

GENOTYPING OF *M. TUBERCULOSIS* CLINICAL ISOLATES FROM NEW CASES OF TUBERCULOSIS IN KAZAKHSTAN

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Introduction

Tuberculosis (TB) remains a major health problem in Kazakhstan. Despite of that the rates of TB disease and mortality decreased from 58,5/100000 and 4,1/100000 in 2015 to 52,7/100000 and 3,4/100000 in 2016 respectively, the rate of **multidrug-resistant TB (MDR-TB)** increased from 12,2/100000 in 2014 to 13,5/100000 in 2015 [1];

MDR strains associated with resistance to the main two first line anti-TB drugs – isoniazid and rifampicin are the most dangerous. **27 countries** relate to **high MDR-TB burden countries**, 15 of them in the European region, including **Kazakhstan** [2];

Methods of genotyping of *M. tuberculosis* play important role in TB infection control. There are more than 10 methods of genotyping, **MIRU-VNTR** is one of the widely used method in the world.

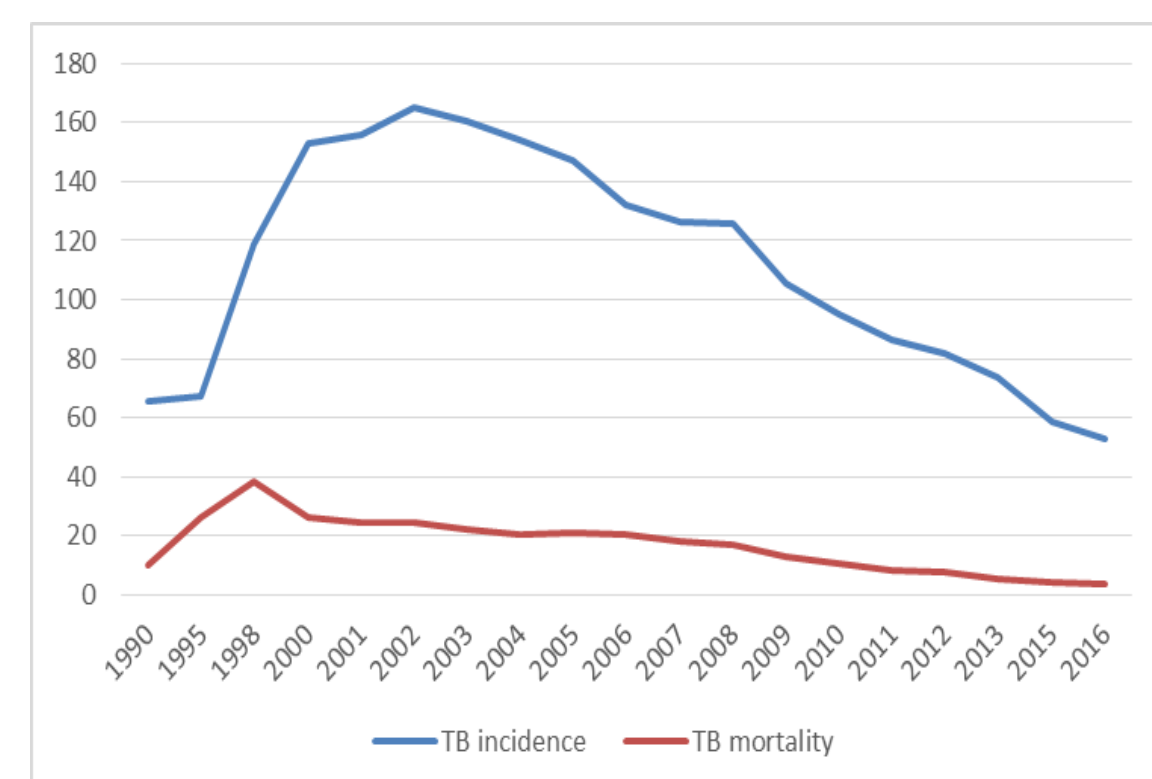


Figure 1. TB incidence and TB mortality in Kazakhstan

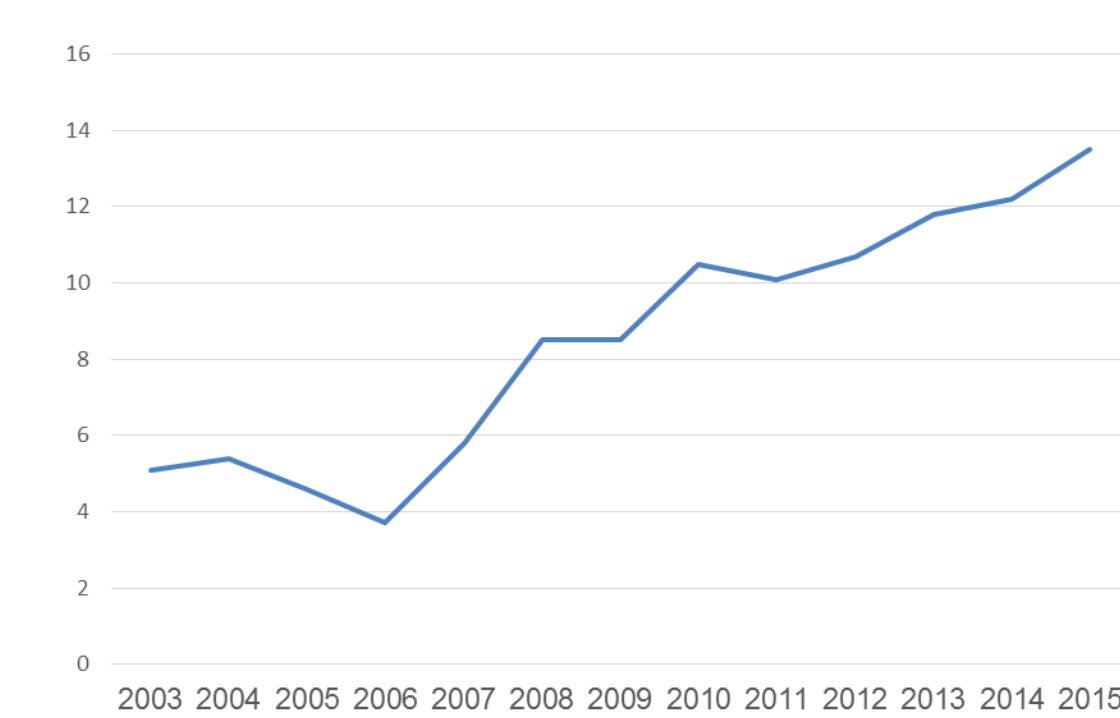
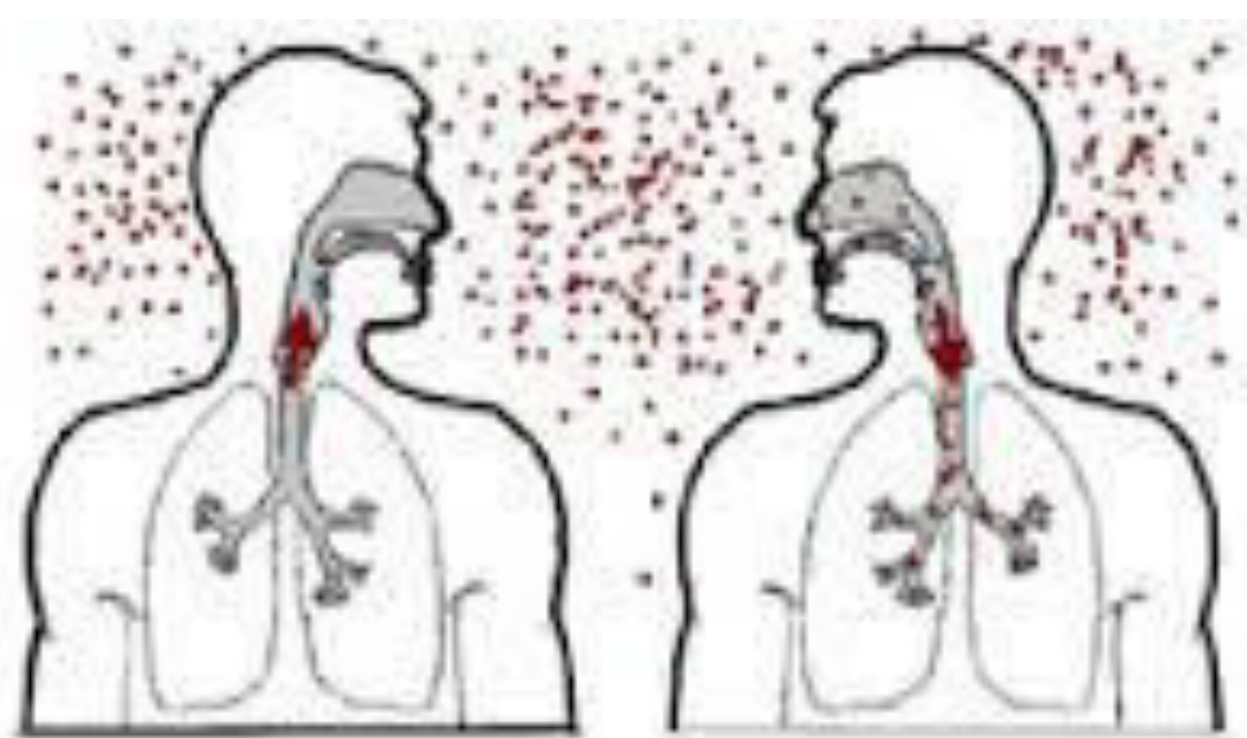


Figure 2. Incidence of MDR tuberculosis in Kazakhstan



Aim

Estimation of biological diversity of *M. tuberculosis* clinical isolates among new TB cases in Kazakhstan by MIRU-VNTR analysis.

Materials and Methods

Materials:

385 samples of *M. tuberculosis* from new TB cases were collected from different regions of Kazakhstan.

Methods:

Clinical isolates of *M. tuberculosis* were collected from regional TB centers and deposited at the **Reference laboratory of the National Scientific Center for Tuberculosis Problems (Almaty)**;

After primary isolation mycobacteria were subcultured on solid **Lowenstein-Jensen medium**;

Drug susceptibility testing for *M. tuberculosis* was performed using absolute concentration method;

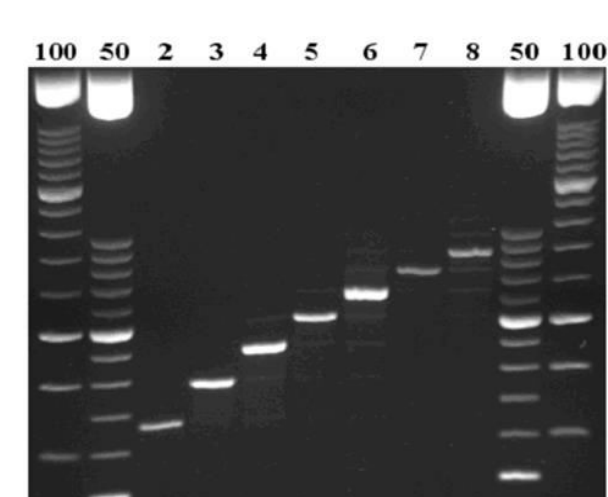
Heat inactivated mycobacterial colonies that were incubated at 95°C during 45 minutes were used for MIRU-VNTR typing;

Genotyping of clinical isolates of *M. tuberculosis* was carried out by 15 MIRU-VNTR method (Figure 3);

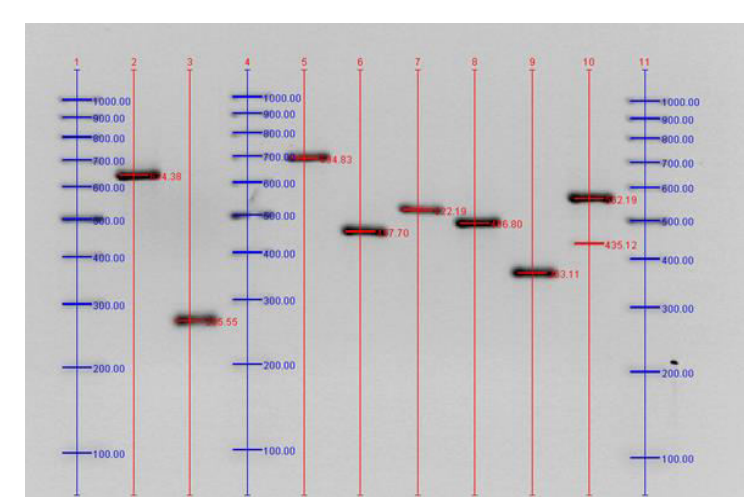
M. tuberculosis **H37Rv** NC_000962.3 reference sequence was used as a control.



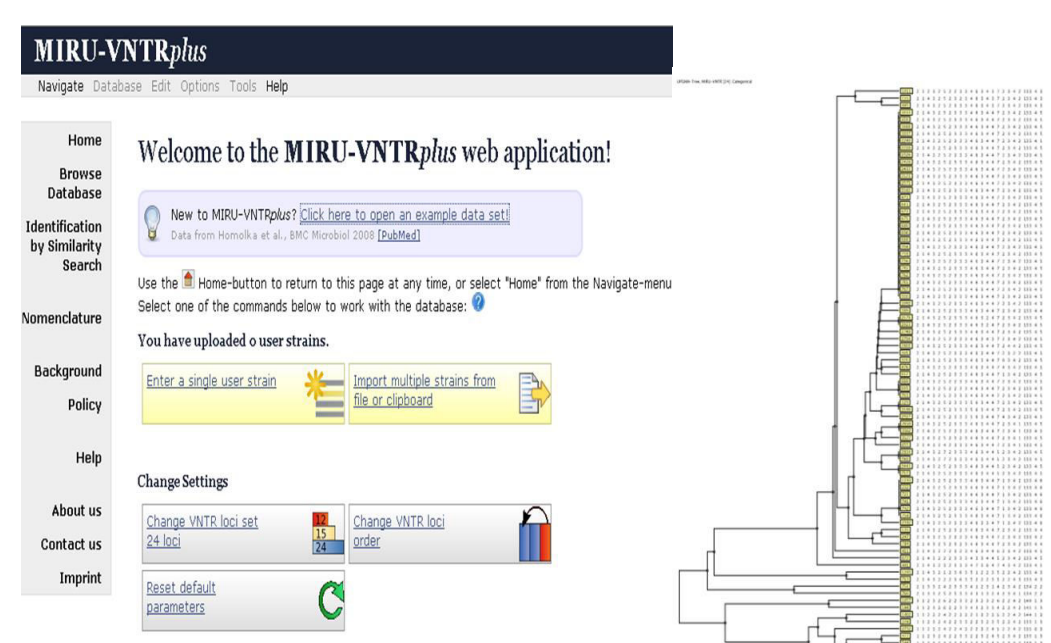
PCR amplification



Gel-electrophoresis



Calculation of tandem repeats (Quantity 1, BioRad)



Phylogenetic tree construction by UPGMA method

No	MIRU-VNTR profile	Isolate
1	225 425 173 533	56
2	225 313 153 323	43
3	224 325 172 324	30

Obtaining MIRU-VNTR digital profile

Figure 3. MIRU-VNTR typing

Results

Phylogenetic tree for 385 *M. tuberculosis* clinical isolates was built using www.miru-vntr.org web-resource based on the results of MIRU-VNTR analysis using UPGMA (Unweighted pair-group method using arithmetic averages) method (Figure 4).

Beijing family strains associated with drug resistance to anti-TB drugs prevail among new TB cases in Kazakhstan. Strains of **Beijing genotype** were found in 63,1% cases (Figure 5 and Table 1).

The second meaningful genotype that is spread in the territory of Kazakhstan among new TB cases is **LAM**, the frequency of distribution is 10,6%.

Strains of **URAL and X families** were detected almost with the same frequency – 8,6% and 8,1%, respectively.

Other genotypes (CAS, Cameroon, Uganda, NEW-1, Ghana) were identified in less than 2,1% cases.

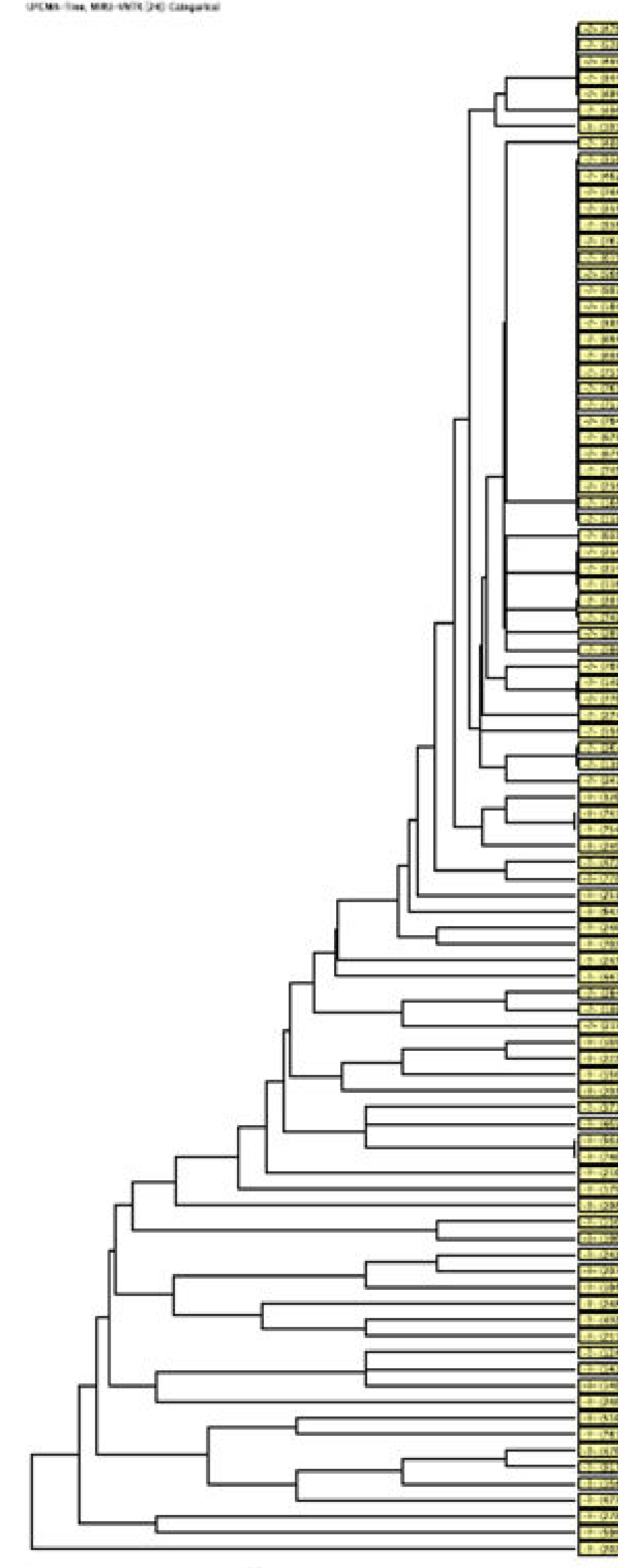


Figure 4. Genotyping of MDR-TB by 15 MIRU-VNTR

<i>M. tuberculosis</i> genotypes	Number of isolates	%
Beijing	243	63.1
LAM	41	10.6
URAL	33	8.6
X	31	8.1
Haarlem	25	6.5
NEW-1	8	2.1
CAS	1	0.25
Cameroon	1	0.25
Uganda	1	0.25
Ghana	1	0.25
Total:	385	100

Table 1. Genotypes of *M. tuberculosis* clinical isolates

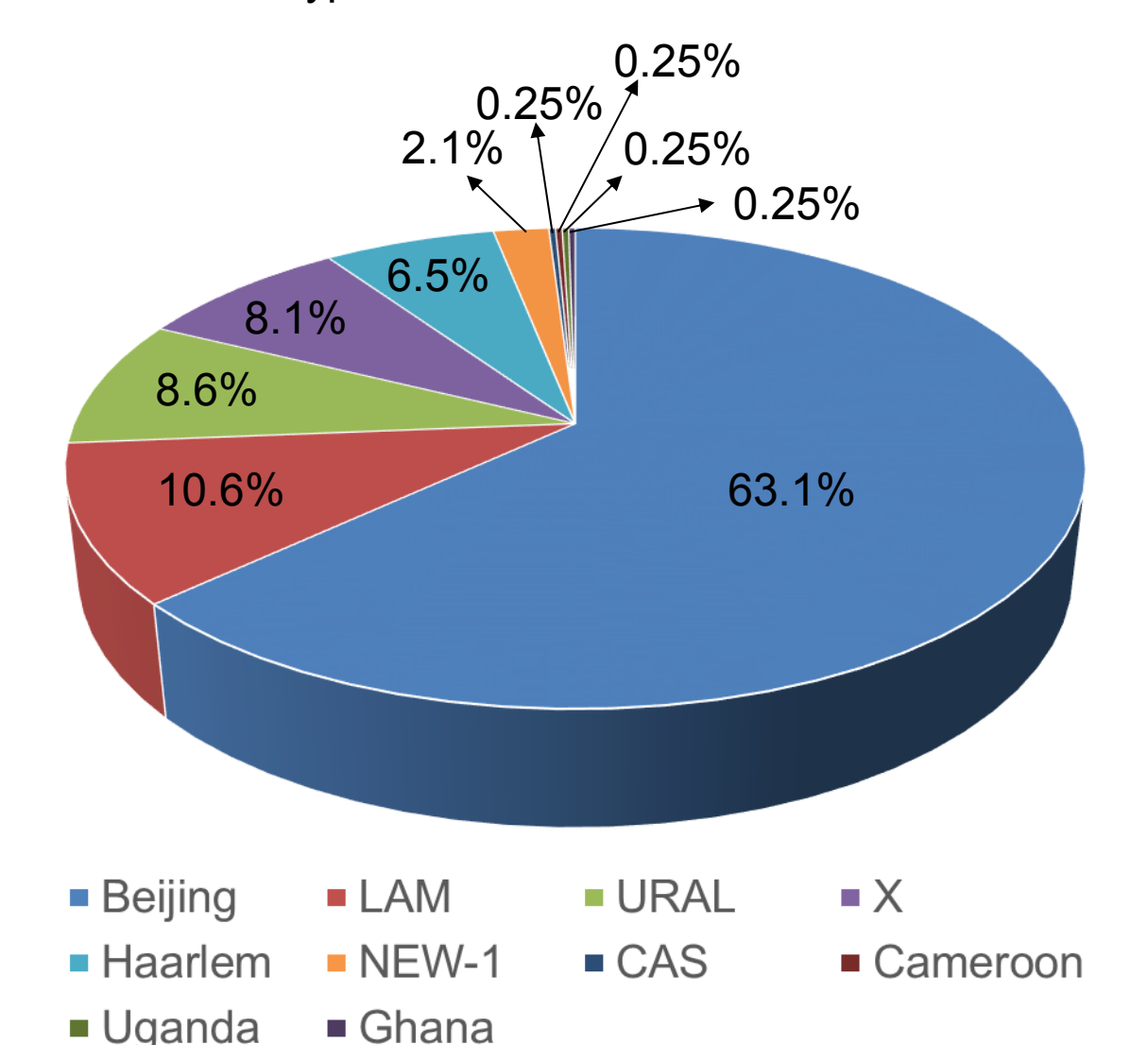


Figure 5. Genotypes of clinical isolates of *M. tuberculosis* among new TB cases

Conclusion

Prevalence of Beijing family strains among new TB cases in Kazakhstan was shown (83,1%).

We identified that Beijing genotype is responsible for ongoing TB transmission in Kazakhstan in the present time.

This genotype is associated with drug resistance and currently distributed in the former USSR countries and countries of Eastern Europe.

According to publications [3-5] the genotype is more virulent, that is why investigation of epidemiology of Beijing genotype plays crucial role in TB monitoring.

References

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