Original Article The relationship between integrons, antibiotic resistance genes and SXT resistance in Shigella flexneri strains

Chunling Peng¹, Mingxiao Yao², Jingwen Liu³, Qian Zhang⁴, Guangying Yuan³, Quanping Ma⁴

¹Department of Child Health, Children's Hospital of Jinan, Jinan 250021, Shandong, China; ²Shandong Provincial Center for Disease Control and Prevention, Jinan 250014, Shandong, China; ³Department of Laboratory, Shandong Provincial Center for Public Health Clinical Center, Jinan 250102, Shandong, China; ⁴Department of Laboratory Medicine, Fourth People's Hospital of Jinan, Jinan 250031, Shandong, China

Received February 19, 2024; Accepted May 13, 2024; Epub May 15, 2024; Published May 30, 2024

Abstract: Objective: To investigate the correlation between sulfamethoxazole-trimethoprim (SXT) resistance in Shigella flexneri (S.flexneri) and the presence of integrons and relevant antibiotic resistance genes. Methods: We collected 115 strains of Shigella flexneri isolated from feces of children with diarrhea in Jinan from 2012 to 2020 and determined the minimum inhibitory concentration (MIC) of SXT by Etest method. The presence of class 1, class 2, and class 3 integron genes, variable region antibiotic resistance gene cassettes, and sul1, sul2, sul3, and SXT elements were detected using polymerase chain reaction (PCR). Positive results were further analyzed by DNA sequencing and BLAST comparison. Results: In total, the resistance rate to SXT was 60.9% among the 115 S.flexneri strains. The prevalence of class 1 and class 2 integrons were 88.7% and 87.0%, respectively, with no class 3 integrons detected. Among the strains, 13.0% carried typical class 1 integrons with variable region antibiotic resistance gene cassettes dfrA17-aadA5 and dfrV, while 85.2% carried atypical class 1 integrons with variable region antibiotic resistance gene cassette blaoxa-30-aadA1. The variable region antibiotic resistance gene cassettes of class 2 integrons were all dfrA1+sat1+aadA1. There was a statistical difference between the presence of class 1 integrons and class 2 integrons between the SXT-sensitive and resistant S.flexneri strains (χ^2 =22.800, χ^2 =16.365, P<0.01, P<0.01). Integrons carrying dfrV and dfrA1 by integrons also showed a statistical difference in SXT resistance (x²=9.422, x²=16.365, P<0.01, P<0.01). PCR revealed the presence of sul1 and sul2 in 13.0% and 47.0% of strains, respectively, with neither sul3 nor SXT elements detected. There was a significant difference between the presence of sul1, sul2 between the SXT-sensitive and resistant S.flexneri strains (χ^2 =9.588, χ^2 =65.445, P<0.01, P<0.01). Conclusion: In summary, integrons are involved in SXT resistance of S.flexneri, and dfrV, dfrA1, sul1, sul2 are closely related to SXT resistance of S.flexneri.

Keywords: S.flexneri, sulfanilamide, integron, drug resistance genes

Introduction

Shigella spp. are a Gram-negative, rod-shaped, immotile, and non-spore - forming bacteria and a causative agent of acute diarrhea that may progress to bloody mucoid diarrhea, also known as bacillary dysentery (or shigellosis). Shigella is a predominant cause of diarrheal disease and a major pathogen responsible for increased morbidity and mortality caused by dysentery each year around globally, particularly affecting children aged <5 years in developing countries. *Shigella* is reported as one of the top three major pathogens responsible for childhood diarrhea mortality [1] and has been recognized by the World Health Organization (WHO) as a bacteria with increasing antibiotic resistance, posing a significant threat to human health [2]. Recent studies indicate a steady increase in the resistance of *Shigella* to antimicrobials [3-5]. The Clinical and Laboratory Standards Institute (CLSI) 2019 edition [6] recommended ampicillin, fluoroquinolones, and sulfonamides for the treatment of bacterial dysentery. Historically, sulfonamides were effective in treating bacterial dysentery caused by *Shigella* in the 1930s. However, in recent years, SXT resistance in *Shigella* has become increasingly concerning. Shigella spp. are emerging as significant public health threats due to the increase and global spread of multidrug-resistant (MDR) strains [4]. The study of integron-carried antibiotic resistance gene cassettes [7-9] and related gene-mediated resistance [10, 11] has become a research hotspot.

In this study, we investigated the relationship between SXT resistance, integrons, and relevant genes in *Shigella* strains isolated from fecal samples of children with diarrhea. We assessed the resistance profiles of 115 *Shigella* strains and performed PCR amplification to explore the correlation between SXT resistance and variable region antibiotic resistance gene cassettes, *sul1*, *sul2*, *sul3*, and SXT elements.

Materials and methods

Strain source

A total of 115 strains of S.flexneri were isolated from fecal samples of children aged 6 months to 14 years who visited the Children's Hospital of Jinan, Fourth People's Hospital of Jinan and Infectious disease Hospital of Jinan from 2012 to 2020. The Shigella strains were isolated using conventional cultivation and automated biochemical identification methods and serotyped using Shigella diagnostic antisera. The preserved strains were retrieved from a -86°C ultra-low temperature freezer, thawed at room temperature, and re-identified. Escherichia coli ATCC 25922, a quality control strain for antimicrobial susceptibility testing, was kept at the Clinical Microbiology Laboratory of the Fourth People's Hospital of Jinan.

Main reagents and instruments

Key materials and equipment included SXT Etest strips (AB Biodisc, Sweden), Mueller-Hinton agar (OXOID, UK), *Shigella* diagnostic antisera (Lanzhou Institute of Biological Products, China), agarose (Invitrogen, USA), automated bacterial identification system (VITEK-2, BioMérieux, France), DNA amplification instrument (Biometra, Germany), electrophoresis instrument (Beijing Liuyi Instrument Factory, Model 10C), biological safety cabinet (Shanghai Lishen Scientific Instrument Factory, 1200IIA2). PCR primer synthesis and DNA sequencing of amplification products were performed by Bao Biological Engineering (Dalian) Co., Ltd.

Antimicrobial susceptibility testing

The Etest method was employed to assess the antimicrobial susceptibility of Shigella flexneri. Three to four colonies of S.flexneri grown at 35°C for 16-18 hours were picked and adjusted to a turbidity of 0.5 McF using sterile saline on a turbidimeter. Within 15 minutes, a sterile cotton swab was dipped into the bacterial suspension, excess liquid was squeezed from the swab against the inner wall of the tube, and the swab was streaked onto Mueller-Hinton agar. The plate was rotated 60 degrees three times and streaked along the edge. After a few minutes, an SXT Etest strip was placed on the agar surface. The plate was incubated at 35°C for 16-18 hours, and the MIC results of SXT were determined according to the instructions provided with the Etest strip. The experimental procedures and interpretation of results were strictly in accordance with the Clinical and Laboratory Standards Institute (CLSI) guidelines of 2019 [6]. MIC values $\leq 2/38$ mg/L were considered sensitive, and MIC values $\geq 4/76$ mg/L were considered resistant. Escherichia coli ATCC 25922 was used for quality control.

PCR amplification experiment

Single colonies were picked and inoculated on M-H agar plates, incubated at 35°C for 16-18 hours. A sterile cotton swab was used to pick an appropriate amount of bacterial, which was then resuspended in 50 µl of double-distilled water. The mixture was then subjected to a 95°C water bath for 5 minutes, followed by a 30-second centrifugation at 12,000 rpm. The supernatant was stored at -20°C for further use. Primers for intl and variable regions were synthesized according to references [12-15], and the primer sequences are shown in **Table 1**. The PCR reaction for intl and the 3' end was performed as follows: initial denaturation at 94°C for 3 minutes, followed by 35 cycles of denaturation at 94°C for 30 seconds, annealing at the temperature specified in Table 1 for 30 seconds, and extension at 72°C for 60 seconds. A final extension step was performed at

Primer	Sequence $(5' \rightarrow 3')$	Fragment Length (bp)	Annealing Temperature (°C)	Reference	
intl1F	ACATGTGATGGCGACGCACGA	569	50	[12]	
intl1R	ATTTCTGTCCTGGCTGGCGA				
in1F	GGCATCCAAGCAGCAAGC	-	52	[13]	
in1R	AAGCAGACTTGACCTGAT				
qacE∆1	ATCGCAATAGTTGGCGAAGT	798	52	[13]	
sul1	GCAAGGCGGAAACCCGCGCC				
intl1ca	CGTAGAAGAACAGCAAGG	-	52	[14]	
IS1ca	AGTGAGAGCAGAGATAGC				
intl2F	GTAGCAAACGAGTGACGAAATG	789	51	[12]	
intl2R	CACGGATATGCGACAAAAAGGT				
intl2ca-F	CGGGATCCCGGACGGCATGCACGATTTGTA	-	55	[15]	
intl2ca-R	GATGCCATCGCAAGTACGAG				
intl3F	GCCTCCGGCAGCGACTTTCAG	980	55	[12]	
intl3R	ACGGATCTGCCAAACCTGACT				
sul1F	CTTCGATGAGAGCCGGCGGC	338	55	[16]	
sul1R	GCAAGGCGGAAACCCGCGCC				
sul2F	GCGCTCAAGGCAGATGGCATT	286	55	[16]	
sul2R	GCGTTTGATACCGGCACCCGT				
sul3F	GAGCAAGATTTTTGGAATCG	799	55	[16]	
sul3R	CATCTGCAGCTAACCTAGGGCTTTGGA				
SXT-F	ATGGCGTTATCAGTTAGCTGGC	1035	56	[17]	
SXT-R	GCGAAGATCATGCATAGACC				

 Table 1. Primer sequences for PCR

72°C for 5 minutes. The PCR reaction for the variable regions was performed as follows: initial denaturation at 94°C for 3 minutes, followed by 10 touchdown PCR cycles with a decreasing annealing temperature from 68°C to 54°C in 1.4°C increments, followed by 25 cycles of denaturation at 94°C for 30 seconds, annealing at 52°C for 30 seconds, extension at 75°C for 180 seconds, and a final extension step at 72°C for 8 minutes. After the reaction, 10 µl of the PCR product was subjected to 1% agarose gel electrophoresis at 120 V for 20 minutes. The gel was stained with ethidium bromide and visualized using a UV analyzer. Positive strains were subjected to sequencing of the intl variable region, and if necessary, the obtained sequences were analyzed for restriction enzyme cutting sites. Restriction fragment length polymorphism analysis was performed using Hinfl as the restriction enzyme. The reaction mixture consisted of 1 µl of Hinfl, 2 µl of 10× buffer, up to 1 µg of DNA, and double-distilled water to a total volume of 20 µl. The mixture was incubated at 37°C for 1 hour and then terminated by adding 10× loading buffer. A 10

µl aliquot was subjected to 2.5% agarose gel electrophoresis at 120 V for 1 hour. Primers for sul1, sul2, sul3, and SXT elements were synthesized according to references [16, 17], with sequences displayed in Table 1. The PCR reaction was performed as follows: initial denaturation at 94°C for 3 minutes, followed by 35 cycles of denaturation at 94°C for 30 seconds, annealing at the temperature specified in Table 1 for 30 seconds, and extension at 75°C for 40 seconds. A final extension step was performed at 75°C for 5 minutes. After the reaction, 10 µl of the PCR product was subjected to 1% agarose gel electrophoresis at 120 V for 20 minutes. The gel was stained with ethidium bromide and visualized using a UV analyzer. The PCR products were sent to Bao Biological Engineering (Dalian) Co., Ltd. for gene sequencing, and the sequences were analyzed and compared using NCBI/BLAST to determine the genotype. The drug resistance gene sequencing map of positive strains was summarized, and critical fragments were archived for future reference and result validation.

SXT resistance		Class 1	Class 2			
phenotype in SXT	Class 1	Canonical	Atypical drug	Class 2	Drug resistance	
(Number of strains)	integrase genes	resistance gene	resistance gene	integrase gene	gene cassette	
Sensitive (45)	- (n=11)	-	-	- (n=11)	-	
	intl1 (n=2)	-	blaoxa-30-aadA1	-	-	
	-	-	-	intl2 (n=2)	dfrA1-sat1-aadA1	
	intl1 (n=30)	-	blaoxa-30-aadA1	intl2 (n=30)	dfrA1-sat1-aadA1	
Drug Resistance (70)	intl1 (n=2)	-	blaoxa-30-aadA1	-	-	
	intl1 (n=4)	dfr V	-	intl2 (n=4)	dfrA1-sat1-aadA1	
	intl1 (n=9)	dfr V	blaoxa-30-aadA1	intl2 (n=9)	dfrA1-sat1-aadA1	
	intl1 (n=2)	dfrA17-aadA5	blaoxa-30-aadA1	intl2 (n=2)	dfrA1-sat1-aadA1	
	intl1 (n=53)	-	blaoxa-30-aadA1	intl2 (n=53)	frA1-sat1-aadA1	
Total (115)	102	15	98	100	100	

Table 2. Antimicrobial resistance and distribution of integron resistance gene cassettes in 115 strainsof S.flexneri

Table 3. Serotypes and resistance genotypes of the 115 strains of S.flexneri

Serotype	Strains	Constituent ratio (%)	Class 1 In	Class 2 In	dfrA17	dfrV	dfrA1	sul1	sul2
1a	12	10.4	12 (10.4)	10 (8.7)	0 (0.0)	0 (0.0)	10 (8.7)	0 (0.0)	10 (8.7)
2a	68	59.1	56 (48.7)	56 (48.7)	0 (0.0)	12 (10.4)	56 (48.7)	12 (10.4)	14 (12.2)
2b	7	6.1	6 (5.2)	6 (5.2)	0 (0.0)	1 (0.9)	6 (5.2)	1 (0.9)	2 (1.7)
4a	26	22.6	26 (22.6)	26 (22.6)	2 (1.7)	0 (0.0)	26 (22.6)	2 (1.7)	26 (22.6)
X varietas	2	1.7	2 (1.7)	2 (1.7)	0 (0.0)	0 (0.0)	2 (1.7)	0 (0.0)	2 (1.7)
Total	115	99.9	102 (88.6)	100 (86.9)	2 (1.7)	13 (11.3)	100 (86.9)	15 (13.0)	54 (46.9)

Statistical analysis

SPSS 22.0 software was used for statistical analysis. Chi-squared test was used for comparing qualitative data between groups to analyze drug resistance, with P<0.05 indicating a statistically significant difference.

Results

Antimicrobial susceptibility results

Among the 115 strains of S.flexneri, 45 strains demonstrated SXT MIC values $\leq 2/38$ mg/L, while 70 strains showed MIC values $\geq 4/76$ mg/L, demonstrating a resistance rate to SXT of 60.9% (70/115). S.flexneri subtypes 1a, 2a, 2b, 4a, and X accounted for 10.4% (12/115), 59.1% (68/115), 6.1% (7/115), 22.6% (26/115), and 1.7% (2/115), respectively (**Tables 2** and **3**).

PCR detection results

Of the 115 S.flexneri strains, 104 strains carried the integrase gene, accounting for 90.4%

(104/115). The class 1 integrase genes (intl1) were detected in 102 strains (88.7%, 102/115), the class 2 integrase genes (intl2) were detected in 100 strains (87.0%, 100/115), and both intl1 and intl2 were simultaneously detected in 98 strains (85.2%, 98/115), while no strains showed amplification of class 3 integrase genes. intl1 and intl2 were detected in all serotypes, with the highest detection rates in S.flexneri 2a and 4a, accounting for 48.7% (56/115) and 22.6% (26/115), respectively. Among the intl1 positive strains, 15 strains (13.0%, 15/115) carried typical class 1 integrons, with a positive 3' conserved segment including intl1, In, and $qacE\Delta1$ -sul1, while 98 strains (85.2%, 98/115) carried atypical class 1 integrons with a positive 3' conserved segment including intl1 and intl1-IS1. 11 strains carried both typical and atypical class 1 integrons (9.6%, 11/115). The variable region of class 1 integrons contained resistance gene cassettes dfrA17-aadA5, dfrV, and blaoxa-30-aadA1, accounting for 1.7% (2/115), 11.3% (13/115), and 85.2% (98/115), respectively. The variable region of class 2 integrons contained gene cassette dfrA1+sat1+aadA, which was detected in 87.0% (100/115) of the strains and showed the same restriction enzyme profile after Hinfl digestion. Among them, two strains of S.flexneri 1a were resistant to SXT and positive for intl1 and intl1-IS1 but negative for intl2. The resistance gene cassette identified was blaoxa-30-aadA1, accounting for 1.7% (2/115). Two strains of S.flexneri 2a were susceptible to SXT and positive for intl1 and intl1-IS1 but negative for intl2, with the resistance gene cassette being blaoxa-30-aadA1, also accounting for 1.7% (2/115). Two strains of S.flexneri 2a were susceptible to SXT and negative for intl1 and intl1-IS1 but positive for intl2, with the resistance gene cassette being dfrA1+sat1+aadA. Eleven strains of S.flexneri 2a were susceptible to SXT and negative for both intl1 and intl2, accounting for 9.6% (11/115) (Tables 2, 3; Figures 1-4).

Among the 115 strains of S.flexneri, primers targeting sul1, sul2, sul3, and the SXT element were used for amplification. Positive fragments were obtained in 67 strains, accounting for 58.3% (67/115). Specifically, 15 strains showed positive amplification with the sul1 primer, representing 13.0% (15/115), while 54 strains showed positive amplification with the sul2 primer, accounting for 47.0% (54/115). No positive fragments were obtained for sul3 or the SXT element. DNA sequencing and BLAST comparison confirmed that these positive products corresponded to dihydropteroate synthase genes sul1 and sul2. Among the strains, 11.3% (13/115) carried only sul1, 45.2% (52/115) carried only sul2, and 1.7% (2/115) of the strains (S.flexneri 4a) carried both sul1 and sul2. Sul1 was detected in S.flexneri subtypes 2a, 2b, and 4a, with the highest detection rate in subtype 2a, accounting for 10.4% (12/115). Sul2 was detected in all subtypes, with the highest detection rates in subtypes 4a, 2a, and 1a, representing 22.6% (26/115), 12.2% (14/115), and 8.7% (10/115), respectively. One strain of S.flexneri 2a and two strains of S.flexneri 1a (carrying only atypical class 1 integrons with the resistance gene cassette blaoxa-30-aadA1) were resistant to SXT but did not amplify sul1 or sul2. Among the 45 SXT susceptible strains, no sul1 or sul2 was detected, while among the 70 SXT resistant strains, 67 strains (95.7%, 67/70) carried both sul1 and sul2 (Table 3; Figures 5, 6).

Analysis of the presence of integrons and resistance genes in S.flexneri strains

The chi-square test revealed significant differences in the presence of class 1 integrons $(\chi^2=22.800, P<0.01)$, class 2 integrons $(\chi^2=$ 16.365, P<0.01), dfrV (χ^2 =9.422, P<0.01), dfrA1 (x²=16.365, P<0.01), sul1 (x²=9.588, P<0.01), and sul2 (χ^2 =65.445, P<0.01) between SXT-sensitive and resistant strains. However, there was no significant difference in the presence of dfrA17 between SXT-sensitive and resistant strains (χ^2 =1.308, P>0.05) (Table 4). Both class 1 and class 2 integrons were detected in the same strains of S.flexneri subtypes 2a, 2b, 4a, and X. Among the S.flexneri 1a strains, 16.7% (10/12) carried only class 1 integrons, while 83.3% (10/12) carried both class 1 and class 2 integrons. Only 7.7% (2/26) of the S.flexneri 4a strains were positive for dfrA17. DfrV was detected in 17.6% (12/68) of the S.flexneri 2a strains and 14.3% (1/7) of the S.flexneri 2b strains, while dfrA1 was present in all serotypes. Sul1 was detected in 17.6% (12/68) of the S.flexneri 2a strains, 14.3% (1/7) of the S.flexneri 2b strains, and 7.7% (2/26) of the S.flexneri 4a strains. Interestingly, sul1 and dfrV coexisted in 12 strains of S.flexneri 2a and 1 strain of S.flexneri 2b. Additionally, sul1, sul2, and dfrA17-aadA5 were found to coexist in 2 strains of S.flexneri 4a. Sul2 was detected in all serotypes, predominantly in S.flexneri 4a, with a detection rate of 100% (Table 3).

Discussion

In recent years, the drug resistance of *Shigella* has been increasing, leading to the global spread of multidrug-resistant *Shigella*, which is a pathogen that requires reevaluation due to its significant impact on public health, as recognized by the WHO [2]. The incidence of *Shigella* infections is related to the economic conditions, public health, lifestyle habits, and predominant serotypes in each region. Bacterial dysentery caused by *Shigella* is a serious public health problem in China.

In this study, 115 strains of S.flexneri were tested for their resistance to SXT, revealing a resistance rate of 60.9%, which is consistent with previously reported 61.3% in 10 cities in China [18]. However, it is lower than the reported resistance rates of 85% in Peru [19] and 91% in



Figure 3. Partial sequence of the *blaoxa-30-aadA1* gene cassette.



Figure 6. Partial sequence of the *sul2* gene.

, 0		0				
Integrons and related genes	Sensitive (45)	Sensitive composition ratio (%)	Drug Resistance (70)	Ratio of drug resistance (%)	X ²	Р
Class 1 In (intl1, in positive)	32	71.1	70	100.0	22.800	<0.01
Class 2 In (intl2, intl2ca positive)	32	71.1	68	97.1	16.365	<0.01
dfrA17	0	0.0	2	2.9	1.308	>0.05
dfrV	0	0.0	13	18.6	9.422	<0.01
dfrA1	32	71.1	68	97.1	16.365	<0.01
sul1	0	0.0	15	21.4	9.588	<0.01
sul2	0	0.0	54	77.1	65.445	<0.01

Table 4. Analysis of integrons and resistance genes in the 115 strains of S.flexneri

Iran [20], yet higher than the resistance rate of 44.4% in Xinjiang, China [21]. These variations may be attributed to the local use of antibiotics and prevalent serotypes.

Plasmids, integrons, and genomic islands are mobile genetic elements associated with bacterial multidrug resistance. Integrons, in particular, are significant due to their ability to capture, integrate, and disseminate resistance genes among bacteria, both within and across species, which is a major cause for concern. Cecilia S. Toro and colleagues [9] studied 349 strains of Shigella sonnei from 1995 to 2013, of which 55.6% carried class 1 integrons containing the blaOXA-1-aadA1 gene and 18.3% carried class 2 integrons containing the dfrA1 gene. Nabi Jomehzadeh et al. [8] detected 47 strains of S.flexneri in southwest Iran, and the carriage rates of class 1 and class 2 integrons were 87.2% and 93.6%, respectively. Llugue et al. [19] tested 55 strains of S.flexneri in Peru, and the carriage rates of class 1 and class 2 integrons were 51% and 52%, respectively. Kang Haiquan et al. [18] tested 31 strains of S.flexneri in China, and the carriage rates of class 1 and class 2 integrons were 80.6% and 83.9%, respectively. In our study, among the 115 strains of S.flexneri, 88.7% carried class 1 integrons, with 85.2% being non-typical integrons carrying the *blaoxa-30-aadA1* variable region, and 13.0% carrying typical integrons with the dfrA17-aadA5 and dfrV variable regions. Furthermore, 87.0% carried class 2 integrons with the *dfrA1*+sat1+aadA1 variable region. These results are similar to those reported in Iran [8] and by domestic scholars [18, 22], but different from the carriage rates and resistance gene profiles reported in Peru [19] and Chile [9]. The differences may be related to the tested regions, time periods, and Shigella strains. Whether regional clonal transmission exists requires further investigation.

The OXA, aadA, and sat genes encode resistance to β-lactams, aminoglycosides, and streptomycin, respectively, and are not related to SXT resistance. The dfr gene encodes resistance to trimethoprim, and the sul gene encodes resistance to sulfamethoxazole. Statistical analysis revealed that dfrV, dfrA1, sul1, and sul2 are statistically related to SXT resistance, indicating the involvement of these four genes in S.flexneri's resistance to SXT. In a study by Shuyu Wu et al. [23], sul2 was detected in 65% of sulfonamide-resistant Escherichia coli in Denmark, along with 45% carrying sul1 and 12% carrying sul3. These genes can be transferred through plasmids ranging in size from 33-160 kb, contributing to the spread of sulfonamide-resistant E. coli in the region. Llugue A et al. [19] detected sul2 in 95% of clinical SXT-resistant Shigella strains and dfrA1 in 47% of strains. In a study by Mohd SI et al. [24], sul2 was detected in all 146 SXT-resistant S.flexneri 2a strains, mediated by a 4.3 MDa plasmid. In our study, 13.0% of the 115 S.flexneri strains tested positive for sul1, 46.9% tested positive for sul2, and 1.7% tested positive for both sul1 and sul2. Among the 40 SXTsensitive strains, no sul genes were detected, while among the 70 SXT-resistant strains, 67 strains (95.7%; 67/70) carried sul genes. These research findings suggest that various regions of integrons, dfrV, dfrA1, sul1, and sul2, contribute to SXT resistance in S.flexneri. However, one S.flexneri 2a strain and two S.flexneri 1a strains only carried *blaoxa-30-aadA1* genes and exhibited resistance to SXT, suggesting the presence of other resistance mechanisms.

The SXT element, initially discovered in Vibrio cholerae *0139*, encodes resistance to SXT

[25]. Over recent years, SXT elements have been identified in various other bacteria, carrying different resistance genes [26, 27]. In our study, the SXT element was not amplified in S.flexneri, yet its potential for horizontal gene transfer warrants close monitoring. Among the 115 S.flexneri strains, three showed resistance to SXT without amplifying the corresponding resistance genes, and 30 carried *dfrA1* but remained sensitive to SXT. Further exploration is needed to determine if *dfrA1* is a non-functional structural gene.

Given the limited number of strains examined, it is possible that some integrons and drug resistance genes might not be detected, and the high prevalence of certain resistance genes may suggest the presence of gene clones specific to this region. Our analysis focused solely on the presence of resistance genes and their statistical correlation with SXT resistance, revealing significant associations. However, without gene cloning of the positive markers, it remains uncertain whether these genes are functional within the strains.

In summary, integrons are involved in SXT resistance of S.flexneri, and dfrV, dfrA1, sul1, sul2 are closely related to SXT resistance of S.flexneri.

Disclosure of conflict of interest

None.

Address correspondence to: Quanping Ma, Department of Laboratory Medicine, Fourth People's Hospital of Jinan, Jinan 250031, Shandong, China. E-mail: jnslsykjwsk@jn.shandong.cn; maquanping-123456@163.com

References

- [1] GBD Diarrhoeal Diseases Collaborators. Estimates of global, regional, and national morbidity, mortality, and aetiologies of diarrhoeal diseases: a systematic analysis for the Global Burden of Disease Study 2015. Lancet Infect Dis 2017; 17: 909-948.
- [2] Kotloff KL. Bacterial diarrhoea. Curr Opin Pediatr 2022; 34: 147-155.
- [3] Bian F, Yao M, Fu H, Yuan G, Wu S and Sun Y. Resistance characteristics of CTX-M type Shigella flexneri in China. Biosci Rep 2019; 39: BSR20191741.
- [4] Ranjbar R and Farahani A. Shigella: antibioticresistance mechanisms and new horizons for

treatment. Infect Drug Resist 2019; 12: 3137-3167.

- [5] Roy B, Tousif Ahamed SK, Bandyopadhyay B and Giri N. Development of quinolone resistance and prevalence of different virulence genes among Shigella flexneri and Shigella dysenteriae in environmental water samples. Lett Appl Microbiol 2020; 71: 86-93.
- [6] Clinical and Laboratory Standards Institute. Performance standards for antimicrobial susceptibility testing; twenty-seventh informational supplement. Wayne PC; 2019.
- [7] Morteza M and Abolfazl DSM. Isolation and antibiotic resistance patterns of shigella and salmonella bacteria in children with acute diarrhea in amirkola children's hospital in Babol, in 2019. J Mazandaran Univ Med Sci 2021; 31: 60-72.
- [8] Jomehzadeh N, Afzali M, Ahmadi K, Salmanzadeh S and Mehr FJ. Antimicrobial resistance patterns and prevalence of integrons in Shigella species isolated from children with diarrhea in southwest Iran. Asian Pac J Trop Med 2021; 14: 78-82.
- [9] Toro CS, Salazar JC, Montero DA, Ugalde JA, Díaz J, Cádiz LA, Henríquez T, García C, Díaz P, Camponovo R, Hermosilla G and Ulloa MT. Antimicrobial resistance dynamics in chilean shigella sonnei strains within two decades: role of shigella resistance locus pathogenicity island and class 1 and class 2 integrons. Front Microbiol 2022; 12: 794470.
- [10] Karkoub M, Kouhsari E, Khaghani S and Sadeghifard N. Clonal lineage analysis of Shigella flexneri isolates circulating in Ahvaz, Iran. Clin Lab 2021; 67.
- [11] Locke RK, Greig DR, Jenkins C, Dallman TJ and Cowley LA. Acquisition and loss of CTX-M plasmids in Shigella species associated with MSM transmission in the UK. Microb Genom 2021; 7: 000644.
- [12] Martínez-Álvarez S, Châtre P, François P, Abdullahi IN, Simón C, Zarazaga M, Madec JY, Haenni M and Torres C. Unexpected role of pig nostrils in the clonal and plasmidic dissemination of extended-spectrum beta-lactamaseproducing Escherichia coli at farm level. Ecotoxicol Environ Saf 2024; 273: 116145.
- [13] Pan JC, Ye R, Meng DM, Zhang W, Wang HQ and Liu KZ. Molecular characteristics of class 1 and class 2 integrons and their relationships to antibiotic resistance in clinical isolates of S.sonnei and S.flexneri. J Antimicrob Chemother 2006; 58: 288-296.
- [14] Saini P, Bandsode V, Singh A, Mendem SK, Semmler T, Alam M and Ahmed N. Genomic insights into virulence, antimicrobial resistance, and adaptation acumen of Escherichia coli isolated from an urban environment. mBio 2024; 15: e0354523.

- [15] Wang T, Zhu Y, Zhu W, Cao M and Wei Q. Molecular characterization of class 1 integrons in carbapenem-resistant Enterobacterales isolates. Microb Pathog 2023; 177: 106051.
- [16] Aarestrup FM, Lertworapreecha M, Evans MC, Bangtrakulnonth A, Chalermchaikit T, Hendriksen RS and Wegener HC. Antimicrobial susceptibility and occurrence of resistance genes among Salmonella enterica serovar Weltevreden from different countries. J Antimicrob Chemother 2003; 52: 715-718.
- [17] Ramachandran D, Bhanumathi R and Singh DV. Multiplex PCR for detection of antibiotic resistance genes and the SXT element: application in the characterization of Vibrio cholerae. J Med Microbiol 2007; 56: 346-351.
- [18] Kang H, Wang L, Li Y, Lu Y, Fan W, Bi R, Qian H and Gu B. Dissemination of multidrug-resistant Shigella flexneri and Shigella sonnei with class 1, class 2, and atypical class 1 integrons in China. Microb Drug Resist 2019; 25: 1465-1474.
- [19] Lluque A, Mosquito S, Gomes C, Riveros M, Durand D, Tilley DH, Bernal M, Prada A, Ochoa TJ and Ruiz J. Virulence factors and mechanisms of antimicrobial resistance in Shigella strains from periurban areas of Lima (Peru). Int J Med Microbiol 2015; 305: 480-490.
- [20] Mamishi S, Arab Yazdi Z, Mahmoudi S, Moradzadeh M, Taghi Haghi Ashtiani M and Pourakbari B. Antimicrobial-resistance pattern of Shigella species in children: a six-year study in an Iranian referral Hospital. Ann Ig 2019; 31: 356-364.
- [21] Liu H, Zhu B, Qiu S, Xia Y, Liang B, Yang C, Dong N, Li Y, Xiang Y, Wang S, Xie J, Mahe M, Sun Y and Song H. Dominant serotype distribution and antimicrobial resistance profile of Shigella spp. in Xinjiang, China. PLoS One 2018; 13: e0195259.

- [22] Ma QP, Su L, Liu JW, Yao MX and Yuan GY. Study on the association between drug-resistance and gene mutations of the active efflux pump acrAB-tolC gene and its regulatory genes. Mol Med Rep 2018; 17: 8228-8236.
- [23] Wu S, Dalsgaard A, Hammerum AM, Porsbo LJ and Jensen LB. Prevalence and characterization of plasmids carrying sulfonamide resistance genes among Escherichia coli from pigs, pig carcasses and human. Acta Vet Scand 2010; 52: 47.
- [24] Iqbal MS, Rahman M, Islam R, Banik A, Amin MB, Akter F and Talukder KA. Plasmid-mediated sulfamethoxazole resistance encoded by the sul2 gene in the multidrug-resistant Shigella flexneri 2a isolated from patients with acute diarrhea in Dhaka, Bangladesh. PLoS One 2014; 9: e85338.
- [25] Waldor MK, Tschäpe H and Mekalanos JJ. A new type of conjugative transposon encodes resistance to sulfamethoxazole, trimethoprim, and streptomycin in Vibrio cholerae 0139. J Bacteriol 1996; 178: 4157-4165.
- [26] Han Y, Gao YF, Xu Ht, Li JP, Li C, Song CL, Lei CW, Chen X, Wang Q, Ma BH and Wang HN. Characterization and risk assessment of novel SXT/R391 integrative and conjugative elements with multidrug resistance in Proteus mirabilis isolated from China, 2018-2020. Microbiol Spectr 2024; 12: e0120923.
- [27] Tong X, Goh SG, Mohapatra S, Tran NH, You L, Zhang J, He Y and Gin KY. Predicting antibiotic resistance and assessing the risk burden from antibiotics: a holistic modeling framework in a tropical reservoir. Environ Sci Technol 2024; 58: 6781-6792.