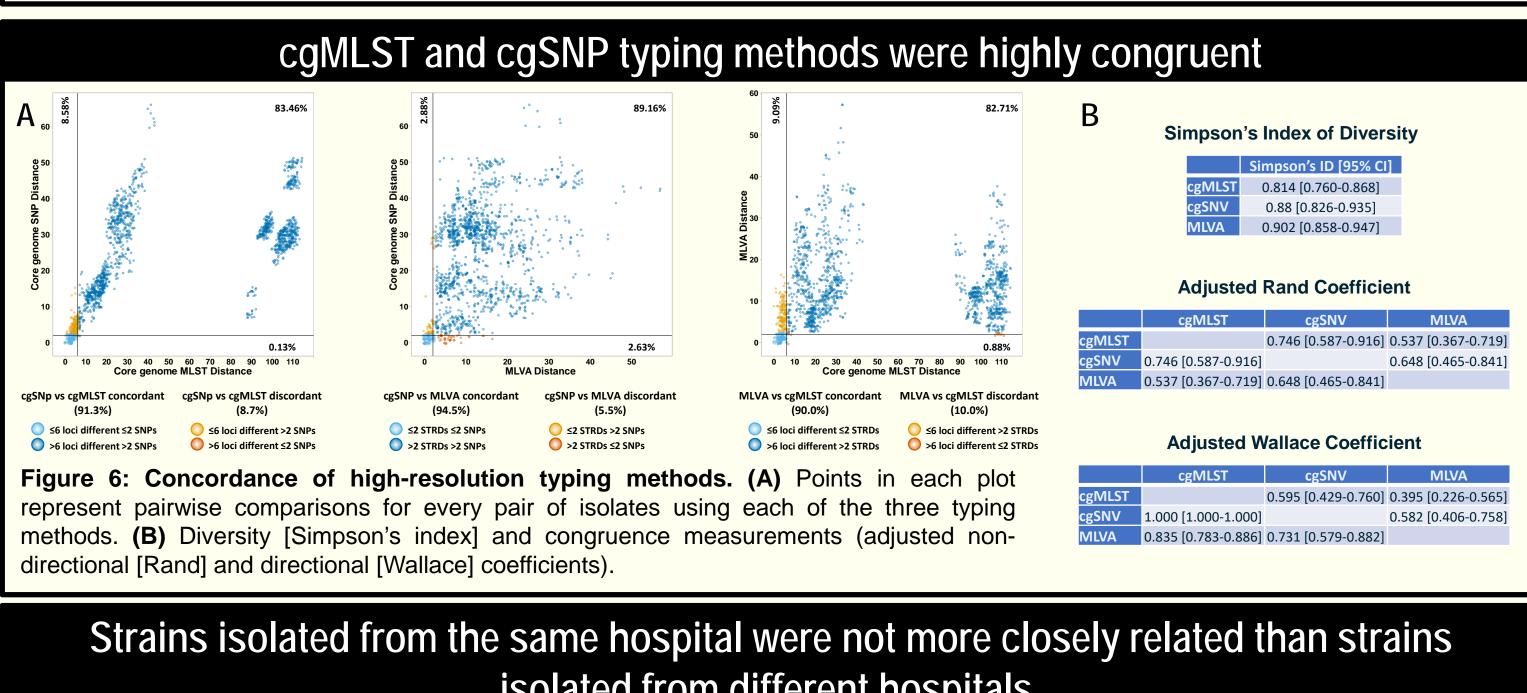
Results

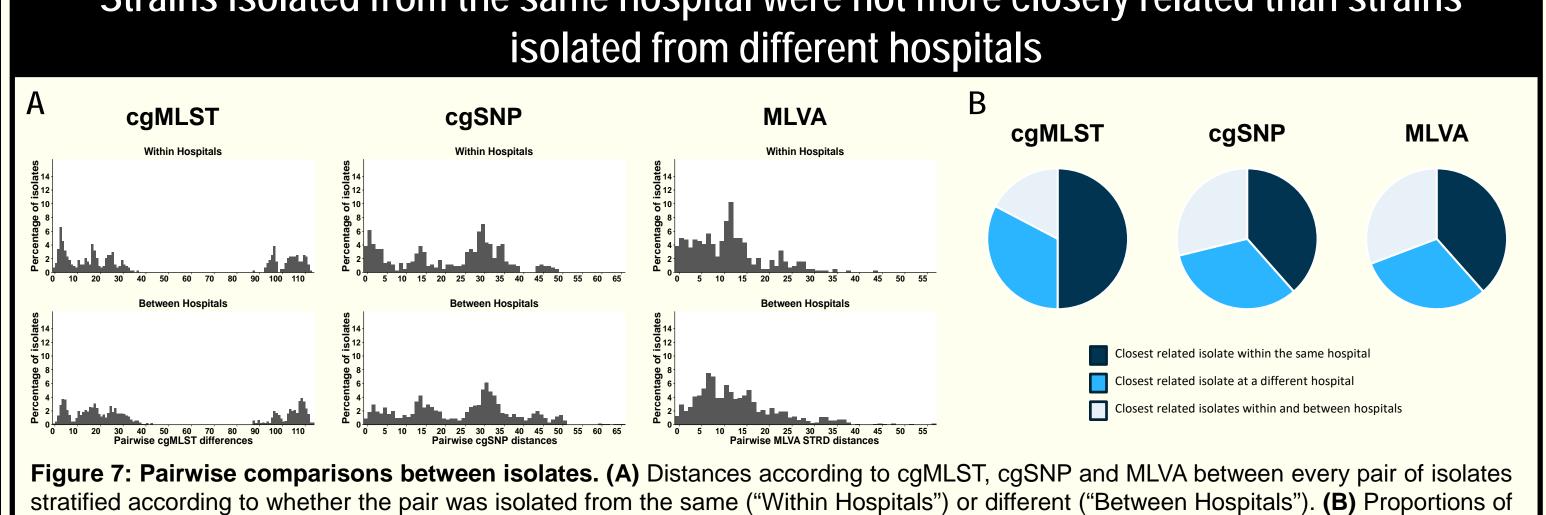






used to classify clonally-related strains: cgMLST ≤ 6 loci different, cgSNP ≤ 2 single nucleotide variants, MLVA ≤ 2 summed tandem





isolates for which the closest related strain was isolated from the same hospital, a different hospital or both.

Conclusions

This is the first study to carry out a detailed genomic analysis of South African C. difficile strains. The results suggest that:

- 1. SA RT017 isolates harboured a diverse array of antimicrobial resistance determinants, which was correlated with phenotypic resistance to moxifloxacin, erythromycin, rifampicin and tetracycline
- Clonally-related RT017 strains were circulating within patients attending public hospitals in the Cape Town area during the study period
- 3. WGS-based methods (cgSNP and cgMLST) provided similar levels of resolution when used to analyse RT017 strains, whereas MLVA had higher discriminatory power but was a poor predictor of clustering by the WGS-based methods

References

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repeat distance.