

#### 5TH EDITION

# VIRULENCE MECHANISMS OF BACTERIAL PATHOGENS

#### **5TH EDITION**

# VIRULENCE MECHANISMS OF BACTERIAL PATHOGENS

#### Edited by

#### Indira T. Kudva

National Animal Disease Center Agricultural Research Service U.S. Department of Agriculture Ames, IA 50010

#### Nancy A. Cornick

Department of Veterinary Microbiology and Preventive Medicine College of Veterinary Medicine Iowa State University Ames, IA 50011

#### Paul J. Plummer

Department of Veterinary Diagnostic and Production Animal Medicine College of Veterinary Medicine Iowa State University Ames, IA 50011

#### Qijing Zhang

Department of Veterinary Microbiology and Preventive Medicine College of Veterinary Medicine Iowa State University Ames, IA 50011

#### Tracy L. Nicholson

National Animal Disease Center Agricultural Research Service U.S. Department of Agriculture Ames, IA 50010

#### John P. Bannantine

National Animal Disease Center Agricultural Research Service U.S. Department of Agriculture Ames, IA 50010

#### Bryan H. Bellaire

Department of Veterinary Microbiology and Preventive Medicine College of Veterinary Medicine Iowa State University Ames, IA 50011



Copyright © 2016 American Society for Microbiology. All rights reserved. No part of this publication may be reproduced or transmitted in whole or in part or reused in any form or by any means, electronic or mechanical, including photocopying and recording, or by any information storage and retrieval system, without permission in writing from the publisher.

Disclaimer: To the best of the publisher's knowledge, this publication provides information concerning the subject matter covered that is accurate as of the date of publication. The publisher is not providing legal, medical, or other professional services. Any reference herein to any specific commercial products, procedures, or services by trade name, trademark, manufacturer, or otherwise does not constitute or imply endorsement, recommendation, or favored status by the American Society for Microbiology (ASM). The views and opinions of the author(s) expressed in this publication do not necessarily state or reflect those of ASM, and they shall not be used to advertise or endorse any product.

#### Library of Congress Cataloging-in-Publication Data

LC record available at https://lccn.loc.gov/2016014513

Names: Kudva, Indira T., editor.
Title: Virulence mechanisms of bacterial pathogens / edited by Indira T. Kudva [and six others].
Description: Fifth edition. | Washington, DC: ASM Press, [2016] | Includes bibliographical references and index.
Identifiers: LCCN 2016014513 (print) | LCCN 2016016980 (ebook) | ISBN 9781555819279 (hardcover) | ISBN 9781555819286 ()
Subjects: LCSH: Virulence (Microbiology) | Pathogenic bacteria. |
Host-bacteria relationships.
Classification: LCC QR175 .V57 2016 (print) | LCC QR175 (ebook) | DDC 616.9/201--dc/3

All Rights Reserved
Printed in the United States of America

10987654321

Address editorial correspondence to ASM Press, 1752 N St., N.W., Washington, DC 20036-2904, USA

Send orders to ASM Press, P.O. Box 605, Herndon, VA 20172, USA Phone: 800-546-2416; 703-661-1593

Fax: 703-661-1501

E-mail: books@asmusa.org

Online: http://www.asmscience.org

Cover: Neisseria gonorrhoeae bacteria, TEM. Credit: Dr Linda Stannard, UCT/Science Photo Library.

#### **Contents**

Contributors ix
Preface xv
Acknowledgments xvii

#### I. BACTERIAL-HOST INTERFACE

Section Editor: Nancy A. Cornick

- 1 Evolution of Bacterial Pathogens Within the Human Host 3 Kimberly A. Bliven and Anthony T. Maurelli
- 2 Bacterial Metabolism Shapes the Host–Pathogen Interface 15
  Karla D. Passalacqua, Marie-Eve Charbonneau, and Mary X.D. O'Riordan
- 3 Iron Acquisition Strategies of Bacterial Pathogens 43
  Jessica R. Sheldon, Holly A. Laakso, and David E. Heinrichs

#### II. BACTERIAL COMMUNICATION AND VIRULENCE

Section Editor: Paul J. Plummer

- 4 Sociomicrobiology and Pathogenic Bacteria 89 Joao B. Xavier
- 5 Candida-Bacteria Interactions: Their Impact on Human Disease 103
  Devon L. Allison, Hubertine M. E. Willems, J.A.M.S. Jayatilake, Vincent M. Bruno,
  Brian M. Peters, and Mark E. Shirtliff
- 6 Microbial Endocrinology in the Pathogenesis of Infectious Disease 137 *Mark Lyte*
- 7 Small RNAs in Bacterial Virulence and Communication 169 Sarah L. Svensson and Cynthia M. Sharma

#### **III. BACTERIAL SECRETION SYSTEMS**

Section Editor: Indira T. Kudva

- 8 Bacterial Secretion Systems: An Overview 215 Erin R. Green and Joan Mecsas
- 9 The Structure and Function of Type III Secretion Systems 241 Ryan Q. Notti and C. Erec Stebbins
- Mechanism and Function of Type IV Secretion During Infection of the Human Host 265
   Christian Gonzalez-Rivera, Minny Bhatty, and Peter J. Christie

- 11 Type V Secretion Systems in Bacteria 305 Enguo Fan, Nandini Chauhan, D. B. R. K. Gupta Udatha, Jack C. Leo, and Dirk Linke
- 12 The Versatile Type VI Secretion System 337 Christopher J. Alteri and Harry L.T. Mobley
- 13 Type VII Secretion: A Highly Versatile Secretion System 357 Louis S. Ates, Edith N. G. Houben, and Wilbert Bitter

#### **IV. BACTERIAL DEFENSES**

Section Editor: Qijing Zhang

- 14 Stress Responses, Adaptation, and Virulence of Bacterial Pathogens
  During Host Gastrointestinal Colonization 387
  Annika Flint, James Butcher, and Alain Stintzi
- 15 Bacterial Evasion of Host Antimicrobial Peptide Defenses 413

  Jason N. Cole and Victor Nizet
- 16 Antigenic Variation in Bacterial Pathogens 445 Guy H. Palmer, Troy Bankhead, and H. Steven Seifert
- 17 Mechanisms of Antibiotic Resistance 481

  Jose M. Munita and Cesar A. Arias

#### V. BACTERIAL PERSISTENCE: WITHIN AND BETWEEN HOSTS

Section Editor: Tracy L. Nicholson

- 18 Chronic Bacterial Pathogens: Mechanisms of Persistence 515 Mariana X. Byndloss and Renee M. Tsolis
- 19 The Staphylococcal Biofilm: Adhesins, Regulation, and Host Response 529
  Alexandra E. Paharik and Alexander R. Horswill
- **20** Surviving Between Hosts: Sporulation and Transmission 567 Michelle C. Swick, Theresa M. Koehler, and Adam Driks
- 21 Staying Alive: Vibrio cholerae's Cycle of Environmental Survival, Transmission, and Dissemination 593 Jenna G. Conner, Jennifer K. Teschler, Christopher J. Jones, and Fitnat H. Yildiz

#### VI. HOST CELL ENSLAVEMENT BY INTRACELLULAR BACTERIA

Section Editor: John P. Bannantine

- **22** Hijacking and Use of Host Lipids by Intracellular Pathogens 637 *Alvaro Toledo and Jorge L. Benach*
- 23 Contrasting Lifestyles Within the Host Cell 667
  Elizabeth Di Russo Case and James E. Samuel

- 24 Intracellular Growth of Bacterial Pathogens: The Role of Secreted
   Effector Proteins in the Control of Phagocytosed Microorganisms
   693
   Valérie Poirier and Yossef Av-Gay
- 25 Cellular Exit Strategies of Intracellular Bacteria 715 Kevin Hybiske and Richard Stephens

#### **VII. TARGETED THERAPIES**

Section Editor: Bryan H. Bellaire

- **26** Novel Targets of Antimicrobial Therapies 741 Sarah E. Maddocks
- Innovative Solutions to Sticky Situations: Antiadhesive Strategies for
   Treating Bacterial Infections 753
   Zachary T. Cusumano, Roger D. Klein, and Scott J. Hultgren
- 28 The Role of Biotin in Bacterial Physiology and Virulence: a Novel Antibiotic Target for Mycobacterium tuberculosis 797
  Wanisa Salaemae, Grant W. Booker, and Steven W. Polyak
- 29 Recent Advances and Understanding of Using Probiotic-Based Interventions to Restore Homeostasis of the Microbiome for the Prevention/Therapy of Bacterial Diseases 823

  Jan S. Suchodolski and Albert E. Jergens

Index 843

#### **Contributors**

#### Devon L. Allison

Graduate Program in Life Sciences, Molecular Microbiology and Immunology, University of Maryland-Baltimore; Department of Microbial Pathogenesis, University of Maryland-Baltimore, Dental School, Baltimore, MD 21201

#### Christopher J. Alteri

Department of Microbiology and Immunology, University of Michigan Medical School, Ann Arbor, MI 48109

#### Cesar A. Arias

Department of Internal Medicine, Division of Infectious Diseases, University of Texas Medical School at Houston, Houston, TX 77030; International Center for Microbial Genomics; Molecular Genetics and Antimicrobial Resistance Unit, Universidad El Bosque, Bogota, Colombia

#### Louis S. Ates

Department of Medical Microbiology and Infection Control, VU University Medical Center, Amsterdam, The Netherlands

#### **Yossef Av-Gay**

Division of Infectious Diseases, Department of Medicine, University of British Columbia, Vancouver, BC V6H 3Z6 Canada

#### **Troy Bankhead**

Department of Veterinary Microbiology and Pathology, Paul G. Allen School for Global Animal Health, Washington State University, Pullman, WA 99164

#### Jorge L. Benach

Department of Molecular Genetics and Microbiology, Stony Brook University, Center for Infectious Diseases at the Center for Molecular Medicine, Stony Brook, NY 11794

#### **Minny Bhatty**

Department of Microbiology and Molecular Genetics, University of Texas Medical School at Houston, Houston, TX 77030

#### Wilbert Bitter

Department of Medical Microbiology and Infection Control, VU University Medical Center; Section Molecular Microbiology, Amsterdam Institute of Molecules, Medicine and Systems, Vrije Universiteit Amsterdam, 1081 BT Amsterdam, The Netherlands

#### Kimberly A. Bliven

Department of Microbiology and Immunology, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, MD 20814

#### Grant W. Booker

Department of Molecular and Cellular Biology, School of Biological Science; Center for Molecular Pathology, The University of Adelaide, North Terrace Campus, Adelaide, South Australia 5005, Australia

#### Vincent M. Bruno

The Institute for Genomic Sciences; Department of Microbiology and Immunology, School of Medicine, University of Maryland-Baltimore, Baltimore, MD 21201

#### James Butcher

Ottawa Institute of Systems Biology, Department of Biochemistry, Microbiology and Immunology, Faculty of Medicine, University of Ottawa, Ottawa, Ontario, Canada K1H 8M5

#### Mariana X. Byndloss

Department of Medical Microbiology and Immunology, School of Medicine, University of California at Davis, Davis, CA 95616

#### Elizabeth Di Russo Case

Department of Microbial Pathogenesis and Immunology, College of Medicine, Texas A&M Health Sciences Center, Bryan, TX 77807

#### Marie-Eve Charbonneau

Department of Microbiology and Immunology, University of Michigan Medical School, Ann Arbor, MI 48109

#### Nandini Chauhan

Department of Biosciences, University of Oslo, Blindern, 0316 Oslo, Norway

#### Peter J. Christie

Department of Microbiology and Molecular Genetics, University of Texas Medical School at Houston, Houston, TX 77030

#### Jason N. Cole

Department of Pediatrics, University of California San Diego, La Jolla, CA 92093; School of Chemistry and Molecular Biosciences, Australian Infectious Diseases Research Center, University of Queensland, St Lucia, Queensland 4072, Australia

#### Jenna G. Conner

Microbiology and Environmental Toxicology, University of California Santa Cruz, Santa Cruz, CA 95064

#### Zachary T. Cusumano

Department of Molecular Microbiology, Washington University School of Medicine, St. Louis, MO 63110

#### **Adam Driks**

Loyola University Chicago, Stritch School of Medicine, Maywood, IL 60153

#### Enguo Fan

Institute of Biochemistry and Molecular Biology, University of Freiburg, Freiburg D-79104, Germany

#### **Annika Flint**

Ottawa Institute of Systems Biology, Department of Biochemistry, Microbiology and Immunology, Faculty of Medicine, University of Ottawa, Ottawa, Ontario, Canada K1H 8M5

#### Christian Gonzalez-Rivera

Department of Microbiology and Molecular Genetics, University of Texas Medical School at Houston, Houston, TX 77030

#### Erin R. Green

Program in Molecular Microbiology, Sackler School of Graduate Biomedical Sciences, Tufts University, Boston, MA 02111

#### David E. Heinrichs

Department of Microbiology and Immunology, University of Western Ontario, London, Ontario, Canada N6A 5C1

#### Alexander R. Horswill

Department of Microbiology, Roy J. and Lucille A. Carver College of Medicine, University of Iowa, Iowa City, IA 52242

#### Edith N. G. Houben

Section Molecular Microbiology, Amsterdam Institute of Molecules, Medicine and Systems, Vrije Universiteit Amsterdam, 1081 BT Amsterdam, The Netherlands

#### Scott J. Hultgren

Department of Molecular Microbiology, Washington University School of Medicine, St. Louis, MO 63110

#### **Kevin Hybiske**

Division of Allergy and Infectious Diseases, Department of Medicine, University of Washington, Seattle, WA 98195

#### J.A.M.S. Jayatilake

Department of Oral Medicine and Periodontology, Faculty of Dental Sciences, University of Peradeniya, Sri Lanka

#### Albert E. Jergens

Department of Veterinary Clinical Sciences, College of Veterinary Medicine, Iowa State University, Ames, IA 50010

#### Christopher J. Jones

Microbiology and Environmental Toxicology, University of California Santa Cruz, Santa Cruz, CA 95064

#### Roger D. Klein

Department of Molecular Microbiology, Washington University School of Medicine, St. Louis, MO 63110

#### Theresa M. Koehler

University of Texas Medical School at Houston, Houston, TX 77030

#### Holly A. Laakso

Department of Microbiology and Immunology, University of Western Ontario, London, Ontario, Canada N6A 5C1

#### Jack C. Leo

Department of Biosciences, University of Oslo, Blindern, 0316 Oslo, Norway

#### **Dirk Linke**

Department of Biosciences, University of Oslo, Blindern, 0316 Oslo, Norway

#### Mark Lyte

Department of Veterinary Microbiology and Preventive Medicine, College of Veterinary Medicine, Iowa State University, Ames, IA 50011

#### Sarah E. Maddocks

Department of Biomedical Sciences, Cardiff School of Health Sciences, Cardiff Metropolitan University, Western Avenue, Llandaff, Wales, CF5 2YB

#### Anthony T. Maurelli

Department of Microbiology and Immunology, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, MD 20814

#### Joan Mecsas

Program in Molecular Microbiology, Sackler School of Graduate Biomedical Sciences; Department of Molecular Biology and Microbiology, Tufts University School of Medicine, Boston, MA 02111

#### Harry L.T. Mobley

Department of Microbiology and Immunology, University of Michigan Medical School, Ann Arbor, MI 48109

#### Jose M. Munita

Department of Internal Medicine, Division of Infectious Diseases, University of Texas Medical School at Houston, Houston, TX 77030; International Center for Microbial Genomics; Clinica Alemana de Santiago, Universidad del Desarrollo School of Medicine, Santiago, Chile

#### Victor Nizet

Department of Pediatrics; Skaggs School of Pharmacy and Pharmaceutical Sciences; Center for Immunity, Infection & Inflammation, University of California San Diego, La Jolla, CA 92093

#### Ryan Q. Notti

Laboratory of Structural Microbiology, Rockefeller University, New York, NY 10065; Tri-Institutional Medical Scientist Training Program, Weill Cornell Medical College, New York, NY 10021

#### Mary X.D. O'Riordan

Department of Microbiology and Immunology, University of Michigan Medical School, Ann Arbor, MI 48109

#### Alexandra E. Paharik

Department of Microbiology, Roy J. and Lucille A. Carver College of Medicine, University of Iowa, Iowa City, IA 52242

#### Guy H. Palmer

Department of Veterinary Microbiology and Pathology, Paul G. Allen School for Global Animal Health, Washington State University, Pullman, WA 99164

#### Karla D. Passalacqua

Department of Microbiology and Immunology, University of Michigan Medical School, Ann Arbor, MI 48109

#### Brian M. Peters

Department of Clinical Pharmacy, University of Tennessee Health Science Center, Memphis, TN 38103

#### Valérie Poirier

Division of Infectious Diseases, Department of Medicine, University of British Columbia, Vancouver, BC V6H 3Z6

#### Steven W. Polyak

Department of Molecular and Cellular Biology, School of Biological Science; Center for Molecular Pathology, The University of Adelaide, North Terrace Campus, Adelaide, South Australia 5005, Australia

#### Wanisa Salaemae

Department of Molecular and Cellular Biology, School of Biological Science, The University of Adelaide, North Terrace Campus, Adelaide, South Australia 5005, Australia

#### James E. Samuel

Department of Microbial Pathogenesis and Immunology, College of Medicine, Texas A&M Health Sciences Center, Bryan, TX 77807

#### H. Steven Seifert

Department of Microbiology-Immunology, Feinberg School of Medicine, Northwestern University, Chicago, IL 60611

#### Cynthia M. Sharma

Research Center for Infectious Diseases (ZINF) University of Würzburg, Würzburg, Germany 97080

#### Jessica R. Sheldon

Department of Microbiology and Immunology, University of Western Ontario, London, Ontario, Canada N6A 5C1

#### Mark E. Shirtliff

Department of Microbial Pathogenesis, University of Maryland-Baltimore, Dental School; The Institute for Genomic Sciences, School of Medicine, University of Maryland-Baltimore, Baltimore, MD 21201

#### C. Erec Stebbins

Laboratory of Structural Microbiology, Rockefeller University, New York, NY 10065

#### **Richard Stephens**

Program in Infectious Diseases, School of Public Health, University of California, Berkeley, Berkeley, CA 94720

#### Alain Stintzi

Ottawa Institute of Systems Biology, Department of Biochemistry, Microbiology and Immunology, Faculty of Medicine, University of Ottawa, Ottawa, Ontario, Canada K1H 8M5

#### Jan S. Suchodolski

Gastrointestinal Laboratory, Department of Small Animal Clinical Sciences, College of Veterinary Medicine and Biomedical Sciences, Texas A&M University, College Station, TX 77845

#### Sarah L. Svensson

Research Center for Infectious Diseases (ZINF) University of Würzburg, Würzburg, Germany 97080

#### Michelle C. Swick

University of Texas Medical School at Houston, Houston, TX 77030

#### Jennifer K. Teschler

Microbiology and Environmental Toxicology, University of California Santa Cruz, Santa Cruz, CA 95064

#### Alvaro Toledo

Department of Molecular Genetics and Microbiology, Stony Brook University, Center for Infectious Diseases at the Center for Molecular Medicine, Stony Brook, NY 11794

#### Renee M. Tsolis

Department of Medical Microbiology and Immunology, School of Medicine, University of California at Davis, Davis, CA 95616

#### D. B. R. K. Gupta Udatha

Department of Biosciences, University of Oslo, Blindern, 0316 Oslo, Norway

#### **Hubertine M. E. Willems**

Department of Clinical Pharmacy, University of Tennessee Health Science Center, Memphis, TN 38103

#### Joao B. Xavier

Program for Computational Biology, Memorial Sloan Kettering Cancer Center, New York, NY 10065

#### Fitnat H. Yildiz

Microbiology and Environmental Toxicology, University of California Santa Cruz, Santa Cruz, CA 95064

#### **Preface**

"Generation of new ideas and refinement or extension of established concepts are the essence of advances in knowledge": Dr. Carlton Gyles, Preface, Virulence Mechanisms of Bacterial Pathogens, 1st Edition, 1988, ASM Press. This was the driving force behind the current fifth edition of this monograph, which essentially is a compilation of bacterial virulence strategies and cutting-edge therapies (targeting these strategies) that have been unraveled in recent years and/or provide new insights into established dogmas.

Previous editions of this book always provided interesting and timely information on topics not always covered in textbooks making them reliable reference sources. Traditionally these were published as follow-up to a series of International Symposia on Virulence Mechanisms of Bacterial Pathogens, held in Ames, Iowa in 1987, 1994, 1999, and 2006. Hence, the last edition was published in 2007. With all the scientific advancements made in the area of bacterial pathogenesis since then, there was a pressing need for a more recent, updated version of this book. To make up for the lapsed time and the inevitable financial constraints, a general consensus was reached to initiate the publication sans a symposium. This turned out to be quite an insightful decision as it enabled the editors and all contributors to provide their undivided attention to weaving together a harmonious and comprehensive monograph.

Sections in this edition have been organized in a systematic manner keeping in sync with the journey a pathogen undertakes in its host. Therefore, these sections discuss, key events occurring at the bacterial-host interface (section I) that enable colonization, bacterial reliance on communication (section II) and secretion (section III) to initiate/enhance virulence, bacterial defense (section IV), persistence (section V), and host-exploitation strategies (section VI) that allow for extended survival in the host. The concluding section (section VII) discusses novel therapeutic approaches being developed to target some of these virulence mechanisms.

It was our intent to deliver the science through this monograph and allow our savvy readers the luxury of philosophizing. As such, we sought contributions from distinguished experts, whether as authors or reviewers, making this monograph a one-stop learning tool for recent advances made in the field of bacterial virulence while stepping away from being just another "textbook". The contents were selected to be beneficial to diverse readership (students, faculty, scientists in academic, clinical, corporate and/or government settings) while promoting discussion, extrapolation, exploration and multi-dimensional thinking.

Indira T. Kudva Executive Editor

### **Acknowledgments**

The Section Editors acknowledge the timely contributions made by all the authors and the tremendous support provided by:

**ASM Press** 

Editors, Microbiology Spectrum

**Reviewers:** 

#### Keith M. Derbyshire, PhD

Director, Division of Genetics, Center for Medical Science, Wadsworth Center Professor, Biomedical Sciences, University at Albany NYSDOH Albany, NY 12201

#### Cammie Lesser, MD, PhD

Associate Professor Medicine (Microbiology and Immunobiology) Massachusetts General Hospital/Harvard Medical School Cambridge, MA 02139

#### Joseph D. Mougous, PhD

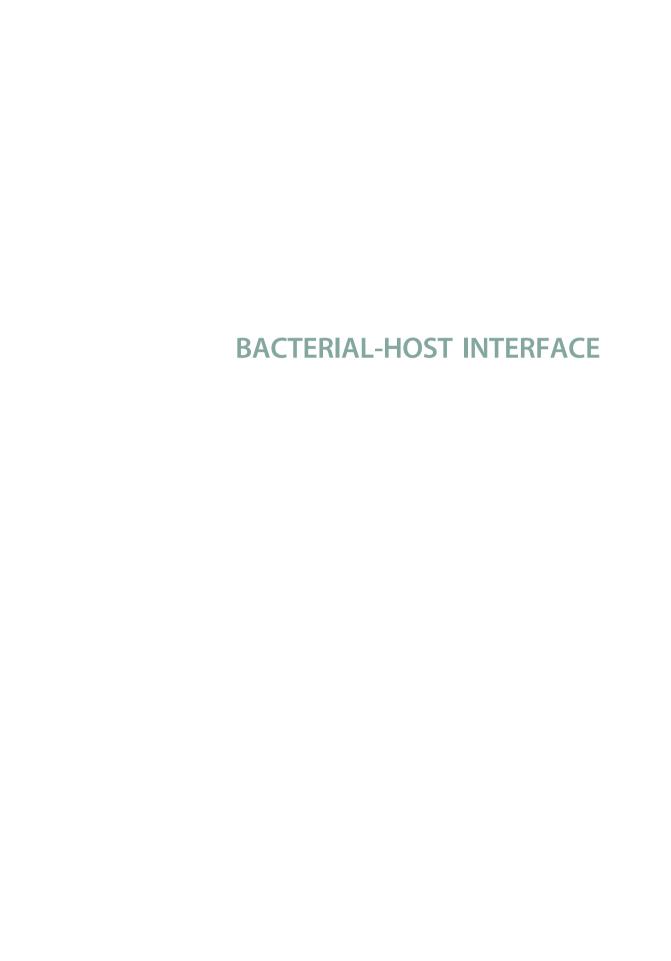
Associate Professor Department of Microbiology University of Washington Seattle, WA 98195

#### Joseph P. Vogel, PhD

Associate Professor Department of Molecular Microbiology Washington University St. Louis, MO 63110

#### Timothy L. Yahr, PhD

Director of Graduate Studies Professor of Microbiology University of Iowa, Carver College of Medicine Iowa City, IA 52242



**Evolution of Bacterial Pathogens**Within the Human Host

1

KIMBERLY A. BLIVEN<sup>1</sup> and ANTHONY T. MAURELLI<sup>1</sup>

#### INTRODUCTION

The success or failure of a pathogen is entirely dependent on its ability to survive, reproduce, and spread to a new host or environment. Host immune systems, predators, microbial competitors, parasites, and environmental resource limitations all exert selective pressures that shape the genomes of microbial populations (1). Host fitness, meanwhile, is determined by the ability of the host to survive and reproduce; the host must therefore effectively curtail diseases that impair either of these abilities.

Dawkins and Krebs suggest that the conflicting drives between host and pathogen have led to an evolutionary "arms race," where an asymmetric "attack-defense" strategy has come into play (2). At the basic level, this concept suggests that when the host evolves new defenses to thwart the pathogen's attack, the pathogen is forced to adapt a more effective attack strategy to penetrate the heightened defenses. In response, the host must once again evolve to cope with the new attack mechanism, and the cycle continues. Evolutionarily fit pathogens, which are able to survive, replicate, and spread effectively within the host, have the most likely chance

Virulence Mechanisms of Bacterial Pathogens, 5th edition

Edited by Indira T. Kudva, Nancy A. Cornick, Paul J. Plummer, Qijing Zhang, Tracy L. Nicholson,

John P. Bannantine, and Bryan H. Bellaire

© 2016 American Society for Microbiology, Washington, DC

doi:10.1128/microbiolspec.VMBF-0017-2015

<sup>&</sup>lt;sup>1</sup>Department of Microbiology and Immunology, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, MD 20814.

of passing their genes on to the next generation. Similarly, host genotypes are more likely to persist within the population if those particular individuals are more capable of controlling or resisting infection. Evolution, therefore, is driven by positive directional selection in the arms race model; eventually, the most beneficial alleles will become fixed in a population. Another model favors frequency-dependent (balancing) selection, a process that maintains rare alleles and therefore preserves polymorphic diversity within a population (3). Simply put, allele fixation is prevented in certain instances because different bacterial alleles confer distinct advantages to the pathogen in the presence of different host alleles (i.e., different environments). Supporting evidence for both directional and frequency-dependent selection can be found within nature, and both types probably occur in bacterial populations.

In this chapter, we explore the host-pathogen interface and offer examples of pathogen adaptation in response to common host selective pressures (Table 1). Although we will focus exclusively on bacterial pathogens within the human host, many of the concepts discussed in this review are readily applicable to other organisms, such as viruses, parasites, and fungi, which can infect a wide range of hosts including plants, animals, and amoeba (4–6).

As a final note, much of the evidence presented here to support presumed evolutionary events is either speculation based on what is currently known or suspected about host and microbial biology or is the result of artificial laboratory-induced evolution during serial passaging of bacterial strains. Due to the sheer enormity of evolutionary timescales, defining the precise origins of and factors driving natural evolutionary events is often a difficult undertaking.

## ANTAGONISTIC PLEIOTROPY AND THE FITNESS COST-BENEFIT ANALYSIS

At the most basic level, the theory of natural selection stipulates that within a bacterial population, beneficial traits will be conserved (selected for) and deleterious traits eventually discarded (selected against). The actual evolutionary process is considerably more complex, however, due to the existence of genetic drift (the change in genetic diversity of a population due to random chance) and antagonistic pleiotropy.

Antagonistic pleiotropy is the concept that a single gene may control more than one phenotype, some of which may be beneficial to the organism and some deleterious (7). Therefore, a gene may confer a selective advantage within one particular environment, but its expression could be detrimental within a different environment. Conservation of this gene ultimately is determined by the overall necessity of the gene to the organism's fitness and the timing of selection. Bacterial pathogens may evolve mechanisms to neutralize the deleterious effects arising

TABLE 1 Examples of pathogenic mechanisms to evade or overcome selective pressures within the human host

Selective pressures	Pathogenic mechanisms to evade or overcome these pressures
Physical barriers in host (i.e., mucosal epithelium)	Mucinases Enterotoxins Exfoliative toxins Transcytosis through M cells
Host complement	Complement inhibitor protein C3 protease
Sequestration of host resources (e.g., iron)	Enterobactin/aerobactin systems
Host B and T cell lymphocytes	Cytotoxins T3SS-mediated apoptosis
Antibiotics, antimicrobial peptides	Efflux pumps Mutations in antimicrobial targets Enzymes to
	inactivate antibiotics (e.g., beta-lactamases)
Bacterial colicins	Colicin immunity proteins
Bacterial T6SSs	T6S immunity proteins

from antagonistic pleiotropy, while at the same time conserving the beneficial ones. Temporal regulation is a powerful tool to ensure that specific genes are only turned on when required and are turned off to prevent detrimental expression within a particular environment. Certain outer membrane proteins or systems are temporally regulated within the host, because they may provide a marker for recognition by the host immune system. Flagellar expression, for example, is downregulated by Salmonella enterica serovar Typhi in vivo to prevent activation of the host inflammatory response; however, outside the host, motility is likely important for the bacterium to seek out and scavenge nutrients from the environment (8).

Other bacteria avoid the deleterious effects of a gene through gene inactivation; mutants that lose functionality of the gene once it becomes deleterious can out-compete the wild-type parent strain, and eventually these mutants will dominate the population. Pseudomonas aeruginosa, an opportunistic pathogen of cystic fibrosis patients, often switches to a mucoid phenotype in vivo as a result of overproduction of the exopolysaccharide alginate, which allows for the production of a bacterial biofilm in the lung (9, 10). MucA is a *P. aeruginosa* transmembrane protein that binds to and represses the sigma factor AlgU, which acts as the transcriptional activator of the alginate synthesis operon. AlgU activates AlgR, a suppressor of type III secretion system (T3SS) expression; when mucA is expressed, therefore, so are the T3SS genes. During acute infection, the T3SS plays an essential role in establishment of the bacterium within the respiratory tract. Once infection has been established, however, chronic infection appears to favor loss of T3SS and a switch to biofilm production (11). Both of these phenotypes are at least partially driven by various mutations in mucA which lead to derepression of AlgU, subsequent production of alginate, and suppression of the T3SS (9). Hauser speculates that loss of the T3SS protects the bacterium from eventual recognition

by the host, because patients infected with *P. aeruginosa* develop antibodies against T3SS effector proteins; conversely, biofilm production likely allows for the persistence of the organism in the respiratory tract (11).

Finally, certain bacteria simply tolerate deleterious fitness costs if the benefits of expressing the gene outweigh the negative effects. Antibiotic-resistance mutations that allow bacteria to survive exposure to antimicrobials often come with a significant fitness disadvantage, for example, and secondary compensatory mutations in these strains may eventually arise to restore fitness rather than lose resistance (12).

# THE IMPACT OF HOST-PATHOGEN INTERACTIONS ON MICROBIAL EVOLUTION

Inside the host, a successful pathogen will pilfer resources to survive, replicate, and eventually escape; concomitantly, the host will attempt to recognize and subsequently rid the body of the intruder. Coevolution between host and pathogen naturally occurs as a result of these interactions (13). For practical purposes, we restrict our discussion to bacterial adaptation within the human host, but it is important to recognize that many of these concepts are applicable to pathogens of other hosts as well, such as plants and amoeba (14-16). As novel genetic variants within the human population emerge which prove more successful at preventing or overcoming infection, only pathogen variants that allow the bacteria to surmount or avoid this new response will be successful. Within the last century, these natural host defenses, which take much longer to evolve than their microbial counterparts, have been supplemented by man-made developments, such as antibiotics and modern medical interventions, which place added pressures on microbes to adapt (17). Host innate and adaptive immune responses and modern medical interventions are all selective pressures that contribute to pathogen evolution within the human host. Furthermore, microbial competition, against either other pathogens or commensal bacteria, also shapes pathogen genomes.

Bacteria have several advantages over the human host when it comes to evolution: first, their generation times are significantly shorter, leading to more rapid selection within a population. In conjunction with a shorter generation time, bacterial populations are typically larger, which may allow for greater genetic diversity from which to select. Lastly, many bacteria utilize horizontal gene transfer (HGT), which accounts for the rapid spread of advantageous alleles between strains or even species (18). Virulence genes are commonly located on transferred pathogenicity islands (PAIs), which are segments of the genome associated with mobility elements, such as integrase genes or transposons. PAIs can often be distinguished from the remainder of the genome by a disparate G+C content (19).

# Host Selective Pressures: The Innate and Adaptive Immune Systems

The innate immune system is one of the first challenges encountered by the incoming pathogen following host contact. These diverse host defenses include physical barriers such as the mucosal epithelium, activation of the complement cascade, circulating antimicrobial peptides and cytokines, leukocytes, activation of the adaptive immune system, and sequestration of host nutrients away from pathogenic bacteria. In addition to effective evasion of innate immune mechanisms, bacteria must also prevent or avoid adaptive immune responses, which include B cell antibody production and T cell-mediated cytotoxicity. Pathogenic bacteria have evolved different approaches to overcome these host defenses.

In the human colon alone, intestinal microbiota concentrations average  $10^{11}$  microorganisms per gram gut content, while  $3 \times 10^{8}$ 

prokaryotes are thought to colonize the entire skin surface of the human adult (20). Consequently, bacteria that exploit more hostile and less frequently occupied niches may gain a selective edge in survival by avoiding sites of high competition. Natural structural barriers, however, typically prevent pathogens from engaging deeper host tissues. Physical blocks to infection include the intestinal and respiratory mucosa, the blood-brain barrier, the blood-cerebral spinal fluid barrier, and the placental barrier (21). Most of these structures consist of a single layer of epithelial or endothelial cells bound closely together by tight junctions, adherens junctions, and desmosomes, which preclude bacteria from passively crossing (21, 22). Gastric and respiratory epithelia support an additional protective coating of mucus, which consists primarily of mucin glycoproteins and antimicrobial molecules (23). Mucin glycoproteins, produced by epithelial goblet cells and submucosal glands, can either remain cell-associated or undergo secretion into the mucosa, where they contribute to the viscous layer of mucus that can effectively trap microbes (24). Additionally, nonspecific antimicrobials, such as defensins and lysozymes, and specific antimicrobials, such as IgG and secretory IgA, also limit the growth of microbes within the mucosa (23). Bacterial pathogens have developed numerous mechanisms to counteract these defenses.

The mucosal barrier can be broken down by mucinases such as the Pic enzyme of *Shigella* and enteroaggregative *Escherichia coli* (EAEC) (25, 26). The *pic* gene is located on a chromosomal pathogenicity island in *Shigella* and flanked by insertion-like elements in EAEC, indicating a history of horizontal gene transfer in these pathogens (26). This potential gene transfer is intriguing because mucin degradation is also important for certain gastrointestinal commensals, which metabolize mucin glycoproteins for energy (27). It is tempting to speculate that these enzymes first evolved within human commensal bacteria as a means of nutrient acquisition and

only later spread to emerging pathogens to confer passage through the mucosal surface. Such a concept would support the hypothesis proposed by Rasko et al., who suggest that commensal E. coli acts as a "genetic sink" for pathogenic E. coli isolates (28). Other pathogens, such as Yersinia enterocolitica and Vibrio cholerae, avoid the thickest layers of the mucosal layer by targeting microfold cells within the small intestine for uptake (23, 29). These specialized epithelial cells sample microorganisms residing in the intestinal lumen and present them to immune cells in the underlying lymphoid tissue. Microfold cells are situated in the region of the epithelium known as the dome, which lacks mucin-secreting goblet cells (23).

Next, to breach the epithelial/endothelial barrier, pathogens must either actively cross using microbial-mediated processes or opportunistically cross following disruption of barrier integrity. Some pathogens, such as Bacteroides fragilis and Staphylococcus aureus, directly break cell-cell junctions (30, 31). B. fragilis, an opportunistic pathogen, encodes a zinc-dependent metalloprotease toxin, BFT (B. fragilis enterotoxin), which cleaves the extracellular domain of E-cadherin, a host zonula adherens protein (30). Like the pic genes of Shigella and EAEC, the bft gene is carried on a PAI present in all enterotoxigenic B. fragilis strains (32). S. aureus induces bullous impetigo and staphylococcal scalded skin syndrome through the actions of three exfoliative toxins (ETs): ETA, ETB, and ETD (31). The ETs act as serine proteases which cleave human desmoglein 1, a transmembrane protein of desmosomes. The genes encoding these toxins are carried on different mobile genetic elements: the ETA gene is carried by a family of Salint phages; the ETB gene is plasmid-encoded; and the ETD gene localizes to a 9-kB PAI (33, 34). Other pathogens, such as Shigella, Salmonella, and Listeria, transcytose through microfold cells in the gut to gain access to the basolateral surface of the intestinal epithelium (35). Because these specialized host cells overlay Peyer's patches

(or gut-associated lymphoid tissue), enteric bacteria transcytosed through microfold cells must then contend with macrophages, T lymphocytes, B lymphocytes, and dendritic cells.

As a putative example of counterevolution, the human host may have developed mechanisms to avoid bacterial-mediated adhesion processes. Helicobacter pylori binds to the adhesion decoy Muc1, a mucin expressed on the surface of epithelial cells in the gastrointestinal tract (36). Muc1 is subsequently shed from the epithelial surface along with coupled bacteria, precluding long-term adhesion. Consequently, wild type mice have a 5-fold lower H. pylori colonization burden than *Muc1*<sup>-/-</sup> mice. Furthermore, human epidemiological studies have linked shorter Muc1 alleles to a higher probability of chronic gastritis progression, indicating that longer Muc1 alleles may confer a protective advantage to the host (37). Polymorphisms between human Muc1 alleles are largely restricted to the extracellular domain, which consists of a region of 30 to 90 tandem repeat units rich in serine and threonine. A study by Costa et al., demonstrated a significant positive association between the number of Muc1 tandem repeats and bacterial adherence for two strains of H. pylori in vitro (38). Longer Muc1 alleles probably evolved from shorter alleles via duplication events and may have emerged to protect against pathogens such as H. pylori (39).

Complement cascade activation via the classical, lectin, and alternative pathways precedes the cleavage of C3 convertase into C3a, an anaphylatoxin, and C3b, which binds to the surface of microbes (otherwise known as opsonization) to promote the eventual clearance of bacteria through phagocytosis. Additionally, C3 convertase may convert to the lytic C5 convertase through addition of a C3b molecule. Pathogens have evolved mechanisms to evade or block these processes (40). The *S. aureus* staphylococcal complement inhibitor protein stabilizes C3 convertase, preventing its cleavage into the active C3a and

C3b fragments and attenuating anaphylatoxin activity and bacterial opsonization (41). Like many of the previously described pathogenicity factors, the gene encoding staphylococcal complement inhibitor (scn) is located on a PAI (42). Rather than preventing C3 cleavage, the Neisseria meningitidis serine protease NalP splits C3 at a unique site, generating shorter C3a-like and longer C3b-like fragments (43). The C3b-like fragments are capable of binding N. meningitidis but are rapidly degraded by host complement factors H (fH) and I (fI). Although the activity of the C3a-like fragment has not been determined, this fragment lacks the conserved C-terminal arginine residue found in wild type C3a that is essential for activity, and therefore this truncated version is likely inactive.

A final example of an innate host selective pressure is the sequestration of host resources or nutrients away from colonizing bacteria. Iron, an essential nutrient, is in short supply within the host, either sequestered away in host cells or stored as a complex in hemoglobin, which is inaccessible to most microbes (44). Correspondingly, pathogens have been forced to develop numerous mechanisms to scavenge host iron. Predictably, these systems are often iron-regulated, and their genes are expressed following bacterial exposure to the low-iron environment of the human host. Certain surface-bound receptors can recognize iron-bound complexes, such as heme, transferrin, or lactoferrin. Additionally, secreted bacterial siderophores (aerobactin and enterobactin) steal iron away from host transferrin and lactoferrin. E. coli strains can encode for both of these systems (45). Another putative example of arms race coevolution is the mammalian neutrophil gelatinase-associated lipoprotein (NGAL). NGAL directly binds the catecholate-type ferric siderophore complexed to iron, preventing bacterial iron sequestration and eventually exerting a bacteriostatic effect upon microbial populations (46). Some bacteria can even bypass this defense mechanism, however.

Uropathogenic *E. coli* strains express the siderophore salmochelin, a glycosylated form of enterobactin resistant to the effects of NGAL (47).

Finally, if a pathogen manages to evade the innate immune system and can successfully compete with commensal bacteria, it must then elude host adaptive immune responses, including B- and T-cell lymphocytes (48). One bacterial strategy employed in this evasion process inhibits lymphocyte proliferation. The VacA cytotoxin of H. pylori blocks the activity of host calcineurin, leading to downstream attenuation of interleukin-2 (IL-2) transcription, a key mediator of T cell proliferation (49). Alternatively, bacteria can avoid the adaptive immune response altogether by mediating lymphocyte cell death. For example, Shigella induces B-cell apoptosis through the actions of its T3SS (50).

#### Host Selective Pressures: Antibiotic Resistance

The rise of adaptive antibiotic resistance in bacteria is perhaps one of the most intensely studied examples of pathogen evolution in response to a specific selective pressure(s) (51). Blair et al. separated adaptive resistance mechanisms into three primary categories: reduced drug permeability through alterations in the bacterial membrane or the development of efflux pumps that quickly expel antimicrobials; prevention of binding through mutation of antimicrobial targets; and the direct inactivation of antimicrobial agents by specific enzymes (51). Wellcharacterized efflux pumps include the multidrug exporters discovered in the common food-borne pathogens E. coli (ArcAB-TolC), S. enterica (EmrAB), and S. aureus (QacA/B, NorA) (52). Linezolid, an oxazolidinone class antibiotic, binds the 23S rRNA subunit and blocks tRNA interactions with the A site to prevent peptide bond formation (53). Unsurprisingly, linezolid resistance in a number of bacterial species has been linked to a G2576T mutation in the 23S rRNA gene, precluding linezolid binding at this site and providing an example of Blair's second category of adaptive drug resistance (54, 55). Finally, inactivating enzymes such as beta-lactamases, aminoglycoside acyltransferases, and monooxygenases are responsible for the hydrolysis, group transfer, or oxidation of their respective antibiotics (56, 57).

The rapid spread of antimicrobial resistance, and the rise of multidrug resistance, is often linked to the HGT dissemination of genes encoding these enzymes, because many PAIs and plasmids have been shown to carry one or more drug-resistance genes (58). Resistance adaptations often come with a fitness cost, however, which has been demonstrated both *in vivo* and *in vitro* (59).

#### **Microbial Competition**

Competition between microbes undoubtedly plays a role in driving pathogen evolution, although this aspect of microbial evolution has not been widely studied and, except for a few examples, is still only very poorly understood. Bacteria can directly eliminate potential rivals through use of toxic peptides (bacteriocins) or through the utilization of type six secretion systems (T6SSs) (60, 61).

Bacteriocins are toxic peptides produced by bacteria that can target and kill neighboring microbes. Colicins, the most well-known members of this category, are produced by strains of E. coli, although bacteriocins have been described in a wide variety of bacteria, including S. aureus, Pseudomonas pyogenes, Yersinia pestis, and Serratia marcescens (61, 62). In E. coli, colicins exhibit a number of different modes of action. Pore-forming colicins, such as colicin A, can insert into the inner membranes of susceptible bacteria to create ion channels (63). Nuclease colicins, such as colicins E9 and E3, translocate across the outer and inner membranes of a susceptible bacterium to the cytoplasm, where they function as DNases (E9) or RNases (E3)

(64, 65). Lastly, colicin M, a unique member of the colicin family, blocks peptidoglycan biosynthesis by degrading undecaprenyl phosphate-linked peptidoglycan precursors. These lipid-anchored intermediates are critical for the transport of peptidoglycan subunits across the cytoplasmic membrane (66, 67). To protect their own population against the harmful effects of these toxic peptides, the producers of colicins must concomitantly express immunity proteins, which block the action of their respective colicins. Immunity proteins of pore-forming colicins sit in the inner membrane and block colicin insertion. Nuclease colicin immunity proteins bind to DNase or RNase colicins to prevent their enzymatic activity, and the immunity protein Cmi binds colicin M to render it catalytically inactive (61, 68). Competing bacteria can acquire these immunity proteins via HGT, providing protection against E. coli colicin toxicity. For example, Shigella, which does not produce the pore-forming colicin V, nevertheless encodes an immunity protein on its SHI-2 PAI, which protects against colicin V produced by strains of E. coli (69, 70).

The recently discovered T6SSs of Gramnegative bacteria are responsible for the direct delivery of effector proteins into neighboring eukaryotic or bacterial cells, resulting in the death of host cells or the lysis of potential microbial competitors (71). VgrG1, an ADP-ribosyltransferase, is secreted from the Aeromonas hydrophila T6SS into host cells, where it disrupts the actin cytoskeleton and induces host cell apoptosis (72). Most of the described T6SS effectors, however, have been shown to target other microbes. The T6SS-exported proteins 1 and 3 (Tse1 and Tse3) of P. aeruginosa exhibit amidase and muramidase activity, respectively, against bacterial peptidoglycan (73). P. aeruginosa also encodes type VI lipase effector (Tle) proteins, which degrade the bacterial phospholipid phosphatidylethanolamine (74). In Dickeya dadantii, the Rhs (rearrangement hotspots) proteins RhsA and RhsB are secreted through

the T6SS and function as toxic endonucleases in susceptible bacteria. While *D. dadantii* is a plant pathogen, the human pathogen *S. marcescens* also expresses a T6SS-secreted Rhs-family protein, although its function is unknown (75, 76). Similar to the colicin proteins, pathogens which encode a T6SS must also express immunity proteins to prevent self-killing. *P. aeruginosa* encodes T6SS immunity 1 and 3 (Tsi1 and Tsi3) proteins, which interact with and inactivate Tse1 and Tse3 through mechanisms that are not yet understood (73).

Intriguingly, T6SSs may also be effective tools for gene acquisition via HGT. In *V. cholerae*, the T6SS is coregulated with competence genes by the regulator TfoX, and transformation events are dependent upon the presence of an active T6SS (77). Borgeaud et al., suggest that following activation of TfoX, both competence and T6SS systems are expressed and assembled. After T6SS-mediated lysis of neighboring cells, DNA is released to the extracellular space, where it can then transform the competent bacterium (77).

#### **CONCLUDING REMARKS**

Bacterial pathogens within the human host are exposed to a vast variety of selective pressures which shape bacterial genomes and drive the evolution of novel virulence factors. Concomitantly, human genomes also evolve as a result of these interactions, leading to a genetic arms race between pathogens and their hosts. In bacteria, HGT can enhance this process by allowing for the rapid dissemination of potentially beneficial alleles across strains or even species.

#### **ACKNOWLEDGMENTS**

This work was supported by National Institutes of Health grants RO1 AI024656-23 and RO1 AI044033-12.

#### CITATION

Bliven KA, Maurelli AT. 2016. Evolution of bacterial pathogens within the human host. Microbiol Spectrum 4(1):VMBF-0017-2015.

#### **REFERENCES**

- Toft C, Andersson SG. 2010. Evolutionary microbial genomics: insights into bacterial host adaptation. Nat Rev Genet 11:465–475.
- Dawkins R, Krebs JR. 1979. Arms races between and within species. Proc R Soc London B Biol Sci 205:489-511.
- Woolhouse ME, Webster JP, Domingo E, Charlesworth B, Levin BR. 2002. Biological and biomedical implications of the coevolution of pathogens and their hosts. *Nat Genet* 32:569–577.
- Taubenberger JK, Kash JC. 2010. Influenza virus evolution, host adaptation, and pandemic formation. *Cell Host Microbe* 7:440–551.
- Mideo N. 2009. Parasite adaptations to withinhost competition. Trends Parasitol 25:261–268.
- Cooney NM, Klein BS. 2008. Fungal adaptation to the mammalian host: it is a new world, after all. Curr Opin Microbiol 11:511–516.
- Williams GC. 1957. Pleiotropy, natural selection, and the evolution of senescence. Evolution 11:398–411.
- Salazar-Gonzalez RM, Srinivasan A, Griffin A, Muralimohan G, Ertelt JM, Ravindran R, Vella AT, McSorley SJ. 2007. Salmonella flagellin induces bystander activation of splenic dendritic cells and hinders bacterial replication in vivo. J Immunol 179:6169–6175.
- 9. Wu W, Badrane H, Arora S, Baker HV, Jin S. 2004. MucA-mediated coordination of type III secretion and alginate synthesis in *Pseudomonas aeruginosa*. *J Bacteriol* 186:7575–7585.
- 10. Boucher JC, Yu H, Mudd MH, Deretic V. 1997. Mucoid *Pseudomonas aeruginosa* in cystic fibrosis: characterization of *muc* mutations in clinical isolates and analysis of clearance in a mouse model of respiratory infection. *Infect Immun* 65:3838–3846.
- Hauser AR. 2009. The type III secretion system of *Pseudomonas aeruginosa*: infection by injection. *Nat Rev Microbiol* 7:654–665.
- 12. Schulz zur Wiesch P, Engelstadter J, Bonhoeffer S. 2010. Compensation of fitness costs and reversibility of antibiotic resistance mutations. Antimicrob Agents Chemother 54: 2085–2095.
- **13. Morgan AD, Koskella B.** 2011. Coevolution of host and pathogen, p 147–171. *In* Tibayreng M

- (ed), Genetics and Evolution of Infectious Diseases. Elsevier, Burlington, MA.
- 14. Langridge GC, Fookes M, Connor TR, Feltwell T, Feasey N, Parsons BN, Seth-Smith HM, Barquist L, Stedman A, Humphrey T, Wigley P, Peters SE, Maskell DJ, Corander J, Chabalgoity JA, Barrow P, Parkhill J, Dougan G, Thomson NR. 2015. Patterns of genome evolution that have accompanied host adaptation in Salmonella. Proc Natl Acad Sci USA 112: 863–868.
- **15. Kemen AC, Agler MT, Kemen E.** 2015. Host-microbe and microbe-microbe interactions in the evolution of obligate plant parasitism. *New Phytol* **206**:1207–1228.
- 16. Price CT, Richards AM, Von Dwingelo JE, Samara HA, Abu Kwaik Y. 2014. Amoeba host-Legionella synchronization of amino acid auxotrophy and its role in bacterial adaptation and pathogenic evolution. Environ Microbiol 16:350–358.
- Davies J, Davies D. 2010. Origins and evolution of antibiotic resistance. *Microbiol Mol Biol Rev* 74:417–433.
- 18. Wiedenbeck J, Cohan FM. 2011. Origins of bacterial diversity through horizontal genetic transfer and adaptation to new ecological niches. FEMS Microbiol Rev 35:957–976.
- 19. Houchhut B, Dobrindt U, Hacker J. 2006. The contribution of pathogenicity islands to the evolution of bacterial pathogens, p 83–107. In Seifert HS, DiRita V (ed), The Evolution of Microbial Pathogens. ASM Press, Washington, DC.
- 20. Whitman WB, Coleman DC, Wiebe WJ. 1998. Prokaryotes: the unseen majority. Proc Natl Acad Sci USA 95:6578–6583.
- 21. Doran KS, Banerjee A, Disson O, Lecuit M. 2013. Concepts and mechanisms: crossing host barriers. Cold Spring Harbor Perspect Med 3: a010090. doi:10.1101/cshperspect.a010090
- **22. Tsukita S, Yamazaki Y, Katsuno T, Tamura A, Tsukita S.** 2008. Tight junction-based epithelial microenvironment and cell proliferation. *Oncogene* **27:**6930–6938.
- 23. McGuckin MA, Linden SK, Sutton P, Florin TH. 2011. Mucin dynamics and enteric pathogens. Nat Rev Microbiol 9:265–278.
- 24. Linden SK, Sutton P, Karlsson NG, Korolik V, McGuckin MA. 2008. Mucins in the mucosal barrier to infection. Mucosal Immunol 1:183–197.
- 25. Gutierrez-Jimenez J, Arciniega I, Navarro-Garcia F. 2008. The serine protease motif of Pic mediates a dose-dependent mucolytic activity after binding to sugar constituents of the mucin substrate. *Microb Pathog* 45:115–123.

- 26. Henderson IR, Czeczulin J, Eslava C, Noriega F, Nataro JP. 1999. Characterization of pic, a secreted protease of Shigella flexneri and enteroaggregative Escherichia coli. Infect Immun 67:5587–5596.
- Sonnenburg JL, Xu J, Leip DD, Chen CH, Westover BP, Weatherford J, Buhler JD, Gordon JI. 2005. Glycan foraging in vivo by an intestine-adapted bacterial symbiont. Science 307:1955–1959.
- 28. Rasko DA, Rosovitz MJ, Myers GS, Mongodin EF, Fricke WF, Gajer P, Crabtree J, Sebaihia M, Thomson NR, Chaudhuri R, Henderson IR, Sperandio V, Ravel J. 2008. The pangenome structure of Escherichia coli: comparative genomic analysis of E. coli commensal and pathogenic isolates. J Bacteriol 190:6881–6893.
- 29. Jones B, Pascopella L, Falkow S. 1995. Entry of microbes into the host: using M cells to break the mucosal barrier. Curr Opin Immunol 7:474–478.
- Wu S, Lim KC, Huang J, Saidi RF, Sears CL. 1998. Bacteroides fragilis enterotoxin cleaves the zonula adherens protein, E-cadherin. Proc Natl Acad Sci USA 95:14979–14984.
- 31. Hanakawa Y, Schechter NM, Lin C, Garza L, Li H, Yamaguchi T, Fudaba Y, Nishifuji K, Sugai M, Amagai M, Stanley JR. 2002. Molecular mechanisms of blister formation in bullous impetigo and staphylococcal scalded skin syndrome. *J Clin Invest* 110:53–60.
- 32. Franco AA, Cheng RK, Chung GT, Wu S, Oh HB, Sears CL. 1999. Molecular evolution of the pathogenicity island of enterotoxigenic Bacteroides fragilis strains. J Bacteriol 181: 6623–6633.
- 33. Yamaguchi T, Nishifuji K, Sasaki M, Fudaba Y, Aepfelbacher M, Takata T, Ohara M, Komatsuzawa H, Amagai M, Sugai M. 2002. Identification of the Staphylococcus aureus etd pathogenicity island which encodes a novel exfoliative toxin, ETD, and EDIN-B. Infect Immun 70:5835–5845.
- **34. Jackson MP, Iandolo JJ.** 1986. Cloning and expression of the exfoliative toxin B gene from *Staphylococcus aureus*. *J Bacteriol* **166:**574–580.
- 35. Jensen VB, Harty JT, Jones BD. Interactions of the invasive pathogens Salmonella typhimurium, Listeria monocytogenes, and Shigella flexneri with M cells and murine Peyer's patches. Infect Immun 66:3758–3766.
- 36. McGuckin MA, Every AL, Skene CD, Linden SK, Chionh YT, Swierczak A, McAuley J, Harbour S, Kaparakis M, Ferrero R, Sutton P. 2007. Muc1 mucin limits both Helicobacter

- *pylori* colonization of the murine gastric mucosa and associated gastritis. *Gastroenterology* **133**:1210–1218.
- 37. Vinall LE, King M, Novelli M, Green CA, Daniels G, Hilkens J, Sarner M, Swallow DM. 2002. Altered expression and allelic association of the hypervariable membrane mucin MUC1 in *Helicobacter pylori* gastritis. *Gastroenterology* 123:41–49.
- 38. Costa NR, Mendes N, Marcos NT, Reis CA, Caffrey T, Hollingsworth MA, Santos-Silva F. 2008. Relevance of MUC1 mucin variable number of tandem repeats polymorphism in *H pylori* adhesion to gastric epithelial cells. *World J Gastroenterol* 14:1411–1414.
- **39. Vos HL, de Vries Y, Hilkens J.** 1991. The mouse episialin (Muc1) gene and its promoter: rapid evolution of the repetitive domain in the protein. *Biochem Biophys Res Commun* **181:** 121–130.
- **40.** Lambris JD, Ricklin D, Geisbrecht BV. 2008. Complement evasion by human pathogens. *Nat Rev Microbiol* **6:**132–142.
- 41. Rooijakkers SH, Ruyken M, Roos A, Daha MR, Presanis JS, Sim RB, van Wamel WJ, van Kessel KP, van Strijp JA. 2005. Immune evasion by a staphylococcal complement inhibitor that acts on C3 convertases. *Nature Immunol* 6:920–927.
- **42.** Rooijakkers SH, van Wamel WJ, Ruyken M, van Kessel KP, van Strijp JA. 2005. Antiopsonic properties of staphylokinase. *Microbes Infect* 7:476–484.
- **43.** Del Tordello E, Vacca I, Ram S, Rappuoli R, Serruto D. 2014. *Neisseria meningitidis* NalP cleaves human complement C3, facilitating degradation of C3b and survival in human serum. *Proc Natl Acad Sci USA* **111**:427–432.
- **44. Skaar EP.** 2010. The battle for iron between bacterial pathogens and their vertebrate hosts. *PLoS Pathog* **6:**e1000949.
- **45. Rogers HJ.** 1973. Iron-binding catechols and virulence in *Escherichia coli*. *Infect Immun* **7**:445–456.
- 46. Goetz DH, Holmes MA, Borregaard N, Bluhm ME, Raymond KN, Strong RK. 2002. The neutrophil lipocalin NGAL is a bacteriostatic agent that interferes with siderophore-mediated iron acquisition. *Mol Cell* 10: 1033–1043.
- 47. Fischbach MA, Lin H, Zhou L, Yu Y, Abergel RJ, Liu DR, Raymond KN, Wanner BL, Strong RK, Walsh CT, Aderem A, Smith KD. 2006. The pathogen-associated *iroA* gene cluster mediates bacterial evasion of lipocalin 2. *Proc Natl Acad Sci USA* 103: 16502–16507.

- 48. Hornef MW, Wick MJ, Rhen M, Normark S. 2002. Bacterial strategies for overcoming host innate and adaptive immune responses. *Nat Immunol.* 3:1033–1040.
- **49. Gebert B, Fischer W, Weiss E, Hoffmann R, Haas R.** 2003. *Helicobacter pylori* vacuolating cytotoxin inhibits T lymphocyte activation. *Science* **301**:1099–1102.
- 50. Nothelfer K, Arena ET, Pinaud L, Neunlist M, Mozeleski B, Belotserkovsky I, Parsot C, Dinadayala P, Burger-Kentischer A, Raqib R, Sansonetti PJ, Phalipon A. 2014. B lymphocytes undergo TLR2-dependent apoptosis upon Shigella infection. J Exp Med 211:1215–1229.
- Blair JM, Webber MA, Baylay AJ, Ogbolu DO, Piddock LJ. 2015. Molecular mechanisms of antibiotic resistance. Nat Rev Microbiol 13:42–51.
- 52. Andersen JL, He GX, Kakarla P, K CR, Kumar S, Lakra WS, Mukherjee MM, Ranaweera I, Shrestha U, Tran T, Varela MF. 2015. Multidrug efflux pumps from Enterobacteriaceae, Vibrio cholerae and Staphylococcus aureus bacterial food pathogens. Int J Environ Res Public Health 12:1487–1547.
- 53. Wilson DN, Schluenzen F, Harms JM, Starosta AL, Connell SR, Fucini P. 2008. The oxazolidinone antibiotics perturb the ribosomal peptidyl-transferase center and effect tRNA positioning. Proc Natl Acad Sci USA 105:13339–13344.
- 54. Feng J, Lupien A, Gingras H, Wasserscheid J, Dewar K, Legare D, Ouellette M. 2009. Genome sequencing of linezolid-resistant *Streptococcus pneumoniae* mutants reveals novel mechanisms of resistance. *Genome Res* 19:1214–1223.
- Meka VG, Gold HS. 2004. Antimicrobial resistance to linezolid. Clin Infect Dis 39: 1010–1015.
- Frere JM. 1995. Beta-lactamases and bacterial resistance to antibiotics. *Mol Microbiol* 16: 385–395.
- **57. Wright GD.** 2005. Bacterial resistance to antibiotics: enzymatic degradation and modification. *Adv Drug Deliv Rev* **57**:1451–1470.
- Ochman H, Lawrence JG, Groisman EA.
   2000. Lateral gene transfer and the nature of bacterial innovation. *Nature* 405:299–304.
- 59. Andersson DI, Hughes D. 2010. Antibiotic resistance and its cost: is it possible to reverse resistance? *Nat Rev Microbiol* 8:260–271.
- 60. Pukatzki S, Ma AT, Sturtevant D, Krastins B, Sarracino D, Nelson WC, Heidelberg JF, Mekalanos JJ. 2006. Identification of a conserved bacterial protein secretion system in