Lytic bacteriophages facilitate antibiotic sensitization of Enterococcus faecium Gregory S. Canfield, a,b Anushila Chatterjee, Mihnea R. Mangalea, Emma K. Sheriff, Micah Keidan, b Sara W. McBride, b,* Bruce D. McCollister, a and Breck A. Duerkopb,# ^aDivision of Infectious Diseases, University of Colorado School of Medicine, Aurora, Colorado, USA ^bDepartment of Immunology and Microbiology, University of Colorado School of Medicine, Aurora, Colorado, USA *Correspondence: Breck A. Duerkop breck.duerkop@cuanschutz.edu *Current address: Salk Institute, La Jolla, California, USA Running Title: Phages enhance antibiotic susceptibility of *E. faecium* Key words: bacteriophages, Enterococcus, antibiotic resistance, phage-bacteria interactions, phage resistance, cephalosporin, beta-lactams

Abstract

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Enterococcus faecium, a commensal of the human intestine, has emerged as a hospitaladapted, multi-drug resistant (MDR) pathogen. Bacteriophages (phages), natural predators of bacteria, have regained attention as therapeutics to stem the rise of MDR bacteria. Despite their potential to curtail MDR E. faecium infections, the molecular events governing E. faecium-phage interactions remain largely unknown. Such interactions are important to delineate because phage selective pressure imposed on E. faecium will undoubtedly result in phage resistance phenotypes that could threaten the efficacy of phage therapy. In an effort to understand the emergence of phage resistance in E. faecium, three newly isolated lytic phages were used to demonstrate that E. faecium phage resistance is conferred through an array of cell wall-associated molecules, including secreted antigen A (SagA), enterococcal polysaccharide antigen (Epa), wall teichoic acids, capsule, and an argininearginine-aspartate (RDD) protein of unknown function. We find that capsule and Epa are important for robust phage adsorption and that phage resistance mutations in sagA, epaR, and epaX enhance E. faecium susceptibility to ceftriaxone, an antibiotic normally ineffective due to its low affinity for enterococcal penicillin binding proteins. Consistent with these findings, we provide evidence that phages potently synergize with cell wall (ceftriaxone and ampicillin) and membrane-acting (daptomycin) antimicrobials to slow or completely inhibit the growth of E. faecium. Our work demonstrates that the evolution of phage resistance comes with fitness defects resulting in drug sensitization and that lytic phages could potentially serve as antimicrobial adjuvants in treating *E. faecium* infections.

Introduction.

Enterococci are intestinal commensal bacteria and important opportunistic human pathogens (1). Of the two most clinically relevant enterococcal species, *Enterococcus faecalis* and *Enterococcus faecium*, the emergence of multidrug resistance is observed most commonly with *E. faecium* (2). Considering that effective antibiotics with activity against multidrug-resistant (MDR) *E. faecium* are limited, clinicians are often forced to use antibiotic combination therapy to treat these infections (3). Although this approach can be life-saving, these regimens increase the risk of patient adverse drug events, drug-drug interactions, dysbiosis, and may fail to cure the infection (4). Rising from desperate treatment dilemmas like these are several examples of the successful use of phage therapy to treat MDR bacterial infections in humans (5-8). These success-stories have motivated renewed interest in the use of phage therapy for treatment of bacterial infections. Despite this motivation, relatively little is understood about the bacterial receptors exploited by phages to infect their bacterial hosts and the counter-measures employed by bacteria to avoid phage infection. We believe that understanding the molecular events that lead to phage resistance in MDR bacteria may help mitigate the threat of phage therapy failure.

Recently, our group and others have begun to elucidate the molecular mechanisms that enable successful phage infection of enterococci and the bulk of these studies were performed for *E. faecalis* and its interactions with tailed dsDNA phages. (9-15). The molecular mechanisms enabling phage infection in *E. faecium* are not well studied. Our knowledge of potential *E. faecium* phage receptors comes from an *in vitro* study where phage and *E. faecium* co-existence was challenged through multiple passages in laboratory media (12). Whole genome sequencing of phage resistant survivors showed mutations in the capsule tyrosine kinase *ywqD2* (equivalent to *wze*), RNA polymerase β-subunit (*rpoC*), several predicted hydrolases, and a cell wall precursor enzyme. It was proposed that these mutations conferred phage resistance, though direct genetic testing of this hypothesis was not performed. Tandem-duplications in a putative phage tail fiber gene (EFV12PHI1_98) supported evolution of phages that overcame adaptive changes that resulted in phage resistance of *E. faecium* (12).

In this work, we expand on our understanding of phage-enterococcal interactions by identifying genes important for lytic phage infection of E. faecium. We have isolated three previously uncharacterized E. faecium-specific phages and show that each belong to the Siphoviridae morphotype of the Caudovirales and resemble previously described lytic enterococcal phages (9-11, 14). Protein coding sequence comparison to other enterococcal phages reveals that one phage belongs to a novel enterococcal phage orthocluster and the remaining two phages belong to previously described enterococcal phage orthoclusters (16). To identify the molecular determinants of *E. faecium* phage infection, we used these three phages to generate a collection of *E. faecium* phage resistant mutants. Phage resistance mutations mapped to genes encoding the cell wall hydrolase secreted antigen A (sagA), putative teichoic acid precursors of the enterococcal polysaccharide antigen (epa), capsule biosynthesis enzymes, and an arginine-aspartate-aspartate (RDD) protein. Capsule and putative teichoic acid biosynthesis genes, but not SagA, were shown to mediate phage adsorption. Considering that all of the genes identified are involved in cell wall biochemistry and/or architecture, we determined if these phage resistance mutations result in fitness tradeoffs that lead to altered antimicrobial susceptibility. Phage resistant strains harboring mutations in sagA, epaX, and epaR showed enhanced susceptibility to cell wall and/or membrane-acting antibiotics, including ceftriaxone, ampicillin, and daptomycin. We discovered that combining phages with cell wall or membrane-acting antimicrobials acts synergistically to kill E. faecium. These findings suggest lytic phages might be leveraged as antibiotic adjuvants to offset the emergence of multi-drug resistant strains of E. faecium in hospitalized patients.

Results.

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Genome sequence analysis and morphology of novel lytic *E. faecium* bacteriophages. *E. faecium* phages 9181, 9183 and 9184 were isolated from raw sewage by plaque assay using *E. faecium* clade B strains Com12 and 1,141,733 (17). Evaluation of phage morphology by TEM revealed that all three phages were non-contractile tailed phages characteristic of the *Siphoviridae* morphotype (Fig. 1) (18). DNA sequence analysis demonstrated that the phage 9181, 9183 and 9184 genomes are

71,854bp, 86,301bp, and 44,601bp in length, respectively (Fig. 1). The genomes of phages 9181 and 9183 were assembled into single contigs. The phage 9184 genome assembled into two contigs, with a 53-bp sequencing gap located near the 5' end of a predicted BppU-family phage baseplate upper protein. In total, 123, 128, and 73 open reading frames (ORFs) were identified for phages 9181, 9183 and 9184, respectively (Table S1). Genome modularity based on predicted gene function was observed for each phage genome, however, for phage 9181 the lysin and holin genes are located at the 5' and 3' termini of the genome (Fig. 1). Functional classifications, consisting of replication or biosynthesis, DNA packaging, phage particle morphogenesis, nucleic acid restriction and modification, host cell lysis, sensory function, sugar transferase and potential β-lactamase, could be predicted for approximately 30%, 47%, and 48% of the phage 9181, 9183, and 9184 ORFs, respectively (Table S1). The remaining genes were predicted to be hypothetical genes or genes containing domains of unknown function. The absence of genes encoding Cro repressor-family proteins, toxin-antitoxin genes, and putative integrase genes (except for phage 9183, discussed below) indicates that that phages 9181, 9183, and 9184 are obligately lytic.

Comparative genome analysis places phages 9181, 9183, and 9184 in distinct orthoclusters.

Comparative genome analysis of phages 9181, 9183 and 9184 was performed with all publicly available enterococcal phage genomes using OrthoMCL, an algorithm that identifies clusters of orthologous proteins from at least two phages enabling phylogenetic categorization of phage proteins into "orthoclusters" (16, 19). Of the 10 enterococcal phage orthoclusters originally identified by Bolocan et al. (16), OrthoMCL clustering places phage 9184 into orthocluster I and phage 9183 into orthocluster X (Fig. 2). Phage 9181 forms a new orthocluster that we have named orthocluster XI (Fig. 2). Whole genome alignments of phages 9183 and 9184 to their nearest orthocluster neighbors, VPE25 and VFW for 9183 and vB_EfaS-DELF1 and IME-EFm5 for 9184, revealed conserved protein sequence identity and similar genome organization (Fig. S1A and S1B). Conversely, phage 9181 shared little protein sequence identity and genome organization to its nearest neighbors, phage EFC-1 and phage FL4A, supporting its placement as the sole member of a new orthocluster (Fig. S1C). Higher protein sequence

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identity and more similar genome organization was observed for phages belonging to the same orthocluster rather than phages belonging to different orthoclusters. Since the publication of Bolocan et al., an additional 45 phage genomes have been made publically available, resulting in the identification of a 12th orthocluster consisting of phages EFA-1 and EFA-2, two recently described phages of unknown morphology (Fig. 2). Consistent with prior observations of orthocluster I phages, a β-lactamase domain-containing protein (ORF35) was found in the genome of phage 9184 (Fig. 1 and Table S1). Similar to phages in orthocluster X, an integrase-family recombinase was found in the genome of phage 9183 (Table S1). However, prior evidence demonstrates that other members of this orthocluster are unable to lysogenize their *E. faecalis* host (11).

E. faecium phages have broad and narrow tropism for laboratory and clinical E. faecium isolates. We next sought to determine the host range of each phage against strains of E. faecium and E. faecalis. To achieve this, a phage susceptibility assay was performed by spotting 10-fold seriallydiluted enterococcal cultures on Todd-Hewitt broth (THB) agar embedded with phages 9181, 9183 or 9184. A panel of 10 laboratory E. faecium isolates and 11 contemporary MDR clinical E. faecium isolates were selected for this analysis (Table S4) (17). An E. faecium strain was considered phagesusceptible if less than 1 x 10⁵ CFU/mL were recovered following phage exposure, representing greater than 4-log of bacterial killing. Phages 9181 and 9183 demonstrated narrow host ranges against laboratory E. faecium strains (Fig. 3A). Besides the host strain on which the phage was isolated (Com12 for phage 9181 and 1,141,733 for phage 9183), only E. faecium Com15 was susceptible to phage 9181, while no other E. faecium laboratory strain tested was susceptible to phage 9183. Contrarily, 60% of the laboratory *E. faecium* strains were susceptible to phage 9184 (Fig. 3A). There was an absence of susceptibility to phage 9181 and 9183, and reduced susceptibility (~36%) to phage 9184 for the contemporary MDR clinical E. faecium isolates (Fig. 3B). Together these data show that phage 9184 has a broader host range compared to phages 9181 and 9183. Interestingly, E. faecium 1,231,501 and 1,230,933, the latter of which is multi-drug resistant, lacked susceptibility to phage 9181, 9183 and 9184. None of the three phages were capable of infecting any of the 10 clinical E. faecalis

strains tested (designated UCH12-20 in Table S4), suggesting that these phages are specific for *E. faecium*.

Phage predation elicits spontaneous and stable phage resistance in *E. faecium*. To identify *E. faecium* genes that are involved in phage infection, we isolated spontaneous phage-resistant *E. faecium* strains following exposure to phages 9181, 9183 and 9184. Phage-resistant isolates were identified by plating stationary phase cultures of *E. faecium* Com12 and 1,141,733 on THB agar embedded with phages 9181, 9183, or 9184. Colonies that arose on these plates represented potential phage-resistant colonies. To confirm the stability of the phage-resistant phenotype, a colony was serially passaged daily for 3 days on THB agar before re-streaking again on phage embedded THB agar. The growth of a strain in the presence of phage following serial passage suggested a stable phage-resistant phenotype (Fig. 4A-C). For phages 9181 and 9183 resistant *E. faecium* strains (denoted 81R3-8 and 83R1-8, respectively) we observed bacterial growth in the presence of phages to levels that were similar to bacterial growth in the absence of phages indicating a strong resistance phenotype (Fig. 4A, 4B and Fig. S2A, S2B, S2D, S2E). However, for phage 9184 we observed limited phage resistance in all but one presumed *E. faecium* phage resistant isolate (Fig. 4C and Fig. S2C, S2F) suggesting that robust resistance to phage 9184 may be multifactorial.

E. faecium phage resistance mutations occur in cell wall biosynthesis and architecture genes and a gene encoding a transmembrane protein. To identify genetic changes conferring a phage resistance phenotype, we performed whole genome DNA sequencing of phage resistant and parental E. faecium strains. We observed unique and conserved genome mutations in strains that had developed phage resistance (Fig. 5A-D and Table S2).

Five of six mutations identified in phage 9181-resistant strains were detected in *efvg_rs16270*, which in the *E. faecium* Com12 reference genome is annotated as a hypothetical protein and was flanked by a 5' sequencing gap. Closure of this sequencing gap by PCR and amplicon sequencing revealed that *efvg_rs16270* encodes the *E. faecium* secreted antigen A (SagA) protein. Whole genome

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sequencing showed that all sagA mutations localized at or near the peptidoglycan clamp or active site residues of the NIpC P60 hydrolase domain of SagA, which was recently shown to function as an endopeptidase that cleaves crosslinked Lys-type peptidoglycan fragments (Fig. 5A and Table S2A) (20). To determine the impact of sagA mutations on protein structure and function, each single nucleotide polymorphism-associated sagA mutant was assessed by Missense 3D analysis (21). BLASTp alignment of SagA from E. faecium Com12 and Com15 showed 95% identity along the entire length of the protein and E. faecium Com12 and Com15 exhibit identical protein homology in the NIpC P60 hydrolase domain (Fig. S3), suggesting that SagA should be functionally conserved between these two stains. Therefore, we used the E. faecium Com15 NlpC P60 crystal structure (PDB 6B8C) in Missense 3D to assess the impact of residue changes on the structure and function of NIpC P60 hydrolase in our sagA mutant strains (20). Except for one SagA mutant (81R8; G435V), no structural damaging mutations were found. Given that the potential for structural damage in our sagA mutants was low, the observation that all mutations occurred in the NIpC P60 hydrolase domain, and the fact that sagA has been shown to be an essential gene in E. faecium, we suspect that these sagA mutants represent hypomorphs whose expression levels or catalytic activity are reduced (20, 22, 23). Interestingly, hypomorphs have been observed in the E. faecalis SagA-like peptidoglycan hydrolase SalB (24). We complemented the sagA mutations in phage 9181 resistant strains using a construct previously generated, pAM401-sagA, which carries the sagA gene and its native promoter from E. faecium Com15 (22). For all sagA mutants, complementation with pAM401-sagA restored phage susceptibility (Fig. S4A). This results suggests that non-crosslinked peptidoglycan in E. faecium Com12 is essential for phage 9181 infection.

One phage 9181-resistant strain (81R7) harbored mutations in capsule tyrosine kinase (*wze*) and topoisomerase III (*topB*) genes and lacked a *sagA* mutation (Table S2A). Similarly, sequencing analysis of all 9184 resistant strains (84R1-6) revealed an assortment of mutations in the capsule biosynthesis locus. Nonsense, insertion and deletion mutations were detected in *wze*, capsule aminotransferase (*efsg_rs08090*), capsule polymerase (*wzy*), and capsule nucleotide sugar dehydrogenase (*efsg_rs08120*) genes (Fig. 5B and Table S2C). Prior co-evolution experiments

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between the Myoviridae phage 1 and E. faecium TX1330 revealed a propensity for wze mutations within an evolved phage resistant E. faecium population (12). Our data is consistent with this observation and suggests that E. faecium capsule might serve as a possible receptor and/or adsorption factor for phages 9181 and 9184. Despite the abundance of capsule mutations detected among our mutant strains, complementation of capsule alleles in capsule mutants minimally restored or failed (Fig. S4B-C) to restore phage 9181 and 9184 susceptibility. This result suggests that capsule is not a major receptor mediating phage resistance to phage 9181 (Fig. S4B) and only weakly promotes phage 9184 resistance (Fig. S4C). These results emphasize the importance of other non-capsule associated mutations in conferring phage-resistance to phage 9181 (sagA) and phage 9184. We attempted to address the non-capsule associated mutation in strain 81R7 (topB) and its involvement in phage 9181 resistance, however, all attempts to clone topB into the expression vector pLZ12A resulted in truncated topB inserts following transformation into Escherichia coli, suggesting that constitutive expression of E. faecium topB may be toxic to E. coli. Similarly, to address the role of the non-capsule mutation detected in 84R6, which exhibited a robust phage 9184-resistance phenotype, a predicted arginine-aspartateaspartate gene (rdd), this gene was successfully cloned into pLZ12A vet transformation of this construct into E. faecium 84R6 was unsuccessful despite repeated attempts. Given the ease with which pLZ12A-wze and empty pLZ12A vector were transformed into E. faecium 84R6 and our repeated failure to successfully recover transformants harboring pLZ12A-rdd suggests that over-expression of rdd in E. faecium 84R6 may be lethal.

Analysis of *E. faecium* phage 9183 resistant strains (83R1-8) identified mutations in *epa* genes, *epaR* and *epaX* (Fig. 5D and Table S2B). Mutation of *epaR* and *epaX* results in *E. faecalis* phage resistance (9, 10, 14) and recently it was determined that the *epaR* and *epaX* genes of *E. faecalis* V583 participate in wall teichoic acid biosynthesis (25). Considering that mutation of the *epaX* homologs *epaOX* and *epaOX2* from *E. faecalis* OG1RF conferred phage VPE25-resistance by limiting phage adsorption (10, 11), we suspect that teichoic acids also mediate adsorption of phage 9183 to *E. faecium* 1,141,733. We were surprised that we did not find any phage 9183 resistant strains with mutations in PIP_{FF}, given the high protein homology and similar genome organization observed

between phages 9183, VPE25 and VFW, the latter two which use PIP_{EF} as a receptor (11) (Fig. 2). To confirm that mutations in the *epa* locus confer phage resistance in *E. faecium*, we pursued a similar complementation strategy as above with the *epaR* and *epaX* mutants identified in the phage 9183-resistant mutants. All phage 9183-resistant mutants complemented with either the *epaR* or *epaX* were restored for phage susceptibility (Fig. S4D). Given the importance of D-alanylation in teichoic acid biosynthesis, we performed complementation with pLZ12A-*dltA* in the *epaX* and *dltA* double mutant (83R7). We observed that only pLZ12A-*epaX*, not pLZ12A-*dltA*, was capable of restoring phage susceptibility in 83R7 (Fig. S4D). Considering that EpaX acts upstream of DltA in the biosynthesis of teichoic acids (25), these data suggest that *dltA* is dispensable during phage infection, lending further support to the notion that the *epa* variable locus involved in teichoic acid biosynthesis is a driver of *E. faecium* infection by phage 9183.

E. faecium phage resistant mutants have phage adsorption defects. To determine if phage adsorption defects occur due to phage resistance, we sought to quantify phage 9181, 9183, and 9184 adsorption to wild type and phage resistant *E.* faecium strains using a phage attachment assay (9, 10, 14). For phage 9181 resistant strains, we observed no significant change in adsorption to *sagA* mutant strain 81R5 and a modest change in phage adsorption to the phage resistant strain 81R7 harboring a *wze* and *topB* mutations (Fig. 6A). This result suggests that mutation of *sagA* in *E. faecium* Com12 has little to no effect on phage 9181 adsorption. It is possible that mutation of *wze* contributes to phage binding, however, we cannot rule out the possibility that mutation of *topB* in this mutant background causes transcriptional or translational changes in surface expressed molecules that result in the modest phage 9181 adsorption phenotype (Fig. 6A).

Previous work has demonstrated that *epa* mutants exhibit phage adsorption defects in *E. faecalis* (9, 10, 13, 14). Since we observed *epa* mutations that conferred phage 9183 resistance, we sought to determine if *epa* mutations might promote a similar phenotype in *E. faecium*. We observed a reduction in phage 9183 adsorption to mutants possessing *epaR* (83R6 and 83R8) and *epaX* (83R4 and 83R7) mutations compared with the parental strain (Fig. 6B). Although *epaX* mutants 83R4 and

83R7 were noted to also have mutations in *gdh* and *dltA*, respectively, we suspect that EpaX was the driver of this phenotype because of the known role of *epaX* homolog mutations to inhibit phage VPE25 adsorption to *E. faecalis* and that EpaX functions upstream of DltA in the biosynthesis of teichoic acid (10, 25). Taken together, these results suggest that mutations in the *epa* locus of *E. faecium* lessen phage 9183 adsorption to the surface of its host strain.

To determine if mutations in the capsule locus facilitated phage 9184 adsorption defects, we performed phage 9184 adsorption assays using wild type and phage 9184 resistant mutants. We observed significant deficits in phage adsorption to strains harboring mutations in capsule polymerase (84R1), nucleotide sugar dehydrogenase (84R4), and tyrosine kinase (84R6) in comparison to the parental strain (Fig. 6C). Given that 84R6 also harbors an *rdd* mutation which encodes a putative transmembrane protein, we cannot definitively conclude that the adsorption deficit was related to the capsule tyrosine mutation, as this mutation only manifested as a mild adsorption defect for phage 9181 (Fig. 6A). Considering the adsorption defect is greater for the capsule mutants raised against phages 9184 compared to the phage 9181 capsule mutant 81R7, it is possible that additional surface associated molecules mediate the attachment of phage 9181 to *E. faecium* cells. Together, these data indicate that *E. faecium* capsule contributes to phage adsorption and may be phage specific.

E. faecium phage resistance enhances β-lactam and lipopeptide susceptibility. With renewed interest focused on utilizing lytic phages for the treatment of bacterial infections and the observation that phage resistance can be a fitness tradeoff under antibiotic pressure (26, 27), we sought to determine the impact of *E. faecium* phage resistance on antimicrobial susceptibility. We performed antimicrobial susceptibility screening using E-test strips for the phage 9181, 9183, and 9184 resistant mutants compared to their parental strains to determine if phage resistance altered *E. faecium* antimicrobial susceptibility. For phage 9181 resistant mutants, we observed a 2-5 fold reduction in the minimum inhibitory concentration (MIC) of ampicillin and an 8-32 fold reduction in the MIC of ceftriaxone (Table S3A). Interestingly, the enhancement of ampicillin and ceftriaxone susceptibility correlated with phage 9181 resistant mutants harboring mutations in *sagA*, and not *wze* or *topB*. For

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phage 9183 resistant mutants, we also observed a 5-8 fold reduction in the MIC of ampicillin and 16-128 fold reduction in the MIC of ceftriaxone (Table S3B). Additionally, we noted a 1.5-3 fold reduction in the MIC of daptomycin, a lipopeptide class antimicrobial, which was not observed for the phage 9181 resistant mutants. These results suggest that the acquisition of phage resistance via mutation of *sagA* and *epa* genes in *E. faecium* is a fitness defect that manifests as enhanced β-lactam susceptibility.

No phage capsule mutants showed a significant difference in antimicrobial susceptibility to β -lactams or lipopeptides, suggesting that mutations to the *E. faecium* capsule locus and *rdd* avoid the cost of increased antimicrobial susceptibility (Table S3C).

Lytic phages synergize with β-lactam and lipopeptide antimicrobials to enhance the killing of E. faecium. Considering the antibiotic fitness cost associated with phage resistance in E. faecium, we hypothesized that phages 9181 and 9183 would be capable of synergizing with ampicillin, ceftriaxone, and daptomycin to kill E. faecium. To address this question, we performed phage-antibiotic synergy assays where E. faecium was grown in the presence of phages alone, sub-inhibitory concentrations of ampicillin, ceftriaxone, or daptomycin alone, or a combination of phage and a sub-inhibitory concentration of antibiotics (Fig. 7A-E). For all three antibiotics, we observed that the combination of phage and sub-inhibitory concentrations of antibiotics were able to inhibit the growth of E. faecium better than phage or antibiotic alone. Given the absence of growth inhibition of E. faecium in the presence of sub-inhibitory concentrations of antibiotics alone, this result is consistent with a synergistic antimicrobial interaction between phages and antibiotics. Interestingly, the synergy observed between phages 9181 and 9183 and ceftriaxone appeared more potent than the synergy observed between these phages and ampicillin (Fig. 7A-D). A dose-response relationship emerged when ampicillin was combined phages 9181 and 9183 where decreasing concentrations of ampicillin enabled varying degrees of bacterial population recovery (Fig. 7A-B). These data suggest that phages 9181 and 9183 could serve as useful adjuvants in combination with β-lactams for the treatment of E. faecium infections by restoring the susceptibility to *E. faecium* strains harboring intrinsic β-lactam resistance. We also observed that the combination of phage 9183 and daptomycin slowed the growth of E. faecium

1,141,733 more than phage 9183 alone or daptomycin alone (Fig. 7E). This suggests that phage 9183 also synergizes with daptomycin to inhibit *E. faecium* 1,141,733. These results are consistent with those observed by Morrisette et al. who observed synergy between the *Myoviridae* phage 113 and β -lactam (ampicillin, ertapenem and ceftaroline) and lipopeptide antimicrobials against daptomycin-resistant and tolerant strains of *E. faecium* (28).

Discussion.

Considering the treatment pitfalls due to worsening drug resistance in *E. faecium* and other bacterial pathogens, the biomedical community is revisiting the use of phage therapy. Since phage therapy's departure from 20th century Western Medicine, new technologies have emerged that have facilitated fine-scale resolution of phage-bacterial molecular interactions. Despite these advancements, for many bacteria, including *E. faecium*, the molecular factors exploited by phages for infection remain largely understudied (12). We believe that studying the molecular interactions of phages with their *E. faecium* hosts will inform rational approaches for future phage therapies against this pathogen.

In this work, we describe three novel lytic phages of *E. faecium*. Using protein coding orthology, we show that one of these phages, phage 9181, forms a new orthocluster from the ten previously described enterococcal phage orthoclusters (16). We show that these phages are specific for *E. faecium* and exhibit broad and narrow strain tropism. Using whole genome sequencing and comparative genomics, we provide evidence that *sagA*, *epa*, and capsule biosynthesis genes are important for phage infection of *E. faecium*. We were unable to fully assess if the genes *topB* and *rdd* are important in mediating phage 9181 and phage 9184 resistance, respectively. We suspect that these genes aid in phage-*E.faecium* interactions. Consistent with previous observations in *E. faecalis* (9, 10, 13, 14), we show that mutations in *epaR* and *epaX* limit phage 9183 adsorption to *E. faecium*. Similarly, we show for the first time that mutations in the capsule locus, which is absent in *E. faecalis* (17), limits phage 9181 and 9184 adsorption to *E. faecium*.

Our investigation into fitness tradeoffs associated with *E. faecium* phage resistance revealed enhanced susceptibility to cell wall and membrane-acting antibiotics. We demonstrated that phages

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9181 and 9183 synergize with cell wall and membrane-targeting antibiotics to more potently inhibit E. faecium. Importantly, this analysis revealed that phages 9181 and 9183 could sensitize E. faecium to ceftriaxone, an antibiotic that normally promotes enterococcal colonization of the intestine due to intrinsic resistance (29). Phage synergy with ceftriaxone is an important discovery as it suggests a strategy to re-sensitize enterococci to a third-generation cephalosporin. Exposure to cell wall-acting agents is recognized as a key event prior to hospital-acquired enterococcal infection in susceptible patients and cephalosporin re-sensitization could have a broad impact on anti-enterococcal therapy (2, 30). Cephalosporin activity pressures the native intestinal microbiota altering its ecology and related mucosal immunity, creating a scenario for enterococci to thrive and become dominant members of the microbiota (30-33). In patients with weakened immune systems or made vulnerable from hospital procedures such as surgeries, bone marrow ablative chemotherapy, or pre-existing alcoholic hepatitis/cirrhosis, these ceftriaxone-associated conditions can tip the scale in favor of infection (30-32, 34, 35). Even in E. faecium strains with ampicillin susceptibility, synergy with ceftriaxone for the treatment of endocarditis was demonstrated to be not absolute, suggesting that current Infectious Disease Society of America guidelines for the treatment of E. faecium endocarditis may lead to suboptimal results (36, 37). Combination therapy with phage and cell wall or membrane-acting antimicrobials may offer a potential solution to circumvent this issue, while avoiding the risk associated with exposing patients to combination β -lactam agents.

Previous studies indicate that intrinsic resistance to ceftriaxone is derived from not only a low-affinity penicillin binding protein 5 (Pbp5), but also *pbpA*, *ponA* and *pbpf* genes in *E. faecium* (38-41). However, in *ponA* and *pbpf* mutants a dissociation in penicillin and cephalosporin susceptibility was observed in *E. faecium* whereby these mutants were rendered susceptible to cephalosporins, but unlike a *pbp5* mutant, not ampicillin, (40). Interestingly, PbpA was found to be essential in *E. faecium* and also exhibited low affinity for both ampicillin and ceftriaxone (38). Combining this observation with the enhancement of ampicillin and ceftriaxone susceptibility displayed by *sagA*, *epaR* and *epaX* mutants, it suggests that Pbp5 and PbpA may play a role in conferring β-lactam susceptibility in these phage resistant mutants. However, to further add to the complexity of enterococcal cell wall dynamics, L,D-

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transpeptidases (LDTs), a novel class of enzymes that function apart from Pbps to promote penicillin and cephalosporin, but not carbapenem resistance, may also contribute to this phenotype (42, 43). It is possible that mutations in sagA, epaR, and/or epaX alter expression levels or post-translational modification of Pbps or LDTs against ceftriaxone and ampicillin. An alternative hypothesis is that sagA, epaR, and epaX gene mutations may manifest their effects through interaction with peptidoglycan and the mechanism of enhanced β-lactam susceptibility may be exclusive from the activity of Pbps or LDTs. Consistent with this notion, mutation of a secreted peptidoglycan hydrolase in E. faecalis, salB, demonstrated enhanced susceptibility to cephalosporins. Pairwise amino acid alignment of E. faecium Com12 SagA and E. faecalis SalB revealed 51% identity over the N-terminal coiled-coil domain region, which is expected given their different C-terminal hydrolase domains (SCP in SalB; NlpC P60 in SagA). Contrary to sagA in E. faecium, salB was shown to be non-essential in E. faecalis, and has a homolog (salA) which may partly compensate for the function of salB to maintain cell viability (24). Staining of an E. faecalis salB mutant with a non-specific, fluorescent Pbp antibody (Bocillin FL) revealed no difference from wild type. However, this analysis was performed in the absence of ceftriaxone pre-treatment, potentially masking subtle changes in the abundance of Pbps in the salB mutant at the cell wall (38). Therefore, it remains unclear if salB partners with or coordinates the activity of Pbps or LDTs to induce cephalosporin resistance. A sagA mutant described in our study (81R5; G460A) has a mutation residing two residues upstream from a peptidoglycan clamp residue (W462) and lacked enhanced susceptibility to ampicillin and ceftriaxone. The reason for this exception and why this mutation confers phage resistance is unclear.

The enhanced susceptibility to β-lactams in *epaR* and *epaX* in *E. faecium* mutants was surprising given prior reports of increased β-lactam resistance in *epa* mutants in *E. faecalis* (44). However, we note that all *epa* mutants tested in that analysis harbored mutations in genes from the core region of *epa* locus (i.e. *epaA*, *epaE*, *epaL*, *epaN*, *epaB*). To the best of our knowledge, this is the first report demonstrating enhanced β-lactam sensitivity to *epa* variable region mutants in enterococci. We observed enhanced susceptibility to daptomycin in *E. faecium epaR* and *epaX* mutants, consistent with data from *E. faecalis epaR* and *epaX* mutants (9, 14, 45). Given that the *epa* variable genes have

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recently been discovered to be involved in teichoic acid biosynthesis (25), we hypothesize that altered display of teichoic acids at the cell surface enables the differential β-lactam and daptomycin susceptibility observed in epa core versus variable region mutants in enterococci. This hypothesis is supported by observations in Staphylococcus aureus, where metabolic perturbations leading to enhanced teichoic acid output or teichoic acid D-alanylation correlate with daptomycin tolerance (46-48). Similarly, mutation of lafB, a gene encoding lipoteichoic acid glycosyltransferase, induces a daptomycin hypersusceptible phenotype in E. faecium (49). Mutation of bgsB in E. faecalis, which functions with a lafB homolog (basA) in lipoteichoic acid anchor biosynthesis, results in enhanced susceptibility to daptomycin (14). A reduction in susceptibility to the β-lactam piperacillin in *lafB* (*E.* faecium) or basB (E. faecalis) mutants is reminiscent of the effect of epa core region mutations in enterococci (44). A similar pattern of enhanced daptomycin susceptibility at the cost of reduced βlactam susceptibility, known as the see-saw effect (50), suggests that the altered display or abundance of the wall teichoic acids at the cell surface may occur in response to the modification of rhamnopolysaccharide or lipoteichoic acid. Mutation of epaR or epaX in E. faecium would potentially avoid the daptomycin-\(\text{\mathcal{B}}\)-lactam see-saw effect, making phages that induce these mutations in enterococci attractive antimicrobial candidates. Collectively, these observations suggest that the location of epa mutations, core versus variable region, as well mutations in genes participating in lipoteichoic acid biosynthesis, are likely to impact the trajectory of β-lactam and daptomycin susceptibility in enterococci.

E. faecalis epa mutations are detrimental during intestinal colonization and show reduced virulence in a mouse peritonitis infection model (9, 51, 52). epa mutants are more susceptible to bile salts, neutrophils, exhibit reduced biofilm formation, and are unable to invade biotic and abiotic surfaces (45, 52-54). Therefore, we predict that epaR and epaX mutants in E. faecium will show a similar intestinal colonization dysfunction. Hydrolase-domain mutations in SagA are also likely to induce fitness costs in vivo. SagA was shown to promote E. faecium attachment to multiple connective tissue molecules, including fibrinogen, fibronectin, and collagen (23). Interestingly, peptidoglycan fragments released following SagA hydrolytic activity activates NOD2-mediated mucosal immunity in the intestine.

providing protection from *Salmonella enterica* infection and *Clostridioides difficile* colitis (20, 22). In *E. faecalis*, mutation of the *sagA*-like gene *salB* altered cell morphology, increased biofilm formation, impacted autolysis, and increased susceptibility to bile salts, detergent, ethanol, peroxide, and heat (55-58). Contrary to SagA, cells expressing SalB were limited in binding fibronectin and collagen type I, suggesting that these proteins exhibit different adherence capacities to host tissue. Considering these observations together, it is possible that phage predation that promotes the formation of *sagA* mutants would result in *E. faecium* cells that are compromised for adherence and/or invasion of host tissues, and potentially less immunostimulatory during infection.

In conclusion, we have identified three previously undescribed phages that infect E. faecium. The study of E. faecium resistance to these phages identified multiple components of the E. faecium cell surface to be critical for productive phage infection. The enhanced sensitivity of sagA, epaR and epaX mutants to cell wall and membrane acting antimicrobials suggests that these proteins represent intriguing antimicrobial targets to be considered for future drug discovery efforts against E. faecium, and potentially other Gram-positive pathogens harboring homologs of these genes. The finding that E. faecium phages synergize with B-lactam and lipopeptide antibiotics provides encouragement that phages could be used in combination with these antibiotics to increase their efficacy and possibly repurpose such antibiotics that are currently deemed ineffective against enterococci.

Materials and Methods.

Bacteria and bacteriophages. A complete list of the bacterial strains and bacteriophages used in this study can be found in Table S4. *E. faecium* Com12 was cultured in Todd-Hewitt broth (THB) and *E. faecium* 1,141,733 was cultured in brain heart infusion (BHI) broth at 37°C with rotation at 250 rpm. *E. coli* strains were cultured in Lennox L broth (LB) at 37°C with rotation at 250 rpm. Semi-solid media in petri plates were made by adding 1.5% agar to broth prior to autoclaving. For antibiotic susceptibility testing, Mueller Hinton Broth (MHB) was used. When needed, chloramphenicol was added to media at 20 μg/ml or 10 μg/ml for selection of *E. coli* or *E. faecium*, respectively. Phage susceptibility assays were performed on THB agar supplemented with 10mM MgSO₄.

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Bacteriophage isolation and purification. Phages 9181, 9183, and 9184 were isolated from wastewater obtained from a water treatment facility located near Denver, Colorado. Fifty milliliters of raw sewage was centrifuged at 3220 x g for 10 minutes at room temperature to remove debris. The supernatant was decanted and passed through a 0.45 µm filter. A 100µl aliquot of filtered wastewater was mixed with 130 µl of E. faecium 1,141,733 or Com12 diluted 1:10 from an overnight culture and incubated at room temperature for 15 min. Molten THB top agar (0.35%), supplemented with 10mM MqSO₄, was added to the bacteria-wastewater suspension and poured over a 1.5% THB agar plate supplemented with 10mM MgSO₄. Following overnight growth at 37°C, plaques were picked with a sterile Pasteur pipette and phages were eluted from the plague in 500 µl SM-plus buffer (100 mM NaCl. 50 mM Tris-HCl, 8 mM MgSO₄, 5 mM CaCl₂ [pH 7.4]) overnight (O/N) at 4°C. After O/N elution, the phages were filter sterilized (0.45 µm). This procedure was repeated two more times to ensure clonal phage isolates. To amplify phages to high titer stocks, 10-fold serially diluted clonal phage isolates were mixed with their appropriate host strain diluted 1:10 from an O/N culture, incubated at room temperature and then poured over 1.5% THB agar supplemented with 10mM MgSO₄. Top agar from multiple near confluent lysed bacterial lawns were scraped into a 15 ml conical tube and centrifuged at 18000 x q for 10 minutes prior to decanting and 0.45 µm filter sterilization. Using these recovered phages, high-titer phage stocks were generated by infecting 500mL of early logarithmically (2-3 x 108 CFU/mL) growing E. faecium with phage at a multiplicity of infection of 0.5 following supplementation of media with 10mM MgSO₄. The phage-cell suspension was incubated at room temperature for 15 min and then incubated at 37°C with rotation (200 rpm) for 4-6 hours. The cultures were centrifuged at 3220 x g for 10 minutes at 4°C and the supernatants filtered (0.45µm). Clarified and filtered lysates were treated with 5 µg/ml each of DNase and RNase at room temperature for 1 hour and phages were precipitated with 1M NaCl and 10% (wt/vol) polyethylene glycol 8000 (PEG 8000) on ice at 4°C overnight. Phage precipitates were pelleted by centrifugation at 11,270 x q for 20 minutes and resuspended in 2mL of SM-plus buffer. One-third volume chloroform was mixed by inversion into the phage precipitates and centrifuged at 16,300 x q to separate out residual PEG 8000 into the organic

phase. Phages in the aqueous phase were further purified using a cesium chloride gradient as described previously (11). The final titer was confirmed by plaque assay. Crude phage lysates were used for all phage susceptibility and adsorption assays, while cesium chloride gradient purified phages were used for phage genomic DNA isolation and transmission electron microscopy.

Transmission electron microscopy. 8 μl of 1 x 10¹⁰ pfu/ml of phages was applied to a copper mesh grid coated with formvar and carbon (Electron Microscopy Sciences) for 2 minutes and then gently blotted off with a piece of Whatman filter paper. The grids were rinsed by transferring between two drops of MilliQ water, blotting with Whatman filter paper between each transfer. Finally, the grids were stained using two drops of a 0.75% uranyl formate solution (a quick rinse with MilliQ water following the first drop followed by an additional 20 seconds of staining). After rinsing and blotting, the grids were allowed to dry for at least 10 minutes. Samples were imaged on a FEI Tecnai G2 Biotwin TEM at 80kV with an AMT side-mount digital camera.

Whole-genome sequence analysis of phages and phage-resistant bacteria. Phage DNA was isolated by incubating phages with 50 μg/ml proteinase K and 0.5% sodium dodecyl sulfate at 56°C for 1 hour followed by extraction with an equal volume of phenol/chloroform. The aqueous phase was extracted a second time with an equal volume of chloroform and the DNA was precipitated using isopropanol. Bacterial DNA was isolated using a ZymoBIOMICS DNA miniprep kit (Zymo Research), following the manufacturers protocol. Phage and bacterial DNA samples were sequenced at the Microbial Genome Sequencing Center, University of Pittsburgh, using an Illumina NextSeq 550 platform and paired end chemistry (2 x 150bp). Paired-end reads were trimmed and assembled into contigs using CLC genomics workbench (Qiagen). Open reading frames (ORFs) were detected and annotated using rapid annotation subsystem technology (RAST) and the Phage Galaxy structural annotation (version 2020.1) and functional workflows (version 2020.3) (59, 60). Trimmed bacterial genomic reads for *E*. faecium Com12, 1,141,733, and phage resistant derivatives were mapped to reference genomes (GCF_000157635.1 (Com12); GCA_000157575.1 (1,141,733)), downloaded from the National Center

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for Biotechnology Information (NCBI) website. To identify mutations conferring phage resistance the basic variant detection tool from CLC genomics workbench was used to identify polymorphisms (similarity fraction = 0.5 and length fraction = 0.8). **Enterococcal phage orthology analysis.** Enterococcal phage orthology was performed according to a method described by Bolocan et al. (16). Briefly, publicly available enterococcal genomes were downloaded from the Millard Lab phage genome database (http://millardlab.org/bioinformatics/). As of May 15, 2020, there were 99 complete enterococcal phage genomes. Open reading frames for each enterococcal phage genome were called using Prodigal and bacteriophage protein Orthologous Groups were identified by OrthoMCL (19, 61). The resulting OrthoMCL matrix was used to generate an orthology tree using the ggplot2 and ggdendro packages in R. Nearest neighbor phages to phages 9181, 9183, and 9184 from the OrthoMCL analysis were compared using the genome alignment feature of ViP Tree using normalized tBLASTx scores between viral genomes to calculate genomic distance for phylogenetic proteomic tree analysis (62). Routine molecular techniques, DNA sequencing, and complementation. Confirmation PCRs were performed using GoTag Green master mix (Promega), per the manufacturer's instructions. Q5 DNA polymerase master mix (New England Biolabs) was used for PCR reactions intended for cloning, per the manufacturer's instructions. Plasmid DNA was purified using a QIAprep Miniprep kit (Qiagen) or a ZymoPURE II Plasmid Midiprep kit (Zymo Research). Restriction enzymes and T4 ligase were purchased from New England Biolabs. Sanger DNA sequencing was performed by Quintara Biosciences (San Francisco, CA). A complete list of primers can be found in Table S4. Complementation was performed using plasmid pLZ12A, a derivative of pLZ12 (63) carrying the bacA promoter upstream of the multiple cloning site (9). wze, epaX, dltA, and efsg rs08090 were cloned into pLZ12A as BamHI and EcoRI fragments. epaR and efsq rs08120 were cloned into pLZ12A as BamHI and Pstl fragments. Plasmids were transformed into E. faecium using a previously described glycinesucrose method (64, 65). Briefly, 1ml of overnight culture was inoculated into 50ml of BHI

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supplemented with 2% glycine and 0.5M sucrose and grown overnight at 37°C with rotation (250 rpm). The following day the cells were pelleted at 7200 x g and re-suspended in an equal volume of prewarmed BHI supplemented with 2% glycine and 0.5M sucrose and incubated for 1h at 37°C statically. The cells were pelleted at 7200 x g and washed three times in ice cold electroporation buffer (0.5M sucrose and 10% glycerol). 1-2 µg of plasmid DNA was electroporated into E. faecium using a Gene Pulser (Bio-Rad) with a 0.2 mm cuvette at 1.7kV, 200 Ω and 25 μ F. Phage susceptibility assay. Overnight bacterial cultures were pelleted, resuspended in SM-plus buffer, and normalized to OD₆₀₀ of 1.0. 10-fold serial dilutions of bacteria were spotted on THB agar embedded with phage or THB agar alone, supplemented with 10mM MgSO₄. Phages were embedded at the following concentrations within THB agar: phage 9181 (108 PFU/ml), phage 9183 (107 PFU/ml), and phage 9184 (10⁷ PFU/ml). Plates were incubated overnight at 37°C and viable CFU was determined by colony counting. Isolation of phage-resistant E. faecium strains. 130 µl of a 1:10 dilution of E. faecium grown O/N was mixed with 10 µl of 10-fold serially diluted phages and added to 5 ml of prewarmed THB top agar (0.35% wt/vol). Phage-bacterium mixtures were poured onto the surface of THB agar plates (1.5% wt/vol). The plates were incubated at 37°C until phage-resistant colonies appeared in the zones of clearing. The presumptive resistant colonies were passaged four times by streaking single colonies onto THB agar. **Determination of phage host range.** The host range of phages 9181, 9183, and 9184 were determined using a panel of laboratory and contemporary clinical E. faecium and E. faecalis isolates (Table S4). Overnight bacterial cultures were suspended in SM-plus buffer to an OD₆₀₀ of 1.0 and 10fold serially diluted and spotted on to THB agar containing phages. Plates were incubated O/N at 37°C and viable CFU was determined. Strains that exhibited greater than 4-log killing in the presence of

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phage were termed phage susceptible, while those that grew beyond this threshold were considered phage resistant. Phage adsorption assay. This assay was performed as described previously (10, 11). O/N bacterial cultures were pelleted at 3220 × q for 10 min and resuspended to 108 CFU/ml in SM-plus buffer. Phage adsorption was determined by mixing 5 x 10⁶ pfu of phage and to 5 x 10⁷ cfu of the appropriate bacterial strain in 500 µl and incubating statically at room temperature for 10 min. The bacteria-phage suspensions were centrifuged at $24.000 \times q$ for 1 min. the supernatant was collected, and remaining phages enumerated by a plaque assay. SM-plus buffer with phage only (no bacteria) served as a control. Percent adsorption was determined as follows: [(PFUcontrol - PFUtest supernatant)/PFUcontrol] × 100. The fold change was calculated by dividing the percent adsorption of phage resistant mutants by those of parental strain. Antibiotic MIC assay. Antibiotic MIC was determined for each strain using Etest strips (bioMérieux). Single colonies were grown O/N in 3mL of MHB broth at 37°C with rotation (250 rpm). The following day overnight cultures were diluted to McFarland 0.5 in MHB broth and 100µL of the cell suspension was spread over the surface of MHB agar plates. One Etest strip was placed on the surface of the agar using sterile forceps. The plates were incubated for 18 hours at 37°C. The MIC was determined to be the number closest to the zone of inhibition. The MIC reported for each strain is representative of two independent experiments. Phage-antibiotic synergy assay. O/N cultures of E. faecium Com12 and E. faecium 1,141,733 were normalized to 108 CFU/mL. 100ul (107 CFU/mL) of bacteria was added into a sterile 96-well plate (Falcon) in triplicate. Antibiotics were diluted 1:100 into desired wells to achieve the appropriate final concentration. Phages were added to desired wells at 10⁶ PFU/ml, achieving a multiplicity of infection of 0.1. The 96 well plate was loaded on to BioTek Synergy Plate reader pre-warmed to 37°C, and

agitated continuously for 18h, allowing for OD₆₀₀ reading every 30 minutes.

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Data availability. The Illumina reads for phage 9181, 9183, and 9184 and phage-resistant E. faecium mutants have been deposited in the European Nucleotide Archive under the accession number PRJEB39873. Assembled phage genomes were submitted to Genbank and were assigned the following accession numbers: MT939240 (phage 9181), MT939241 (phage 9183), and MT939242 (phage 9184). Acknowledgements. This work was supported by National Institutes of Health grants R01Al141479 (B.A.D.). We thank Dr. Jennifer Bourne at the University of Colorado School of Medicine Electron Microscopy Center for preparing and visualizing electron micrographs of phages. We thank the staff at the Microbial Genome Sequencing Center (MiGS) at the University of Pittsburgh for assistance with bacterial and phage whole genome DNA sequencing. We thank Dr. Howard Hang and Juliel Espinosa for generously providing pAM401-sagA. References. Arias CA, Murray BE. 2012. The rise of the Enterococcus: beyond vancomycin 1. resistance. Nat Rev Microbiol 10:266-78. Kristich CJ, Rice LB, Arias CA. 2014. Enterococcal infection—treatment and antibiotic 2. resistance, p 1-62. In Gilmore MS, Clewell DB, Ike Y, Shakar N (ed), Enterococci : from commensals to leading causes of drug resistant infection [Internet]. Massachusetts Eye and Ear Infirmary, Boston, MA. 3. Beganovic M, Luther MK, Rice LB, Arias CA, Rybak MJ, LaPlante KL. 2018. A review of combination antimicrobial therapy for Enterococcus faecalis bloodstream infections and infective endocarditis. Clin Infect Dis 67:303-309. Rybak MJ, McGrath BJ. 1996. Combination antimicrobial therapy for bacterial 4. infections. Guidelines for the clinician. Drugs 52:390-405. Fish R, Kutter E, Bryan D, Wheat G, Kuhl S. 2018. Resolving digital staphylococcal 5. osteomyelitis using bacteriophage-a case report. Antibiotics (Basel) 7. 6. Cano EJ, Caflisch KM, Bollyky PL, Van Belleghem JD, Patel R, Fackler J, Brownstein MJ, Horne B, Biswas B, Henry M, Malagon F, Lewallen DG, Suh GA. 2020. Phage therapy for limb-threatening prosthetic knee Klebsiella pneumoniae infection: case report and in vitro characterization of anti-biofilm activity. Clin Infect Dis

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- 837 Figure Legends.

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- 838 Figure 1. Genome organization and morphogenesis of three previously uncharacterized E.
- 839 faecium phages. Whole genome sequencing reveals a modular functional organization of phage
- 9181, 9183 and 9184 genomes. Open reading frames for each phage were determined by RAST
- version 2.0 and by the Texas A&M Center for Phage Therapy structural analysis workflow version
- 842 2020.01. Colored open reading frames correspond to the functional prediction. Beneath the phage
- genome maps, TEM shows phage 9181, 9183 and 9184 are non-contractile tailed Siphoviridae. The E.
- faecium host strain for phage 9181 is E. faecium Com12. The host strain for phage 9183 and 9184 is
- 845 E. faecium 1,141,733.
- Figure 2. Comparative genomic analysis identifies two novel enterococcal phage orthoclusters.
- A comparative genome analysis was performed using OrthoMCL as described previously by Bolocan et
- al. (16). A phylogenetic proteomic tree was constructed from the OrthoMCL matrix using the Manhattan
- distance metric and hierarchical clustering using an average linkage with 1000 iterations. Ninety-nine
- enterococcal phage genomes available from NCBI were used for comparison to *E. faecium* phages
- 852 9181, 9183, and 9184 (highlighted in red). Distinct phage orthoclusters are represented by colored
- boxes. Roman numerals to the right of the shaded boxes signify the phage orthocluster number. Phage

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orthocluster morphology is indicated by calipers (if known) or an asterisk symbol (if unknown) to the right of the roman numerals. Figure 3. E. faecium phages demonstrate broad and narrow host ranges. Host ranges of phage 9181, 9183, and 9184. Phage 9181 and 9183 have a narrow *E. faecium* host range, while phage 9184 shows a broader host range. Bacteria were susceptible if less than 1 x 10⁵ CFU/mL of bacteria were recovered from a phage susceptibility assay. Bacteria were resistant if greater than 1 x 10⁵ CFU/mL of bacteria were recovered from a phage susceptibility assay. (A) Indicates host range for a collection of laboratory strains. (B) Indicates the host range for a collection of clinical isolates provided by the clinical microbiology lab at the University of Colorado, Anschutz Medical Campus. Figure 4. E. faecium elicits a robust resistance phenotype to phage 9181 and 9183, but variable resistance to phage 9184. Representative phage resistant strains raised against phages 9181 (A). 9183 (B), and 9184 (C). Data show phage susceptibility assays and associated bacterial enumeration of wild type and phage resistant mutants in the presence (white bars) or absence (black bars) of phage from three independent experiments. Error bars indicate standard deviation. Phage 9181 resistant (A) and phage 9183 resistant (B) strains exhibit ≥ 4-log of survival in the presence of phages compared to the parental E. faecium Com12 and 1,141,733 (733) strains, respectively. Phage 9184 resistant strains (C) exhibit diverse resistance strength characterized weak (84R2) and strong (84R6) resistance phenotypes. The dotted line indicates the spontaneous mutation threshold conferring phage resistance observed in the respective wild type host strain of each phage. Figure 5. A diverse assortment of mutations confer phage resistance in E. faecium. (A) Protein secondary structure of E. faecium Com12 SagA, consisting of an N-terminus coiled-coil domain (residues 18-242) and C-terminus NIpC P60 peptidoglycan hydrolase domain (residues 393-520). Displayed above the protein structure are colored lollipops denoting the site of mutations within

NIpC P60 domain of phage 9181-resistant mutants. Inside and below the protein structure are colored

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one letter amino acid abbreviations and lines, respectively, corresponding to key active site (red) and peptidoglycan clamp residues (teal) of the NIpC P60 domain. Abbreviations: W, tryptophan; C, Cysteine; H, Histidine; G, Glycine; D, Aspartate; L, Leucine; Y, Tyrosine; V, Valine. (B) Capsule locus mutations are detected in a tyrosine kinase (wze), aminotransferase (efsq rs08090), wzy (efsg rs08105), and nucleotide sugar dehydrogenase (efsg rs08120) of phage 9184-resistant mutants. Arrows indicate open reading frames. Arrow colors correspond to colored boxes (figure bottom left) indicate predicted open reading frame function (17). Colored lollipops above the arrows corresponding to colored dots (figure bottom right) indicate the mutational type. E. faecium 1.141.733 locus tags are angled below the arrows. (C) A missense mutation is found within a predicted arginine-aspartateaspartate protein (rdd; black arrow) of one phage 9184-resistant mutant (84R6) of E. faecium 1,141,733. rdd is flanked upstream by a predicted hypothetical protein (white arrow) and signal sequence peptidase A (sspA; black arrow) and downstream by another hypothetical protein (white arrow). E. faecium 1,141,733 locus tags are angled below the arrows. (D) Mutations in predicted teichoic acid biosynthesis genes (epaR and epaX) are identified in phage 9183-resistant mutants of E. faecium 1.141.733 (25). Arrow colors correspond to colored boxes (figure bottom left) indicate predicted open reading frame function. Colored lollipops above the arrows corresponding to colored dots (figure bottom right) indicate the mutational type. E. faecium 1,141,733 locus tags are angled below the arrows. The brackets above the locus correspond the conserved (left) and variable (right) portions of the epa locus proposed to by Gueredal et al. to encode the machinery necessary for rhamnopolysaccharide synthesis and wall teichoic acid biosynthesis, respectively (25).

Figure 6. Mutation in the capsule and exopolysaccharide loci limit phage adsorption in *E.* **faecium.** Shown is the fold-change in phage 9181 (A), 9183 (B), and 9184 (C) adsorption compared to wild type (WT) *E. faecium*. Results represent average fold-change and standard deviation from three independent experiments. *, *P*<0.05; **, *P*<0.01 using an unpaired Student's *t* test.

Figure 7. Phage 9181 and phage 9183 synergize with antibiotics to kill *E. faecium*. (A-E) *E. faecium* growth was monitored over 18 hours in the presence of phage (open blue squares), sub-inhibitory concentrations of antibiotics (open orange, grey, purple triangles or diamonds), both phage and sub-inhibitory concentration of antibiotics (filled orange, grey and purple triangles or diamonds), or media alone (open black circles). Phage 9181 was used in experiments with *E. faecium* Com12, while phage 9183 was employed for experiments with 1,141,733. Phages 9181 (A) and 9183 (B) synergize with sub-inhibitory concentration of ampicillin (AMP) in a dose responsive manner to kill *E. faecium* Com12 and 1,141,733, respectively. Phage 9181 (C) and 9183 (D) synergize with sub-inhibitory concentrations of ceftriaxone (CTX) to kill *E. faecium* Com12 and 1,141,733, respectively. Phage 9183 (E) synergizes with sub-inhibitory concentrations of daptomycin (DAP) in a dose-responsive manner to kill *E. faecium* 1,141,733. Three technical replicates were performed for each condition tested and the averages plotted. Error bars indicate standard deviation. Shown are the results from one experiment that was replicated in triplicate.

Supplemental Figure Legends

Figure S1. Enterococcus faecium phage orthoclusters. Phage protein coding sequence alignments were performed with nearest neighbors in VIP Tree (62, 66). Colored lines connecting genomes indicate percent protein identity along the length of each genome. (A) Phage 9183 demonstrates protein homology and similar genome organization to its nearest neighbor intra-orthocluster phages (phages VFW and VPE25). (B) Phage 9184 demonstrates proteome homology and similar genome organization to its nearest neighbor intra-orthocluster phages (phages vB EfaS-DELF1 and IME-EFm5). (C) Phage 9181 shows little to no protein homology to its nearest neighbor extra-orthocluster phages (phages EFC-1 and FLA4).

9184. Phage 9181 (A), 9183 (B), and 9184 susceptibility assays and associated bacterial enumeration of wild type and phage resistant mutants in the presence (white bars) or absence (black bars) of phage

(A-F) from three independent experiments. Phage 9181 (A, C) and phage 9183 (B, E) resistant strains exhibit ≥ 5-logs of survival versus *E. faecium* Com12 and 1,141,733 (i.e. 733), respectively. Phage 9184 resistant strains exhibit a weak resistance phenotypes. The dotted line indicates the spontaneous mutation threshold conferring phage resistance observed in the respective wild type host strain of each phage.

Figure S3. SagA is conserved in *E. faecium* Com12 and Com15. Displayed is the BLASTP alignment of SagA between Com12 and Com15, showing 95% similarity and strict conservation of peptidoglycan clamp (orange lettering) and active site residues (red lettering). Colored highlights indicate the location of amino acid changes detected in phage 9181 resistant mutants (81R3 and 81R4 – green highlight, 81R5 – yellow highlight, 81R6 – blue highlight, 81R8 – magenta highlight). Specific amino acid changes are noted below the alignment in parentheses next to their respective phage resistant mutant.

Figure S4. Complementation restores phage susceptibility in phage resistant mutants.

Bacterial enumeration from Phage 9181 (A and B), 9184 (C), and 9183 (D) phage susceptibility assays of wild type and phage resistant mutants complemented with their respective wild type allele or empty vector. Assays were performed in the presence (white bars) or absence (black bars) of phages from two independent experiments. The bars and error bars indicate the average and standard deviation from two independent experiments. The dotted line indicates the spontaneous mutation threshold conferring phage resistance observed in the respective wild type host strain of each phage.

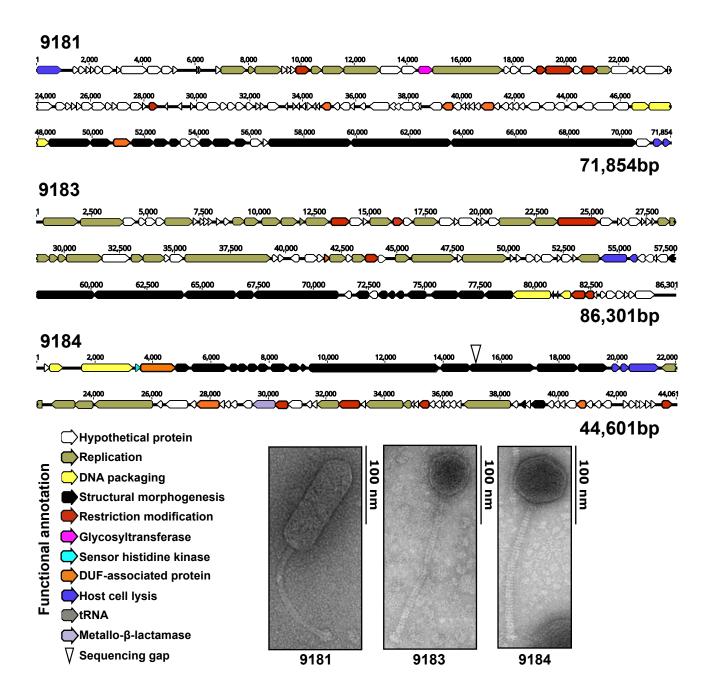


Figure 1

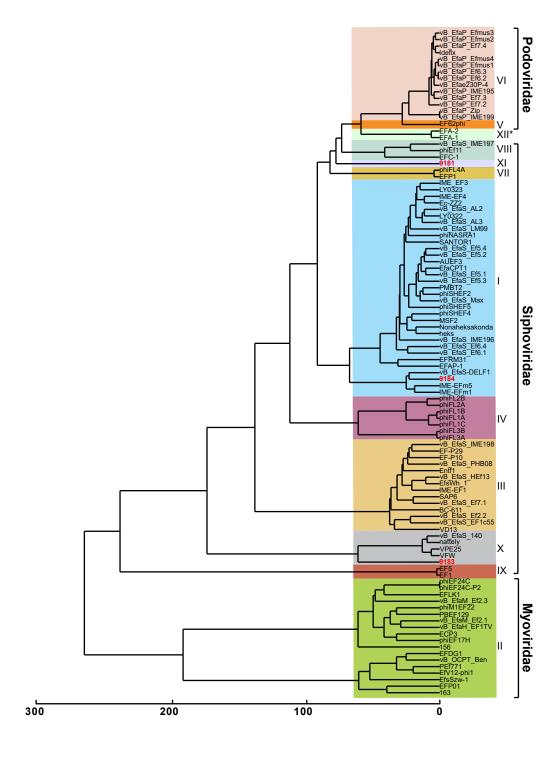


Figure 2

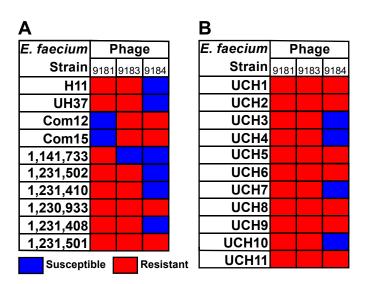


Figure 3

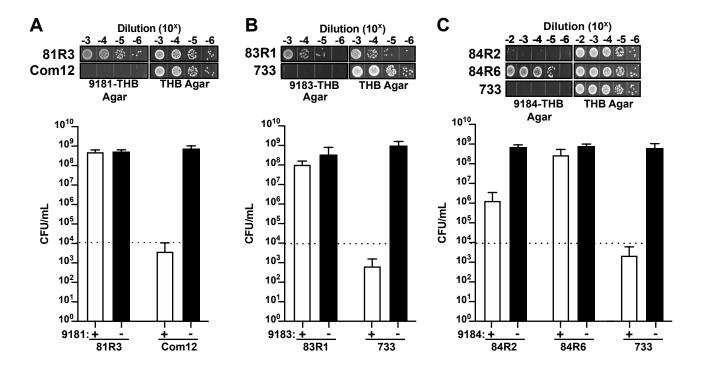


Figure 4

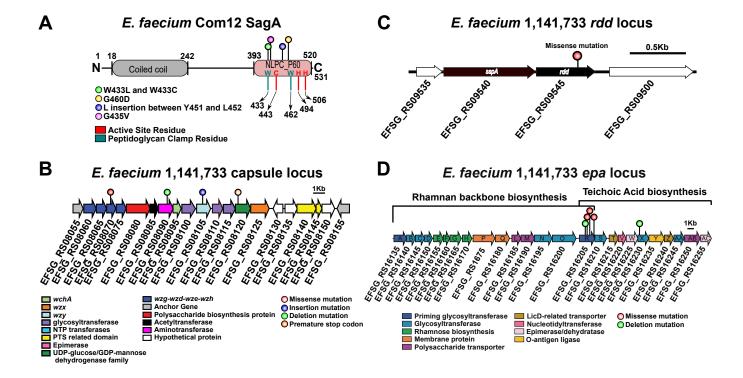


Figure 5

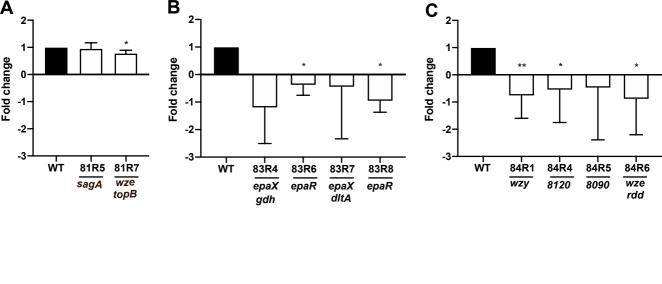


Figure 6

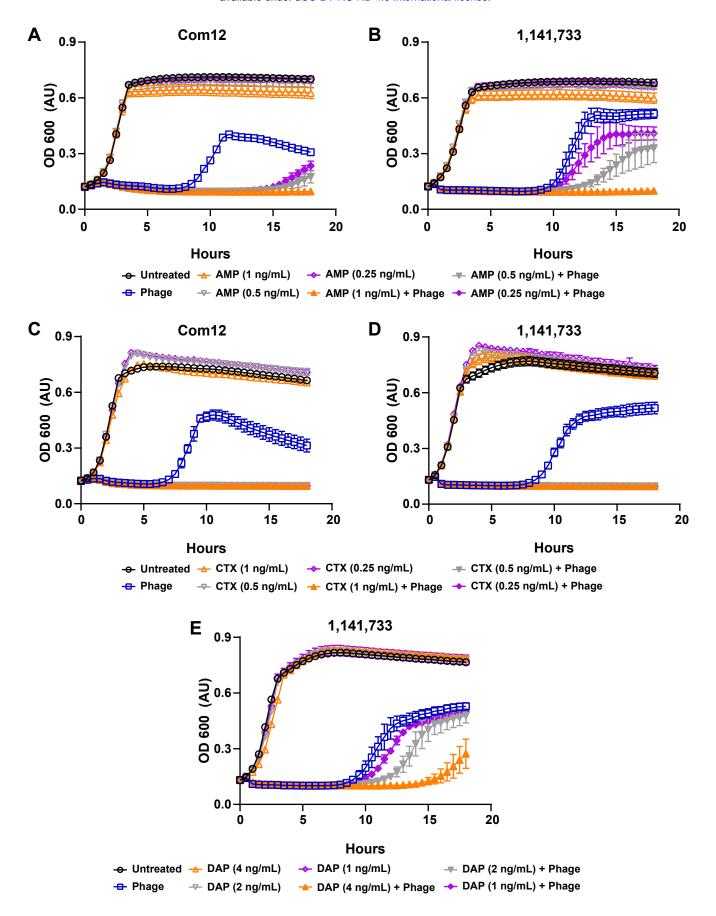


Figure 7

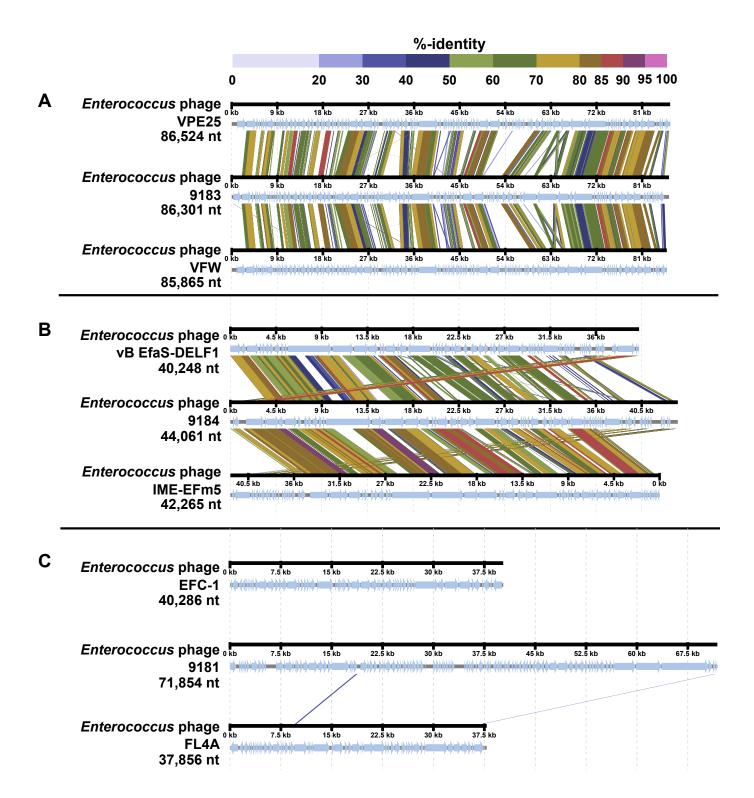


Figure S1

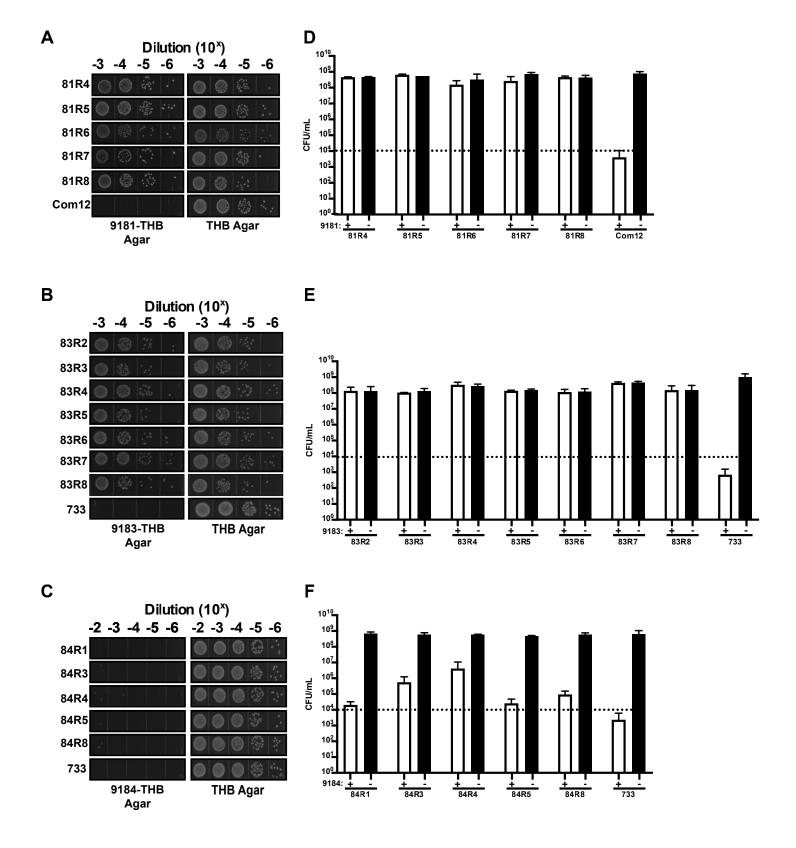


Figure S2

		513/538(95%) 515/538(95%) 20/538(3%)
Com12	1	VKKSLISAVMVCSMTLTAVASPIAAAADDFDSQIQQQDQKIADLKNQQADAQSQIDALES +KKSLISAVMVCSMTLTAVASPIAAAADDFDSQIQQQDQKIADLKNQQADAQSQIDALES
Com15	1	MKKSLISAVMVCSMTLTAVASPIAAAADDFDSQIQQQDQKIADLKNQQADAQSQIDALES

Positives

OVSEINTOAODLLAKODTLROESAOLVKDIADLOERIEKREDTIOKOAREAOVSNTSSNY

OVSEINTOAODLLAKODTLROESAOLVKDIADLOERIEKREDTIOKOAREAOVSNTSSNY OVSEINTOAODLLAKODTLROESAOLVKDIADLOERIEKREDTIOKOAREAOVSNTSSNY

IDAVLNADSLADAIGRVOAMTTMVKANNDLMEOOKODKKAVEDKKAENDAKLKELAENOA IDAVLNADSLADAIGRVOAMTTMVKANNDLMEOOKODKKAVEDKKAENDAKLKELAENOA

IDAVLNADSLADAIGRVOAMTTMVKANNDLMEOOKODKKAVEDKKAENDAKLKELAENOA

ALESOKGDLLSKOADLNVLKTSLAAEOATAEDKKADLNROKAEAEAEOARIREOORLAEO

ALESOKGDLLSKOADLNVLKTSLAAEOATAEDKKADLNROKAEAEAEOARIREOORLAEO

ALESOKGDLLSKOADLNVLKTSLAAEOATAEDKKADLNROKAEAEAEOARIREOORLAEO

AROOAAOEKAEKEAREOAEAEAOATOASSTAOSSASEESSAAOSSTTEESSSAAOSSTTE

AROOAAOEKAEKEAREOAEAEAOATOASS AOSSA+EESSAAOSSTTEESSSAAOSSTTE

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ESTTAPESSTTEESTT PESSTTEESTT PESSTTEESTTVPES

ISVSOAKAGDLLFWGSPGGTYHVAIALGGGOYIHAPOPGESVKVGSVOWFAPDFAVSM

ISVSOAKAGDLLFWGSPGGTYHVAIALGGGOYIHAPOPGESVKVGSVOWFAPDFAVSM

ISVSOAKAGDLLFWGSPGGTYHVAIALGGGOYIHAPOPGESVKVGSVOWFAPDFAVSM

Gaps

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60

120

120

180

180

240

240

300

300

360

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412

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472

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Figure S3

Identities

Com15	301	ESTTAPESSTTEESTTXPESSTTEESTTAPESSTTEESTTVPESSTTEESTTVPES
Com12	361	ESTTVPETSTEESTTPAPTTPSTDQSVDPGNSTGSNATNNTTNTTPTPTPSG
		STEESTTPAPTTPSTDQSVDPGNSTGSNATNNT TNTTPTPTPSG
Com15	357	STEESTTPAPTTPSTDQSVDPGNSTGSNATNNTTNTTPXXXXTNTTPTPTPSG
Com12	413	
		SVNGAAIVAEAYKYIGTPYV <mark>TGE</mark> KDPSGFDCSGFTRYV <mark>YI</mark> QVTGRDI <mark>G</mark> GWTVPQESAGTK
Com15	409	SVNGAAIVAEAYKYIGTPYV <mark>WGG</mark> KDPSGFDCSGFTRYV <mark>YL</mark> QVTGRDI <mark>G</mark> GWTVPQESAGTK

81R3 and 81R4 (W433G and W433C, respectively)

Active Site Residues (C443, H494, H506) Peptidoglycan Clamp Residues (W433 and W462)

(note: L insertion between Y451 and L452

Com12

Com15

Com12

Com15

Com12

Com15

Com12

Com15

Com12

Com12

Com15

81R6

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81R5 (G460D)

81R8 (G435V)

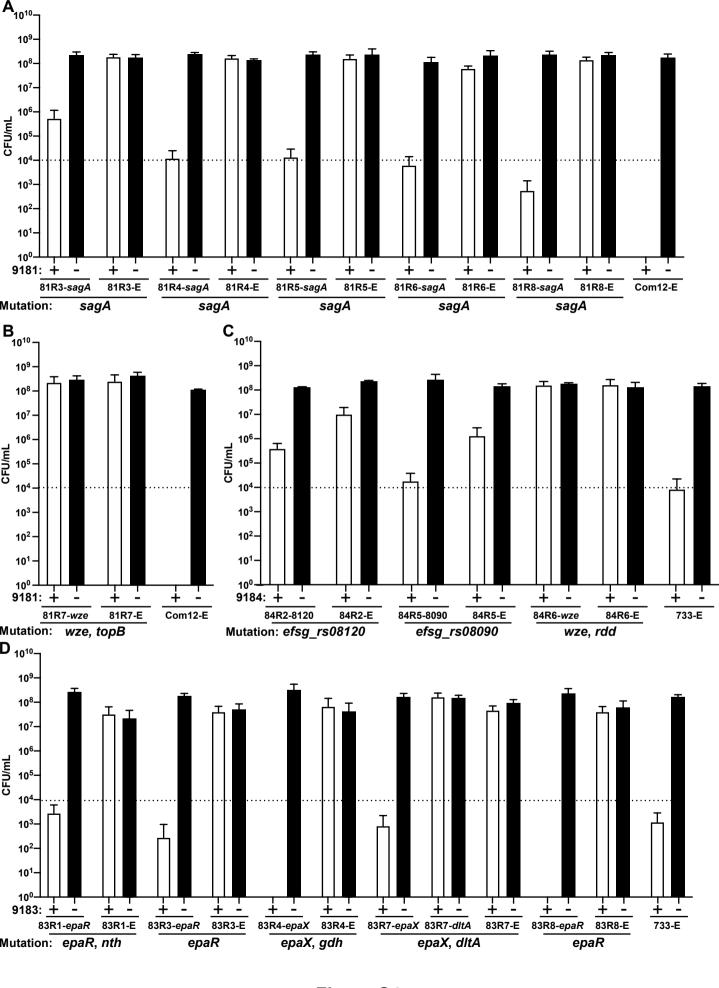


Figure S4