



Phylogenetic relationship of *Fusarium* species isolated from keratitis using TEF1 and RPB2 gene sequences

Zeynab Yassin¹, Zahra Salehi², Mohammad Soleimani³, Ensieh Lotfali⁴, Mahsa Fattahi^{5*}, Somayeh Sharifynia⁶

¹Antimicrobial Resistance Research Center, Iran University of Medical Sciences, Tehran, Iran ²Department of Mycology, Pasteur Institute of Iran, Tehran, Iran

³Department of Ocular Trauma and Emergency, Farabi Hospital, Tehran University of Medical Sciences, Tehran, Iran

⁴Department of Medical Parasitology and Mycology, School of Medicine, Shahid Beheshti University of Medical Sciences, Tehran, Iran

⁵Center for Research and Training in Skin Diseases and Leprosy, Tehran University of Medical Sciences, Tehran, Iran

⁶Clinical Tuberculosis and Epidemiology Research Center, National Research Institute of Tuberculosis and Lung Diseases (NRITLD), Shahid Beheshti University of Medical Sciences, Tehran, Iran

Received: November 2021, Accepted: April 2022

ABSTRACT

Background and Objectives: Fusarium species are known to be one of the common causes of keratitis. This study was conducted to identify Fusarium spp. causing keratitis and to investigate their genetic diversity using TEF1 and RPB2 gene sequences.

Materials and Methods: Twenty-four clinical isolates of Fusarium were isolated from the patient with keratitis. Phylogenetic analysis of two-locus of the 24 clinical isolates and three reference strains was carried out using the maximum parsimony and RAxML methods.

Results: Based on gene sequences of the 24 clinical isolates, 17, 4, and 3 isolates were identified as Fusarium solani species complex (FSSC), Fusarium fujikuroi species complex (FFSC), and Fusarium oxysporum, respectively. FFSC include F. proliferatum (n=1), F. globosum (n=1), F. verticillioides (n=1), and F. brevicatenulatum (n=1), respectively.

Conclusion: Given that sequence of a sole gene can be challenging and on the other hand, due to the high resistance to antifungal drugs, identification of Fusarium species is of substantial significance. In this study, by designing a novel set of primers for the *RPB2* area and using *TEF1* primer, we were able to differentiate 24 *Fusarium* spp. isolated from patients with keratitis.

Keywords: Keratitis; Fusarium oxysporum; Fusarium solani species complex; Fusarium fujikuroi species complex

INTRODUCTION

Fungal keratitis is a corneal infection that occurs mostly in tropical and subtropical regions as well as in temperate climates following the fungal contaminants among farmers, corneal trauma, chronic ocular surface disease, and the use of contact lenses, respectively (1). A broad spectrum of filamentous fungi and yeasts causes fungal keratitis (2, 3). Fusarium species (spp.) are known as the most common cause

*Corresponding author: Mahsa Fattahi, Ph.D, Center for Research and Training in Skin Diseases and Leprosy, Tehran University of Med-Tel: +98-2188978190 Fax: +98-88963804 Email: mfattahi@sina.tums.ac.ir ical Sciences, Tehran, Iran.

Copyright © 2022 The Authors. Published by Tehran University of Medical Sciences.

Co O O This work is licensed under a Creative Commons Attribution-Non Commercial 4.0 International license

(https://creativecommons.org/licenses/by-nc/4.0/). Noncommercial uses of the work are permitted, provided the original work is properly cited.

of it in tropical and subtropical regions, particularly in developing countries, and it can be caused by its different members (4-7). Due to the resistance to a wide range of antifungal drugs, Keratitis caused by *Fusarium* spp. is of great importance, and eye loss is expected if such a disease is not treated appropriately (8, 9).

Recently, multilocus molecular phylogenetic studies have shown that *Fusarium solani* species complex (FSSC) and *Fusarium oxysporum* species complex (FOSC) are the common causes of fungal keratitis (8, 10-12). A new taxonomy has been done by Sandoval-Denis et al. that the FSSC updates under the genus name Neocosmospora (13). The particular conundrum between FSSC and Neocosmospora is still undergoing. This name change is still disputed by O'Donnell and Graser. Therefore, in this study, the FSSC is used. The FSSC consists of over 60 phylogenetic species that are morphologically homogenous and genetically heterogeneous and only 13 species are able to cause disease in humans (14-17).

In previous studies, the sequencing of Translation elongation factor 1-alpha (*TEF1*), Beta-tubulin (*TUB2*), RNA polymerase II (*RPB2*) genes, the Internal Transcribed Spacer (*ITS*), and the Ribosomal Intergenic Spacer (*IGS*) was performed to identify the *Fusarium* species (15-20). It seems that solo gen fails to identify the *Fusarium* spp. and the use of multiple genes is required (8, 5, 18, 21). Accordingly, the goal of the present study was accurate molecular identification of *Fusarium* spp. isolated from patients with keratitis based on two loci *RPB2* and *TEF1*.

MATERIALS AND METHODS

Clinical isolates. The present study was conducted on 24 patients with keratitis over a period of one year at Farabi Hospital in Tehran (Table 1). Following the microscopic examination with Gram staining and observation of hyaline hyphae, the samples were cultured on Blood agar and Sabouraud Dextrose Agar (SDA) (Merck, Germany). The samples were inoculated at three points on each plate and incubated at 25°C for 5 days (22). Also, reference strains of *F. solani* complex (PTCC 5284), *F. oxysporum* (PTCC 5115), and *F. proliferatum* (PFCC 48-125) were used in sequence analysis.

DNA extraction. The genomic DNA was extracted

	Isolate	
FSSC	F1	F. solani
	F4	F. solani
	F7	F. solani
	F9	F. solani
	F10	F. solani
	F11	F. solani
	F12	F. solani
	F24	F. solani
	F31	F. solani
	F32	F. solani
	F33	F. solani
	F42	F. solani
	F44	F. solani
	F45	F. solani
	F46	F. solani
	F50	F. solani
	F62	F. solani
	PTCC 5284	F. solani
FFSC	F3	F. globosum
	F13	F. proliferatum
	F25	F. verticillioides
	F49	F. brevicatenulatum
	PFCC 48-125	F. proliferatum
FOSC	F15	F. oxysporum
	F16	F. oxysporum
	F54	F. oxysporum
	PTCC 5115	F. oxysporum

Table 1. List of Fusarium isolates used in this study

from all 24 isolates and three reference strains according to Salehi et al. (23). Sections from the *TEF1* and *RPB2* genes were chosen for sequencing. To amplify these regions, a novel set of primers for the RPB2 area was designed using Lasergene 7 software (Table 2). PCR assays exist in 50 µl reaction, including 25 µl of Premix, 3 µl of DNA extract, 0.8 µM of each primer, and water. PCRs were performed in a thermocycler (Eppendorf, Germany) under the following conditions: 35 cycles of 30 seconds at 94°C, annealing at changing temperatures for 40 seconds (Table 2), 45 seconds at 72°C, and a terminal extension step of 72°C for 7 minutes (24).

Sequencing and gene diversity. PCR products were purified and sequenced using the ABI PRISM BigDye Terminator Cycle Sequencing Ready Reaction Kit. Forward and the reverse DNA sequence were

Locus	Primers	Sequence (5 [*] 3 [*])	Annealing	Reference
			temp (°C)	
TEF-1α	Forward	ATGGGTAAGGAGGACAAGAC GGAAGTACCAGTGATCATGTT	56	21
	Reverse			
RPB2	Forward	CGGTAGCTGGGTTGGTGTTCA	62	Manual design
	Reverse	TTGGCCCGTTTCTCTTCTTC		

Table 2. Sequencing primers used in the two loci RPB2 and TEF1

edited, aligned, and analyzed using MEGA7.0.21 software. Subsequently, the nucleotide polymorphic sites were identified. The species were identified and compared using two databases, namely, the CBS (http://www.cbs.knaw.nl/fusarium/) and BLASTn (http://www.ncbi.nlm.nih.gov/genbank/). All isolates were verified to the species level by the *TEF1* sequence.

Phylogenetic analysis. The maximum parsimony (MP) analysis was performed using MEGA7.0.21 software. Maximum likelihood (ML) analysis (25) was performed using the RAxML (26). Optimization in RAxML was carried out using the GTRCAT option. Bootstrap values for maximum likelihood were 1000 replicates, with one search replicate per bootstrap replicate. *Fusarium graminearum* was used as an outgroup to root the dendrogram. The discriminatory power was calculated according to Hunter's formula (27).

RESULTS

Clinical isolates. Totally 24 clinical isolates and three reference strains grow on the SDA. In the event that the fungal species grow on both plates (Blood agar and SDA) and they are the same at all three inoculation points, the fungal species is identified as a cause of keratitis.

Molecular identification. Although it is easy to use the databases to identify the unknown sequences, the interpretation of the corresponding results is challenging. Identification of strains was performed using databases of the CBS and NCBI. As Table 1 represents, the most common isolates belonged to FSSC (n = 17, 70.8%), followed by *Fusarium fujikuroi* species complex (FFSC) (n=4, 16.6%), and *F. oxysporum* (n=3, 12.5%). All 17 identified isolates of the complex were *F. solani*. FFSC, including *F. proliferatum* (n=1), *F. globosum* (n=1), *F. verticillioides* (n=1), and *F. brev-icatenulatum* (n=1), respectively. Only *F. oxysporum* was observed in the FOSC members.

Phylogenetic analyses. Phylogenetic analyses and species limits of 27 isolates were performed using the two loci *RPB2* and *TEF1*. In general, 1523 bp of aligned nucleotide sequence was studied. The highest and lowest sequences belonged to FFSC for the *TEF1* gene, *F. oxysporum*, and FFSC for the *RPB2* region, respectively.

The discriminatory power of the two loci *RPB2* and *TEF1* for *F. solani, F. oxysporum*, and FFSC was estimated to be 1.

MP analyses of *TEF1* and *RPB2* genes revealed that the highest informative sites are present in *F. solani* species. Overall, the most informative sites were seen in the *TEF1* gene.

The phylogenetic tree drawn using the RaxML phylogenetic analyses of the combined data set is shown in Fig. 1. Also, The FSSC clade received the highest possible support. FFSC clade is phylogenetically and most closely related to *F. oxysporum*. Also, in the consensus tree constructed, the *F. globosum* of the FFSC was closer to *F. solani* (FSSC) and the *F. verticillioides* were closer to the *F. oxysporum*. The *F. oxysporum* clade takes a basal position to the aforementioned clades.

DISCUSSION

Since most of the *Fusarium* spp. are seen in the complex form and sequence of a sole gene can be challenging, therefore in the current study, a scheme was developed from two genes, namely *TEF1* and RPB2. Sequencing was used to examine the molecular diversity among the *Fusarium* spp. isolated from patients with keratitis. According to the results ob-

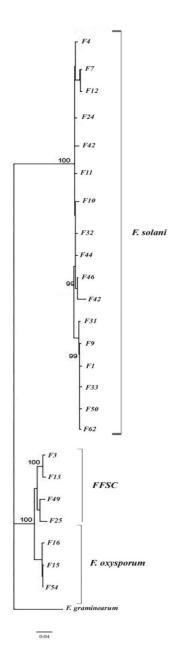


Fig. 1. The consensus tree constructed by the Maximum likelihood analysis from the combined two-locus *TEF1* and *RPB2* of the 24 clinical isolates and three reference strains. Bootstrap branch supports above 95% are shown. *F. graminearum* was used as an outgroup to root the dendrogram.

tained in this study, the dominant species of keratitis infection was identified to be *F. solani* from FSSC (70.8%), which is supported by da Rosa et al. (8) and Sun et al. (28). The results of da Rosa et al. (8) study were different only in that *F. solani* was followed by FOSC, while in the present study and Sun et al. study (28), *F. solani* was followed by FFSC as the dominant species. The results may be attributable to the low number of samples.

In this study, to increase the accuracy concerning the results obtained from the sequence in forward and reverse, as well as to shorten the length of the RPB2 area examined, a new primer was designed. A comparison of the discriminatory power obtained in this study with that of the previous studies (21, 29) shows this primer is sufficiently efficient.

The results of the genotypes *TEF1* of FSSC showed that almost every isolate has an exclusive sequence (single genetically).

The resulting phylogenetic trees showed a high degree of genetic similarity between FFSC which is recognizable from other complexes. Also, a comparison of the dendrogram obtained from the combination of two genes with the dendrogram derived from only individual *TEF1* tree and individual *RPB2* tree (results were not shown) showed high levels of similarity.

Sequencing of the *TEF1* and *RPB2* genes manifested that such genes can differentiate between the FSSC members as well it does with the FGSC members. The study of Sun et al. (28) confirms the afore-mentioned result.

The MP analysis showed no parsimony-informative for *F. oxysporum* in *TEF1* and *RPB2* genes. The most parsimony informative sites were observed in FSSC, in which, the *TEF1* gene had the most informative site (Table 3). However, the most informative gene was *TEF1*. In a similar vein, the study conducted by O'Donnell et al. (10, 20) confirms our results.

CONCLUSION

Given that sequence of a sole gene can be challenging and on the other hand, due to the high resistance to antifungal drugs, identification of *Fusarium* species is of substantial significance. Furthermore, accurate identification of species is important when it comes to evolution of taxonomy, the discovery of new fungal species associated with clinical infections, and a better understanding of their epidemiology and diagnosis. Therefore, in this study, by designing a novel set of primers for the *RPB2* area and using *TEF1* primer, we were able to differentiate 24 *Fusarium* spp. isolated from patients with keratitis. The results of this study showed a very high diversity of *Fusarium* spp. using the designed primers.

Locus	Fusarium isolates	Amplicon size (bp)	SNPs (No.)	Allele types	PIC (No.)	PIC %
TEF1	FSSC	741	73	17	31	4.1
	FFSC	717	85	1	22	3
	F. oxysporum	712	13	3	0	0
RPB2	FSSC	457	92	17	23	4.4
	FFSC	447	8	1	0	0
	F. oxysporum	447	6	3	0	0

Table 3. Characteristics obtained from the MP analysis and phylogenetic analysis of the five housekeeping loci studied

SNP, single-nucleotide polymorphism; PIC; parsimony-informative character

REFERENCES

- Oliveira dos Santos C, Kolwijck E, van der Lee HA, Tehupeiory-Kooreman MC, Al-Hatmi AMS, Matayan E, et al. *In vitro* activity of chlorhexidine compared with seven antifungal agents against 98 *Fusarium* isolates recovered from fungal keratitis patients. *Antimicrob Agents Chemother* 2019; 63(8): e02669-18.
- Spierer O, Dugar J, Miller D, O'Brien TP. Comparative antifungal susceptibility analysis of *Candida albicans* versus non-albicans *Candida corneal* isolates. *Cornea* 2015; 34: 576-579.
- Tighnavard Bejarbane R, Daie Ghazvini R, Mahmoudi S, Soltani Moghaddam R, Safara M, Bakhshi H, et al. Diagnosis of fungal keratitis in patients with corneal lesions at Amiralmomenin hospital in Rasht, Iran. *TUMSJ* 2017; 75: 374-380.
- Garg P, Roy A, Roy S. Update on fungal keratitis. *Curr* Opin Ophthalmol 2016; 27: 333-339.
- Haghani I, Amirinia F, Nowroozpoor-Dailami K, Shokohi T. Detection of fungi by conventional methods and semi-nested PCR in patients with presumed fungal keratitis. *Curr Med Mycol* 2015; 1: 31-38.
- Badali H, Cañete-Gibas C, Patterson H, Sanders C, Mermella B, Garcia V, et all. *In vitro* activity of olorofim against clinical isolates of the *Fusarium oxysporum* and *Fusarium solani* species complexes. *Mycoses* 2021; 64: 748-752.
- Ahmadikia K, Aghaei Gharehbolagh S, Fallah B, Naeimi Eshkaleti M, Malekifar P, Rahsepar S, et al. Distribution, prevalence, and causative agents of fungal keratitis: a systematic review and meta-analysis (1990 to 2020). *Front Cell Infect Microbiol* 2021; 11: 698780.
- Dallé da Rosa P, Nunes A, Borges R, Batista B, Fuentefria AM, Goldani LZ. *In vitro* susceptibility and multilocus sequence typing of *Fusarium* isolates causing keratitis. *J Mycol Med* 2018; 28: 482-485.
- Badali H, Patterson HP, Sanders CJ, Mermella B, Gibas CFC, Ibrahim AS, et all. Manogepix, the active moiety of the investigational agent Fosmanogepix, demonstrates *in vitro* activity against members of the

Fusarium oxysporum and *Fusarium solani* species complexes. *Antimicrob Agents Chemother* 2021; 65:(6) e02343-20.

- O'Donnell K, Sutton DA, Rinaldi MG, Gueidan C, Crous PW, Geiser DM. Novel multilocus sequence typing scheme reveals high genetic diversity of human pathogenic members of the *Fusarium incarnatum-F. equiseti* and *F. chlamydosporum* species complexes within the United States. *J Clin Microbiol* 2009; 47: 3851-3861.
- Oechsler RA, Yamanaka TM, Bispo PJ, Sartori J, Yu MC, Melo AS, et al. *Fusarium keratitis* in Brazil: genotyping, *in vitro* susceptibilities, and clinical outcomes. *Clin Ophthalmol* 2013; 7: 1693-1701.
- 12. O'Donnell K, Sutton DA, Rinaldi MG, Magnon KC, Cox PA, Revankar SG, et al. Genetic diversity of human pathogenic members of the *Fusarium oxysporum* complex inferred from multilocus DNA sequence data and amplified fragment length polymorphism analyses: evidence for the recent dispersion of a geographically widespread clonal lineage and nosocomial origin. *J Clin Microbiol* 2004; 42: 5109-5120.
- Sandoval-Denis M, Lombard L, Crous PW. Back to the roots: a reappraisal of Neocosmospora. *Persoonia* 2019; 43: 90-185.
- 14. Summerbell RC, Schroers HJ. Analysis of phylogenetic relationship of *Cylindrocarpon lichenicola* and *Acremonium falciforme* to the *Fusarium solani* species complex and a review of similarities in the spectrum of opportunistic infections caused by these fungi. *J Clin Microbiol* 2002; 40: 2866-2875.
- Zhang N, O'Donnell K, Sutton DA, Nalim FA, Summerbell RC, Padhye AA, et al. Members of the *Fusari-um solani* species complex that cause infections in both humans and plants are common in the environment. *J Clin Microbiol* 2006; 44: 2186-2190.
- 16. Schroers HJ, Samuels GJ, Zhang N, Short DP, Juba J, Geiser DM. Epitypification of *Fusisporium (Fusarium) solani* and its assignment to a common phylogenetic species in the *Fusarium solani* species complex. *Mycologia* 2016; 108: 806-819.

- Al-Hatmi AM, van Diepeningen AD, Curfs-Breuker I, de Hoog GS, Meis JF. Specific antifungal susceptibility profiles of opportunists in the *Fusarium fujikuroi* complex. *J Antimicrob Chemother* 2015; 70: 1068-1071.
- O'Donnell K, Sutton DA, Fothergill A, McCarthy D, Rinaldi MG, Brandt ME, et al. Molecular phylogenetic diversity, multilocus haplotype nomenclature, and *in vitro* antifungal resistance within the *Fusarium solani* species complex. *J Clin Microbiol* 2008; 46: 2477-2490.
- Schroers HJ, O'Donnell K, Lamprecht SC, Kammeyer PL, Johnson S, Sutton DA, et al. Taxonomy and phylogeny of the *Fusarium dimerum* species group. *Mycologia* 2009; 101: 44-70.
- 20. O'Donnell K, Gueidan C, Sink S, Johnston PR, Crous PW, Glenn A, et al. A two-locus DNA sequence database for typing plant and human pathogens within the *Fusarium oxysporum* species complex. *Fungal Genet Biol* 2009; 46: 936-948.
- O'Donnell K, Ward TJ, Robert VA, Crous PW, Geiser DM, Kang S. DNA sequence-based identification of *Fusarium*: current status and future directions. *Phytoparasitica* 2015; 43: 583-595.
- Thomas PA, Kaliamurthy J. Mycotic keratitis: epidemiology, diagnosis and management. *Clin Microbiol Infect* 2013; 19: 210-220.
- 23. Salehi Z, Shams-Ghahfarokhi M, Razzaghi-Abyaneh M. Antifungal drug susceptibility profile of clinically

important dermatophytes and determination of point mutations in terbinafine-resistant isolates. *Eur J Clin Microbiol Infect Dis* 2018; 37: 1841-1846.

- 24. Senatore MT, Ward TJ, Cappelletti E, Beccari G, Mc-Cormick SP, Busman M, et al. Species diversity and mycotoxin production by members of the *Fusarium tricinctum* species complex associated with *Fusarium* head blight of wheat and barley in Italy. *Int J Food Microbiol* 2021; 358: 109298.
- Kumar S, Tamura K, Jakobsen IB, Nei M. MEGA2: molecular evolutionary genetics analysis software. *Bioinformatics* 2001; 17: 1244-1245.
- Stamatakis A. RAxML version 8: a tool for phylogenetic analysis and post-analysis of large phylogenies. *Bioinformatics* 2014; 30: 1312-1313.
- Hunter PR. Reproducibility and indices of discriminatory power of microbial typing methods. J Clin Microbiol 1990; 28: 1903-1905.
- 28. Sun S, Lui Q, Han L, Ma Q, He S, Li X, et al. Identification and characterization of *Fusarium proliferatum*, a new species of fungi that cause fungal keratitis. *Sci Rep* 2018; 8: 4859.
- O'Donnell K, Sutton DA, Rinaldi MG, Sarver BAJ, Balajee SA, Schroers HJ, et al. Internet-accessible dna sequence database for identifying Fusaria from human and animal infections. *J Clin Microbiol* 2010; 48: 3708-3718.