

1           **Antimicrobial resistance, virulence genes profiles and molecular**  
2           **epidemiology of carbapenem-resistant *Klebsiella pneumoniae* strains**  
3           **from captive giant pandas (*Ailuropoda melanoleuca*)**

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9           **Abstract:**

10           This study aimed to investigate the antibiotic susceptibility, antibiotic resistance  
11           genes (ARGs), mobile genetic elements (MGEs), virulence genes, and molecular  
12           epidemiology of carbapenem-resistant *Klebsiella pneumoniae* (CRKP) strains isolated  
13           from giant pandas. The screening of 178 nonduplicated *Klebsiella pneumoniae* strains  
14           identified eight CRKP strains, with the most abundant ARGs observed in  
15           ampC/blaDHA, blaSHV-01, blaSHV-02, tetB-01, tetB-02, tetC-01, and tetC-02. MGE  
16           analysis revealed the presence of intI1 in all strains, while other MGEs exhibited  
17           varying detection rates. Strain 24 exhibited the highest diversity in terms of MGE  
18           species. Seven virulence genes including wabG, uge, ycf, entB, kpn, alls, and wcaG,  
19           showed positive results with different proportions across the strains. Molecular  
20           epidemiology analysis using pulsed-field gel electrophoresis (PFGE) patterns indicated  
21           a high level of genetic diversity among the CRKP strains. Multi-locus sequence typing  
22           (MLST) analysis classified the strains into different sequence types (STs). In conclusion,  
23           this study highlighted the diverse nature of CRKP strains found in giant pandas, which  
24           exhibited varying levels of antibiotic resistance along with multiple ARGs and  
25           virulence genes present. These findings emphasized the importance of monitoring and  
26           researching antibiotic resistance within wildlife populations to safeguard the health  
27           status of these endangered animals.

28           **Keywords:** carbapenem-resistant *Klebsiella pneumoniae*; antibiotic susceptibility;  
29           antibiotic resistance genes; mobile genetic elements; virulence genes; molecular

30 epidemiology

## 31 **1. Introduction**

32 The giant panda, an endemic species to China, serves as the flagship species for  
33 global wildlife conservation efforts (Jia W et al. 2023). Bacterial diseases have emerged  
34 as a major epidemic that poses a grave threat to the life and well-being of giant pandas.  
35 With the widespread utilization of antibiotics, bacterial resistance continues to emerge  
36 and escalate every year, thereby posing an immense risk to the health of giant panda  
37 (Yang X et al. 2017; Guo L et al. 2015). Gastrointestinal bacterial infections are believed  
38 to be a primary cause of mortality among giant pandas, with alterations in gut  
39 microecology leading to digestive disorders and potential disease development. The  
40 intestinal disease in giant pandas can be caused by bacterial pathogens such as  
41 *Escherichia coli* (*E. coli*), *Klebsiella pneumoniae* (KP), *Campylobacter jejuni*, *Arizona*  
42 *bacillus*, *Pseudomonas aeruginosa* and other bacteria (Xiong Yan et al. 2000).

43 KP is a gram-negative, conditionally pathogenic bacillus. In captive giant pandas,  
44 KP infection has become increasingly prevalent and often occurs in conjunction with  
45 other bacteria, making it the most important pathogen (Wang Qiang et al. 1998; Wang  
46 Chengdong et al. 2006; Wang Xiaoyu et al. 2002). Infected pandas may develop  
47 haemorrhagic enteritis characterized by bloody stools and genitourinary bleeding  
48 characterized by haematuria, which can potentially result in fatal haemorrhagic sepsis.  
49 In addition, our previous study has identified the emergence of drug resistance in giant  
50 panda-derived KP (Xiong Yan et al. 1998).

51 According to our research, antimicrobials have been extensively utilized for the  
52 prevention and treatment of infectious diseases in giant pandas over the past few  
53 decades (Yang X et al. 2017; Guo L et al. 2015). The misuse of antibiotics is the primary  
54 factor contributing to the emergence of carbapenem-resistant *Klebsiella pneumoniae*  
55 (CRKP). Furthermore, horizontal gene transfer (HGT) via mobile genetic elements  
56 (MGEs) such as integrons, transposons, integration-coupled elements, genomic islands  
57 and plasmids plays an important role in disseminating antibiotic resistance genes  
58 (ARGs) carried by MDR-KP (Chen Q et al. 2016; Partridge et al. 2009). Integrons  
59 possess the ability to capture, transform and adapt one or more resistance gene cassettes

60 into functionally expressed genes through self-acting gene expression systems (Gillings  
61 et al. 2014). Their association with plasmids also facilitates the transfer of these genes  
62 among different bacterial species. The three main types of MGEs associated with  
63 antimicrobial resistance are classified as type 1, type 2 and type 3 integrons (Kaushik  
64 et al. 2018).

65 Recent studies have identified a large number of antimicrobial resistant bacteria  
66 (ARB), ARGs and their MGEs (including integrons) in *E. coli* isolated from captive  
67 giant pandas (Yang, X. et al. 2016; Yang, X. et al. 2018; Mustafa et al. 2021). However,  
68 limited information is available regarding the prevalence of CRKPs, the diversity of  
69 ARGs and MGEs, and the correlation between antimicrobial resistance and the  
70 occurrence of integron gene cassettes in CRKP among captive giant pandas (Yang, X.  
71 et al. 2016). Additionally, there is a lack of knowledge about the antimicrobial  
72 resistance profiles across different age groups of giant pandas. The objective of this  
73 study was to analyze the antimicrobial resistance profiles of 178 KP strains collected  
74 from fecal samples obtained from captive giant pandas belonging to various age and  
75 sex groups. Furthermore, we aimed to investigate the presence of ARGs, integrative  
76 subgene cassettes and other MGEs in 8 CRKP strains. These findings will provide  
77 valuable insights for guiding appropriate use of clinical antibiotics in giant pandas.

## 78 **2. Materials and Methods**

### 79 **2.1 Bacterial isolates and screening for carbapenemases phenotype**

80 One hundred seventy-eight nonduplicated KP isolates were collected from fresh  
81 feces of captive giant pandas at the Chengdu Research Base of Giant Panda Breeding  
82 (Panda Base) in Sichuan, China, between 2018 and 2019. These isolates were identified  
83 as KP by Gram staining, 16S rDNA analysis and bacterial biochemical identification.  
84 Carbapenemases production was screened in all isolates using cefotaxime (CTX) and  
85 ceftazidime (CAZ) alone according to CLSI guidelines (2019). The presence of  
86 carbapenemases in the isolates was determined phenotypically by observing diameter  
87 enhancement of the inhibition zone around the clavulanate disk and corresponding  $\beta$ -  
88 lactam antimicrobial disk. If the enhancement value exceeded 5 mm, the isolate was  
89 considered an carbapenemases producer.

## 90 **2.2 Antimicrobial susceptibility testing of CRKP isolates**

91 The antibiotic resistance testing of CRKP isolates was performed using the disk  
92 diffusion method (K-B method) against a panel of antibiotics, including piperacillin  
93 (PIP), moxalactam (MOX), ceftazidime (CAZ), cefixime (CFM), ceftazidime (CMZ),  
94 cefepime (FEP), cefotaxime (CTX), cephalixin (CA), cephalosin (CZ), ceftriaxone  
95 (CTR), cefoxitin (FOX), piperacillin/tazobactam (TZD), cefuroxime (CXM), cefaclor  
96 (CEC), ampicillin/sulbactam (AMS), cefoperazone (CFP), ceftizoxime (ZOX),  
97 aztreonam (AT), meropenem (MEM), imipenem (IPM), kanamycin (K), gentamicin  
98 (GM), streptomycin (S), enoxacin (ENX), ofloxacin (OFX), norfloxacin (NOR),  
99 lomefloxacin (LOM), fleroxacin (FO), levofloxacin (LVX), ciprofloxacin (CIP),  
100 gatifloxacin (GAT), chloramphenicol (C), azithromycin (AZM), doxycycline (DX),  
101 minocycline (MI), compound sulfamethoxazole (SXT), trimethoprim (TMP). The  
102 antibiotic disks were purchased from Hangzhou Microbiological Reagent Co. Ltd,  
103 Hangzhou, China. *E. coli* ATCC25922 was used as the quality control bacterial strain.  
104 The results were interpreted as susceptible (S), intermediate (I), and resistant (R) based  
105 on the interpretative criteria of the CLSI 2020.

## 106 **2.3 DNA extraction of CRKP isolates**

107 The CRKP isolates were subjected to total genomic DNA extraction using the  
108 TIANamp Bacteria DNA Kit (Tiangen Biotech, Beijing, China) following the  
109 manufacturer's protocol. Subsequently, the DNA samples were stored at -20 °C.

## 110 **2.4 Antibiotic resistance genes analysis of CRKP isolates**

111 High-throughput qPCR (HT-qPCR) reactions were conducted using the Wafergen  
112 smartchip Real-time PCR system to analyze the antibiotic resistance genes. A total of  
113 89 primer sets were employed, which were listed in supplementary Table 1 for the  
114 detection of resistance genes. Each sample was simultaneously replicated three times.  
115 Following a pre-denaturation step at 95 °C for 10 min, amplification was performed  
116 through 30 cycles according to the following program: denaturation at 95 °C for 30 s,  
117 annealing at 60 °C for 30 s. The obtained results were then analyzed with smartchip  
118 qPCR Software to exclude wells exhibiting multiple melting peaks or amplification  
119 efficiency beyond the range (90%-110%).

## 120 **2.5 The Mobile genetic elements (MGEs) analysis of CRKP isolates**

121 Twenty-three pairs of primers were used to detect MGEs in CRKP isolates by PCR,  
122 following previously described protocols (Levesque, Piche et al. 1995, White, McIver  
123 et al. 2001, Zou, Li et al. 2018, Zhu, Pan et al. 2020). The sequences of primers were  
124 listed in supplementary Table 1. PCR amplification was performed in a total volume of  
125 25  $\mu$ L containing 12.5  $\mu$ L of Dream Taq Green PCR Master Mix (2 $\times$ ), 8.5  $\mu$ L ddH<sub>2</sub>O,  
126 and each forward primer and reverse primer at a concentration of 1  $\mu$ L, DNA template  
127 2  $\mu$ L. Amplification was carried out under the following thermal cycling conditions:  
128 pre-denaturation at 95 °C for 5 min, followed by a total of 30 cycles consisting of  
129 denaturation at 95 °C for 30 s, annealing at the specified temperature for 30 s, extension  
130 at 72 °C for 30 s, and final extension at 72 °C for 10 min. PCR products were  
131 subsequently subjected to 1% agarose gel at 120 V, 0.5  $\times$  TAE buffer electrophoresis  
132 for 38 min.

## 133 **2.6 The virulence gene analysis of CRKP isolates**

134 The multiplex PCR reaction mixtures for 16 virulence genes (magA-fimH-uge-  
135 iutA, wabG-rmpA-cnf-ycf, hly-iroN-K2a-mrkD, kpn-allS-entB-wcaG) in CRKP  
136 isolates were divided into four different sets (Candan ED et al. 2015). Each set consisted  
137 of a total volume of 50  $\mu$ L containing 25  $\mu$ L of Dream Taq Green PCR Master Mix (2 $\times$ ),  
138 2  $\mu$ L of total DNA, 22  $\mu$ L ddH<sub>2</sub>O, and each forward primers and reverse primers  
139 (Sangon Biotech Co., Ltd., Shanghai, China) at a concentration of 0.5  $\mu$ L. The  
140 amplification process was carried out with the following thermal cycling conditions:  
141 pre-denaturation at 95 °C for 5 min, followed by 30 cycles consisting of denaturation  
142 at 94 °C for 1 min, annealing at 58 °C for 1 min, extension at 72 °C for 1 min, and final  
143 elongation at 72 °C for 10 min. Finally, the PCR products were subjected to 2% agarose  
144 gel at 120 V, 1  $\times$  TAE buffer electrophoresis for 38 min.

## 145 **2.7 The molecular epidemiology analysis of CRKP isolates**

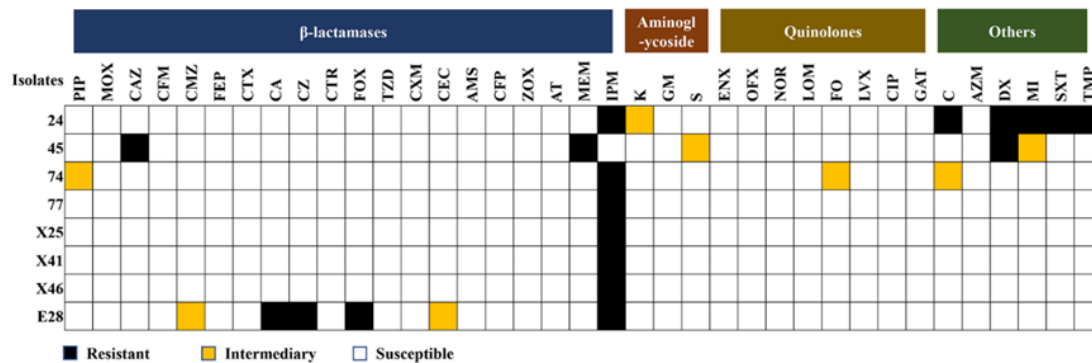
146 PFGE was conducted to investigate the molecular epidemiology of the CRKP  
147 isolates with XbaI-digested and genotyped DNA. The genomic DNA restriction  
148 patterns of the isolates were analyzed and interpreted based on the previously  
149 established criteria (Han, Zhou et al. 2013). Additionally, in order to further assess

150 whether clonal spread influenced the dissemination of carbapenemase-producing KP  
 151 isolates in giant panda, MLST was performed by amplifying internal fragments of seven  
 152 *K. pneumoniae* housekeeping genes provided on the MLST website  
 153 (<http://www.mlst.net>).

### 154 3. Result

#### 155 3.1 Antibiotic susceptibility of CRKP isolates

156 The screening and detection process yielded a total of 8 CRKP isolates, with a  
 157 isolation rate 4.5% (8/178). Prior to further analysis, we conducted an initial assessment  
 158 of antibiotic susceptibility. The results of antibiotic susceptibility revealed that seven of  
 159 eight CRKP strains (strain 24, 74, 77, X25, X41, X46, E28) exhibited resistance to  
 160 imipenem, while one strain (strain 45) showed resistance to meropenem. Additionally,  
 161 strain 24 demonstrated multiple resistance with a spectrum including imipenem,  
 162 chloramphenicol, doxycycline, minocycline, compound sulfamethoxazole, and  
 163 trimethoprim. Strain E28 displayed widely resistance to  $\beta$ -lactamase such as cephalexin,  
 164 cefazolin, ceftazidime, and imipenem. In addition to meropenem, strain 45 was resistant  
 165 to ceftazidime and doxycycline. However, strain 74, 77, X25, X41, X46 didn't exhibit  
 166 any resistance except for imipenem (Fig. 1).



167

168 **Fig. 1** The antibiotic susceptibility profiles of CRKP isolates.

169 Columns: 37 different types of antibiotics; Rows: the number of isolates in the study. PIP: piperacillin, MOX:

170 moxalactam, CAZ: ceftazidime, CFM: cefixime, CMZ: ceftazidime, FEP: cefepime, CTX: cefotaxime, CA:

171 cephalexin, CZ: cephazolin, CTR: ceftriaxone, FOX: ceftazidime, TZD: piperacillin/tazobactam, CXM: cefturoxime,

172 CEC: ceftazidime, AMS: ampicillin/sulbactam, CFP: cefoperazone, ZOX: ceftizoxime, AT: aztreonam, MEM:

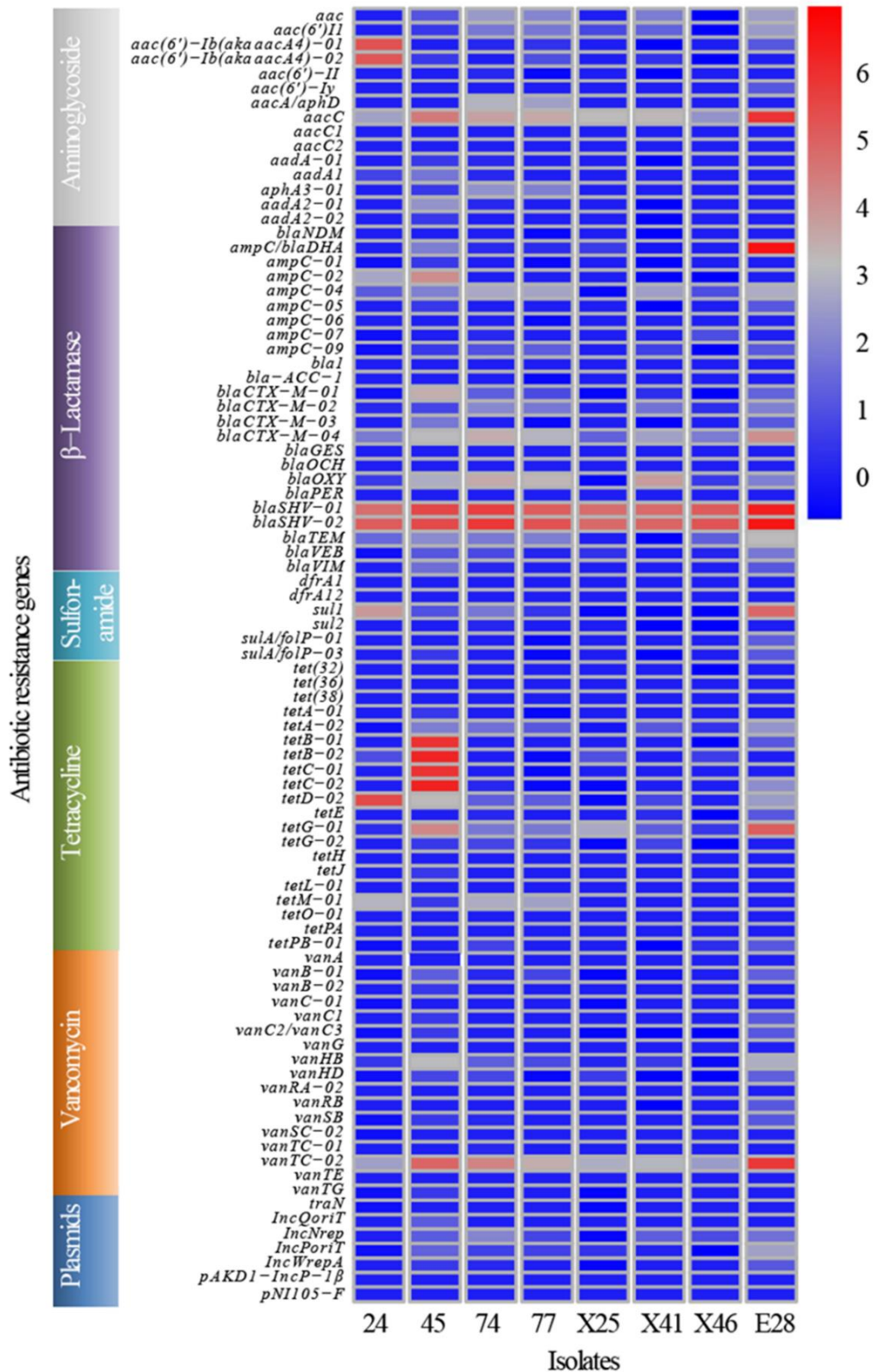
173 meropenem, IPM: imipenem, K: kanamycin, GM: gentamicin, S: streptomycin, ENX: enoxacin, OFX: ofloxacin,

174 NOR: norfloxacin, LOM: lomefloxacin, FO: fleroxacin, LVX: levofloxacin, CIP: ciprofloxacin, GAT: gatifloxacin,

175 C: chloramphenicol, AZM: azithromycin, DX: doxycycline, MI: minocycline, SXT: compound sulfamethoxazole,  
176 TMP: trimethoprim.

### 177 **3.2 Antibiotic resistance genes in 8 CRKP isolates**

178 A total of 89 ARGs were assessed in 8 CRKP isolates using HT-qPCR. Out of  
179 these, 47 ARGs were detected, 6 ARGs among which were positively present in all  
180 strains, including *aacC*, *blaCTX-M-04*, *blaOXY*, *blaSHV-01*, *blaSHV-02* and *vanTC-*  
181 *02*. However, 43 ARGs such as *aac (6')-II*, *aac (6')-Iy*, *aacC1*, *blaPER* were not detected.  
182 Furthermore, the abundance of the identified 47 positive ARGs varied among the strains.  
183 The top ten resistance genes of abundance were: *aacC*, *ampC/blaDHA*, *blaSHV-01*,  
184 *blaSHV-02*, *tetB-01*, *tetB-02*, *tetC-01*, *tetC-02*, *tetD-02*, and *vanTC-02*. It was worth  
185 noting that ARGs of tetracycline exhibited highly abundance in strain 45 (Fig. 2).



186

187

**Fig. 2** ARGs distribution in CRKP in giant panda.

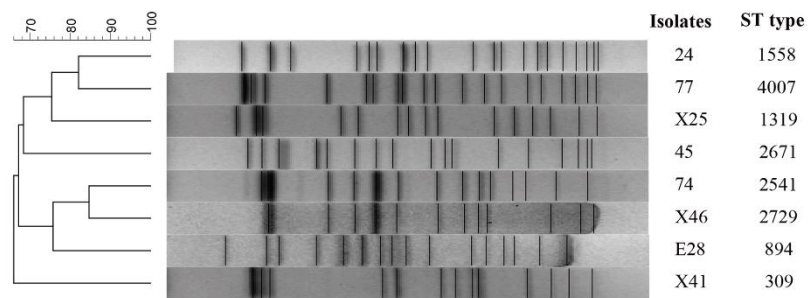
188

Columns: the number of isolates in the study; Rows: 89 different types of ARGs.

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**Fig.4** Molecular epidemiology of SRKP through the analysis of PFGE and MLST

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The dendrogram of PFGE, generated using the BioNumerics software, illustrated the relatedness of fingerprints

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among eight CRKP strains isolated from giant pandas. The dendrogram was constructed based on the restriction

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patterns of XbaI-digested KP genomes, with strain numbers and ST types depicted alongside the corresponding

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restriction profiles.

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#### 4. Discussion

222

The emergence of CRKP was initially documented in the United States, followed

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by subsequent reports from The French Republic, Sweden, and Canada (White, McIver

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et al. 2001, Chang, Sharma et al. 2021). In a hospital located in eastern China, the

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isolation rate of CRKP reached 41.3%, surpassing isolation rate 4.5% in our findings in

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giant pandas (Lu, Zhang et al. 2023). This disparity could potentially be attributed to

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the comparatively lower utilization of antibiotics for treating giant pandas, and the fact

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that our study isolated CRKP strains exclusively from fecal samples obtained from

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healthy giant pandas as opposed to clinical specimens collected in other investigations.

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The antibiotic susceptibility test of CRKP isolates revealed that 87.5% of the

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isolates exhibited resistance to imipenem; while 25.0% showed resistance to

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doxycycline. Additionally, 12.5% displayed resistance to meropenem, cefazolin and

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chloramphenicol, indicating varying degrees of drug resistance among the eight CRKP

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isolates in this study, particularly towards carbapenems. Notably, the resistance of

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CRKP isolates to imipenem and meropenem varied across different countries and

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regions; for instance, in Saudi Arabia, the rates were 55.6% and 61.7%, respectively;

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whereas in New York, USA, they were observed at 17.0% and 20.0%; similarly in

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Chongqing, China, they stood at 37.2% and 30.8%, respectively(White, McIver et al.

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2001, Chang, Sharma et al. 2021, Bshabshe et al. 2020; Kaiser et al. 2013). The

240 resistance rate of the eight CRKP strains to imipenem in this study (87.5%) was  
241 significantly higher compared to that of meropenem (12.5%). The reasons for this  
242 outcome could be attributed to several factors: firstly, the utilization of antibiotics  
243 varied across different countries and regions, and the results of resistance test suggested  
244 that veterinarians may preferentially administer imipenem during clinical treatment of  
245 giant pandas; secondly, there existed disparities in the resistance mechanisms between  
246 the two CRKP strains, as meropenem targets both PBP2 and PBP3, whereas imipenem  
247 exhibits a stronger affinity towards PBP2 only (Zhanel et al. 2007). Additionally, it was  
248 worth noting that all eight CRKP strains examined in this study demonstrated sensitivity  
249 towards amitrazan, kanamycin, gentamicin, ofloxacin and norfloxacin. These findings  
250 suggested potential clinical options for preventing and treating bacterial infections  
251 caused by these strains.

252 HT-qPCR technique enables rapid and sensitive quantification of numerous ARGs  
253 that confer resistance to nearly all major classes of antibiotics and provide a  
254 comprehensive profile of ARGs (Su et al. 2015). Therefore, this method was employed  
255 to perform a total of 90 ARGs on 8 CRKP strains. Out of these, 47 ARGs were detected,  
256 with 6 ARGs positively presented in all strains, namely *aacC*, *blaCTX-M-04*, *blaOXY*,  
257 *blaSHV-01*, *blaSHV-02* and *vanTC-02*. The most abundance ARGs identified included  
258 *ampC/blaDHA*, *blaSHV-01*, *blaSHV-02*, *tetB-01*, *tetB-02*, *tetC-01*, *tetC-02*, which was  
259 consistent with the findings reported by Hu (Hu et al. 2021). Simultaneously, the results  
260 from antimicrobial susceptibility testing revealed that the MDR isolates also exhibited  
261 significant resistance towards  $\beta$ -lactam antibiotics, particularly imipenem had an  
262 alarming resistance rate of 87.5%. The primary mechanism underlying KP's  $\beta$ -lactam  
263 antibiotic resistance lies in its production of extended-spectrum  $\beta$ -lactamases encoded  
264 by extended-spectrum  $\beta$ -lactamase genes that disrupt the  $\beta$ -lactam ring structure leading  
265 to antibiotic inactivation (Fluit et al. 2001). The resistance phenotype and genotype of  
266 the isolates in this study closely corresponded, despite the diversity observed in both  $\beta$ -  
267 lactam antibiotics and genes. Given the rapid dissemination and emergence of novel  
268 ARGs among bacteria populations worldwide, it became imperative to monitor closely  
269 for any resistance genes carried by giant panda-associated bacteria.

270 MGEs play a crucial role in facilitating the transmission of ARGs within KP strains.  
271 In this study, a total of 23 MGEs were analyzed. It was observed that *intI1* was present  
272 in all 8 strains, while there were significant variations in the detection rates of the other  
273 22 MGEs. The detection rates for *In1*, *tbrC*, *tnpU*, *tnpA/Tn21*, *merA*, *IS1133*, and *IS26*  
274 were found to be 12.5%, 37.5%, 75%, 37.5%, 12.5%, 12.5%, and 37.5%, respectively;  
275 whereas the remaining MGEs were not detected. Interestingly, different strains  
276 exhibited varying numbers of MGE species, with strain 24 carrying the highest diversity  
277 of MGEs. The emergence of multidrug resistance in microorganisms is believed to be  
278 closely linked to MGEs due to their ability to swiftly transfer multiple ARGs (Martinez,  
279 2009). The horizontal transfer of ARGs mediated by MGEs is considered as a primary  
280 mechanism driving the spread of ARGs (Chen et al. 2018). MGEs, serving as carriers  
281 of ARGs, play a pivotal role in capturing, accumulating, and disseminating these genes.  
282 This transfer can occur both intra-strain and inter-strain within KP, thereby facilitating  
283 the rapid and widespread proliferation of antibiotic-resistant bacteria. Moreover, the  
284 horizontal transfer of ARGs contributes to the emergence of drug-resistant and multi-  
285 drug-resistant bacteria in clinical settings (Chamosa et al. 2017). In this study, we found  
286 that multidrug-resistant KP strains isolated from different giant pandas carried common  
287 ARGs along with a substantial number of MGEs detected. Therefore, it is plausible to  
288 hypothesize that there might be sharing of ARGs among the giant pandas in this study.  
289 However, further investigations were required to determine the precise mechanisms  
290 underlying the sharing of ARGs.

291 The detection of 16 common virulence genes from 8 CRKP strains was also an  
292 important part of this study. Seven genes, namely *wabG* (100%), *uge* (100%), *ycf*  
293 (100%), *entB* (87.5%), *kpn* (50%), *all* (25%), and *wcaG* (25%), were found to be  
294 positive. Additionally, among the strains, E28 carried the highest number of virulence  
295 genes, with 6 virulence genes identified as *wagGI*, *uge*, *all*, *wcaG*, *kpn*, *ycf*, while other  
296 strains carried only 4 or 5 virulence genes, indicating a relatively high prevalence of  
297 multiple-virulence-gene-carrying strains in adult giant panda-sourced KP. Genes  
298 associated with lipopolysaccharide (LPS) production primarily included *uge* and *wabG*,  
299 encoding UDP-galactose-4-epimerase and galactosyltransferase, respectively. These

300 two types of virulence genes are commonly presented in a variety of virulence factors  
301 within KP strains. Studies have demonstrated that KP lacking the *uge* gene produces  
302 incomplete lipopolysaccharides (Regué et al. 2004). Mutations or deletions of the *wabG*  
303 gene in KP can result in the absence of certain capsular antigens and hemolysins, which  
304 reduces pathogenicity in animal infection models (Cogen et al. 2009). In addition, there  
305 are several other genes potentially associated with the virulence of KP, including *kpn*  
306 gene involved in capsule polysaccharide synthesis, and *wcaG* and *wagGI* genes  
307 encoding extracellular toxins. Research has suggested that genes related to iron carriers,  
308 *pili*, and lipopolysaccharides are located on virulence plasmids in highly virulent KP  
309 strains and serving as specific molecular markers for high-virulent strains (Russo et al.  
310 2019; Xu Shuibao et al. 2017). Therefore, it can be inferred that *wabG*, *uge*, and *ycf*  
311 may potentially serve as high virulence genes. In this study, the LPS carrier genes *wabG*  
312 and *uge* exhibited a detection rate of 100%, which aligned with the findings of Zhang  
313 Wenju (Zhang Wenju et al. 2020). Conversely, unlike Han Kun's study, the *fimH* pilus  
314 virulence gene was not detected in KP strains from different animal sources, indicating  
315 variations in the carried virulence genes among KP isolates. The iron carrier gene *entB*  
316 displayed a detection rate of 87.5%, while all urease gene had a detection rate of 25%.  
317 These results were consistent with those reported by Wang Zhehong (Wang Zhehong et  
318 al. 2021). This study identified one strain of isolated bacteria carrying 6 virulence genes,  
319 including lipopolysaccharide carrier genes and urease genes, suggesting its potential as  
320 a highly virulent KP strain isolated from giant pandas, laying the foundation for future  
321 investigations on the pathogenicity.

322 The DNA fingerprinting by PFGE is considered to be the “gold standard” for  
323 typing of microorganisms due to the adequate consistency within a single assay, which  
324 is widely used in molecular epidemiology (Jouni Heikkinen et al. 2022). MLST  
325 technique is a well-established procedure employed for characterizing bacterial species  
326 by sequencing internal fragments of typically seven housekeeping genes (Jolley et al.  
327 2018). Eight strains of bacteria exhibited distinct PFGE patterns, indicating a high  
328 degree of genetic diversity ( $\leq 84\%$ ) among these CRKP strains. Further analysis using  
329 MLST revealed that the eight CRKP strains could be classified into different STs. This

330 study successfully divided the eight CRKP strains into eight distinct STs, indicating that  
331 despite the observed diversity among CRKP strains isolated from various giant pandas,  
332 some strains still share a common origin.

## 333 **5. Conclusion**

334 In this study, we investigated eight strains of CRKP isolated from giant pandas to  
335 determine their antibiotic susceptibility, ARGs, MGEs, virulence genes, and molecular  
336 epidemiology. The most abundant ARGs included ampC/blaDHA, blaSHV-01,  
337 blaSHV-02, tetB-01, tetB-02, tetC-01, and tetC-02. Analysis of MGE revealed the  
338 presence of intI1 in all strains, while other MGEs exhibited varying detection rates.  
339 Strain 24 carried the highest diversity of MGE species. Seven virulence genes including  
340 wabG, uge, ycf, entB, kpn, alls, and wcaG were detected across the strains with varying  
341 proportions. Molecular epidemiology analysis using PFGE patterns indicated a high  
342 level of genetic diversity among the CRKP strains. MLST analysis classified the strains  
343 into different STs.

344 In conclusion, this study highlighted the remarkable diversity of CRKP strains in  
345 giant pandas, exhibiting varying degrees of antibiotic resistance and the presence of  
346 multiple ARGs and virulence genes. These findings emphasized the critical significance  
347 of monitoring and researching antibiotic resistance in wildlife populations to safeguard  
348 the well-being of these endangered animals.

## 349 **6. ETHICS STATEMENT**

350 The animal study was reviewed and approved by the Institutional Animal Care and  
351 Use Committee (IACUC) of the Chengdu Research Base of Giant Panda Breeding (No.  
352 2018017).

## 353 **7. AUTHOR CONTRIBUTIONS**

354 Xia Yan, Xiaoyan Su, Rong Hou, Lin Li, Chanjuan Yue, and Songrui Liu  
355 contributed to conception and design of the study. Xiaoyan Su played a guiding role in  
356 carrying out the experiment. Xia Yan, Mei Yang, Yunli Li, and Dongsheng Zhang  
357 collected samples. Xia Yan, Mei Yang, and Yang Zhou performed bacterial  
358 identification and isolation and related component testing. Xiaoyan Su, and James  
359 Edward Ayala performed the statistical analysis. Xia Yan, Mei Yang, and Xiaoyan Su

360 wrote the first draft of the manuscript. All authors contributed to manuscript revision,  
361 read, and approved the submitted version.

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370

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Assay Name	Forward	Reverse	Classification
aac	CCCTGCGTTGTGGCTAATGT	TTGGCCACGCCAATCC	Aminoglycoside
aac(6)II	GACCCGATTAAAGCCCGATG	CTTGCCCTTGATATTCAGTTTTTATAACCA	Aminoglycoside
aac(6')-Ib(aka aacA4)-01	GTTTGAGAGGCAAGGTACCGTAA	GAATGCCTGGCGTGTTTGA	Aminoglycoside
aac(6')-Ib(aka aacA4)-02	CGTCGCCGAGCAAACCTTG	CGGTACCTTGCCTCTCAAACC	Aminoglycoside
aac(6')-II	CGACCCGACTCCGAACAA	GCACGAATCCTGCCCTTCTCA	Aminoglycoside
aac(6')-Iy	GCTTTGGGGATGCCCTCAAT	GGAGAACAAAAAATACCTTCAAGGAAA	Aminoglycoside
aacA/aphD	AGAGCCTTGGGAAGATGAAAGTTT	TTGATCCATACCATAGACTATCTCATCA	Aminoglycoside
aacC	CGTCACTTATTCGATGCCCTTAC	GTCGGCGCGGCATA	Aminoglycoside
aacC1	GGTCGTGAGTTCGGAGACGTA	GCAAGTCCCGAGGTAATCG	Aminoglycoside
aacC2	ACGGCAITTCGATTGCTTT	CCGAGCTTCACTAAGCAITTT	Aminoglycoside
aadA-01	GTTGTGCACGACGACATCAIT	GGCTCGAAGATACCTGCAAGAA	Aminoglycoside
aadA1	AGCTAAGCCGCAACTGCAAT	TGGCTCGAAGATACTTGCAA	Aminoglycoside
aadA2-01	ACGGCTCCGCAGTGGAT	GGCCACAGTAACCAACAAATCA	Aminoglycoside
aadA2-02	CTTGTCGTGCATGACGACATC	TCGAAAGATACCCGCAAGAATG	Aminoglycoside
aphA3-01	AAAAGCCCCGAAAGGAACTTG	CATCTTTCACAAAGATGTTGCTGTCT	Aminoglycoside
ampC/blaDHA	TGGCCCGCAGCAGAAAAGA	CCGTTTTATGCACCCAGGAA	Beta-Lactamase
ampC-01	TGGCGTATCGGGTCAATGT	CTCCACGGGCCAGTTGAG	Beta-Lactamase
ampC-02	GCAGCACGCCCCCGTAA	TGTACCCCATGATGCGCGTACT	Beta-Lactamase
ampC-04	TCCGGTGACGCGACAGA	CAGCACGCCCGGTGAAAGT	Beta-Lactamase
ampC-05	CTGTTCCGAGCTGGGTTCTATAAGTAAA	CAGTATCTGGTCAACCGGATCGT	Beta-Lactamase
ampC-06	CCGCTCAAAGCTGGACCATAC	CCATATCCTGCACGTTGGTTT	Beta-Lactamase
ampC-07	CCGCCACAGACAAGGACTA	GCTCGACTTCAACGCCGTAAG	Beta-Lactamase
ampC-09	CAGCCCGCTGATGAAAAAATATG	CAGCGAGCCCACTTCGA	Beta-Lactamase
blaI	GCAAGTTGAAGCGAAAGAAAAGA	TACCAGTATCAATCGCATATACACCTAA	Beta-Lactamase

bla-ACC-1	CACACAGCTGATGGCTTATCTAAAA	AATAAACCGGATGGGTCCCA	Beta-Lactamase
blaCTX-M-01	GGAGGCGTGACGGCTTTT	TTCAGTGCATCCAGACGAA	Beta-Lactamase
blaCTX-M-02	GCCGCGGTGCTGAAGA	ATCGGATTATAGTTAACCCAGGTCAGATTT	Beta-Lactamase
blaCTX-M-03	CGATAACCACACGCCGTTA	GCAITGCCCCAACGTCAGAIT	Beta-Lactamase
blaCTX-M-04	CTTGGCGTTGCGCTGAT	CGTTCATCGGCACGGTAGA	Beta-Lactamase
blaGES	GCAATGTGCTCAACGTTCAAG	GTGCCTGAGTCAATCTTCAAAAG	Beta-Lactamase
blaNDM	GGCCACACCCAGTGACAATATCA	CAGGCAGCCACCAAAGC	Beta-Lactamase
blaOCH	GGCGACTTGCGCCGTAT	TTTTCTGCTCGGCCATGAG	Beta-Lactamase
blaOXY	CGTTCAGGCGGCAGGTT	GCCGCGATATAAGATTTGAGAATT	Beta-Lactamase
blaPER	TGCTGGTTGCTGTTTTTGTA	CCTGCGCAATGATAGCTTCAT	Beta-Lactamase
blaSHV-01	TCCCATGATGAGCACCTTTAAA	TTCGTCACCGGCATCCA	Beta-Lactamase
blaSHV-02	CTTTCCCATGATGAGCACCTTT	TCCTGCTGGCGATAGTGGAT	Beta-Lactamase
blaTEM	AGCATCTTACGGATGGCATGA	TCCTCCGATCGTTGTCAAGAAGT	Beta-Lactamase
blaVEB	CCCGATGCAAAGCGTTAIG	GAAAGATTCCCCTTATCTATCTCAGACAA	Beta-Lactamase
blaVIM	GCACCTCTCGCGGAGATTG	CGACGGTGATGCGTACGTT	Beta-Lactamase
IncNrep	AGTTCACCCACCTACTCGCTCCG	CAAGTTCCTCTGTTGGGATTCGG	plasmids
IncPoriT	CAGCCTCGCAGAGCAGGAT	CAGCCGGGCAGGATAGGTGAAGT	plasmids
IncQoriT	TTCGCGCTCGTTGTTCTTCCGAGC	GCCGTTAGGCCAGTTTCTCG	plasmids
IncWrepA	GGCCATCGTATCAACGAGAT	ATTGGTGCGCTCAAAGTAGC	plasmids
pAKD1-IncP-1 $\beta$	GGTAAGATTACCGATAAACT	GTTTCGTGAAGAAGATGTA	plasmids
pNII105-F	CGCTAAGGATGTTTACAC	CTCAACCCTTCTAGGATT	plasmids
traN	GCTTGGCGGTCAGCAATT	TTAGGAATAACAATCGTACACCTTTAC	plasmids
dfrA1	GGAATGGCCCTGATATTCCA	AGTCTTGGCTCCAACCAACAG	Sulfonamide
dfrA12	CCTTACCGAACCGTCACACA	GCGACAGCGTTGAAAACAACACTAC	Sulfonamide
sulI	CAGCGCTATGCGCTCAAG	ATCCCGCTGCGCTGAGT	Sulfonamide

sul2	TCATCTGCCAAACTCGTCGTTA	GTCAAAAGAACGCCGCAATGT	Sulfonamide
suIA/foIP-01	CAGGCTCGTAAATTGATAGCAGAAG	CTTTCCTTGCGAATCGCTTT	Sulfonamide
suIA/foIP-03	CACGGCTTCGGCTCATGT	TGCCATCCTGTGACTAGCTACGT	Sulfonamide
tet(32)	CCATTACTTCGGACAACGGTAGA	CAATCTCTGTGAGGGCAATTAACA	Tetracycline
tet(36)	TGCAGGAAAGACCTCCCAITACAG	CTTTGTCCACACTTCCACGTACTATG	Tetracycline
tet(38)	TTAATGTGGCGGTATCTGTAGGTATT	TTGCCCTGGGAAATTTAATGCTTT	Tetracycline
tetA-01	GCTGTTTGTCTGCCCCGAAA	GGTTAAAGTTCCCTTGAACGCAAACT	Tetracycline
tetA-02	CTCACAGCCTGACCCTCGAT	CACGTTGTTATAGAAGCCCGCATAG	Tetracycline
tetB-01	AGTGGCCTTTGGATGCTGTA	AGCCCCAGTAGCTCCTGTGA	Tetracycline
tetB-02	GCCCAGTGCTGTTGTTGTCAT	TGAAAAGCAAACGGCCTAATAACA	Tetracycline
tetC-01	CATATCGCAATACATGCGA AAAA	AAAGCCGGGTAATAAGCAA	Tetracycline
tetC-02	ACTGGTAAAGGTAAACGCCATTGTC	ATGCATAAACCCAGCCATTGAGTAAG	Tetracycline
tetD-02	TGTCATCGCGCTGGTGATT	CATCCGCTTCCGGGAGAT	Tetracycline
tetE	TTGGCGCTGTATGCAATGAT	CGACGACCTATGCGATCTGA	Tetracycline
tetG-01	TCAACCAATTGCCGATTCGA	TGGCCCCGGCAATCATG	Tetracycline
tetG-02	CATCAGCGCCGGTCTTATG	CCCCATGTAGCCGAACCA	Tetracycline
tetH	TTTGGGTCATCTTACCAGCATTAA	TTGCGCATTATCATCCGACAGA	Tetracycline
tetJ	GGGTGCCGCCAATTAGATTACCT	TCGTCCAATGTAGAGCATCCATA	Tetracycline
tetL-01	AGCCCCAATTTATTCAAAGGAATTG	CAAATGCTTTCCCCCTGTTCT	Tetracycline
tetM-01	CATCATAGACACGCCAGGACATAT	CGCCATCTTTTGCAGAAATCA	Tetracycline
tetO-01	ATGTGGATACTACAACGCATGAGATT	TGCCCTCCACATGATATTTTTCCCT	Tetracycline
tetPA	AGTTGCAGATGTGTATAGTCGTAAACT ATCTATT	TGCTACAAGTACGAAAACA AA ACTAGAA	Tetracycline
tetPB-01	ACACCTGGACACGCTGATTTT	ACCGTCTAGAACGCCGGAATG	Tetracycline
vanA	AAAAGGCTCTGAAAACGCAGTTAT	CGGCCGTTATCTTTGTAAA AACAT	Vancomycin

vanB-01	TTGTCGGCGAAGTGGATCA	AGCCTTTTTCCGGCTCGTT	Vancomycin
vanB-02	CCGGTCGAGGAAACGAAATC	TCCTCCTGCAAAAAGATCAAC	Vancomycin
vanC-01	ACAGGATTGGCTATGAACCAT	TGACTGGCGATGATTTGACTATG	Vancomycin
vanC2/vanC3	TTTGACTGTCGGTGTGTGTA	TCAATCGTTTTCAAGGCAATGG	Vancomycin
vanC1	AGCGATAGCGGGTATTGAA	CAATCGTCAATTGCTCAITTTCC	Vancomycin
vanG	AITTTGAATTGGCAGGTATACAGGTTA	TGATTTGTCTTTGTCCATACATAATGC	Vancomycin
vanHB	GAGGTTTCCGAGGCGACAA	CTCTCGGCGGCAGTCGTAT	Vancomycin
vanHD	GTGGCCGATTATACCGTCATG	CGCAGGTCATTCAGGCAAT	Vancomycin
vanRA-02	CCACTCCGGCCTTGTCAAT	GCTAACACACATCCCCCTTGTTTT	Vancomycin
vanRB	GCCCTGTCGGATGACGAA	TTACATAGTCGTCTGCCTCTGCAT	Vancomycin
vanSB	GCGCGCAAAATGACAAAC	TTTGCCATTTTATTCGCACTGT	Vancomycin
vanSC-02	GCCATCAGCGAGTCTGATGA	CAGCTGGGATCGTTTTTTCCCTT	Vancomycin
vanTC-01	CACACGCATTTTTCCCATCTAG	CAGCCAACAGATCATCAAAAACAA	Vancomycin
vanTC-02	ACAGTTGCCCGCTGGTGAAG	CGTGGCTGGTCGATCAAAA	Vancomycin
vanTE	GTGGTGCCAAAGGAAGTTGCT	CGTAGCCACCGCAAAAAAAT	Vancomycin
vanTG	CGTGTAGCCGTTCCGTTCTT	CGGCATTACAGGTATATCTGGAAA	Vancomycin