

1        **Comparison of methods for detection of plasmid-mediated and**  
2        **chromosomally-encoded colistin resistance in Enterobacteriaceae**

3        **Aurélie Jayol,<sup>1,2,3,4</sup> Patrice Nordmann,<sup>3,4,5</sup> Philippe Lehours,<sup>1</sup> Laurent Poirel,<sup>3,4</sup> and**  
4        **Véronique Dubois<sup>1,2\*</sup>**

5        *<sup>1</sup>Laboratory of Bacteriology, Bordeaux University Hospital, <sup>2</sup>CNRS UMR5234, University of*  
6        *Bordeaux, France, <sup>3</sup>Emerging Antibiotic Resistance Unit, Medical and Molecular*  
7        *Microbiology, Department of Medicine, University of Fribourg, Switzerland, <sup>4</sup>INSERM*  
8        *European Unit (LEA, IAME), Paris, France, and <sup>5</sup>University of Lausanne and University*  
9        *hospital Center, Lausanne, Switzerland*

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11        **Keywords.** MCR-1, colistin, polymyxin B, resistance, susceptibility testing, Phoenix  
12        automated system, Rapid Polymyxin NP test

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14        \*Corresponding author. Véronique Dubois, MFP Laboratory CNRS UMR-5234. 146 rue Léo  
15        Saignat, Batiment 3A, 33076 BORDEAUX Cedex, France. E-mail: [veronique.dubois@u-](mailto:veronique.dubois@u-bordeaux.fr)  
16        [bordeaux.fr](mailto:veronique.dubois@u-bordeaux.fr)

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## ABSTRACT

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27 **Objectives:** Because of the emergence of plasmid-mediated (*mcr-1* and *mcr-2* genes) and  
28 chromosomally-encoded colistin resistance, reliable methods for detecting colistin  
29 resistance/susceptibility in routine laboratories are required. We evaluated the respective  
30 performances of the BD Phoenix automated system, the newly-developed Rapid Polymyxin  
31 NP test and the broth microdilution (BMD) reference method to detect colistin resistance in  
32 Enterobacteriaceae, and particularly those producing MCR-1 and MCR-2.

33 **Methods:** Colistin susceptibility of 123 enterobacterial clinical isolates (40 colistin-  
34 susceptible and 83 colistin-resistant isolates) was tested with the Phoenix automated system,  
35 the Rapid Polymyxin NP test and the BMD method. Molecular mechanisms responsible for  
36 plasmid-mediated and chromosomally-encoded colistin resistance mechanisms were  
37 investigated by PCR and sequencing.

38 **Results:** Considering BMD as a reference method, the Phoenix system failed to detect ten  
39 colistin-resistant isolates (one *Escherichia coli*, one *Klebsiella pneumoniae*, seven  
40 *Enterobacter* spp., and one *Salmonella enterica*). The Rapid Polymyxin NP test failed to  
41 detect the same single *E. coli* isolate. Those two latter methods detected the sixteen *E. coli*, *K.*  
42 *pneumoniae* and *S. enterica* isolates producing the plasmid-encoded MCR-1 and MCR-2.

43 **Conclusion:** The Phoenix system and the Rapid Polymyxin NP test are reliable techniques for  
44 detecting plasmid-mediated MCR-1 and MCR-2-related colistin resistance. However, a high  
45 rate of false susceptibility was observed with the Phoenix system, indicating that  
46 susceptibility results obtained with that system should be confirmed by BMD method. By  
47 contrast, the Rapid Polymyxin NP test showed a good agreement with the BMD method and

48 results were obtained rapidly (within two hours). The BMD method should be performed if  
49 MIC values are needed.

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## INTRODUCTION

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52           The increasing use of colistin in human medicine, and the recent discovery of plasmid-  
53 mediated polymyxin resistance [1–4], highlight the need for reliable methods for polymyxin  
54 susceptibility testing.

55           The Clinical Laboratory Standard Institute (CLSI) and the European Committee on  
56 Antimicrobial Susceptibility Testing (EUCAST) recently gathered in a joint subcommittee,  
57 chose the broth microdilution (BMD) method as the reference method ([www.eucast.org](http://www.eucast.org)). It  
58 must be performed with sulfate salts of polymyxins (colistimethate used in human medicine  
59 shall not be used), with cation-adjusted Mueller-Hinton broth, without additive (in particular  
60 without polysorbate 80) and without treated polystyrene trays. Other methods such as, agar  
61 dilution, disk diffusion and gradient diffusion (E-test) have been ruled out. However, this gold  
62 standard BMD method is difficult to performed in routine laboratories since it requires  
63 qualified staff, is time-consuming, and requires manual preparation of antibiotic solutions [5].

64           Automated dilution methods such as those performed by the BD Phoenix system could  
65 be an alternative for the screening of colistin resistance for laboratories that cannot perform  
66 manual BMD. However, the performance of this automate for colistin susceptibility testing,  
67 especially its accuracy for the detection of isolates exhibiting a plasmid-mediated colistin  
68 resistance, have never been evaluated. Recently, a rapid colorimetric test, the Rapid  
69 Polymyxin NP test, has been developed for detecting polymyxin resistance in  
70 *Enterobacteriaceae* within 2 hours [6].

71           The objective of this study was to evaluate the performance of the BD Phoenix  
72 automated system to detect plasmid-mediated and chromosomally-encoded colistin resistance,  
73 using a collection of clinical enterobacterial isolates. We also aimed to compare their  
74 performances to those of the Rapid Polymyxin NP test and the BMD reference method.

## MATERIAL AND METHODS

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76       **Bacterial strains.** This study was carried out using 123 non-duplicated clinical  
77 isolates of various enterobacterial species. The collection included 40 colistin-susceptible and  
78 83 colistin-resistant isolates. Out of the 83 colistin-resistant isolates, sixteen belonged to a  
79 genus known to be naturally-resistant to colistin (*Morganella*, *Proteus*, *Providencia*, *Serratia*,  
80 *Hafnia*), and 67 isolates belonged to the *Escherichia*, *Klebsiella*, *Enterobacter*, or *Salmonella*  
81 genus with acquired resistance mechanisms to colistin. Identification of the isolates at the  
82 species level was performed using the Microflex bench-top MALDI-TOF mass spectrometer  
83 (Brücker, Champs-sur-Marne, France). Isolates were grown on Luria Bertani (LB)  
84 (GibcoBRL, Cergy Pontoise, France) or Mueller Hinton (MH) (bioMérieux, Marcy-l’Etoile,  
85 France) agar plates at 35±2°C for 18 h. The colistin-susceptible *E. coli* ATCC 25922 strain  
86 was included in all experiments as quality control.

### 87       **Susceptibility testing**

#### 88       Reference antimicrobial susceptibility testing

89 The BMD method was performed according to the EUCAST/CLSI joined guidelines  
90 (www.eucast.org). Briefly, BMD panels were prepared extemporaneously in 96-wells sterile  
91 polystyrene microplates (Sarstedt, Nümbrecht, Germany). Dilutions of colistin (Sigma Aldrich,  
92 St Louis, USA) ranging from 0.125 to 128 mg/l were made in cation-adjusted MH broth (Bio-  
93 Rad, Marnes-la-Coquette, France), without addition of polysorbate 80 (Tween 80), and with a  
94 final concentration of 5x10<sup>5</sup> CFU/ml of bacteria in each well. This procedure was performed  
95 in triplicate in separate experiments and the Minimum Inhibitory Concentrations (MICs) were  
96 read after 16 to 20 h of incubation at 35±2°C in ambient air. Results were interpreted  
97 according to the EUCAST breakpoints [7], i.e. isolates with MICs of colistin ≤ 2 mg/l were  
98 categorized as susceptible although those with MICs > 2 mg/l were resistant.

99 BD Phoenix automated system

100 Colistin susceptibility testing was assessed using the Phoenix automated system (BD Phoenix  
101 100, BD Diagnostic systems, Le Pont de Claix, France), which performs automated BMD  
102 method. The panel selected to perform this evaluation was the Gram-negative panel NMIC-  
103 93, using the BMD method for colistin concentrations ranging from 0.5 to 4 mg/l in order to  
104 cover the EUCAST breakpoints [7]. The bacterial suspension and the panel inoculation were  
105 performed according to the manufacturer's guidelines. Panels were incubated up to 16 h at  
106  $35\pm 2^\circ\text{C}$  under ambient air, and results were interpreted with the BD EpiCenter software.

107 Rapid Polymyxin NP test

108 The Rapid Polymyxin NP test is based on the detection of the glucose metabolism related to  
109 bacterial growth in presence of a fixed concentration of colistin (3.75 mg/l) in cation-adjusted  
110 MH broth medium [6]. Formation of acid metabolites consecutive to the glucose metabolism  
111 is evidenced by a color change (orange to yellow) of the pH indicator (red phenol). The test is  
112 positive (colistin resistance) if a strain grows in presence of colistin, whereas it is negative  
113 (colistin susceptibility) if a strain does not grow in presence of colistin. Results of the Rapid  
114 Polymyxin NP test were read at 2 h of incubation at  $35\pm 2^\circ\text{C}$  in ambient air.

115 **Molecular characterization of the colistin resistance.** Molecular mechanisms  
116 responsible for plasmid-mediated (*mcr-1* and *mcr-2* genes) and chromosomally-encoded  
117 (*pmrA*, *pmrB*, *phoP*, *phoQ*, *mgrB*, and *crrB* alterations) colistin resistance were determined as  
118 described previously [1,2,8–12].

119 **Results analysis.** The results obtained with the BD Phoenix system and the Rapid  
120 Polymyxin NP test were compared to those obtained with the reference BMD method.  
121 Discrepancies were determined for each method in order to assess their performance to detect  
122 colistin resistance. For strains for which discrepant susceptibility results were obtained, the

123 isolates were retested with the three methods. Unsolved discrepancies were then maintained in  
124 the database for performance evaluation. Errors were ranked as follows: a very major error  
125 (VME) was defined when isolates were categorized as susceptible using the Phoenix system  
126 or the Rapid Polymyxin NP test but resistant by the BMD method (false-susceptible result),  
127 while a major error (ME) was defined when isolates were found resistant using the Phoenix  
128 system or the Rapid Polymyxin NP test, but were found susceptible by using the BMD  
129 method (false-resistant result). The number of resistant isolates, and the number of susceptible  
130 isolates were used as denominators for VME and ME calculations, respectively. Acceptance  
131 criteria that provide requirements, and specifications to evaluate performances of  
132 antimicrobial susceptibility test devices were those defined by the ISO standards (VME and  
133 ME must be  $\leq 3\%$ ) [13].

## 134 RESULTS

135 The features of the 123 enterobacterial isolates included in this study to evaluate the  
136 performance of the BD Phoenix system and the Polymyxin NP test for determining colistin  
137 susceptibility are presented in the Table.

138 Fourty isolates defined as colistin-susceptible according to the results of the BMD  
139 method (MICs of colistin ranging from 0.12 to 2  $\mu\text{g/ml}$ ) were found susceptible by the BD  
140 Phoenix system (Table). While a single susceptible *K. pneumoniae* isolate with an MIC of  
141 colistin at 2 mg/l was found resistant using the Rapid Polymyxin NP test. The MIC value of  
142 colistin for this same isolate as determined by the BD Phoenix system was underestimated  
143 (MIC  $\leq 0.5$  mg/l) but the isolate was well categorized as susceptible.

144 Out of the 83 colistin-resistant enterobacterial isolates (MICs of colistin ranging from  
145 4 to higher than 128 mg/l), the Phoenix system failed to detect colistin resistance for seven  
146 *Enterobacter* spp. isolates, a single *K. pneumoniae*, a single *S. enterica*, and a single *E. coli*

147 isolate, whereas the Rapid Polymyxin NP test only failed for detecting a single colistin-  
148 resistant *E. coli* isolate. (Table). Identical results were obtained when those strains were  
149 repeatedly tested with the Phoenix system and the Rapid Polymyxin NP test indicating a good  
150 reproducibility of the methods.

151 Noteworthy, thirteen non clonally-related colistin-resistant *E. coli*, one *K. pneumoniae*,  
152 and one *S. enterica* isolate possessing the plasmid-mediated *mcr-1* gene were tested (MICs of  
153 colistin ranging from 4 to 64 mg/l using the BMD method) and all were identified as resistant  
154 with the BD Phoenix system and the Rapid Polymyxin NP test. Similarly, the *E. coli* isolate  
155 possessing the plasmid-mediated *mcr-2* gene (MIC = 4 mg/l) was detected by the two  
156 methods.

## 157 DISCUSSION

158 Out of the 40 colistin-susceptible enterobacterial isolates, no ME (i.e. false resistance)  
159 was found with the Phoenix system, and only a single susceptible *K. pneumoniae* isolate with  
160 an MIC of colistin at 2 mg/l (therefore just below the EUCAST breakpoint value > 2 mg/l)  
161 was falsely identified as colistin resistant with the Rapid Polymyxin NP test revealing a ME  
162 rate of 2.5%.test

163 Out of the 83 colistin-resistant enterobacterial isolates, the BD Phoenix system and the  
164 Rapid Polymyxin NP test showed excellent performances to detect the 13 isolates with  
165 plasmid-mediated colistin resistance regardless of the level of resistance. However, ten VME  
166 (i.e. false susceptibility) were found with the Phoenix system whereas a single VME was  
167 found with the Rapid Polymyxin NP test (Table). A high VME rate of 12% was thus found  
168 with the BD Phoenix system, whereas a low VME rate of 1.2% was found with the Rapid  
169 Polymyxin NP test. The single colistin-resistant *E. coli* isolate that was not detected with the  
170 BD Phoenix system and the Rapid Polymyxin NP test, presented a low level of resistance

171 (MIC of colistin at 8 mg/l). Its mechanism of colistin resistance remains unknown (neither  
172 chromosomally-encoded mutations in genes known to be involved in lipopolysaccharide  
173 modifications, i.e. *mgrB*, *pmrAB* and *phoPQ* genes, nor plasmid-mediated *mcr-1* and *mcr-2*  
174 genes were detected).

175 The *S. enterica* isolate identified as susceptible (MIC = 2 mg/l) with the BD Phoenix system  
176 presented a low level of colistin resistance (MIC = 4 mg/l) and its mechanism of resistance  
177 remains unknown (neither chromosomal mutations, nor plasmid-mediated resistance).

178 The *K. pneumoniae* resistant isolate and the seven *Enterobacter* spp. resistant isolates not  
179 detected with the BD Phoenix system exhibited MIC values of colistin ranging from 16 to  
180 higher than 128 mg/l and were identified as colistin resistant with the Rapid Polymyxin NP  
181 test. During the determination of MICs by the BMD method, skipped wells (i.e. wells that  
182 exhibit no growth although growth does occur at higher concentrations) were observed for  
183 88% of those isolates (the *K. pneumoniae* isolate and six *Enterobacter* spp. isolates). This  
184 observation suggests that the failure of the BD Phoenix system to detect colistin resistance in  
185 those isolates could be related to a heteroresistance phenotype (defined by the presence of two  
186 subpopulations exhibiting different susceptibilities to colistin) [14]. The skipped wells  
187 observed during the MIC determination of those isolates by the BMD method are mainly for  
188 dilutions comprised between 0.125 and 4 mg/l. The Phoenix panel used in this study  
189 contained dilutions of colistin ranging from 0.5 to 4 mg/l. It is therefore likely that the failure  
190 of detection of heteroresistance for those isolates was linked to the absence of testing at higher  
191 colistin concentrations. The low sensitivity to detect colistin heteroresistance has already been  
192 described for another automated system, i.e. the bioMérieux Vitek system [15].

193 The limitation of our study could be the absence of testing of non-fermenting Gram negative  
194 rods in our collection.

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## CONCLUSION

196 This study shows that the BD Phoenix system and the Rapid Polymyxin NP test are  
197 reliable tools for detection of plasmid-mediated colistin resistance (*mcr-1* and *mcr-2* genes),  
198 which is currently a major concern. However, the BD Phoenix system is not reliable for  
199 detection of colistin heteroresistance in enterobacterial isolates. Thus, we recommend the  
200 determination of MICs by the BMD method when susceptible results are obtained and if  
201 clinical use is required. By contrast, the Rapid Polymyxin NP test showed a good agreement  
202 with the BMD method and results were obtained rapidly (within two hours), but BMD  
203 method should be performed if determination of MIC values is necessary.

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## CONFLICT OF INTEREST

211 An international patent form has been filed on behalf of the University of Fribourg,  
212 Switzerland corresponding to the Rapid Polymyxin NP test.

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## REFERENCES

215 [1] Liu YY, Wang Y, Walsh TR, Yi LX, Zhang R, Spencer J, et al. Emergence of plasmid-  
216 mediated colistin resistance mechanism MCR-1 in animals and human beings in China: a

- 217 microbiological and molecular biological study. *Lancet Infect Dis* 2015;16:161–8.  
218 doi:S1473-3099(15)00424-7 [pii] 10.1016/S1473-3099(15)00424-7.
- 219 [2] Xavier BB, Lammens C, Ruhai R, Kumar-Singh S, Butaye P, Goossens H, et al.  
220 Identification of a novel plasmid-mediated colistin-resistance gene, *mcr-2*, in *Escherichia*  
221 *coli*, Belgium, June 2016. *Euro Surveill* 2016;21. doi:10.2807/1560-  
222 7917.ES.2016.21.27.30280 30280 [pii].
- 223 [3] Skov RL, Monnet DL. Plasmid-mediated colistin resistance (*mcr-1* gene): three months  
224 later, the story unfolds. *Euro Surveill* 2016;21. doi:10.2807/1560-  
225 7917.ES.2016.21.9.30155 30155 [pii].
- 226 [4] Poirel L, Jayol A, Nordmann P. Polymyxins: Antibacterial Activity, Susceptibility  
227 Testing, and Resistance Mechanisms Encoded by Plasmids or Chromosomes. *Clin*  
228 *Microbiol Rev* 2017;30:557–96. doi:10.1128/CMR.00064-16.
- 229 [5] Jorgensen JH, Ferraro MJ. Antimicrobial susceptibility testing: a review of general  
230 principles and contemporary practices. *Clin Infect Dis* 2009;49:1749–55.  
231 doi:10.1086/647952.
- 232 [6] Nordmann P, Jayol A, Poirel L. Rapid detection of polymyxin resistance in  
233 *Enterobacteriaceae*. *Emerg Infect Dis* 2016;22:1038–43. doi:10.3201/eid2206.151840.
- 234 [7] EUCAST. Breakpoints tables for interpretation of MICs and zone diameters, Version 1.0.  
235 EUCAST; 2016; 2016.
- 236 [8] Jayol A, Poirel L, Villegas MV, Nordmann P. Modulation of *mgrB* gene expression as a  
237 source of colistin resistance in *Klebsiella oxytoca*. *Int J Antimicrob Agents* 2015;46:108–  
238 10. doi:S0924-8579(15)00109-0 [pii] 10.1016/j.ijantimicag.2015.02.015.
- 239 [9] Poirel L, Jayol A, Bontron S, Villegas MV, Ozdamar M, Turkoglu S, et al. The *mgrB*  
240 gene as a key target for acquired resistance to colistin in *Klebsiella pneumoniae*. *J*  
241 *Antimicrob Chemother* 2014;70:75–80. doi:dku323 [pii] 10.1093/jac/dku323.

- 242 [10] Sun S, Negrea A, Rhen M, Andersson DI. Genetic analysis of colistin resistance in  
243 *Salmonella enterica* serovar *Typhimurium*. *Antimicrob Agents Chemother* 2009;53:2298–  
244 305. doi:AAC.01016-08 [pii] 10.1128/AAC.01016-08.
- 245 [11] Quesada A, Porrero MC, Tellez S, Palomo G, Garcia M, Dominguez L. Polymorphism  
246 of genes encoding PmrAB in colistin-resistant strains of *Escherichia coli* and *Salmonella*  
247 *enterica* isolated from poultry and swine. *J Antimicrob Chemother* 2015;70:71–4.  
248 doi:dku320 [pii] 10.1093/jac/dku320.
- 249 [12] Cheng YH, Lin TL, Lin YT, Wang JT. Amino acid substitutions of CrrB responsible  
250 for resistance to colistin through CrrC in *Klebsiella pneumoniae*. *Antimicrob Agents*  
251 *Chemother* 2016 May 236063709-16 2016.
- 252 [13] International Standard Organization. Clinical laboratory testing and in vitro diagnostic  
253 test systems - Susceptibility testing of infectious agents and evaluation of performance of  
254 antimicrobial susceptibility test devices - Part2: evaluation of performance of  
255 antimicrobial susceptibility test devices. International Standard ISO 20776-2:2007,  
256 Geneva: ISO, 2007.) n.d.
- 257 [14] Landman D, Salamera J, Quale J. Irreproducible and uninterpretable polymyxin B  
258 MICs for *Enterobacter cloacae* and *Enterobacter aerogenes*. *J Clin Microbiol*  
259 2013;51:4106–11. doi:JCM.02129-13 [pii] 10.1128/JCM.02129-13.
- 260 [15] Lo-Ten-Foe JR, de Smet AM, Diederer BM, Kluytmans JA, van Keulen PH.  
261 Comparative evaluation of the VITEK 2, disk diffusion, Etest, broth microdilution, and  
262 agar dilution susceptibility testing methods for colistin in clinical isolates, including  
263 heteroresistant *Enterobacter cloacae* and *Acinetobacter baumannii* strains. *Antimicrob*  
264 *Agents Chemother* 2007;51:3726–30. doi:AAC.01406-06 [pii] 10.1128/AAC.01406-06.  
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Table. MICs of colistin (mg/l) using the BMD method and the BD Phoenix system and results of the Rapid Polymyxin NP test.

Isolate	Species (number of isolates)	Phenotype	Mechanism of resistance to colistin <sup>a</sup>	BMD MIC colistin	Phoenix MIC colistin	Discrepancies <sup>b</sup>	Rapid Polymyxin NP test Result	Discrepancies <sup>b,c</sup>
Isolates susceptible to colistin								
ATCC25922	<i>E. coli</i>	S	NA	0.25	≤0.5	No	-	No
2 to 15	<i>E. coli</i> (n= 14)	S	NA	0.12 to 0.5	≤0.5	No	-	No
16 to 26	<i>K. pneumoniae</i> (n=11)	S	NA	0.12 to 2	≤0.5	No	-	<b>Yes, ME (n=1)</b>
27 to 29	<i>K. oxytoca</i> (n=3)	S	NA	0.12 to 0.25	≤0.5	No	-	No
30 to 32	<i>E. cloacae</i> (n=3)	S	NA	0.12 to 0.25	≤0.5	No	-	No
33	<i>E. asburiae</i>	S	NA	0.12	≤0.5	No	-	No
34	<i>E. aerogenes</i>	S	NA	0.12	≤0.5	No	-	No
35 to 37	<i>C. freundii</i> (n=3)	S	NA	0.25	≤0.5	No	-	No
38 to 40	<i>C. koseri</i> (n=3)	S	NA	0.12 to 0.25	≤0.5	No	-	No
Isolates resistant to colistin								
41	<i>M. morgani</i>	R	Intrinsic	>128	>4	No	+	No
42-43	<i>P. mirabilis</i> (n=2)	R	Intrinsic	>128	>4	No	+	No
44	<i>P. vulgaris</i>	R	Intrinsic	>128	>4	No	+	No
45	<i>P. stuartii</i>	R	Intrinsic	>128	>4	No	+	No
46 to 48	<i>S. marcescens</i> (n=3)	R	Intrinsic	>128	>4	No	+	No
49 to 52	<i>H. alvei</i> (n=4)	R	Intrinsic	8 or 16	4 or >4	No	+	No
53 to 56	<i>H. paralvei</i> (n=4)	R	Intrinsic	8	4 or >4	No	+	No
57 to 68	<i>E. coli</i> (n= 11)	R	Plasmid-mediated <i>mcr-1</i> gene	4 or 8	4 or >4	No	+	No
69	<i>E. coli</i>	R	Plasmid-mediated <i>mcr-1</i> gene	64	>4	No	+	No
70	<i>E. coli</i>	R	Plasmid-mediated <i>mcr-2</i> gene	4	4	No	+	No
71	<i>K. oxytoca</i>	R	ISK <i>pn26</i> into <i>mgrB</i> promotor	64	>4	No	+	No
72	<i>E. coli</i>	R	Unknown	8	≤0.5	<b>Yes, VME</b>	-	<b>Yes, VME</b>
73	<i>E. coli</i>	R	Unknown	8	>4	No	+	No
74	<i>E. coli</i>	R	Unknown	4	4	No	+	No
75	<i>E. coli</i>	R	Unknown	16	>4	No	+	No
76	<i>K. pneumoniae</i>	R	PmrA G53C	64	>4	No	+	No
77-78	<i>K. pneumoniae</i> (n=2)	R	PmrA G53S	16 or 32	>4	No	+	No
79-80	<i>K. pneumoniae</i> (n=2)	R	PmrB T157P	16 or 32	>4	No	+	No
81	<i>K. pneumoniae</i>	R	PhoP D191Y	128	≤0.5	<b>Yes, VME</b>	+	No

82	<i>K. pneumoniae</i>	R	PhoQ R16C	128	>4	No	+	No
83	<i>K. pneumoniae</i>	R	MgrB N42Y et K43I	64	>4	No	+	No
84	<i>K. pneumoniae</i>	R	MgrB I45T	64	>4	No	+	No
85 to 87	<i>K. pneumoniae</i> (n=3)	R	MgrB truncated	64 or 128	>4	No	+	No
88	<i>K. pneumoniae</i>	R	Deletion of 11 nucleotides into <i>mgrB</i> gene	>128	>4	No	+	No
89	<i>K. pneumoniae</i>	R	blaCTX-M-15/ISEcp1 into <i>mgrB</i>	64	>4	No	+	No
90	<i>K. pneumoniae</i>	R	IS5 into <i>mgrB</i> gene	64	>4	No	+	No
91	<i>K. pneumoniae</i>	R	IS102 into <i>mgrB</i> gene	>128	>4	No	+	No
92	<i>K. pneumoniae</i>	R	ISKpn14 into <i>mgrB</i> gene	32	>4	No	+	No
93	<i>K. pneumoniae</i>	R	ISKpn13 into <i>mgrB</i> gene	128	>4	No	+	No
94	<i>K. pneumoniae</i>	R	ISKpn26 into <i>mgrB</i> gene	64	>4	No	+	No
95	<i>K. pneumoniae</i>	R	IS903 into <i>mgrB</i> gene	128	>4	No	+	No
96	<i>K. pneumoniae</i>	R	IS903b into <i>mgrB</i> gene	64	>4	No	+	No
97	<i>K. pneumoniae</i>	R	IS5 into <i>mgrB</i> gene	128	>4	No	+	No
98	<i>K. pneumoniae</i>	R	IS10R into <i>mgrB</i> promotor	128	>4	No	+	No
99	<i>K. pneumoniae</i>	R	ISKpn14 into <i>mgrB</i> promotor	32	>4	No	+	No
100	<i>K. pneumoniae</i>	R	CrrB N141Y	>128	>4	No	+	No
101	<i>K. pneumoniae</i>	R	CrrB P151L	>128	>4	No	+	No
102	<i>K. pneumoniae</i>	R	CrrB G183V	>128	>4	No	+	No
103	<i>K. pneumoniae</i>	R	Plasmid mediated <i>mcr-1</i> gene	16	4	No	+	No
104	<i>K. pneumoniae</i>	R	Unknown	16	>4	No	+	No
105	<i>K. pneumoniae</i>	R	Unknown	64	>4	No	+	No
106	<i>K. pneumoniae</i>	R	Unknown	32	>4	No	+	No
107	<i>K. pneumoniae</i>	R	Unknown	>128	>4	No	+	No
108	<i>K. pneumoniae</i>	R	Unknown	64	>4	No	+	No
109	<i>K. pneumoniae</i>	R	Unknown	64	>4	No	+	No
110	<i>K. pneumoniae</i>	R	Unknown	32	>4	No	+	No
111	<i>E. cloacae</i>	R	Unknown	32	>4	No	+	No
112	<i>E. cloacae</i>	R	Unknown	>128	>4	No	+	No
113	<i>E. cloacae</i>	R	Unknown	32	>4	No	+	No
114	<i>E. cloacae</i>	R	Unknown	>128	<b>1</b>	<b>Yes, VME</b>	+	No
115	<i>E. cloacae</i>	R	Unknown	64	<b>≤0.5</b>	<b>Yes, VME</b>	+	No
116	<i>E. cloacae</i>	R	Unknown	>128	<b>≤0.5</b>	<b>Yes, VME</b>	+	No
117	<i>E. cloacae</i>	R	Unknown	16	<b>≤0.5</b>	<b>Yes, VME</b>	+	No

118	<i>E. cloacae</i>	R	Unknown	>128	≤ <b>0.5</b>	<b>Yes, VME</b>	+	No
119	<i>E. cloacae</i>	R	Unknown	>128	≤ <b>0.5</b>	<b>Yes, VME</b>	+	No
120	<i>E. asburiae</i>	R	Unknown	>128	≤ <b>0.5</b>	<b>Yes, VME</b>	+	No
121	<i>S. enterica</i>	R	Plasmid mediated <i>mcr-1</i> gene	16	>4	No	+	No
122	<i>S. enterica</i>	R	Unknown	4	<b>2</b>	<b>Yes, VME</b>	+	No
123	<i>S. enterica</i>	R	Unknown	4	>4	No	+	No

S, susceptible; R, resistant; NA, not applicable.

<sup>a</sup>Unknown : no mutation in genes known to be involved in colistin resistance (*pmrA*, *pmrB*, *phoP*, *phoQ*, *mgrB* and *crrB* genes)

<sup>b</sup>VME, very major error (false-susceptibility compared to the results obtained by broth microdilution reference method)

<sup>c</sup>ME, major error (false-resistance compared to the results obtained by broth microdilution reference method)