

Graphical Abstract

SCOPING REVIEW: BIOINFORMATIC ANALYSIS OF THE MECC GENE IN THE STAPHYLOCOCCUS AUREUS STRAIN

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Original article

SCOPING REVIEW: BIOINFORMATIC ANALYSIS OF THE MECC GENE IN THE STAPHYLOCOCCUS AUREUS STRAIN

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Abstract

Antibiotic resistance is a natural phenomenon that has been accelerated due to its excessive use, resulting in longer hospital stays, increased patient mortality, and higher costs for treating infectious diseases. The *Staphylococcus aureus* strain is an opportunistic pathogen associated with nosocomial infections and often produces suppurative lesions; minor trauma and immunosuppression predispose to an infection development. The *MRSA* (methicillin-resistant *Staphylococcus aureus*) strain has a *SCCmec* segment, it is constituted by a structural *mec* gene that codes the *PBP2a* protein. In 2011, García-Álvarez *et al.* made the first report of the *mecC* gene in *MRSA* strains, obtained from both bovines and humans; this gene shares 69% homology with the *mecA* gene, in addition to having zoonotic potential. A systematic review allows to analyze the geographical distribution of the gene and to understand the genomic characteristics of the studied strains. We employed the PRISMA extension for Scoping-Reviews; the information was collected from 2012 to 2023 in PubMed. The inclusion criteria were: 1) type of sample used in the



study, 2) animal or human origin of the sample and 3) geographic region where the samples were taken. The presence of the *mecC* gene was observed in 25 countries around the world, with European countries accounting for the largest number of reports. The *mecC* gene was detected in *MRSA* strains in the *SCCmec XI* segment and most frequently with *CC130* clonal complexes. During the development of the present investigation, no publications were found regarding the presence of this gene in México.

Keywords: *mecC gene, Staphylococcus aureus strain, MRSA*, PRISMA, Scoping-Reviews, geographic distribution.

Introduction

The antibiotic resistance could be defined as the natural phenomenon by which bacteria employ different mechanisms to evade antibiotic drugs. This behavior has been accelerated due to the excessive use of antibiotics, resulting in increased treatment costs, prolonged hospital stays, and an increment in patient mortality [1, 2, 3, 4]. The World Health Organization (WHO) mentions that about 700,000 deaths per year happen because of infections caused by bacteria resistant to some antibiotic. This problem could cause millions of deaths in the future and generate economic losses [4, 5, 6]. Globally, for every 5 human diseases that arise each year, at least 3 are of animal origin [7]. Particularly, it is estimated that the death of human patients because of nosocomial infections is 32 per 100,000 inhabitants [8]. The *Staphylococcus aureus* strain is an opportunistic pathogen associated with nosocomial infections and often produces suppurative lesions; minor trauma and immunosuppression predispose to an infection development [9, 10]. About the specific case of México, at national level, there is no data regarding the percentage of incidence of nosocomial infections in veterinary medicine in the bibliographic review carried out to the date of this article.

The MRSA (methicillin-resistant *Staphylococcus aureus*) strain has a *SCCmec* segment, it is constituted by a structural *mec* gene; whether of type: *mecA*, *mecB* or *mecC*. The *mec* gene belongs to the *SCCmec XI* type and codes the *PBP2a* protein [11, 12], which retains the transglycosylase activity, restoring the peptidoglycan of the bacterial wall interrupted by beta-lactams [13]. In 2011, García-Álvarez et al. [14] made the first report of the *mecC* gene in *MRSA* strains, obtained from both bovines and humans; this gene shares 69% homology with the *mecA*



gene, in addition to having zoonotic potential. While Armand-Lefevre et al. conducted a study where they determined the presence of *MRSA* strains in farm caretakers and pigs, both without presenting clinical alterations [15]. Lozano et al. [16] mention that the *mecC* gene is found in clonal complexes (*CC*): *CC49*, *CC425*, *CC599*, *CC1943*, *CC2361* and mainly in *CC130*. This is in the case of samples taken from humans, although it has also been observed in farm and wild animals.

This is the way; we propose a systematic review of the current literature to analyze the geographic distribution of the gene and the genomic characteristics of the reported strains; with the aim to understand the causes of *mecC* gene epidemiology in *Staphylococcus aureus* strains and its impact on nosocomial diseases.

Methodology

We employed the the PRISMA extension for Scoping-Reviews [17], the data was collected from February to March 2024 from the PubMed database, which contains articles mainly related to the medical field [18]. The search was developed by the keywords: "*Staphylococcus aureus*" and "*mecC*" in a date range from 2012 to 2023. Data extraction was carried out using the methodology proposed by Arksey & O'Malley in 2005 [19]. The inclusion criterion was that the publications had to describe or indicate at least one of the following points: 1) the type of sample used in the study: blood sample, pus sample, sample from an anatomical area, milk, or other, 2) whether the origin of the sample was animal or human, and 3) the geographic region where the samples were taken.

Results

Of the total articles analyzed, 43 met the characteristics described in the methodology. The reports belonged to 25 countries around the world, represented in Figure 1, where it is observed the origin of the sample and the respective country. For samples of animal origin, the countries with presence of *mecC* gene were Spain with 23%, Germany, France, Hungary and Sweden with



9% and the rest of the countries with 4%. Human samples have been reported in Pakistan at 16%, Spain, France, and the United Kingdom at 11%, while other countries only 5%. Finally, for the food samples, France and Great Britain indicate 20% and the other countries about 10%.



Figure 1: Geographical distribution of the mecC gene and the origin of the samples.

In Figure 2, we present the incidence according to the sample type, with swabs from an anatomical area of animal origin having the highest number of reports. The incidences of human origin were found in those classified as other types of samples, while those of food origin only came from milk samples. Being located more frequently in swabs from anatomical areas of animals could indicate that the gene does not require a clinical or hospital environment for its dissemination. Which is important to understand, since the *Staphylococcus aureus* strain is an opportunistic pathogen associated with nosocomial infection.



Incidence according to the sample type and its origin

Figure 2: Incidence graph of sample types and where the mecC gene was found.

Regarding the genomic characteristics in Figure 3, we noticed that 30% of the countries reported the *SCCmec XI* type. From the works that mentioned the *CC*, in Figure 4 we show how 77% registered the presence of *CC130*, 8% the *CC425* and 7% the *CC49* type.



Figure 3: Percentage incidence of SSCmec XI type with the mecC gene.





Figure 4: Clonal complexes (CC) in which the mecC gene has been reported.

Finally, in Table 1, the clonal complexes and the countries in which they were reported are listed.



Table 1: Countries and CCs that have been reported with the mecC gene.

Country with reports	ССтес				
Belgium	СС97				
Hungary		CC130			
Portugal		CC130			
Iran		CC130			
Brazil	CC97				
Spain		CC130			
Czech Republic		CC130	CC425		
France		CC130			
United Kingdom		CC130			
Italy		CC130			
Slovenia		CC130			
Belgium		CC130			
England		CC130			
Great Britain		CC130		<i>CC49</i>	CC1943
Sweden		CC130	CC425		



Conclusions

Along this Scoping Review, we observed that the geographic distribution of the *mecC* gene is not homogeneous throughout the world, as European countries generate the largest number of reports. While the development of this research, no reports were found about the presence of the *mecC* gene in México. The population at greatest risk of acquiring the MRSA strain with the *mecC* gene, is that which is in constant contact with animals, whether domestic or wild. Regarding the genomic characteristics, we confirmed that the *mecC* gene in present in the *SCCmec XI* type, with a variability on the *CC* composition. Understanding the epigenetics of antibiotic resistance genes promotes the search for solutions that mitigate the clinical consequences of pathogens [20, 21]. Based on the analysis of the results obtained, the prospects that we propose in this work are: 1) to develop a meta-analysis that includes more databases to provide a broader picture of the *mecC* epidemiology, 2) continue in-depth research on the presence of the *mecC* gene in México or other countries in the Americas. To comprise the epidemiology of infectious diseases to help in their prevention, as well as in public global health care.

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Declaration of no conflict of interest

The authors declare that there is no conflict of interest.



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