

## Using diversity to capture the spread and persistence of antimicrobial resistance



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**LONGITUDE** PRIZE 2014

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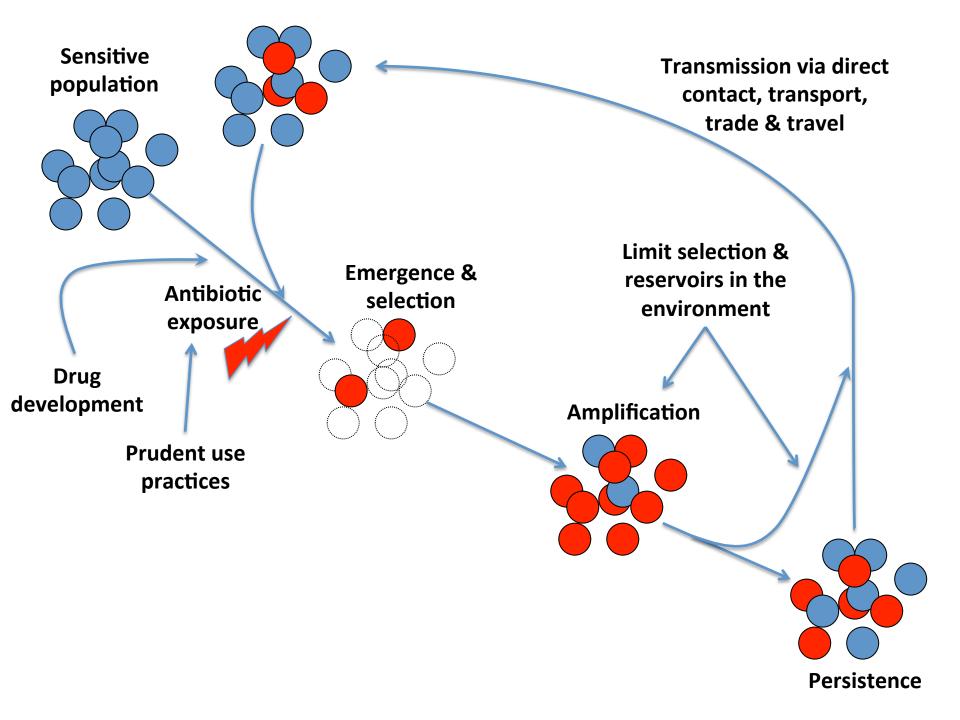
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## THE WINNING CHALLENGE IS ANTIBIOTICS

Longitude Prize 2014 is a challenge with a £10 million prize fund to help solve one of the greatest issues of our time. It is being run and developed by Nesta, with the Technology Strategy Board as launch funding partner.



#### **Developing countries**

- Commonly lack effective regulatory framework
  - Quality, distribution, sales, access
- Nigerian case study
  - 85% human E. coli, 53% animal E. coli resistant
  - In-feed use of antibiotics in poultry oxytetracycline, gentamicin, ciprofloxacin, enrofloxacin, chloramphenicol
  - No attention to withholding periods





(Nsofor et al. 2013, African J Microbiol Res 7:4646

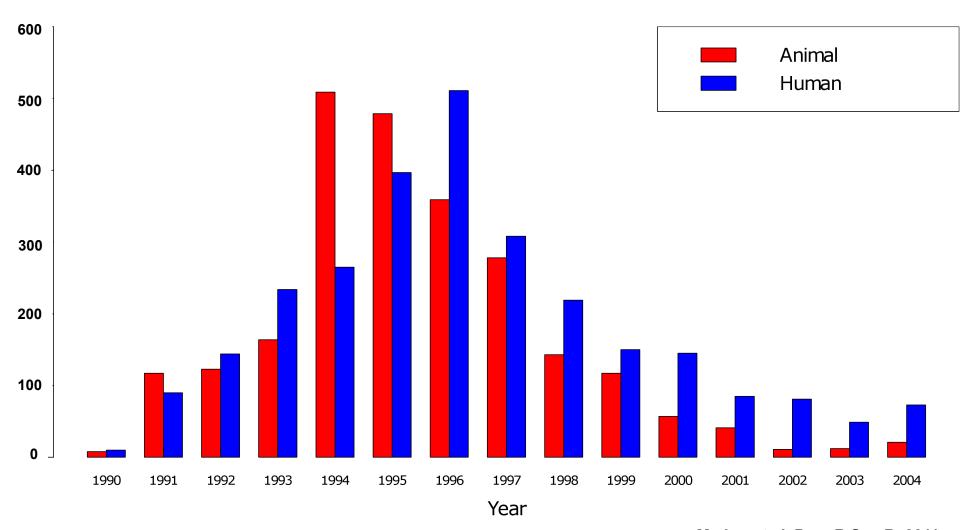


#### Background

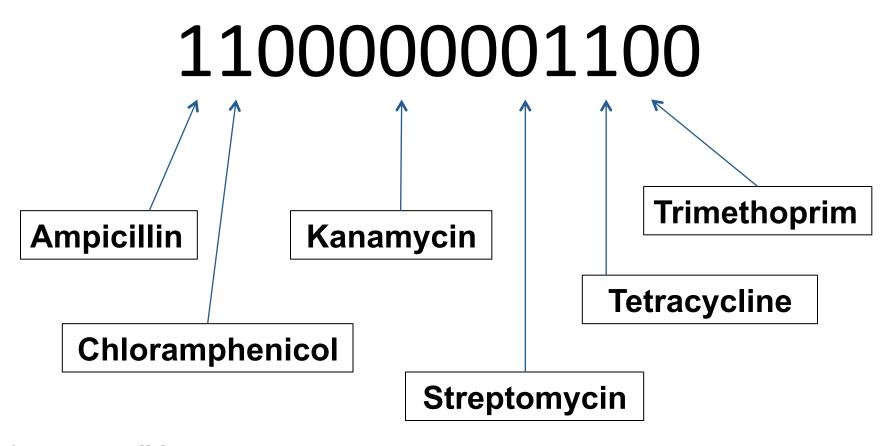
 Previous studies investigated AMR in Salmonella from Scottish human and livestock data

 Used suite of analytical approaches to investigate the flow of resistance between populations

# Reported number of isolates of *S.* Typhimurium DT104



#### Resistance profiles

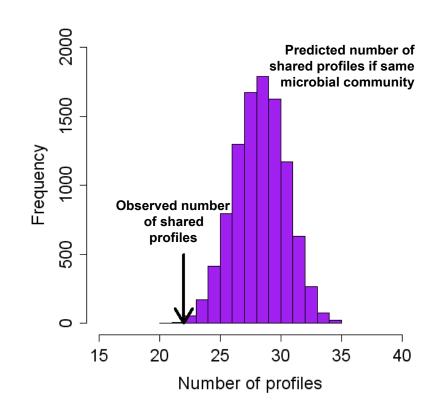


0 = susceptible 1 = resistant

#### Comparing human and animal profiles

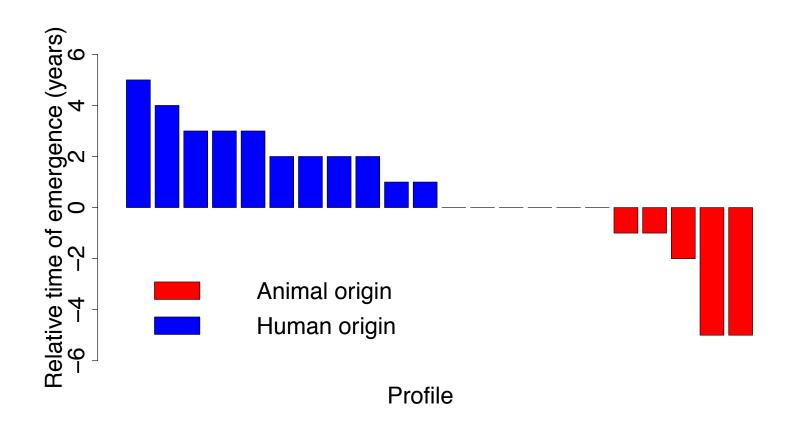
#### **Observations**

- Observed 65 unique profiles\*
  - 52 in humans (30 unique)
  - 35 in animals (13 unique)
  - 22 shared
- Common microbial community?
  - No
    - Fewer profiles shared by both populations than expected



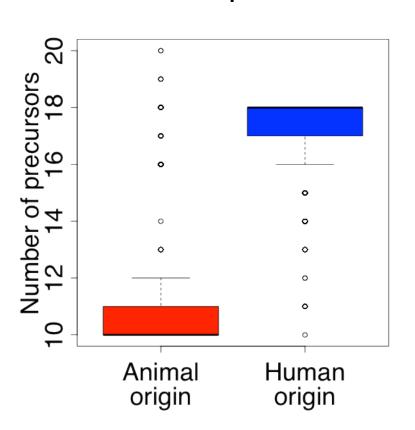
\*2<sup>13</sup> = 8,192 theoretically possible, but also know there are genetically linked resistances

# 1.Relative emergence time of shared profiles

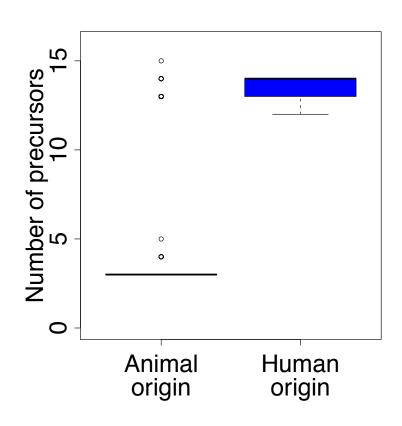


# 2.Source of precursors of resistant profiles

#### **Human profiles**



#### **Animal profiles**



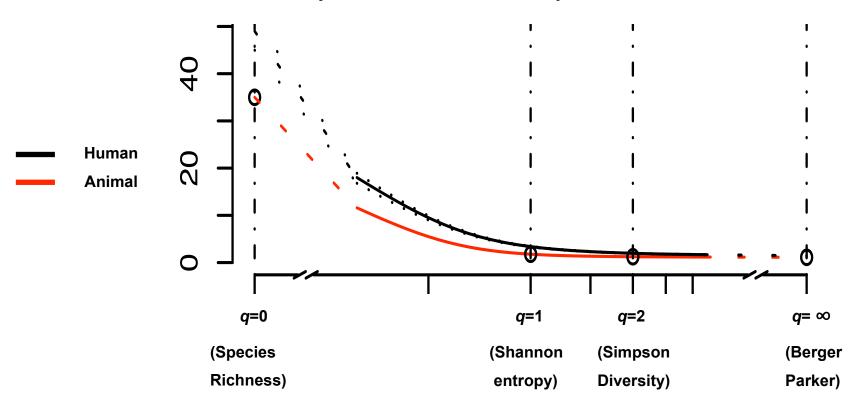
#### 3. Quantifying Diversity

- Many ways of looking at diversity
  - Species richness
  - Relative abundance of most common species
- Different measures of diversity weigh richness and abundance differently
- Family of diversity measures (related by parameter, q)
  - Species richness (q=0)
    - Rare profiles carry same weight as common profiles
  - Shannon entropy (q=1)
  - Simpson diversity (q=2)
  - Berger-Parker  $(q=\infty)$ 
    - Frequency of most common profile dominates
    - Rare profiles carry no weight

$$D_{q}(p_{1}\cdots p_{S}) = \begin{cases} \left[\sum_{i=1}^{S} p_{i}^{q}\right]^{\frac{1}{1-q}} & q \neq 1\\ \prod_{i=1}^{S} p_{i}^{-p_{i}} & q = 1 \end{cases}$$

## Diversity 'fingerprint'

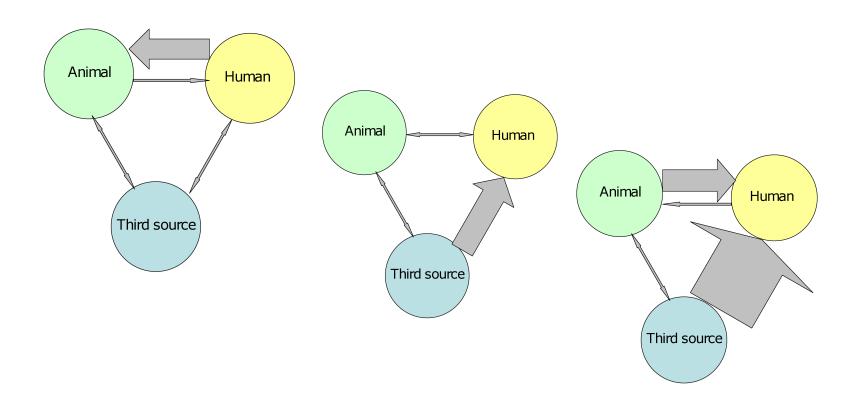
Greater diversity in human samples

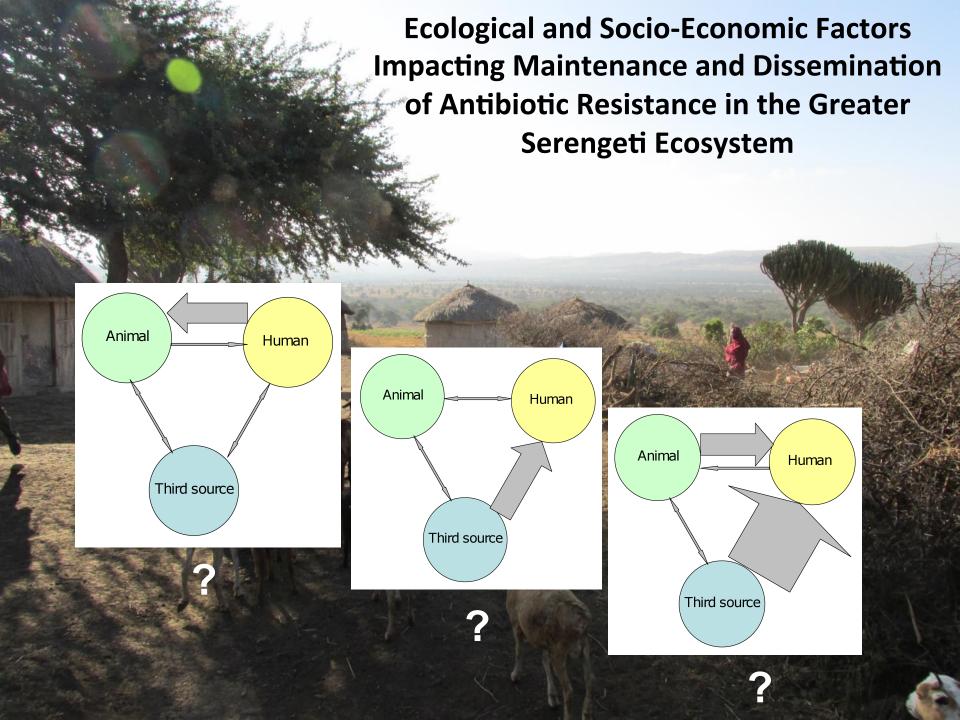


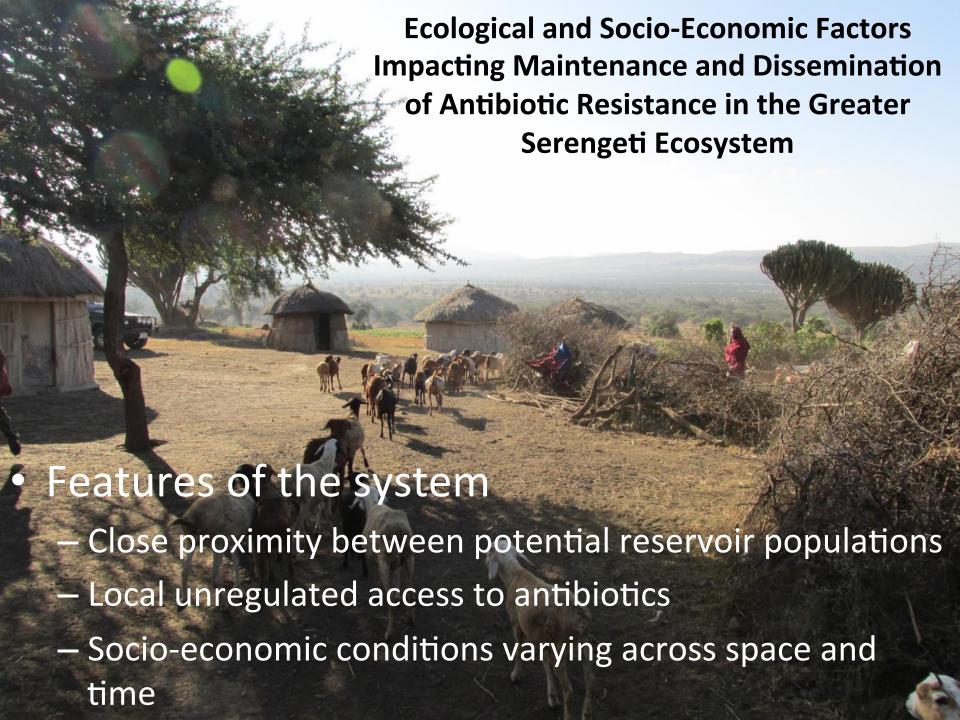
### Findings

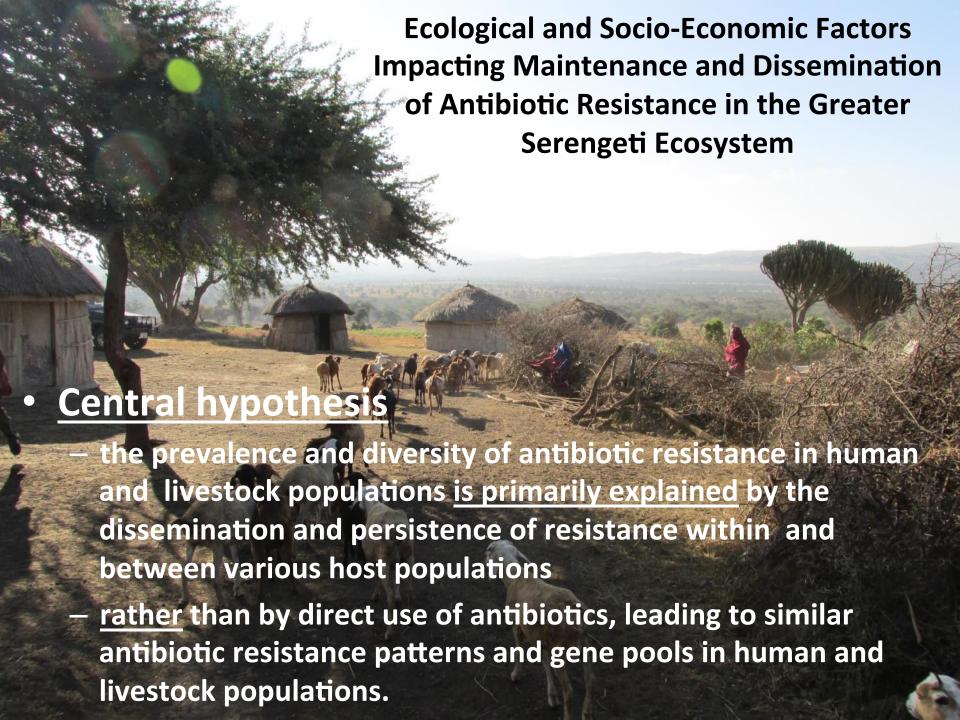
- Human population
  - More likely source for first emergence
  - More frequent source of precursors
  - Greater diversity
- Sympatric animal population unlikely to be major source of resistance in humans
  - Three possible scenarios

## Three possible scenarios









Ecological and Socio-Economic Factors
Impacting Maintenance and Dissemination
of Antibiotic Resistance in the Greater
Serengeti Ecosystem

Socio-economic surveys of 480 households in 48 communities across distinct ecological zones

**Analytical methods** 

- 1. Quantify diversity profiles
- 2. Connectivity analysis
- 3. Risk factor analysis
- 4. Ecological modelling
- 5. Integration of socio-economic factors

Ethnographic interviews and surveys of antibiotic supply chains

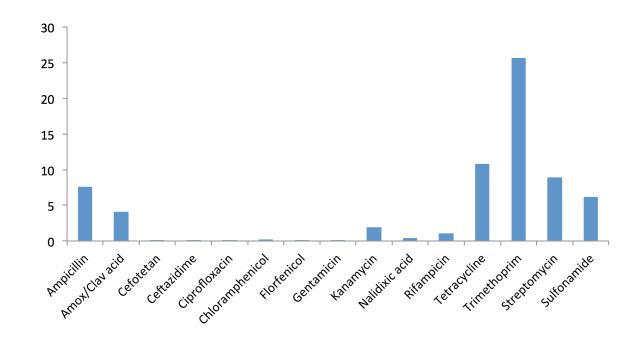
phenotyping and genotyping from humans, wildlife and livestock (>50,000 isolates)

Antibiotic resistance

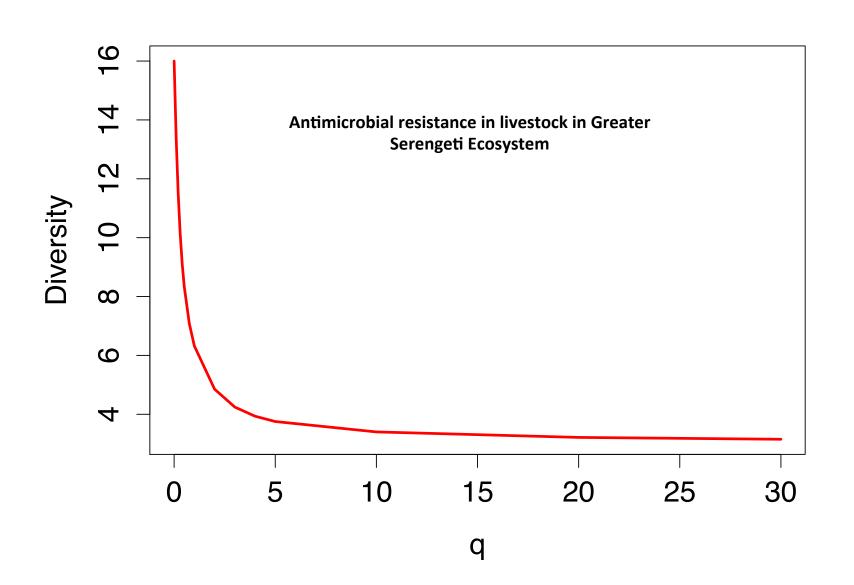
economic connectivity between communities

#### Data: hot off the press

Antibiotic	%	Number
Ampicillin	7.6	8
Amox/Clav acid	4.09	4
Cefotetan	0.05	0
Ceftazidime	0.04	0
Ciprofloxacin	0.04	0
Chloramphenicol	0.18	0
Florfenicol	0.05	0
Gentamicin	0.05	0
Kanamycin	1.91	2
Nalidixic acid	0.41	0
Rifampicin	1.03	1
Tetracycline	10.8	11
Trimethoprim	25.68	26
Streptomycin	8.91	9
Sulfonamide	6.19	6
Susceptible	32.97	5487
Total	100	5554



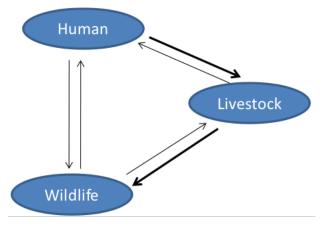
#### First diversity profile



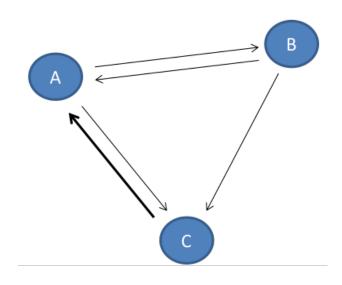
#### US-UK Collab: Ecological and Socio-Economic Factors Impacting Maintenance and Dissemination of Antibiotic Resistance in the Greater Serengeti Ecosystem

- Quantifying the diversity of resistance
  - diversity "fingerprint"
  - compare diversity between host types and communities

 Advances on previous analyses...



Within-community transmission of AMR

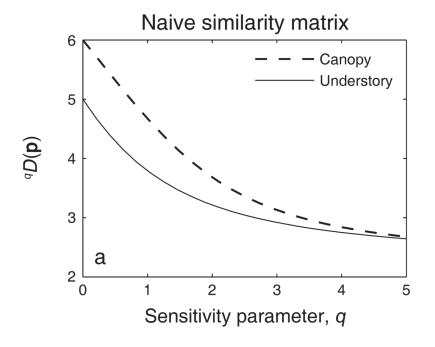


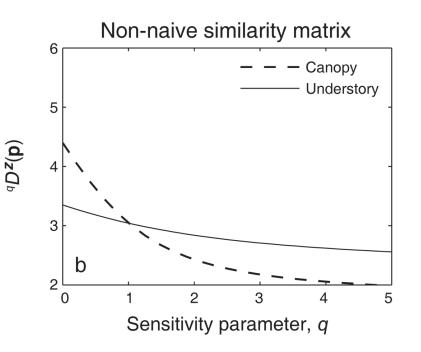
Between-community transmission of AMR

#### 1. Inclusion of similarity

 Delivers more accurate representation of diversity

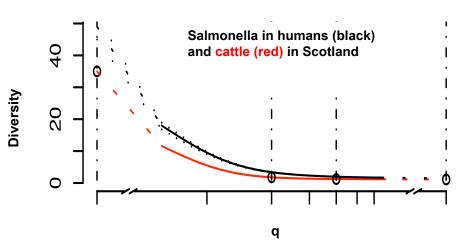
$$^{q}D^{Z}(\boldsymbol{p}) = \left(\sum_{i=1}^{S} p_{i}(\boldsymbol{Z}\boldsymbol{p})_{i}^{q-1}\right)^{1/(1-q)}$$





#### 1. Inclusion of similarity

 Previous study compared naïve diversities



- New analyses will account for
  - genetic and phenotypic similarity
  - overlap between communities

#### 2. Formally partition diversity

Similarity sensitive measure

$$^{q}D^{Z}(\boldsymbol{p}) = \left(\sum_{i=1}^{S} p_{i}(\boldsymbol{Z}\boldsymbol{p})_{i}^{q-1}\right)^{1/(1-q)}$$

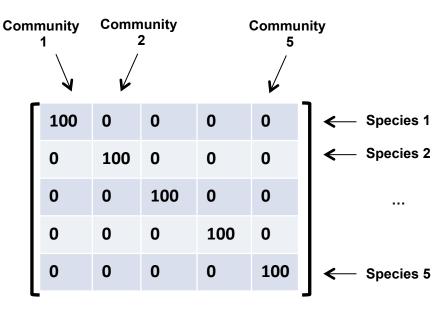
- Alpha diversity
  - Average diversity of communities
- Gamma diversity
  - Global diversity across all communities
- Beta diversity
  - Between community diversity
  - Long and varied history!

$$q D^{Z}(\boldsymbol{p}) = \left(\sum_{i=1}^{S} p_{i} (1/\gamma_{i})^{q-1}\right)^{1/(1-q)}$$

$$q D^{Z}(\boldsymbol{p}) = \left(\sum_{i=1}^{S} p_{i} (1/\beta_{i})^{q-1}\right)^{1/(1-q)}$$

$$| Individual community contribution | Individual community distinctiveness | Individual community | Indivi$$

- Both ecosystems have same gamma diversity
  - ecosystem gamma diversity=5
    - (5 equally present species)
- Ecosystem A
  - $-\alpha_i=1$ ,  $\beta_i=5$ ,  $\gamma_i=5$
  - ecosystem alpha diversity=1
  - ecosystem beta diversity=5
- Ecosystem B
  - α<sub>i</sub>=4, β<sub>i</sub>=1.25, γ<sub>i</sub>=5
  - ecosystem alpha diversity=4
  - ecosystem beta diversity=1.25



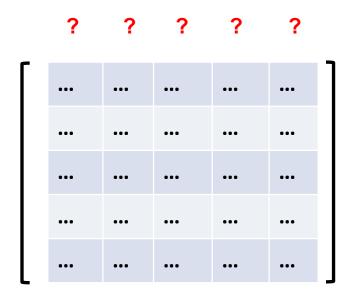
**Ecosytem A** 

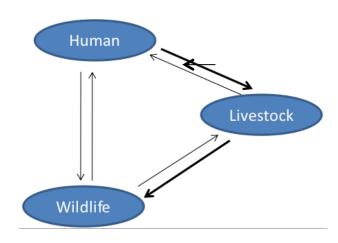
25	25	25	25	0
25	25	25	0	25
25	25	0	25	25
25	0	25	25	25
0	25	25	25	25

**Ecosytem B** 

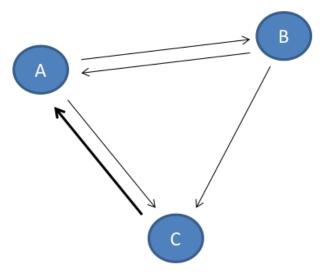
#### Exposing community structure

- Which communities have distinct ecologies/dynamics?
- Which partitioning of the data maximises beta diversity?





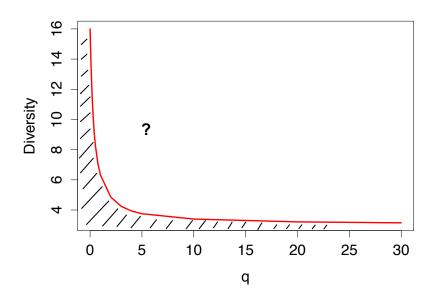
Within-community transmission of AMR

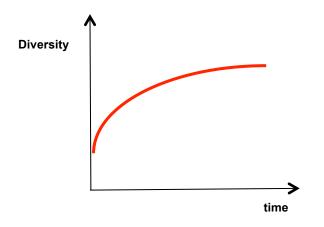


Between-community transmission of AMR

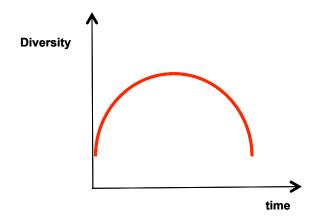
#### 3. Statistics and diversity

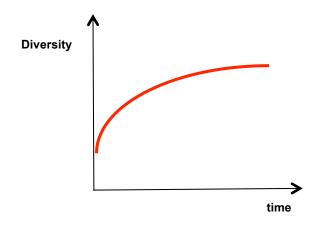
- Risk factor analysis
  - use 'diversity' as an outcome in statistical models
  - find risk factors based on community types, classified by
    - rural, peri-urban
    - connectivity (trading, animal movements)
    - educational status
    - availability of antibiotics
  - appropriate outcome variables?
    - diversity (which value of q?)



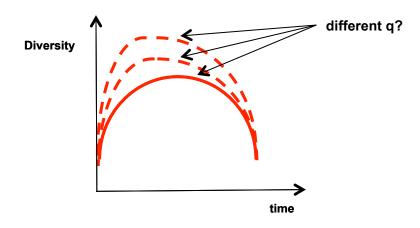


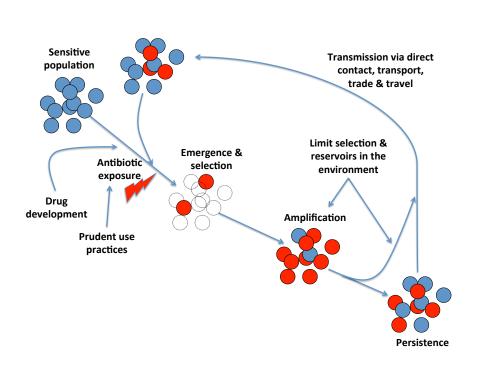
- Modelling the flow of resistance
  - allow diversity "fingerprint" to change over time



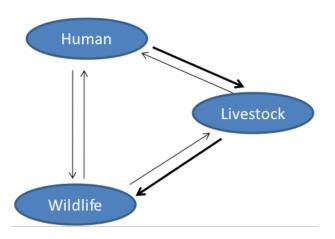


- Modelling the flow of resistance
  - allow diversity "fingerprint" to change over time

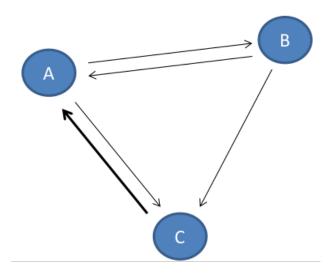




- Modelling the flow of resistance
  - allow diversity "fingerprint" to change over time
  - capture generation and spread of resistance



Within-community transmission of AMR



- Modelling the flow of resistance
  - allow diversity "fingerprint" to change over time
  - capture generation and spread of resistance

**Between-community transmission of AMR** 

#### Summary

- New and powerful tools
  - Similarity-sensitive diversity
  - Partitioning of diversity
- Emerging areas of interest
  - Diversity and statistics
  - The dynamics of diversity
- Developing and deploying these tools as large amounts of AMR data come on line

- Washington State University (USA)
  - Doug Call, Margaret Davis, Terry McElwain, Guy Palmer, Rob Quinlan, Marsha Quinlan, Mark Caudell, Felix Lankester
- University of Glasgow
  - Jo Sharp, Sarah Cleaveland, Richard Reeve, Dan Haydon, Colette Mair
- Duke University (USA) & University of Otago (New Zealand)
  - John Crump
- Nelson Mandela African Institute for Science and Technology (TZ)
  - Francis Shahada, P. Gwakisa
- Tanzania Wildlife Research Institute (TZ)
  - Julius Keyyu
- Kilimanjaro Christian Medical Centre & Kilimanjaro Clinical Research Institute (TZ)
  - G. Kibiki, M. Ntabaye







- University of Dodoma (TZ)
  - D. Mwamfupi, Benta Matunga, Deman Yusuph, Eva Ombaka
- RVC (UK)
  - Jonathan Rushton, Ruth Rushton, Stuart Reid
- Directorate of Veterinary Services (TZ)
  - Emanuel Swai

#### Summary and future

#### Central hypothesis

- the prevalence and diversity of antibiotic resistance in human and livestock populations is <u>primarily explained</u> by the dissemination and persistence of resistance within and between various host populations
- rather than by direct use of antibiotics, leading to similar antibiotic resistance patterns and gene pools in human and livestock populations.

#### Consistent observations

- 1. No role of antibiotic usage!
  - No differences between communities or host types!
  - Better connected communities have greater diversity
- 2. Or, differences seen between community types, explained by differing antibiotic usage, but within communities
  - extent of shared diversity (flow of resistance) independent of antibiotic usage patterns
  - acquisition of new resistance types) more strongly related to contact patterns than usage patterns