

Molecular Characterization of Mycobacterial Ribonucleotide Reductase (RNR) and its Implication as a Novel Drug Target

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Abstract

The genus *Mycobacterium* consists of both pathogenic and non-pathogenic species. The emergence of MDR and XDR tuberculosis and opportunistic infections by non tuberculous mycobacterium in immunosuppressive persons are major concern now a days. The aim of the study was to characterize ribonucleotide reductase (RNR) of *Mycobacterium* species to produce information about the evolution of the gene which could further be used in targeting RNR as a novel drug target. Here we were analyzed RNR of 23 mycobacterial species. The sequence length of RNR region is about 975 bp. Out of 975 characters 625 (64.10%) are conserved sites (monomorphic) and 350 (35.89%) are variable sites (polymorphic). The total nucleotide diversity (π) is 0.120114 (12.011%). The RNR phylogeny approach in *Mycobacterium* species provides evidence of several evolutionary lineages evolving from the ancestral polymorphism and fixed in the descendant population. Species of mycobacteria causing tuberculosis or respiratory infection in humans have specific patterns of allele distribution in different motifs, which differentiate them from other opportunistic mycobacterial species. Molecular analysis and structural motif analysis of RNR suggests the occurrence of host-mediated genetic differentiation in mycobacterial species, which requires further wet lab investigations.

Keywords: *Mycobacterium*, Ribonucleotide reductase, Structural motif, Neutral evolution, Multi drug resistance.

Introduction

Mycobacterium is the genus of actinobacteria, consisting of more than 100 species [1]. The genus includes several pathogenic species viz, *Mycobacterium tuberculosis* causing tuberculosis and *Mycobacterium leprae* causing leprosy in humans. *M. tuberculosis* exhibits extraordinary capabilities to subvert and to resist the bactericidal response of their infected host. These capabilities led the bacillus to colonize one third of the world's population and nearly 1.4 million people are killed annually [2]. The emergence of drug resistance strains is a serious problem for TB control programmes. India and China have largest number of TB cases and the figure is less than one in ten; scale-up is expected in these countries [2]. Another aspect of mycobacterial infection is the emergence of non-tuberculous mycobacterial (NTM) infection in immunosuppressive patients and in healthy individuals which cannot be looked over. XDR-TB has an estimated cure rate of only 30% in patients with an uncompromised immune system compared to a 95% cure rate of drug sensitive tuberculosis [2]. Ribonucleotide reductase (RNR) also known as ribonucleoside diphosphate reductase is a central enzyme in DNA replication system in all organisms. The enzyme catalyzes the formation of deoxyribonucleotides (dATP, dGTP, dCTP and dUDP) from ribonucleotides (ADP, GDP, CDP and UDP) [3] which are further used as precursors of DNA synthesis. The mechanism of action of RNR is strictly conserved in all living organisms [4]. dTDP (deoxythymidine diphosphate) is synthesized by another enzyme (thymidylate kinase) from dTMP (deoxythymidine monophosphate). RNR plays a critical role in regulating the total rate of DNA synthesis so that DNA to cell mass is maintained at a constant ratio during cell division and DNA repair [5].

In the genome of *M. tuberculosis* the RNR is encoded by *nrdE* (Rv3051c) and *nrdF2* (Rv3048c) as well as a putative alternate small subunit encoded by *nrdF1* (Rv1981c), which contains key catalytic residues but cannot associate with *NrdE* to form a functional RNR [6,7]. Apart from the above RNR, the genome of *M. tuberculosis* also

contains *nrdZ* (Rv0570) which encodes a putative class II RNR [8]. The *nrdF1* gene is unable to substitute for *nrdF2* and that the class II RNR, *NrdZ*, cannot substitute for the class Ib enzyme, *NrdEF2* [6]. In this study an attempt has been made to compare the *nrdF2* of mycobacterial species to elucidate the evolution of RNR gene as well as the structural differences among them through bioinformatics tools, which might enlighten in adopting a new and safer drug for the cure of tuberculosis and other mycobacterial diseases.

Material and Methods

Dataset

The sequence of *nrdF2* of *M. tuberculosis* (H37Rv) was retrieved from NCBI, accession no "AL123456". Homologous sequences were retrieved from the BLAST search of Rv3048c at NCBI. Only the sequences having 95% query coverage and belong to the genus *Mycobacterium* was taken for further analysis (Table 1).

Nucleotide and haplotype diversity

The alignments of *nrdF2* sequences were done using CLUSTAL-X2. Variations in the nucleotides within each sequence were estimated through nucleotide diversity (π), average number of nucleotide differences (Kt) and haplotype diversity (HD). The calculations were

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Mycobacterium species	Accession No	Growth rate	Pathogenic nature
<i>M. tuberculosis</i>	CP003248	Slow	Tuberculosis in human
<i>M. bovis</i>	CP003900	Slow	Tuberculosis in cattle and Opportunistic pulmonary infection in humans, those who are working in cattle shed.
<i>M. africanum</i>	FR878060	Slow	Tuberculosis in human
<i>M. canettii</i>	FO203508	Slow	Lymphadenitis in human
<i>M. kansasii</i>	CP006835	Slow	Pulmonary infection resembles with tuberculosis in human
<i>M. paratuberculosis</i>	CP005928	Slow	Johne's disease in cattle and Crohn's disease in humans (In humans it is an opportunistic infection those who are working in cattle shed and are consuming unpasteurized milk)
<i>M. marinum</i>	CP000854	Slow	Infection in fish and opportunistic infection in humans those who are tending home aquaria or bathing in natural pools on the shores
<i>M. liflandii</i>	CP003899	Slow	Nodular and ulcerative skin lesions in <i>Xenopus</i> (Frogs)
<i>M. hominissuis</i>	AP012555	Slow	Respiratory infection in pigs and opportunistic infection in humans
<i>M. ulcerans</i>	CP000325	Slow	Buruli ulcer in human
<i>M. avium</i>	CP000479	Slow	Tuberculosis in birds and opportunistic infection in immune compromised humans
<i>M. intracellulare</i>	CP003323	Slow	Pulmonary disease in humans
<i>M. indicus pranii</i>	CP002275	Slow	Non pathogen
<i>M. chubuense</i>	CP003053	Rapid	Non pathogen
<i>M. smegmatis</i>	CP001663	Rapid	Non pathogen
<i>M. gilvum</i>	CP002385	Rapid	Non pathogen
<i>M. vanbaalenii</i>	CP000511	Rapid	Non pathogen
<i>M. neoaurum</i>	CP006936	Rapid	Non pathogen
<i>M. rhodesiae</i>	CP003169	Ungrouped	Non pathogen
<i>M. leprae</i>	AL583923	Slow	Leprosy in humans
<i>M. massiliense</i>	CP003699	Rapid	Non pathogen
<i>M. bolletii</i>	CP004374	Rapid	Non pathogen
<i>M. abscessus</i>	CU458896	Rapid	Non pathogen
<i>Arthrobacter</i> species	CP000454	Rapid	--

Table 1: *Mycobacterium* species used in this study with their Genbank Accession number, growth rate and pathogenic forms.

done using DnaSP 5.0 program [9]. The transition/transversion bias (R) was calculated using MEGA 4.0 [10].

Phylogenetic analysis

Phylogenetic analysis was performed by maximum parsimony (MP) method. The MP tree was obtained using the Close-Neighbor-Interchange algorithm with search level 3 in which the initial trees were obtained with the random addition of sequences (10 replicates). Phylogenetic analysis was conducted in MEGA4 [10]. A total of RNR of 23 mycobacterial species were included in the analysis and the RNR sequence of *Arthrobacter* sp was included in the analysis for rooting the phylogenetic tree.

Structural motif analysis

The retrieved nucleotide sequences were converted into protein sequences using translate tool at ExPASy Bioinformatics Resource portal (<http://web.expasy.org/translate>) and were saved in FASTA format. The structural motifs of nrdF2 sequences of *Mycobacterium* spp were generated by MEME Motif discovery tool to identify the similar motifs in each of the sequences. All the settings were set to default, except for the maximum number of Motifs which was increased from three to ten [11].

Results

Nucleotide diversity and haplotype diversity

The sequence length of the "nrdF2" region is about 975 bp. For combined alignment and analysis of "nrdF2", 975 characters were included, of which 625 (64.10%) were conserved sites (monomorphic) and 350 (35.89%) were variable sites (polymorphic). Out of 385 variable sites 278 were parsimony informative. The total nucleotide diversity (π)

was=0.120114 (12.011%) and average number of nucleotide difference was $K_2=117.11067$. The nucleotide frequencies were 0.216 (A), 0.175 (T), 0.313 (C), and 0.297 (G). The transition/transversion rate ratios were $k_1=5.879$ (purines) and $k_2=2.034$ (pyrimidines). The overall transition/transversion bias was $R=2.287$ and the bias were towards transitional mutation (Table 2).

Phylogenetic analysis

A phylogenetic tree was constructed from the aligned dataset of "nrdF2" region, consisting of 24 sequences including *Arthrobacter* sp as root. The consensus tree inferred from 5 most parsimonious trees (Figure 1). The consistency index was (0.490105), retention index (0.691549) and composite index was 0.379604 (0.338932) for all sites and parsimonyinformative sites (in parentheses). The MP tree was differentiated into two main clusters A and B with *Arthrobacter* sp as root of the tree. Main cluster A further differentiated into 4 sub-clusters A1, A2, A3 and A4. In sub-cluster A1, *M. africanum*, *M. bovis*, *M. tuberculosis*, *M. canettii* and *M. kansasii* were clustered together with a bootstrap value of 100%. In sub cluster, A2 *M. marinum*, *M. ulcerans* and *M. liflandii* grouped together at a bootstrap value of 100%. In sub-cluster, A3 *M. intracellulare*, *M. indicus pranii*, *M. avium*, *M. avium paratuberculosis*, and *M. avium hominissuis* grouped together at a bootstrap value of 100%. *M. leprae* grouped in subcluster A3 as

	A	T	C	G
A		2.92	5.21	29.05
T	3.59		10.59	4.94
C	3.59	5.93		4.94
G	21.12	2.92	5.21	

Table 2: Maximum composite likelihood estimate of the pattern of nucleotide substitution.

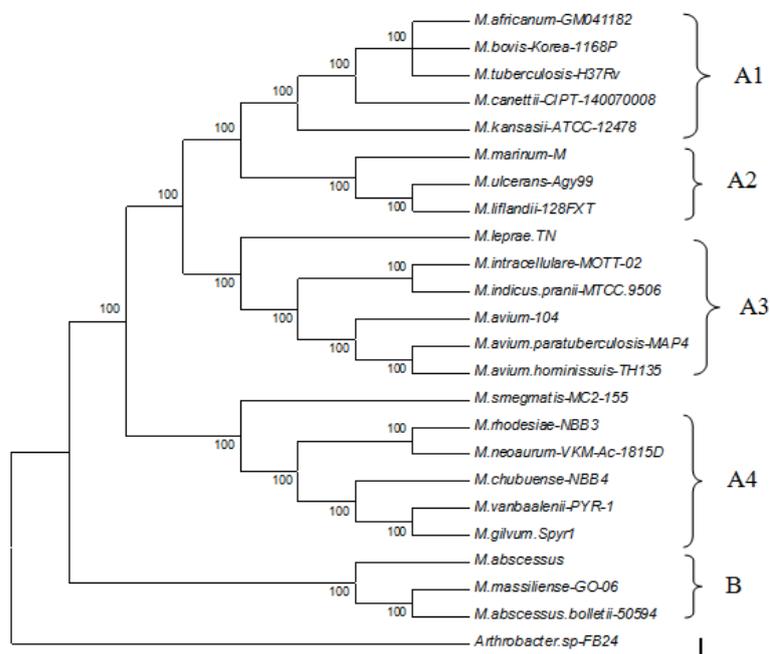


Figure 1: Phylogenetic tree obtained by Maximum Parsimony analysis of RNR region showing phylogenetic relationships among mycobacterial species. The tree is rooted with *Athrobacter* sp.

a paraphyletic group. *M. rhodesiae*, *M. neoaurum*, *M. chubuense*, *M. vanbaalenii* and *M. gilvum* were grouped together with a bootstrap value of 100% in subcluster A4, while *M. smegmatis* grouped in the same cluster as paraphyletic group. *M. abscessus*, *M. massiliense* and *M. abscessus bolletii* were clustered in main cluster B at a bootstrap value of 100%.

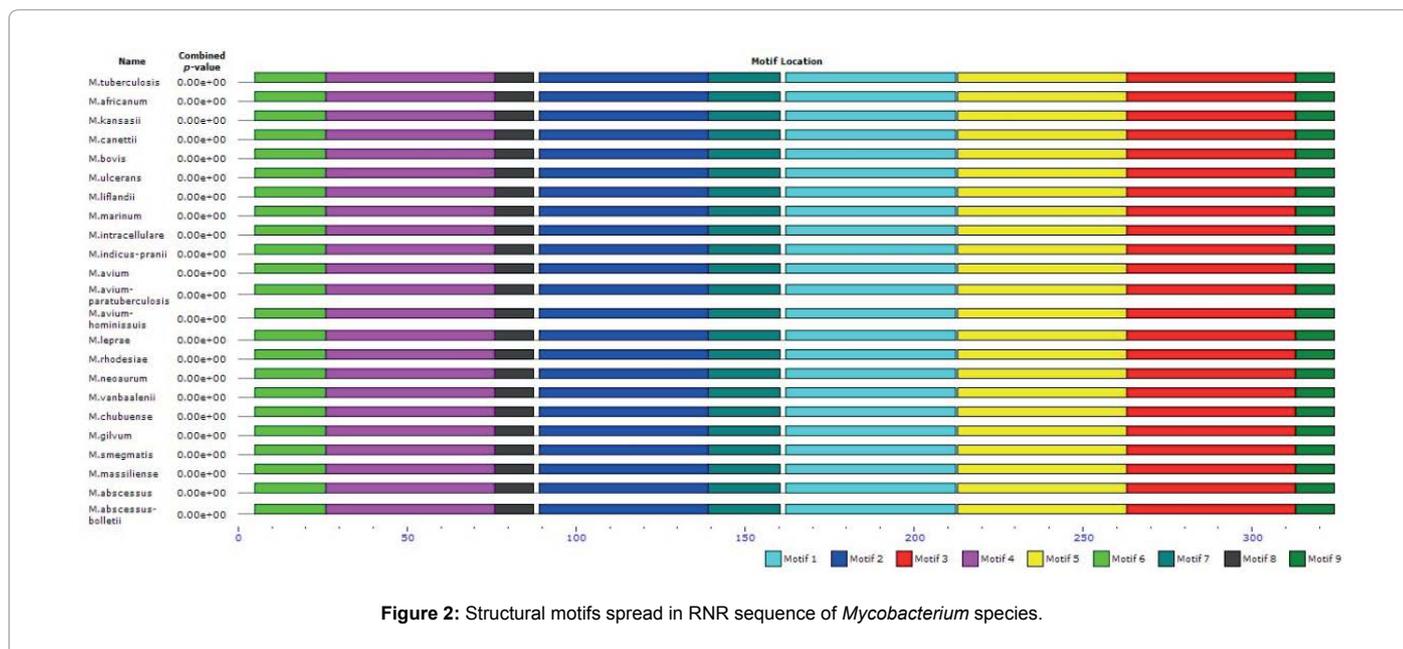
Structural motif analysis

Structural motif analysis of *nrdF2* protein segment resulted in 9 motifs (Motif 1 to 9) of varying size, 5 having 50 amino acids (motif 1, 2, 3, 4 and 5), 2 having 21 amino acid (motif 6 and 7), 2 having 11 amino acids (motif 8 and 9) in length (Figure 2). The most variable motifs are motif 4 and 5. In motif 5 fifteen variable sites were detected whereas in motif 4 seven variable sites. No variation in amino acid sequences were found in motif 8. In Mycobacterium tuberculosis complex cluster specific amino acids were found in 3 positions in motif 2 position 134, in motif 5 position 118 and in motif 9 position 320. Likewise in Mycobacterium avium complex the cluster specific amino acids were found in 6 positions, motif 1 position 208, motif 4 positions 47, 48, 51, 60 and in motif 5 position 219. In case of *M. marinum*, *M. ulcerans* and *M. liflandii* the cluster specific amino acids were found in 5 positions, motif 2 position 134, motif 5 positions 215, 221, motif 7 position 251 and in motif 9 position 318. In pathogenic species of mycobacteria host specific amino acid changes found in the position 208 (F to Y in motif1), 108 (K to R in motif2), 48, 51 and 60 (P to Q, G to A and L to M in motif4), 219 (T to K in motif5) for *M. avium* complex and in position 134 (P to R in motif2), 218, 219 and 221 (A to V, R to T or K to T and Q to A in motif5), 320 (E to D in motif9) for *M. tuberculosis* complex. In case of *M. marinum*, *M. ulcerance* and *M. liflandii* changes in amino acids were found in positions 134 (P and S in motif2), 214, 215, 217, 219 and 221 (L to A, V to A, D to E, T to R or K to R and Q to T in motif5),

19 (L to V in motif6), 145 and 151 (Q to E and E to D in motif7) and in 318 (E and Q in motif9). In case of *M. leprae*, *M. intracellulare* and *M. indicus pranii* the mutations were either associated with *M. tuberculosis* complex or with *M. avium* complex (Table 3). The amino acid changes in positions 96, 108 and 112, (Y to L, R to K and N to Q in motif2), 56 and 70 (H to G and T to M in motif4), 144 and 148 (M to L and K to R in motif7) were associated with the pathogenic species viz., *M. tuberculosis* complex, *M. marinum*, *M. ulcerance* and *M. liflandii*. In fast growing predominantly non-pathogenic but opportunistic pathogens have some amino acids common to pathogenic mycobacteria in the positions 108, 217, 219, 221, 19, 145 and 148 in different motifs. Motif span, important residues and variable residues were given in (Table 3).

Discussion

The species of genus Mycobacterium are cosmopolitan bacteria and are distributed over a broad eco geographical range. The growth rate of different species of Mycobacterium greatly varies from species to species in artificial medium except *M. leprae* which is not cultivable in any artificial medium. The emergence of MDR [12,13], XDR strains of *M. tuberculosis* [14] as well as the infection of NTMs in immune suppressive individuals is a major concern to the Anti microbacterial therapy. Excluding the infection by predominant species of mycobacteria viz, *M. tuberculosis*, *M. bovis* and *M. leprae* several other species of the genus are being reported as etiologic agent of human pulmonary infection [15]. Nearly one third of known Mycobacterium species have been observed to be associated with disease in humans [16]. The species of NTM associated with human disease are : *M. avium*, *M. intracellulare* [17,18], *M. kansasii* [19], *M. paratuberculosis* [20], *M. scrofulaceum* [21], *M. simiae* [22,23], *M. interjectum* [24], *M. xenopi* [25], *M. szulgai* [26], *M. fortuitum* [27], *M. chelonae* [28], *M. marinum* [29], *M. genavense* [30], *M. ulcerans* [31], *M. smegmatis* [32], *M. thermoresistible* [33], *M. neoaurum* [34], *M. vaccae* [35].



Presently little information is available on the evolution of RNR in different species of *Mycobacterium* which governs the central metabolic pathways by directing the DNA replication. In this study we provide an insight into the evolution of RNR in different species of *Mycobacterium* by combining phylogenetic analysis with structural motif analysis. In this study phylogenetic analysis based on RNR of *Mycobacterium* species resulted in 5 different sub-clades. We compared the clades with the phenotypic systematic of the genus *Mycobacterium* to establish the congruence between both methods and found that all the clades were perfectly differentiated on the basis of their growth behaviour. The fast growing species of *Mycobacterium* were grouped in the sub cluster A4 and main cluster B, whereas the slow growing *Mycobacterium* were grouped in sub cluster A1, A2 and A3. Our result support the phenotypic systematic described by Stahl and Urbance [36]. From this phylogenetic analysis we also found that the species of *Mycobacterium* were differentiated on the basis of their host dependency. The species like *M. africanum*, *M. bovis*, *M. tuberculosis*, *M. canettii* and *M. kansasii*, causing human tuberculosis [37-41] were grouped in sub cluster A1. Likewise *M. intracellulare* causing pulmonary tuberculosis in humans [42], *M. avium* causing tuberculosis in poultry and captive birds [43] and also in immune compromise patients/HIV patients [44], *M. avium paratuberculosis* causing tuberculosis in cattle [45], and *M. avium hominissuis* causing pulmonary tuberculosis in pigs, humans and horses [46,47] were placed in sub-cluster A3. Although the species in sub-cluster A3 were caused human pulmonary disease, the prevalence of these opportunistic infections was very low and also these infections are from animal sources. Similarly *M. marinum* causing infection in fishes [48] and *M. liflandii* causing infection in frogs [49,50] were grouped in sub-cluster A2. Exception to the host dependency clustering were species viz, *M. ulcerans*, causing buruli ulcers in humans and it was clustered in sub-cluster A2. This is because *M. ulcerans* is a specialized variants of a common *M. marinum* progenitor that have adapted to live in restricted environments [51].

The RNR phylogeny approach in *Mycobacterium* species provided evidence of several evolutionary lineages evolving from the ancestral polymorphism and fixed in the descendant populations. The species

of *Mycobacterium* were strongly supported as polyphyletic by the RNR phylogeny. A large number of parsimony informative sites (278) indicated significant genetic diversity between the species of *Mycobacterium* and this was supported by the higher values for total nucleotide diversity 0.120114 and average number of nucleotide differences (Kt=117.11067). It was confirmed that the bias was towards transitional mutation (Table 2). The higher value of transitional mutations might indicate that some species of *Mycobacterium* are under selection process, as suggested by Rosenberg et al [52], whilst working with mammalian genome. Exposure of pathogen populations to alternative hosts can cause relaxation or shifts in selection pressure, resulting in greater genetic diversity [53,54]. The high genetic diversity in RNR of *Mycobacterium* might be due to shift in host. It is evident not only from the clustering pattern but also from the change in amino acid pattern in different structural motifs. This result suggests that the evolutionary trend was driven by variability in the host species or change in environment due to the accumulation of beneficial mutations. This apparent genetic plasticity may also explain the wide host range of the mycobacterial species. However, defying the host-specific clustering pattern discussed earlier, *M. leprae* causing leprosy in human and nine banded armadillos clustered with A3 as paraphyletic group showing RNR genotype difference within the group. From structural motif analysis it was observed that most of the pathogenic mycobacteria have similar motif pattern having small nucleotide differences in the motifs elucidated. *M. avium* group had distinct mutational pattern which might be responsible for the host specific differentiation rather than growth rate (Shown in yellow color in Table 3). Likewise the species of mycobacteria causing tuberculosis or respiratory infection in humans had specific patterns of allele distribution in the amino acid positions 108, 134, 218 and 221 in different motifs, which differentiate them from other opportunistic mycobacterial species (Shown in violet color in Table 3). The pathogenic mycobacterium like *M. marinum* (in fish), *M. ulcerans* (in human opportunistic infection) and *M. liflandii* (in frogs) had specific type of distribution of alleles in different motifs (Shown in red color in Table 3). Human tuberculosis

causing mycobacteria including opportunistic pathogens had same

Motif	Motif 1		Motif 2		Motif 3	Motif 4										Motif 5										Motif 6				Motif 7			Motif 8	Motif 9								
	208	210	96	108		112	121	134	279	47	48	51	55	56	60	70	214	215	217	218	219	220	221	223	225	229	232	236	239	240	248	8			9	19	20	144	145	148	151	
Specis	F	R	L	K	Q	A	R	D	I	P	G	A	G	L	M	L	V	D	V	T	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	316	318	320	
<i>M. tuberculosis</i>	F	R	L	K	Q	A	R	D	I	P	G	A	G	L	M	L	V	D	V	T	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	V	E	D	
<i>M. africanum</i>	F	R	L	K	Q	A	R	D	I	P	G	A	G	L	M	L	V	D	V	T	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	V	E	D	
<i>M. bovis</i>	F	R	L	K	Q	A	R	D	I	P	G	A	G	L	M	L	V	D	V	T	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	V	E	D	
<i>M. canettii</i>	F	R	L	K	Q	A	R	D	I	P	G	A	G	L	M	L	V	D	V	T	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	V	E	D	
<i>M. kansasii</i>	F	R	L	K	Q	A	P	D	I	P	G	A	N	L	T	L	V	E	V	K	R	A	L	D	E	F	D	V	E	E	I	D	L	Q	L	Q	E	No Variable sites	V	E	E	
<i>M. leprae</i>	F	R	Y	K	S	A	N	D	L	P	G	A	S	L	T	L	V	D	A	R	R	A	L	E	F	D	V	E	R	I	D	L	Q	M	E	R	E	No Variable sites	V	E	E	
<i>M. intracellulare</i>	F	R	Y	R	N	A	P	D	L	P	G	A	H	M	T	L	V	D	A	R	K	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. indicus pranii</i>	F	R	Y	R	N	A	P	D	L	P	G	A	H	M	T	L	V	D	A	R	K	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. avium</i>	Y	R	Y	R	N	A	P	D	L	Q	A	A	H	M	T	L	V	D	A	K	R	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. paratuberculosis</i>	Y	R	Y	R	N	A	P	D	L	Q	A	A	H	M	T	L	V	D	A	K	R	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. hominissuis</i>	Y	R	Y	R	N	A	P	D	L	Q	A	A	H	M	T	L	V	D	A	K	R	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. marinum</i>	F	R	L	K	Q	A	S	D	I	P	G	A	G	L	M	A	A	E	A	R	R	T	L	D	E	F	D	V	E	E	I	D	V	Q	L	E	R	D	No Variable sites	V	Q	E
<i>M. ulcerance</i>	F	R	L	K	Q	A	S	D	I	P	G	A	G	L	M	A	A	E	A	R	R	T	L	D	E	F	D	V	E	E	I	D	V	Q	L	E	R	D	No Variable sites	A	Q	E
<i>M. liflandi</i>	F	R	L	K	Q	A	S	D	I	P	G	A	G	L	M	A	A	E	A	R	R	T	L	D	E	F	D	V	E	E	I	D	V	Q	L	E	R	D	No Variable sites	V	Q	E

The species over this bar are dominantly Pathogenic in nature and are slow growers while species are predominantly non pathogenic and fast growers

<i>M. abscessus</i>	F	R	Y	K	S	R	P	E	I	Q	N	D	H	L	T	R	V	E	A	K	R	A	I	E	D	Y	E	T	D	E	V	S	V	P	M	E	R	E	No Variable sites	N	E	E
<i>M. massiliense</i>	F	R	Y	K	S	R	P	E	I	Q	N	D	H	L	T	R	V	E	A	K	R	A	I	E	D	Y	E	T	D	E	V	S	V	P	M	E	R	E	No Variable sites	N	E	E
<i>M. boletii</i>	F	R	Y	K	S	R	P	E	I	Q	N	D	H	L	T	R	V	E	A	K	R	A	I	E	D	Y	E	T	D	E	V	S	V	P	M	E	R	E	No Variable sites	N	E	E
<i>M. vanbaalenii</i>	F	K	Y	R	N	A	P	D	I	P	N	A	H	L	T	L	E	E	A	T	R	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	N	E	E
<i>M. gilvum</i>	F	K	Y	R	N	S	P	D	I	P	N	A	H	L	L	L	A	D	A	T	R	Q	L	D	E	F	D	V	E	E	I	D	L	Q	M	Q	K	E	No Variable sites	V	E	E
<i>M. chubuense</i>	Y	R	Y	R	N	A	P	D	I	P	N	A	G	L	T	Q	Q	E	S	T	K	Q	L	D	E	F	D	V	E	G	I	D	L	Q	M	Q	K	E	No Variable sites	N	E	E
<i>M. smegmatis</i>	Y	R	L	K	N	A	P	D	I	Q	G	D	N	L	T	L	V	E	E	K	K	Q	L	D	E	F	D	V	E	S	I	D	L	Q	M	Q	R	D	No Variable sites	N	E	E
<i>M. neoaurum</i>	Y	K	Y	K	N	A	N	D	I	P	H	D	H	L	T	A	E	E	T	R	K	Q	L	D	E	F	D	T	E	G	I	D	L	Q	M	D	K	E	No Variable sites	V	E	E
<i>M. rocheiae</i>	Y	R	Y	R	N	S	P	D	I	P	G	D	H	L	T	A	T	A	A	T	Q	A	L	D	E	F	D	V	E	E	I	D	V	Q	M	R	K	E	No Variable sites	N	E	E

Table 3: Amino acid variation in structural motifs of mycobacterial species with their specific positions in different motifs.

type of allele distribution in different locus over a period of time which was fixed in the species level (Shown in green color in Table 3).

Conclusion

The major conclusion from this study is that the RNR sequences of mycobacterial species have unique characteristics in relation to the host species. Variability in the RNR sequence suggests that an evolutionary trend was driven by the encounters of an ancestral population of the pathogen with different host species. The existence of barriers to gene flow such as geographical separation, ecological adaptation or the accumulation of genetic

differences ultimately leads to distinct lineages. In this analysis we found that the accumulation of beneficial mutations over the span of time in mycobacterial species were not due to geographical separation or ecological adaptation but due to the shift and adaptation of new host species. From structural motif analysis it was found that the motifs of different mycobacterial species were of similar type in between the sub-cluster. Thus RNR might be a

useful target for new drug in MDR, XDR and non tuberculosis mycobacterial infection. the nucleotide differences were largely accumulated outside the motifs derived.

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References

- Hartmans S, De Bont JAM, Stackebrandt E (2006) The genus *Mycobacterium* nonmedical. *Prokaryotes* 3: 889-918.
- World Health Organization (2013) Tuberculosis Fact Sheet. No 104 (2013)
- Elledge SJ, Zhou Z, Allen JB (1992) Ribonucleotide reductase: regulation, regulation, regulation. *Trends Biochem Sci* 17: 119-123.
- Torrents E, Aloy P, Gibert I, Rodríguez-Trelles F (2002) Ribonucleotide reductases: divergent evolution of an ancient enzyme. *J Mol Evol* 55: 138-152.
- Herrick J, Sclavi B (2007) Ribonucleotide reductase and the regulation of DNA replication: an old story and an ancient heritage. *Mol Microbiol* 63: 22-34.
- Dawes SS, Warner DF, Tsenova L, Timm J, McKinney JD, et al. (2003) Ribonucleotide reduction in *Mycobacterium tuberculosis*: function and expression of genes encoding class Ib and class II ribonucleotide reductases. *Infect Immun* 71: 6124-6131.
- Boshoff HI, Reed MB, Barry III CE, Mizrahi V (2003) DnaE2 polymerase contributes to in vivo survival and the emergence of drug resistance in *Mycobacterium tuberculosis*. *Cell* 113: 183-193.
- Cole ST, Brosch R, Parkhill J, Garnier T, Churcher C, et al. (1998) Deciphering the biology of *Mycobacterium tuberculosis* from the complete genome sequence. *Nature* 393: 537-544.
- Librado P, Rozas J (2009) DnaSP v5: A software for comprehensive analysis of DNA polymorphism data. *Bioinformatics* 25: 1451-1452.
- Tamura K, Dudley J, Nei M, Kumar S (2007) MEGA4: Molecular Evolutionary Genetics Analysis (MEGA) software version 4.0. *Mol Biol Evol* 24: 1596-1599.
- Bailey TL, Williams N, Misleh C, Li WW (2006) MEME: discovering and analyzing DNA and protein sequence motifs. *Nucleic Acids Res* 34: 69-73.
- Caminero JA, Sotgiu G, Zumla A, Migliori GB (2010) Best drug treatment for multidrug resistant and extensively drug resistant tuberculosis. *Lancet Infect Dis* 10: 621-629.
- Migliori GB, Zellweger JP, Abubakar I, Ibraim E, Caminero JA, et al. (2012) European Union Standards for Tuberculosis Care. *Eur Respir J* 39: 807-819.
- Arora J, Bhalla M, Sidiq Z, Lal P, Behera D, et al. (2013) Predominance of Beijing genotype in extensively drug resistant *Mycobacterium tuberculosis* isolates from a tertiary care hospital in New Delhi, India. *Int J Mycobacteriol* 2: 109-113.
- Jesudason MV, Gladstone P (2005) Non tuberculous mycobacteria isolated from clinical specimens at a tertiary care hospital in South India. *Indian J Med Microbiol* 23: 172-175.
- Katoch VM (2004) Infections due to non-tuberculous mycobacteria (NTM). *Indian J Med Res.*
- Hampson SJ, Portaels F, Thompson J, Green EP, Moss MT, et al. (1989) DNA probes demonstrate single highly conserved strain of *Mycobacterium avium* infecting AIDS patients. *Lancet* 333: 65-68.
- Biet F, Boschirolu ML, Thorel MF, Guilloteau LA (2005) Zoonotic aspects of *Mycobacterium bovis* and *Mycobacterium avium* intracellulare complex (MAC). *Vet Res* 36: 411-436.
- Marras TK, Morris A, Gonzalez LC, Daley CL (2004) Mortality Prediction in Pulmonary *Mycobacterium Kansasii* Infection and Human Immunodeficiency Virus. *Am J Resp Crit Care Med* 170: 793-798.
- Sechi LA, Mura M, Tanda F, Lissia A, Solinas A, et al. Identification of *Mycobacterium avium* subsp. paratuberculosis in biopsy specimens from patients with Crohn's disease identified by in situ hybridization. *J Clin Microbiol* 39: 4514-4517.
- Marazzi MG, Chappier A, Defilippi AC, Pistoia V, Mangini S, et al. (2010) Disseminated *Mycobacterium scrofulaceum* infection in a child with interferon- γ receptor 1 deficiency. *Int J Infect Dis* 14: 167-170.
- Wayne LG, Sramek HA (1992) Agents of newly recognized or infrequently encountered mycobacterial diseases. *Clin Microbiol Rev* 5: 1-25.
- Balkis MM, Kattar MM, Araj GF, Kanj SS (2009) Fatal disseminated *Mycobacterium simiae* infection in a non-HIV patient. *Int J Infect Dis* 13: 286-287.
- Bagley AW, Gujral JS (2010) Novel Pulmonary Presentation of *Mycobacterium interjectum*. *J Indian Acad Clin Med.* 11: 66-68.
- Meybeck A, Fortin C, Abgrall S, Adle-Biassette H, Hayem G et al. (2005) Spondylitis Due to *Mycobacterium xenopi* in a Human Immunodeficiency Virus Type 1-Infected Patient: Case Report and Review of the Literature. *J Clin Microbiol* 43: 1465-1466.
- van Ingen J, Boeree MJ, de Lange WCM, de Hass PEW, Dekhuijzen PNR, et al. (2008) Clinical Relevance of *Mycobacterium szulgai* in The Netherlands. *Clin Infect Dis* 46: 1200-1205.
- Gebo KA, Srinivasan A, Perl TM, Ross T, Groth A, et al. (2002) Pseudo-outbreak of *Mycobacterium fortuitum* on a Human Immunodeficiency Virus Ward: Transient Respiratory Tract Colonization from a Contaminated Ice Machine. *Clin Infect Dis* 35: 32-38.
- Singh S, Rattan A, Kumar S (1992) Severe cutaneous *Mycobacterium chelonae* infection following a yellow jacket sting. *Tubercle Lung Dis* 73: 305-306.
- Rallis E, Koumantaki-Mathioudaki E (2007) Treatment of *Mycobacterium marinum* cutaneous infections. *Expert Opin Pharmacother* 8: 2965-2978.
- Bessesen MJ, Shlay J, Stone-Venohr B, Cohn DL, Reves RR (1993) Disseminated *Mycobacterium genavense* infection; clinical and microbiological features and response to therapy. *AIDS* 7: 1357-1361.
- Debacker M, Aguiar J, Steunou C, Zinsou C, Meyers WM, et al. (2004) *Mycobacterium ulcerans* disease: role of age and gender in incidence and morbidity. *Trop Med Int Health* 9: 1297-1304.
- Best CA, Best TJ (2009) *Mycobacterium smegmatis* Infection of the Hand. *HAND* 4: 165-166.
- Weitzman I, Osadezyl D, Corrado NL, Karp D (1981) *Mycobacterium thermoresistibile*; a new pathogen for humans. *J Clin Microbiol* 14: 593-595.
- Becker ML, Suchak AA, Wolfe JN, Zarychanski R, Kabani A, et al. (2003) *Mycobacterium neoaurum* bacteremia in a hemodialysis patient. *Can J Infect Dis Med Microbiol* 14: 45-48.
- Hachem R, Raad I, Rolston KV, Whimbey E, Katz R, et al. (1996) Cutaneous and pulmonary infections caused by *Mycobacterium vaccae*. *Clin Infect Dis* 23: 73-75.
- Stahl DA, Urbance JW (1990) The division between fast- and slow-growing species corresponds to natural relationships among the mycobacteria. *J*

- Bacteriol 172: 116-124.
37. Castets M, Rist N, Boisver H (1969) La variete africaine du bacille tuberculeux humain. *Med Afrique Noire* 16: 321-322.
38. Claxton PD, Eamens GJ, Mylrea PJ (1979) Laboratory diagnosis of bovine tuberculosis. *Aust Vet J* 55: 514-520.
39. Collins CH, Yates MD, Grange JM (1981) A study of bovine strains of *Mycobacterium tuberculosis* isolated from humans in south-east England. *Tubercle* 62: 113-116.
40. Evans AJ, Crisp AJ, Hubbard RB, Colville A, Evans SA, et al. (1996) Pulmonary *Mycobacterium kansasii* infection: comparison of radiological appearances with pulmonary tuberculosis. *Thorax* 51: 1243-1247.
41. Wirth T, Hildebrand F, Allix-Bequec C, Wolbeling F, Kubica T, et al. (2008) Origin, spread and demography of the *Mycobacterium tuberculosis* complex. *PLoS Pathog* 4: e1000160.
42. Dutta AK, Stead WW (1979) Long-term results of medical treatment in *Mycobacterium intracellulare* infection. *Am J Med* 67: 449-453.
43. Dhama K, Mahendran M, Tiwari R, Singh SD, Kumar D, et al. (2011) Tuberculosis in Birds: Insights into the *Mycobacterium avium* Infections. *Vet Med Int*
44. Karakousis PC, Moore RD, Chaisson RE (2004) *Mycobacterium avium* complex in patients with HIV infection in the era of highly active antiretroviral therapy. *Lancet Infect Dis* 4: 557-565.
45. Douarre PE, Cashman W, Buckley J, Coffey A, O'Mahony J (2010) Isolation and detection of *Mycobacterium avium* subsp. *paratuberculosis* (MAP) from cattle in Ireland using both traditional culture and molecular based methods. *Gut Pathogen* 2: 11-17.
46. Mijs W, de Hass P, Rossau R, Van der Laan T, Rigouts L, et al. (2002) Molecular evidence to support a proposal to reserve the designation *Mycobacterium avium* subsp. *avium* for bird-type isolates and '*M. avium* subsp. *hominissuis*' for the human/porcine type of *M. avium*. *Int J Syst Evol Microbiol* 52: 1505-1518.
47. Kriz P, Jahn P, Bezdekova B, Blahutkova M, Mrlik V, et al. (2010) *Mycobacterium avium* subsp. *hominissuis* Infection in Horses. *Emerg Infect Dis* 16: 1328-1329.
48. Ucko M, Colorni A (2005) *Mycobacterium marinum* infections in fish and humans in Israel. *J Clin Microbiol* 43: 892-895.
49. Ferreira R, Fonseca LS, Afonso Am, de Silva MG, Saad HM, et al. (2004) A report of mycobacteriosis caused by *Mycobacterium marinum* in bullfrogs (*Rana catesbeiana*). *Vet J* 171: 177-180.
50. Fremont-Rahl JJ, Ek C, Williamson HR, Small PL, Fox JG, et al. (2011) *Mycobacterium liflandii* outbreak in a research colony of *Xenopus* (*Silurana*) *tropicalis* frogs. *Vet Pathol* 48: 856-867.
51. Doig KD, Holt KE, Fyfe JAM, Lavender CJ, Eddiyani M, et al. (2012) On the origin of *Mycobacterium ulcerans*, the causative agent of Buruli ulcer. *BMC Genomics* 13: 258.
52. Rosenberg MS, Subramanian S, Kumar S (2003) Patterns of Transitional Mutation Biases Within and Among Mammalian Genomes. *Mol Biol Evol* 20: 988-993.
53. Burdon JJ (1993) The structure of pathogen populations in natural plant communities. *Annu Rev Phytopathol* 31: 305-328.
54. Burdon JJ, Silk J (1997) Sources and patterns of diversity in plant-pathogenic fungi. *Phytopathology* 87: 664-673.