Horizontal transfer of antibiotic resistance genes in the human gut microbiome

McInnes, Ross S; McCallum, Gregory E; Lamberte, Lisa E; van Schaik, Willem

DOI:

[10.1016/j.mib.2020.02.002](https://doi.org/10.1016/j.mib.2020.02.002)

License:

Creative Commons: Attribution-NonCommercial-NoDerivs (CC BY-NC-ND)

Document Version

Peer reviewed version

Citation for published version (Harvard):

McInnes, RS, McCallum, GE, Lamberte, LE & van Schaik, W 2020, 'Horizontal transfer of antibiotic resistance genes in the human gut microbiome', *Current Opinion in Microbiology*, vol. 53, pp. 35-43.
<https://doi.org/10.1016/j.mib.2020.02.002>

[Link to publication on Research at Birmingham portal](#)

General rights

Unless a licence is specified above, all rights (including copyright and moral rights) in this document are retained by the authors and/or the copyright holders. The express permission of the copyright holder must be obtained for any use of this material other than for purposes permitted by law.

- Users may freely distribute the URL that is used to identify this publication.
- Users may download and/or print one copy of the publication from the University of Birmingham research portal for the purpose of private study or non-commercial research.
- User may use extracts from the document in line with the concept of 'fair dealing' under the Copyright, Designs and Patents Act 1988 (?)
- Users may not further distribute the material nor use it for the purposes of commercial gain.

Where a licence is displayed above, please note the terms and conditions of the licence govern your use of this document.

When citing, please reference the published version.

Take down policy

While the University of Birmingham exercises care and attention in making items available there are rare occasions when an item has been uploaded in error or has been deemed to be commercially or otherwise sensitive.

If you believe that this is the case for this document, please contact UBIRA@lists.bham.ac.uk providing details and we will remove access to the work immediately and investigate.

Horizontal transfer of antibiotic resistance genes in the human gut microbiome

Ross S. McInnes^a, Gregory E. McCallum^a, Lisa E. Lamberte^b, Willem van Schaik^b

Institute of Microbiology and Infection, College of Medical and Dental Sciences,
University of Birmingham, Birmingham B15 2TT, United Kingdom

^aThese authors contributed equally and will be putting their name first on the citation
in their CVs.

^bCorresponding authors: l.e.lamberte@bham.ac.uk and w.vanschaik@bham.ac.uk

10 **Abstract**

11

12 Infections caused by antibiotic-resistant bacteria are a major threat to public health.
13 The pathogens causing these infections can acquire antibiotic resistance genes in a
14 process termed horizontal gene transfer (HGT). HGT is a common event in the
15 human gut microbiome, i.e. the microbial ecosystem of the human intestinal tract.
16 HGT in the gut microbiome can occur via different mechanisms of which transduction
17 and conjugation have been best characterised. Novel bioinformatic tools and
18 experimental approaches have been developed to determine the association of
19 antibiotic resistance genes with their microbial hosts and to quantify the extent of
20 HGT in the gut microbiome. Insights from studies into HGT in the gut microbiome
21 may lead to the development of novel interventions to minimise the spread of
22 antibiotic resistance genes among commensals and opportunistic pathogens.

23 **Highlights**

24

- 25 - The human gut microbiome harbours antibiotic resistance genes ('the
26 resistome')
- 27 - Antibiotic resistance genes can spread in the gut microbiome through
28 horizontal gene transfer (HGT)
- 29 - The best characterised mechanisms of HGT in the human gut microbiome are
30 transduction and conjugation
- 31 - Novel bioinformatic and experimental approaches have been developed to
32 study HGT in the gut

The human gut microbiome and antimicrobial resistance

The term 'human gut microbiome' describes the microorganisms, their genomes and the environmental conditions of the human intestinal tract [1]. Over the last decade, the implementation of high-throughput, low-cost sequencing methods has fuelled research into the gut microbiome, with the aim to uncover its composition, function, and role in health and disease [2]. The gut contains hundreds of bacterial species, collectively called the microbiota, with those belonging to the phyla Bacteroidetes and Firmicutes accounting for 90% of all species in the gut of healthy adults [3]. The phyla Actinobacteria, Proteobacteria, Fusobacteria and Verrucomicrobia are generally less abundant, but can contribute to important functions, such as providing protection against invading pathogens [4,5]. Most gut bacteria have a symbiotic or commensal relationship with the human host. However, the gut microbiota also contains opportunistic pathogens, including those belonging to the families Enterobacteriaceae, particularly *Escherichia coli* and *Klebsiella pneumoniae*, and Enterococcaceae, most notably *Enterococcus faecalis* and *Enterococcus faecium*. Intestinal carriage of opportunistic pathogens can predispose an individual to urinary tract infections and, in immunocompromised patients, more serious systemic infections [6–8]. Recent decades have seen a global rise of infections caused by antibiotic-resistant clones of *E. coli*, *K. pneumoniae* [9], and *E. faecium* [10].

Infections caused by antibiotic-resistant bacteria are a significant threat to global public health. The annual attributable mortality due to antibiotic-resistant infections in the EU alone is estimated to number over 30,000 deaths, with the highest cases occurring in Italy and Greece [11]. Morbidity and mortality due to multi-drug resistant

infections are even higher in low- and middle-income countries in Asia, Africa and South America [12–14].

The main mechanisms by which bacteria can become resistant to antibiotics are prevention of the antibiotic from reaching toxic levels inside the cell, modification of the antibiotic target, and modification or degradation of the antibiotic itself [15]. These resistance mechanisms can arise through mutations of chromosomal genes and the acquisition of antibiotic resistance genes (ARGs) from other strains of the same, or different, species in a process termed horizontal gene transfer (HGT). The sharing of genes through HGT contributes importantly to the global dissemination of ARGs [16]. HGT can occur in any environment, particularly when bacterial loads are high, e.g. in soil [17], in wastewater treatment plants [18,19] and in the gut microbiome of humans and animals [20–22].

As *E. coli*, *K. pneumoniae*, *C. difficile*, enterococci and other opportunistic pathogens inhabit the human gut, there is a distinct possibility that they can acquire resistance determinants from other members of the gut microbiota. Indeed, previous work has shown that the gut harbours many and diverse antibiotic resistance determinants, which have collectively been termed the ‘gut resistome’ [23,24]. In this review, we will provide an overview of the different mechanisms of HGT in the human gut microbiome and of innovative methods to study HGT in this microbial ecosystem.

Mechanisms of horizontal gene transfer

ARGs can be horizontally transferred through a number of mechanisms, the most important of which are transformation, transduction, and conjugation. More recently,

the role of membrane vesicles (MVs) in HGT has also been recognised. In this section, we will shortly discuss the relevance of these HGT mechanisms in the context of the spread of ARGs in the gut microbiome (Figure 1).

In transformation, naked DNA from the extracellular environment is taken up by bacteria and inserted into their genomes. The process of transformation requires bacteria to be naturally transformable or competent. Over 80 bacterial species have been experimentally proven to be naturally competent, and the presence of genes involved in DNA uptake in a number of other species suggests that this trait is more widespread [25]. The stimuli that lead to a competent state in naturally transformable bacteria are only partially understood, but nutrient starvation and the presence of competence-inducing peptides have been identified as triggers [26]. Important pathogens, including *Neisseria gonorrhoeae*, *Vibrio cholerae*, and *Streptococcus pneumoniae* are naturally competent pathogens and have acquired antibiotic resistance through this process [27]. While DNase activity in the gut will degrade most DNA [28], intact plasmid DNA can be isolated from the gut contents of rats that are fed plasmids [29]. This finding indicates that there is potential for extracellular DNA to be taken up by naturally competent bacteria. Observations showing that *E. coli* can be transformed by plasmid DNA under natural conditions [30,31], suggest that *E. coli* could take up DNA in the gut, with transformation thus conceivably contributing to the spread of ARGs. The extent by which DNA can spread horizontally in the gut through the process of transformation is, however, currently unknown.

MVs Membrane vesicles (MVs) are 20–250 nm spherical structures that are predominantly produced by Gram-negative bacteria when the outer membrane

bulges away from the cell and is then released through constriction [32]. MVs fuse with their target cells, thus delivering their cargo. MVs that are produced *in vitro* by the gut commensal *Bacteroides* can contain β -lactamases and these vesicles protect target cells against β -lactam antibiotics [33]. In the context of HGT, it is relevant that MVs produced by gut bacteria can also contain cytoplasmic contents, including DNA [34]. DNA-containing MVs are thought to be formed by protrusion of both the outer and inner membrane, which leads to the inclusion of cytoplasmic components into the vesicles [35]. Indeed, membrane vesicles isolated from bacteria in the genus *Acinetobacter* can transfer antibiotic resistance plasmids *in vitro* [36]. Similarly, vesicle-mediated transfer of DNA has also been reported for *E. coli* [37]. While MVs are produced in the gut and can potentially influence host immune responses [38], it is as yet not clear whether they can also contribute to HGT in the gut microbiome.

Transduction describes the transfer of chromosomal and extrachromosomal DNA between bacteria via a viral intermediate known as a bacteriophage. The main mechanisms of transduction are generalised transduction, specialised transduction, and lateral transduction. Collectively these can cause the mobilisation of any fragment of a bacterial genome [39]. Generalised transduction occurs when bacteriophages in the lytic cycle incorporate sections of the DNA of the bacterial host during capsid synthesis. In specialised transduction, regions immediately flanking the integration site of a lysogenic phage are excised and packaged into the capsid [39]. Lateral transduction, in contrast, occurs when prophages initiate DNA replication while they are still integrated into the host. This process generates multiple copies of DNA before excision from the host genome occurs. Once excised, the DNA – which may contain both phage and the adjacent genes up to hundreds of kilobases in length – are packaged into new phage particles and transferred to other bacterial

strains [40]. The human gut contains an extensive community of bacteriophages [41,42] and significant numbers of ARG-carrying phages are present in the human gut and other environments [43]. The abundance of these ARG-carrying phages in the human gut increases upon antibiotic treatment [44]. Experiments in mouse models have shown that transduction is a driving force behind genetic diversity in gut-colonising *E. coli* strains [45] and can contribute to the emergence of drug resistance in gut bacteria [46]. However, the quantitative contribution of phages to the horizontal transfer of ARGs is still poorly understood. We foresee that novel methods to detect and quantify HGT in the gut (further outlined below) will be implemented to address this question.

In conjugation, mobile genetic elements such as plasmids and integrative and conjugative elements (ICEs) are transferred from one bacterium to another [47]. Among conjugative elements, conjugative plasmids are arguably the most relevant for the spread of ARGs as they have the potential to carry multiple resistance genes, due to their substantial size (median of 90 kbp) and the common occurrence of one or more toxin-antitoxin modules which ensure that plasmids are retained within their microbial hosts [48]. In addition, conjugative plasmids frequently carry genes, other than ARGs, that contribute to microbial fitness, e.g. by coding for novel metabolic routes or tolerance to disinfectants or heavy metals. Antibiotic resistance determinants can thus be co-selected under a variety of conditions as they share a genetic platform with other fitness determinants [48]. Conjugation is a complex, multistage, and contact-dependent process where DNA is transported via a pilus between bacteria in close proximity to each other [49]. The gut, with its high density of bacterial cells and dense mucus layer, provides an environment conducive to conjugation. The spread of antibiotic resistance plasmids and ICEs has been

observed among commensals and opportunistic pathogens while colonising the human gut [50–52]. Notably, conjugative plasmids can provide the machinery allowing the mobilisation of DNA that is not self-transmissible, thus greatly increasing the potential for HGT of resistance determinants [53].

Bioinformatic tools to study HGT in the gut

The high-throughput sequencing of DNA isolated from microbial ecosystems, often referenced to as shotgun metagenomics, is widely used to study the microbial diversity of the human gut microbiome [54]. The Illumina DNA sequencing platform is most commonly used for shotgun metagenomic studies of the gut microbiome. The relatively short sequence reads generated by Illumina sequencers can be used to detect and quantify the abundance of ARGs in the human gut microbiome [55]. It is, however, difficult to resolve linkage of ARGs and MGEs as these elements are generally rich in DNA repeats that are difficult to resolve with short reads [56]. The advent of long-read technologies such as Oxford Nanopore and PacBio sequencing allows the reconstruction of genome and plasmid sequences from complex metagenomic samples [19]. Independent of the platform used for shotgun metagenomics, approaches based on DNA sequencing have long struggled to identify the microbial hosts of ARGs and to detect HGT events. Recently, advanced bioinformatic tools have been developed to address this issue (Table 1).

Different approaches have been developed to identify HGT events in metagenomic sequencing data [57]. These tools include MetaCHIP, which uses a combination of best-match and phylogenetic approaches to identify HGT candidates from genes that have a different taxonomic assignment to the contig or genome they have been

assembled into [58]. An additional method, MetaCherchant, has been developed which uses local de Bruijn graph assembly to uncover the wider context of ARGs. When metagenomes from a time series are compared, a change in gene context suggests that an HGT event has occurred [59]. A recently developed binning technique which utilises the methylation patterns of DNA, as determined by Oxford Nanopore and PacBio sequencing, has proven useful in linking MGEs to their host. Methylation motifs are given scores and DNA sequences from MGE and from bacterial genomes can be matched based on their methylation scores thus identifying the host of the MGE [60]. If the same MGE is identified in multiple hosts then an HGT event may have occurred. However, purely metagenomic methods are still limited in their ability to accurately identify all HGT events, because the conjugative transfer of ARG-carrying plasmids between different microbial hosts cannot be resolved by DNA sequencing alone. For this reason, novel experimental approaches have been developed to characterise HGT in the gut microbiome (Table 1; Figure 2).

Novel experimental approaches to study HGT in the gut

HGT has been studied in the human gut since the 1960s [61]. In these human challenge studies, bacteria capable of transferring DNA ('donors') and recipient strains were administered to the host and transconjugants were then isolated by selective culture from the host faeces. However, these studies are fraught with ethical challenges as there is a risk that multidrug resistant donor strains or transconjugants colonize the gut of the volunteers, and thus animal models are more frequently used to study HGT in the gut (Figure 2A). More recently, culturing of

201 human faeces on selective media has identified novel hosts of ARGs, such as the
202 *vanB* vancomycin resistance transposon in the gut commensals *Eggerthella lenta*
203 and *Clostridium innocuum* [62], which can be transferred to the opportunistic
204 pathogen *E. faecium* in the mouse gut [63]. These findings support the hypothesis
205 that gut commensals act as a reservoir for ARGs. A drawback of these approaches
206 is that they require the recipient cells to be cultured and while important advances
207 have been made in the isolation of gut commensals [64], it remains technically
208 challenging to systematically identify strains that acquire ARGs and uncover the
209 hidden network of HGT in the gut.

210 In recent years, novel techniques have been developed which allow the high-
211 throughput characterisation of HGT events in microbial communities. The inclusion
212 of fluorescent markers on plasmids has enabled the use of technologies such as
213 confocal fluorescence microscopy and Fluorescence Activated Cell Sorting (FACS)
214 to uncover the host range of plasmids (Figure 2B). In one study, HGT events were
215 identified by the use of plasmids that carry a green fluorescent protein gene (*gfp*) of
216 which expression was controlled by a chromosomally encoded repressor. Upon
217 conjugation of the plasmid to a new host, repression of *gfp* was lifted and
218 transconjugants could be identified by their green fluorescence [65].
219 Transconjugants were then isolated using FACS and subsequently subjected to 16S
220 rRNA gene sequencing to identify which hosts the plasmids had spread to. A
221 drawback of this approach is that typically only one plasmid is examined at a time,
222 which limits our understanding of the wider picture of HGT events within a
223 microbiome. In addition, there is a distinct lack of genetic tools to perform these
224 studies in microbial hosts other than model strains like *E. coli* MG1655.

225 Several techniques have been developed that physically link ARGs to their microbial
226 hosts in microbiomes. These data can be used to elucidate the patterns of ARG
227 dissemination in microbiomes (Figure 2C). In Emulsion, Paired Isolation, and
228 Concatenation PCR (epicPCR), single microbial cells are encapsulated in
229 polyacrylamide beads followed by a fusion PCR step within individual beads. This
230 results in a concatemer of the targeted gene (e.g. an ARG) and the 16S rRNA gene,
231 which serves as a phylogenetic marker [66]. The resulting fusion PCR amplicon can
232 be sequenced using Illumina technology to identify the host(s) of the gene targeted
233 in epicPCR. Recently, epicPCR has been used to determine the diversity of ARG
234 hosts in wastewater [67].

235 Another technique that can be used to identify the bacterial hosts of ARGs is
236 chromosome conformation capture (3C). During 3C, cells are incubated with
237 formaldehyde to cross-link the DNA, followed by restriction digestion, ligation of the
238 cross-linked DNA and finally reversal of the cross-linking [68]. Sequencing the
239 resulting 3C library will then reveal cross-links between MGEs carrying ARGs and
240 chromosomal DNA, thus allowing the host of the MGEs to be identified.
241 Metagenomic 3C (meta3C) was performed on mouse gut microbiome samples to link
242 phage sequences to their bacterial hosts [69]. Recently, a derivative of 3C called
243 Hi-C, which includes an additional step to enrich for ligated fragments of DNA, has
244 been used to link ARGs to their bacterial hosts in a variety of complex samples. By
245 performing Hi-C on a wastewater sample, the microbial hosts of ARGs and *in situ*
246 host ranges of plasmids were assessed, where the authors found that the phylum
247 Bacteroidetes was one of the most common reservoirs of ARGs in the sample [70].
248 Also using Hi-C data, in combination with long-read assembly, the microbial hosts of
249 viruses and ARGs were linked in a cow rumen microbiome [71]. Hi-C has similarly

been performed on human gut microbiome samples. In a pioneering study, an approximately 600-kbp megaplasmid was linked to several species in the order Clostridiales [72]. More recently, the transfer of accessory elements was tracked in two human stool samples collected 10 years apart using 3C, but the authors did not discuss linkage of ARGs to their microbial hosts [73]. While there has, thus far, been no extensive study using 3C or its derivatives to link ARGs to their host in a human gut microbiome sample, these studies have provided a foundation for the use of these novel techniques to study HGT in the gut.

A recent study [74] described an elegant recorder for HGT events based on the ability of the CRISPR-Cas9 system to integrate fragments of invading DNA into the bacterial genome (Figure 2D). CRISPR-Cas9 is an adaptive immune system that bacteria use to defend against invasion by foreign DNA [75]. Invading DNA is incorporated into the bacterial genome at the CRISPR locus by the Cas1-Cas2 complex in a process known as spacer acquisition. These sequences are subsequently transcribed and used to target the Cas9 nuclease to invading DNA which matches the spacer sequence [76]. To record HGT events, Munck and co-workers engineered an *E. coli* strain containing a plasmid with the *cas1-cas2* operon under the control of an inducible promoter to capture DNA sequences which have entered the cell. Sequencing of the CRISPR spacer regions was then used to not only identify HGT events but also the order in which the events occurred. When this system was applied to clinical faecal samples, it showed that HGT is frequent in the gut and that IncX-type plasmids transferred most actively [74]. This technique promises to uncover HGT events at an unprecedented resolution, but to unveil the full extent of the gut mobilome it will need to be adapted to function in bacteria which fall outside of the Enterobacteriaceae family.

275

276 **Conclusions and future perspectives**

277 The human gut microbiome contains a wide variety of ARGs. Modern sequencing-
278 based and experimental technologies are uncovering the extent by which resistant
279 genes spread between strains and species that inhabit the gut. Genes that confer
280 resistance against clinically relevant antibiotics and are carried on mobile genetic
281 elements that replicate in pathogens are considered to be an immediate threat to the
282 successful treatment of clinical infections [77]. While bacteriophages can potentially
283 mobilise any chromosomal gene or mutation, the conjugative spread of plasmids is
284 still widely considered to be the most important way resistance genes can be
285 transferred among bacteria.

286 The observation that ARGs from opportunistic pathogens can also be found in the
287 genomes of Gram-positive commensal bacteria [62,78] suggests that HGT of ARGs
288 in the gut is pervasive, particularly among the Firmicutes. Carbapenemases and
289 extended-spectrum beta-lactamases that are increasingly prevalent in the
290 opportunistic pathogens *E. coli* and *K. pneumoniae* can readily spread among
291 Proteobacteria in the gut [79,80] but HGT to other phyla have, to our knowledge, not
292 been reported. The scarcity of HGT of resistance genes across phyla can be
293 explained by the specific physiological contexts in which proteins conferring antibiotic
294 resistance need to operate, which makes it unlikely that resistance genes can be
295 functional, at a low biological cost, in phylogenetically disparate bacteria [●●81].
296 However, soil microcosm experiments have provided evidence that plasmids can
297 spread, albeit infrequently, among diverse phyla [65]. As HGT is a common event in
298 the gut microbiome [●●74], it is not unlikely that broad-host range MGEs carrying

299 resistance genes will start to disseminate across phyla, although intra-phylum HGT
300 remains quantitatively more important. There is still a lack of knowledge on the
301 conditions in the gut microbiome that favour HGT events, but inflammation of the
302 host and the production of membrane-destabilizing agents by both the microbiota
303 and the host have been proposed to promote HGT in the gut [82].

304 Our improved understanding of HGT in the gut opens up avenues for novel
305 interventions to minimise transfer of ARGs, e.g. by the conjugative delivery of
306 CRISPR-Cas to selectively deplete strains carrying resistance genes [83]. We
307 envisage that the novel techniques reviewed here will aid in further elucidating the
308 exchange networks of ARGs in the human gut. The information gleaned from these
309 studies can then support the development of targeted approaches to control or
310 reduce the number of antibiotic-resistant bacteria in the human gut, particularly in
311 individuals that are at high risk of developing infections, such as neonates, the
312 immunocompromised, and the elderly.

313

314 **Acknowledgments**

315

316 R.S.M is funded by the Wellcome Trust Antimicrobials and Antimicrobial Resistance
317 Doctoral Training Programme (215154/Z/18/Z). G.E.M. is funded by the MRC Impact
318 Doctoral Training Programme (MR/N013913/1). W.v.S. and L.E.L. are funded
319 through BBSRC (BB/S017941/1). Work in the lab of W.v.S. is also supported by a
320 Royal Society Wolfson Merit Award (WM160092).

321

	Technique	Description	Limitations	Ref
Bioinformatics	MetaCHIP	Identifies differences in taxonomic assignments between genes and the contig or genome they have been assembled into	Detection of recent HGT events is challenging	[58]
	MetaCherchant	Uses local De Bruijn graph assembly to uncover wider context of ARGs	HGT of high copy-number MGEs may be difficult to detect due to complexity of the assembly graph	[59]
	Binning by DNA methylation	DNA sequences from MGEs and bacterial genomes are matched based on their methylation	High numbers of genomes in sample limit uniqueness of methylation signal	[●60]
Experimental	Culturing approaches	<i>in vivo</i> studies Strains with MGEs are administered to a host and transconjugants are then isolated from faecal samples by culture	Ethical challenges; low throughput	[50]
		culturomics High-throughput culture-based methods to identify bacterial hosts of antibiotic resistance genes	Laborious and technically challenging, particularly for bacteria that are present at low abundance	[64]
	Fluorescent reporter systems	Fluorescently-tagged plasmids are used to track the movement of plasmids in complex microbiomes	Needs to be optimised for each plasmid-host combination	[65]
	epicPCR	Single microbial cells are captured in polyacrylamide beads, followed by fusion PCR on a target and the 16S rRNA gene, and sequencing of the amplicon	Targets only one gene per experiment; uses 16S rRNA gene as a low-resolution phylogenetic marker; requires multiple rounds of PCR introducing biases	[66]
	Chromosome conformation capture	meta3C By physically cross-linking DNA inside microbial cells, and subsequent sequencing of the cross-linked DNA, the hosts of genes of interest are identified	Requires high sequencing depth; can be difficult to accurately resolve hosts to strain- or species-level	[●69,73]
		Hi-C Similar to meta3C but with an additional step to enrich for cross-linked fragments of DNA before sequencing.		[70–72]
	CRISPR recorder	A CRISPR-based system that utilises the spacer acquisition process to record HGT events. Uniquely able to track transient HGT events.	The system has presently only been developed for <i>E. coli</i>	[●●74]

323

324 **Table 1. Summary of current approaches to study horizontal gene transfer in**325 **the gut microbiome.** Bioinformatic approaches to identify HGT have recently been

326 reviewed in [●57] and the tools highlighted here are a selection of those that have

327 recently been developed. All bioinformatic tools listed in this table for detecting HGT

328 in metagenomes are reliant on accurate and contiguous metagenomic assembly.

329 Ref: references.

330

Figure legends

Figure 1. Mechanisms of horizontal gene transfer (HGT).

Transformation: physiologically competent bacteria can take up naked DNA from the environment. **Membrane vesicle fusion:** 20-250 nm spherical, lipid bilayer-enclosed vesicles can transport cargo between bacteria, including DNA. **Transduction:** genetic material can be transferred between donor and recipient bacteria via a bacteriophage intermediate. **Conjugation:** mobile genetic elements, such as plasmids, can transfer via a pilus formed between donor and recipient cells. The mechanisms of HGT illustrated in this figure can mediate the transfer of both chromosomal and extra-chromosomal DNA.

Figure 2. Experimental approaches to study horizontal gene transfer (HGT) in the gut.

Panel A: the use of culture-based animal models to study HGT. Laboratory animals are fed bacteria containing an antibiotic resistance gene (ARG)-plasmid and stool samples can then be cultured on antibiotic-containing media to isolate transconjugants. **Panel B:** fluorescent reporter systems to identify HGT events. A donor cell carries a green-fluorescent protein (GFP)-tagged plasmid and a repressor gene on the chromosome. GFP will only be expressed when the plasmid is transferred to another cell that does not contain the repressor and GFP-producing transconjugants can thus be isolated using fluorescence-activated cell sorting (FACS). **Panel C:** novel techniques for physically linking ARGs to their microbial

host. Emulsion, Paired Isolation, and Concatenation PCR (epicPCR) involves the encapsulation of single bacterial cells in polyacrylamide beads. After cell lysis, a PCR is performed in each bead individually. The PCR targets an ARG with custom primers where the reverse primer contains an overhang homologous to the 16S rRNA gene, of which another conserved region is targeted by a third primer. The resulting fusion PCR amplicon contains the ARG fused with the 16S rRNA gene of its host(s). Chromosome conformation capture approaches use formaldehyde to cross-link DNA inside cells. Cells are then lysed, followed by enzymatic digestion of the DNA, ligation of the cross-linked fragments, and finally removal of the cross-links, ultimately leaving linked DNA fragments that were in close physical proximity to each other. **Panel D:** CRISPR spacer acquisition as a tool for HGT detection. Using an engineered bacterial strain containing a plasmid with the *cas1-cas2* operon, the sequences of DNA entering the cell are captured and incorporated into the CRISPR array. By sequencing the CRISPR array, HGT events can be observed, including the order in which they occurred.

References

1. Marchesi JR, Ravel J: **The vocabulary of microbiome research: a proposal.** *Microbiome* 2015, **3**:31.
2. Durack J, Lynch SV: **The gut microbiome: Relationships with disease and opportunities for therapy.** *J Exp Med* 2019, **216**:20–40.
3. Eckburg PB, Bik EM, Bernstein CN, Purdom E, Dethlefsen L, Sargent M, Gill SR, Nelson KE, Relman DA: **Diversity of the human intestinal microbial flora.** *Science* 2005, **308**:1635–1638.
4. Ducarmon QR, Zwitter RD, Hornung BVH, van Schaik W, Young VB, Kuijper EJ: **Gut microbiota and colonization resistance against bacterial enteric infection.** *Microbiol Mol Biol Rev* 2019, **83**:e00007-19.
5. Yatsunenko T, Rey FE, Manary MJ, Trehan I, Dominguez-Bello MG, Contreras M, Magris M, Hidalgo G, Baldassano RN, Anokhin AP, et al.: **Human gut microbiome viewed across age and geography.** *Nature* 2012, **486**:222–227.
6. Gorrie CL, Mirčeta M, Wick RR, Edwards DJ, Thomson NR, Strugnell RA, Pratt NF, Garlick JS, Watson KM, Pilcher DV, et al.: **Gastrointestinal Carriage is a major reservoir of *Klebsiella pneumoniae* infection in intensive care patients.** *Clin Infect Dis* 2017, **65**:208–215.
7. Price LB, Hungate BA, Koch BJ, Davis GS, Liu CM: **Colonizing opportunistic pathogens (COPs): The beasts in all of us.** *PLOS Pathogens* 2017, **13**:e1006369.

- 391 8. Raven KE, Gouliouris T, Brodrick H, Coll F, Brown NM, Reynolds R, Reuter S,
392 Török ME, Parkhill J, Peacock SJ: **Complex routes of nosocomial**
393 **vancomycin-resistant *Enterococcus faecium* transmission revealed by**
394 **genome sequencing.** *Clin Infect Dis* 2017, **64**:886–893.
- 395 9. Dunn SJ, Connor C, McNally A: **The evolution and transmission of multi-**
396 **drug resistant *Escherichia coli* and *Klebsiella pneumoniae*: the complexity**
397 **of clones and plasmids.** *Curr Opin Microbiol* 2019, **51**:51–56.
- 398 10. Guzman Prieto AM, van Schaik W, Rogers MRC, Coque TM, Baquero F,
399 Corander J, Willems RJL: **Global Emergence and Dissemination of**
400 **Enterococci as Nosocomial Pathogens: Attack of the Clones?** *Front*
401 *Microbiol* 2016, **7**:788.
- 402 11. Cassini A, Högberg LD, Plachouras D, Quattrocchi A, Hoxha A, Simonsen GS,
403 Colomb-Cotinat M, Kretzschmar ME, Devleesschauwer B, Cecchini M, et al.:
404 **Attributable deaths and disability-adjusted life-years caused by infections**
405 **with antibiotic-resistant bacteria in the EU and the European Economic**
406 **Area in 2015: a population-level modelling analysis.** *Lancet Infect Dis* 2019,
407 **19**:56–66.
- 408 12. Stewardson AJ, Marimuthu K, Sengupta S, Allignol A, El-Bouseary M, Carvalho
409 MJ, Hassan B, Delgado-Ramirez MA, Arora A, Bagga R, et al.: **Effect of**
410 **carbapenem resistance on outcomes of bloodstream infection caused by**
411 **Enterobacteriaceae in low-income and middle-income countries**
412 **(PANORAMA): a multinational prospective cohort study.** *Lancet Infect Dis*
413 2019, **19**:601–610.

- 414 13. Lim C, Takahashi E, Hongsuwan M, Wuthiekanun V, Thamlikitkul V, Hinjoy S,
415 Day NP, Peacock SJ, Limmathurotsakul D: **Epidemiology and burden of**
416 **multidrug-resistant bacterial infection in a developing country.** *eLife* 2016,
417 **5:e18082.**
- 418 14. Gandra S, Tseng KK, Arora A, Bhowmik B, Robinson ML, Panigrahi B,
419 Laxminarayan R, Klein EY: **The mortality burden of multidrug-resistant**
420 **pathogens in India: a retrospective, observational study.** *Clin Infect Dis*
421 2019, **69**:563–570.
- 422 15. Blair JMA, Webber MA, Baylay AJ, Ogbolu DO, Piddock LJV: **Molecular**
423 **mechanisms of antibiotic resistance.** *Nat Rev Microbiol* 2015, **13**:42–51.
- 424 16. von Wintersdorff CJH, Penders J, van Niekerk JM, Mills ND, Majumder S, van
425 Alphen LB, Savelkoul PHM, Wolffs PFG: **Dissemination of antimicrobial**
426 **resistance in microbial ecosystems through horizontal gene transfer.** *Front*
427 *Microbiol* 2016, **7**:173.
- 428 17. Forsberg KJ, Reyes A, Wang B, Selleck EM, Sommer MOA, Dantas G: **The**
429 **shared antibiotic resistome of soil bacteria and human pathogens.** *Science*
430 2012, **337**:1107–1111.
- 431 18. Karkman A, Do TT, Walsh F, Virta MPJ: **Antibiotic-resistance genes in waste**
432 **water.** *Trends in Microbiology* 2018, **26**:220–228.
- 433 19. Che Y, Xia Y, Liu L, Li A-D, Yang Y, Zhang T: **Mobile antibiotic resistome in**
434 **wastewater treatment plants revealed by Nanopore metagenomic**
435 **sequencing.** *Microbiome* 2019, **7**:44.

- 436 20. Thanner S, Drissner D, Walsh F: **Antimicrobial resistance in agriculture.**
437 *mBio* 2016, **7**:e02227-02215.
- 438 21. San Millan A: **Evolution of Plasmid-Mediated Antibiotic Resistance in the**
439 **Clinical Context.** *Trends Microbiol* 2018, **26**:978–985.
- 440 22. Huddleston JR: **Horizontal gene transfer in the human gastrointestinal**
441 **tract: potential spread of antibiotic resistance genes.** *Infect Drug Resist*
442 2014, **7**:167–176.
- 443 23. Ruppé E, Ghoulane A, Tap J, Pons N, Alvarez A-S, Maziers N, Cuesta T,
444 Hernando-Amado S, Clares I, Martínez JL, et al.: **Prediction of the intestinal**
445 **resistome by a three-dimensional structure-based method.** *Nat Microbiol*
446 2019, **4**:112–123.
- 447 24. van Schaik W: **The human gut resistome.** *Philos Trans R Soc Lond, B, Biol*
448 *Sci* 2015, **370**:20140087.
- 449 25. Johnston C, Martin B, Fichant G, Polard P, Claverys J-P: **Bacterial**
450 **transformation: distribution, shared mechanisms and divergent control.**
451 *Nat Rev Microbiol* 2014, **12**:181–196.
- 452 26. Chen I, Dubnau D: **DNA uptake during bacterial transformation.** *Nat Rev*
453 *Microbiol* 2004, **2**:241–249.
- 454 27. Blokesch M: **Natural competence for transformation.** *Curr Biol* 2016,
455 **26**:R1126–R1130.

- 456 28. Jonas DA, Elmadfa I, Engel KH, Heller KJ, Kozianowski G, König A, Müller D,
457 Narbonne JF, Wackernagel W, Kleiner J: **Safety considerations of DNA in**
458 **food**. *Ann Nutr Metab* 2001, **45**:235–254.
- 459 29. Wilcks A, van Hoek AHAM, Joosten RG, Jacobsen BBL, Aarts HJM:
460 **Persistence of DNA studied in different ex vivo and in vivo rat models**
461 **simulating the human gut situation**. *Food Chem Toxicol* 2004, **42**:493–502.
- 462 30. Hasegawa H, Suzuki E, Maeda S: **Horizontal plasmid transfer by**
463 **transformation in *Escherichia coli*: environmental factors and possible**
464 **mechanisms**. *Front Microbiol* 2018, **9**:2365.
- 465 31. Sun D: **Pull in and Push Out: Mechanisms of Horizontal Gene Transfer in**
466 **Bacteria**. *Front Microbiol* 2018, **9**:2154.
- 467 32. Gill S, Catchpole R, Forterre P: **Extracellular membrane vesicles in the three**
468 **domains of life and beyond**. *FEMS Microbiol Rev* 2019, **43**:273–303.
- 469 33. Stentz R, Horn N, Cross K, Salt L, Brearley C, Livermore DM, Carding SR:
470 **Cephalosporinases associated with outer membrane vesicles released by**
471 ***Bacteroides* spp. protect gut pathogens and commensals against β -lactam**
472 **antibiotics**. *J Antimicrob Chemother* 2015, **70**:701–709.
- 473 34. Klieve AV, Yokoyama MT, Forster RJ, Ouwerkerk D, Bain PA, Mawhinney EL:
474 **Naturally occurring DNA transfer system associated with membrane**
475 **vesicles in cellulolytic *Ruminococcus* spp. of ruminal origin**. *Appl Environ*
476 *Microbiol* 2005, **71**:4248–4253.

- 477 35. Pérez-Cruz C, Delgado L, López-Iglesias C, Mercade E: **Outer-inner**
478 **membrane vesicles naturally secreted by Gram-negative pathogenic**
479 **bacteria.** *PLOS ONE* 2015, **10**:e0116896.
- 480 36. Rumbo C, Fernández-Moreira E, Merino M, Poza M, Mendez JA, Soares NC,
481 Mosquera A, Chaves F, Bou G: **Horizontal transfer of the OXA-24**
482 **carbapenemase gene via outer membrane vesicles: a new mechanism of**
483 **dissemination of carbapenem resistance genes in *Acinetobacter***
484 ***baumannii*.** *Antimicrob Agents Chemother* 2011, **55**:3084–3090.
- 485 37. Yaron S, Kolling GL, Simon L, Matthews KR: **Vesicle-mediated transfer of**
486 **virulence genes from *Escherichia coli* O157:H7 to other enteric bacteria.**
487 *Appl Environ Microbiol* 2000, **66**:4414–4420.
- 488 38. Shen Y, Giardino Torchia ML, Lawson GW, Karp CL, Ashwell JD, Mazmanian
489 SK: **Outer membrane vesicles of a human commensal mediate immune**
490 **regulation and disease protection.** *Cell Host Microbe* 2012, **12**:509–520.
- 491 39. Chiang YN, Penadés JR, Chen J: **Genetic transduction by phages and**
492 **chromosomal islands: The new and noncanonical.** *PLoS Pathog* 2019,
493 **15**:e1007878.
- 494 40. Chen J, Quiles-Puchalt N, Chiang YN, Bacigalupe R, Fillol-Salom A, Chee MSJ,
495 Fitzgerald JR, Penadés JR: **Genome hypermobility by lateral transduction.**
496 *Science* 2018, **362**:207–212.
- 497 41. Aggarwala V, Liang G, Bushman FD: **Viral communities of the human gut:**
498 **metagenomic analysis of composition and dynamics.** *Mobile DNA* 2017,
499 **8**:12.

- 500 42. Shkoporov AN, Hill C: **Bacteriophages of the human gut: the “known**
501 **unknown” of the microbiome**. *Cell Host Microbe* 2019, **25**:195–209.
- 502 43. Debroas D, Siguret C: **Viruses as key reservoirs of antibiotic resistance**
503 **genes in the environment**. *ISME J* 2019, **13**:2856–2867.
- 504 ●44. Fernández-Orth D, Miró E, Brown-Jaque M, Rodríguez-Rubio L, Espinal P,
505 Rodríguez-Navarro J, González-López JJ, Muniesa M, Navarro F: **Faecal**
506 **phageome of healthy individuals: presence of antibiotic resistance genes**
507 **and variations caused by ciprofloxacin treatment**. *J Antimicrob Chemother*
508 2019, **74**:854–864.
- 509
- 510 A recent study which describes the carriage of antibiotic resistance genes in gut
511 bacteriophages, strictly controlling for contamination with bacterial DNA.
- 512
- 513 ●45. Frazão N, Sousa A, Lässig M, Gordo I: **Horizontal gene transfer overrides**
514 **mutation in *Escherichia coli* colonizing the mammalian gut**. *PNAS* 2019,
515 **116**:17906–17915.
- 516
- 517 Study in an animal model showing that a gut-colonizing *E. coli* strain rapidly evolves
518 due to bacteriophage-mediated horizontal gene transfer
- 519
- 520 46. Modi SR, Lee HH, Spina CS, Collins JJ: **Antibiotic treatment expands the**
521 **resistance reservoir and ecological network of the phage metagenome**.
522 *Nature* 2013, **499**:219–222.

- 523 47. Ilangovan A, Connery S, Waksman G: **Structural biology of the Gram-**
524 **negative bacterial conjugation systems.** *Trends Microbiol* 2015, **23**:301–310.
- 525 48. Pal C, Bengtsson-Palme J, Kristiansson E, Larsson DGJ: **Co-occurrence of**
526 **resistance genes to antibiotics, biocides and metals reveals novel insights**
527 **into their co-selection potential.** *BMC Genomics* 2015, **16**:964.
- 528 49. Cabezón E, Ripoll-Rozada J, Peña A, de la Cruz F, Arechaga I: **Towards an**
529 **integrated model of bacterial conjugation.** *FEMS Microbiol Rev* 2015, **39**:81–
530 95.
- 531 50. Lester CH, Frimodt-Møller N, Sørensen TL, Monnet DL, Hammerum AM: **In**
532 **vivo transfer of the *vanA* resistance gene from an *Enterococcus faecium***
533 **isolate of animal origin to an *E. faecium* isolate of human origin in the**
534 **intestines of human volunteers.** *Antimicrob Agents Chemother* 2006, **50**:596–
535 599.
- 536 51. Porse A, Gumpert H, Kubicek-Sutherland JZ, Karami N, Adlerberth I, Wold AE,
537 Andersson DI, Sommer MOA: **Genome dynamics of *Escherichia coli* during**
538 **antibiotic treatment: transfer, loss, and persistence of genetic elements in**
539 **situ of the infant gut.** *Front Cell Infect Microbiol* 2017, **7**:126.
- 540 52. Shoemaker NB, Vlamakis H, Hayes K, Salyers AA: **Evidence for extensive**
541 **resistance gene transfer among *Bacteroides* spp. and among *Bacteroides***
542 **and other genera in the human colon.** *Appl Environ Microbiol* 2001, **67**:561–
543 568.
- 544 53. Ramsay JP, Firth N: **Diverse mobilization strategies facilitate transfer of**
545 **non-conjugative mobile genetic elements.** *Curr Opin Microbiol* 2017, **38**:1–9.

- 546 54. Quince C, Walker AW, Simpson JT, Loman NJ, Segata N: **Shotgun**
547 **metagenomics, from sampling to analysis.** *Nat Biotechnol* 2017, **35**:833.
- 548 55. Hu Y, Yang X, Qin J, Lu N, Cheng G, Wu N, Pan Y, Li J, Zhu L, Wang X, et al.:
549 **Metagenome-wide analysis of antibiotic resistance genes in a large cohort**
550 **of human gut microbiota.** *Nat Commun* 2013, **4**:2151.
- 551 56. Berglund F, Österlund T, Boulund F, Marathe NP, Larsson DGJ, Kristiansson E:
552 **Identification and reconstruction of novel antibiotic resistance genes from**
553 **metagenomes.** *Microbiome* 2019, **7**:52.
- 554 •57. Douglas GM, Langille MGI: **Current and promising approaches to identify**
555 **horizontal gene transfer events in metagenomes.** *Genome Biol Evol* 2019,
556 **11**:2750–2766.
- 557
- 558 A comprehensive overview of current bioinformatic tools to identify and quantify HGT
559 events in microbiomes.
- 560
- 561 58. Song W, Wemheuer B, Zhang S, Steensen K, Thomas T: **MetaCHIP:**
562 **community-level horizontal gene transfer identification through the**
563 **combination of best-match and phylogenetic approaches.** *Microbiome*
564 2019, **7**:36.
- 565 59. Olekhnovich EI, Vasilyev AT, Ulyantsev VI, Kostryukova ES, Tyakht AV:
566 **MetaCherchant: analyzing genomic context of antibiotic resistance genes**
567 **in gut microbiota.** *Bioinformatics* 2018, **34**:434–444.

- 568 ●60. Beaulaurier J, Zhu S, Deikus G, Mogno I, Zhang X-S, Davis-Richardson A,
569 Canepa R, Triplett EW, Faith JJ, Sebra R, et al.: **Metagenomic binning and**
570 **association of plasmids with bacterial host genomes using DNA**
571 **methylation**. *Nat Biotechnol* 2018, **36**:61–69.
- 572 This paper highlights the potential of using methylation signatures, as determined by
573 novel DNA sequencing technologies, to identify microbial hosts of mobile
574 genetic elements.
- 575
576 61. Williams Smith H: **Transfer of antibiotic resistance from animal and human**
577 **strains of *Escherichia coli* to resident *E. coli* in the alimentary tract of man**.
578 *Lancet* 1969, **293**:1174–1176.
- 579 62. Stinear TP, Olden DC, Johnson PD, Davies JK, Grayson ML: **Enterococcal**
580 ***vanB* resistance locus in anaerobic bacteria in human faeces**. *Lancet* 2001,
581 **357**:855–856.
- 582 63. Launay A, Ballard SA, Johnson PDR, Grayson ML, Lambert T: **Transfer of**
583 **vancomycin resistance transposon Tn1549 from *Clostridium symbiosum***
584 **to *Enterococcus* spp. in the gut of gnotobiotic mice**. *Antimicrob Agents*
585 *Chemother* 2006, **50**:1054–1062.
- 586 64. Lagier J-C, Dubourg G, Million M, Cadoret F, Bilen M, Fenollar F, Levasseur A,
587 Rolain J-M, Fournier P-E, Raoult D: **Culturing the human microbiota and**
588 **culturomics**. *Nat Rev Microbiol* 2018, **16**:540–550.
- 589 65. Klümper U, Riber L, Dechesne A, Sannazzarro A, Hansen LH, Sørensen SJ,
590 Smets BF: **Broad host range plasmids can invade an unexpectedly diverse**
591 **fraction of a soil bacterial community**. *ISME J* 2015, **9**:934–945.

- 592 66. Spencer SJ, Tamminen MV, Preheim SP, Guo MT, Briggs AW, Brito IL, A Weitz
593 D, Pitkänen LK, Vigneault F, Juhani Virta MP, et al.: **Massively parallel**
594 **sequencing of single cells by epicPCR links functional genes with**
595 **phylogenetic markers.** *ISME J* 2016, **10**:427–436.
- 596 67. Hultman J, Tamminen M, Pärnänen K, Cairns J, Karkman A, Virta M: **Host**
597 **range of antibiotic resistance genes in wastewater treatment plant influent**
598 **and effluent.** *FEMS Microbiol Ecol* 2018, **94**:fiy038.
- 599 68. Marbouty M, Cournac A, Flot J-F, Marie-Nelly H, Mozziconacci J, Koszul R:
600 **Metagenomic chromosome conformation capture (meta3C) unveils the**
601 **diversity of chromosome organization in microorganisms.** *eLife* 2014,
602 **3**:e03318.
- 603 •69. Marbouty M, Baudry L, Cournac A, Koszul R: **Scaffolding bacterial**
604 **genomes and probing host-virus interactions in gut microbiome by**
605 **proximity ligation (chromosome capture) assay.** *Sci Adv* 2017, **3**:e1602105.
- 606 First description of the application of chromosomal conformation capture in gut
607 microbiome samples, successfully identifying hosts of bacteriophages
608
- 609 70. Stalder T, Press MO, Sullivan S, Liachko I, Top EM: **Linking the resistome**
610 **and plasmidome to the microbiome.** *ISME J* 2019, **13**:2437–2446.
- 611 •71. Bickhart DM, Watson M, Koren S, Panke-Buisse K, Cersosimo LM, Press
612 MO, Van Tassell CP, Van Kessel JAS, Haley BJ, Kim SW, et al.: **Assignment**
613 **of virus and antimicrobial resistance genes to microbial hosts in a**

complex microbial community by combined long-read assembly and proximity ligation. *Genome Biol* 2019, **20**:153.

Recent work showing the powerful combination of chromosomal conformation capture with long-read sequencing to identify microbial hosts of antibiotic resistance genes in the rumen microbiome. The approaches described here can also be used to study linkage of resistance genes to their hosts in human gut microbiome samples.

72. Press MO, Wiser AH, Kronenberg ZN, Langford KW, Shakya M, Lo C-C, Mueller KA, Sullivan ST, Chain PSG, Liachko I: **Hi-C deconvolution of a human gut microbiome yields high-quality draft genomes and reveals plasmid-genome interactions.** *bioRxiv* 2017, doi:10.1101/198713.

73. Yaffe E, Relman DA: **Tracking microbial evolution in the human gut using Hi-C reveals extensive horizontal gene transfer, persistence and adaptation.** *Nat Microbiol* 2020, **5**:343-353.

●●74. Munck C, Sheth RU, Freedberg DE, Wang HH: **Recording mobile DNA in the gut microbiota using an *Escherichia coli* CRISPR-Cas spacer acquisition platform.** *Nat Commun* 2020, **11**:95.

A very elegant approach using a recorder based on CRISPR-Cas to identify horizontal gene transfer events in *E. coli* during gut colonisation.

- 636 75. Barrangou R, Fremaux C, Deveau H, Richards M, Boyaval P, Moineau S,
637 Romero DA, Horvath P: **CRISPR provides acquired resistance against**
638 **viruses in prokaryotes**. *Science* 2007, **315**:1709–1712.
- 639 76. McGinn J, Marraffini LA: **Molecular mechanisms of CRISPR-Cas spacer**
640 **acquisition**. *Nat Rev Microbiol* 2019, **17**:7–12.
- 641 77. Martínez JL, Coque TM, Baquero F: **What is a resistance gene? Ranking risk**
642 **in resistomes**. *Nat Rev Microbiol* 2015, **13**:116–123.
- 643 78. Dehoux P, Marvaud JC, Abouelleil A, Earl AM, Lambert T, Dauga C:
644 **Comparative genomics of *Clostridium bolteae* and *Clostridium***
645 ***clostridioforme* reveals species-specific genomic properties and**
646 **numerous putative antibiotic resistance determinants**. *BMC Genomics*
647 2016, **17**:819.
- 648 79. Goren MG, Carmeli Y, Schwaber MJ, Chmelnitsky I, Schechner V, Navon-
649 Venezia S: **Transfer of carbapenem-resistant plasmid from *Klebsiella***
650 ***pneumoniae* ST258 to *Escherichia coli* in patient**. *Emerg Infect Dis* 2010,
651 **16**:1014–1017.
- 652 80. Göttig S, Gruber TM, Stecher B, Wichelhaus TA, Kempf VAJ: **In vivo**
653 **horizontal gene transfer of the carbapenemase OXA-48 during a**
654 **nosocomial outbreak**. *Clin Infect Dis* 2015, **60**:1808–1815.
- 655 ●●81. Porse A, Schou TS, Munck C, Ellabaan MMH, Sommer MOA: **Biochemical**
656 **mechanisms determine the functional compatibility of heterologous**
657 **genes**. *Nat Commun* 2018, **9**:1–11.

658

659 A landmark study describing the mechanisms for the phylogenetic barriers to the
660 spread of antibiotic resistance genes

661

662 82. Sitaraman R: **Prokaryotic horizontal gene transfer within the human**
663 **holobiont: ecological-evolutionary inferences, implications and**
664 **possibilities**. *Microbiome* 2018, **6**:163.

665 ●83. Rodrigues M, McBride SW, Hullahalli K, Palmer KL, Duerkop BA:
666 **Conjugative delivery of CRISPR-Cas9 for the selective depletion of**
667 **antibiotic-resistant enterococci**. *Antimicrob Agents Chemother* 2019,
668 **63**:e01454-19.

669 An important proof-of-principle study showing that CRISPR-Cas targeting antibiotic
670 resistance genes can be used to reduce the abundance of antibiotic-resistant
671 bacteria in the gut

672

673

674 **Figure 1**

675

676