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1 ***Candida auris* exhibits resilient biofilm characteristics *in vitro*:**  
2 **implications for environmental persistence**

3

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14 Running title: Phenotypic survival strategies of *Candida auris*

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16 *Key words:* *Candida auris*, disinfection, surface, biofilm

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23

1 **Abstract**

2 Surfaces within healthcare play a key role in the transmission of drug-resistant  
3 pathogens. *Candida auris* is an emerging multi-drug resistant yeast which has  
4 the ability to survive for prolonged periods on environmental surfaces. Here we  
5 show that the ability to form cellular aggregates increases survival after 14 days,  
6 which coincides with the upregulation of biofilm-associated genes. Additionally,  
7 the aggregating strain demonstrated tolerance to clinical concentrations of  
8 sodium hypochlorite and remain viable 14 days' post treatment. The ability of *C.*  
9 *auris* to adhere and persist on environmental surfaces emphasises our need to  
10 better understand the biology of this fungal pathogen.

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1 **Introduction**

2 Since its discovery in 2009, *Candida auris* has quickly emerged as a prolific  
3 nosocomial pathogen, responsible for a number of simultaneous outbreaks  
4 globally [1]. It is of considerable interest given the difficulties associated with  
5 identifying and treating this organism and its association with life-threatening  
6 infections and high mortality rates.

7  
8 A key attribute of its pathogenic repertoire is its ability to survive and persist in  
9 the environment, yet the methods employed by this multi-drug resistant  
10 pathogen to disseminate throughout healthcare environments are still not fully  
11 understood. This has profound implications for decontamination and infection  
12 control protocols. Therefore, understanding the mechanisms of spread and  
13 survival in the hospital environment is critical, particularly as it is able to persist  
14 on hospital fomites, extensively colonise individuals and also survive as biofilms  
15 [2, 3]. Although traditionally biofilms are associated with formation on an  
16 indwelling medical device or on a mucosal substrate, recent investigations have  
17 suggested that these communities can facilitate residence and survival upon  
18 surfaces within a clinical setting [4].

19  
20 Despite the obvious lack of nutrients, these communities adapt to survive and  
21 display increased tolerance to both heat and conventional disinfection  
22 treatments compared to a free floating, equivalent cell [5]. *C. auris* has been  
23 shown to readily transmit between hospital equipment such as reusable  
24 temperature probes and patients suggesting limitations of current infection  
25 control strategies (ref). Commonly used disinfectants have been shown to be  
26 highly effective when tested in suspension, yet our previous data indicates that  
27 adherent *C. auris* cells can selectively tolerate biocides including sodium  
28 hypochlorite and peracetic acid, in a substrate dependent manner [2].

29  
30 Given the lack of knowledge of survival strategies utilised by *C. auris*, we herein  
31 investigated the potential of phenotypic traits of biofilm formation and cellular  
32 aggregation that may aid environmental persistence and survival.

33

1 **Material and Methods**

2 *Microbial growth and standardisation*

3 *C. auris* clinical isolates NCPF 8973 (single cells) and NCPF 8978 (aggregates)  
4 were used throughout this study, with phenotypes determined visually using  
5 microscopy as previously described [6]. For survival experiments, *Candida*  
6 *glabrata* ATCC 2001 and *Candida parapsilosis* NCPF 8334 were used as  
7 reference species. All strains were stored and maintained on Sabouraud  
8 dextrose (SAB) agar (Oxoid, Hampshire, UK) at 4°C prior to propagation in yeast  
9 peptone dextrose (YPD; Sigma-Aldrich, Dorset, UK) medium overnight at 30°C.  
10 Cells were washed by centrifugation in phosphate buffered saline (PBS; Sigma-  
11 Aldrich), and standardised to desired concentration in selected media after  
12 counting using a haemocytometer.

13

14 *Fungal survival assay*

15 To assess the persistence of *Candida* species on dry, non-porous substrates  
16 methods were adapted from Welsh *et al* (2017) with slight modifications [7]. To  
17 simulate microbial spillages within the nosocomial environment, various growth  
18 conditions were used: PBS, artificial saliva (AS) and 10% fetal calf serum (FCS;  
19 Sigma-Aldrich, Dorset, UK). Cells were grown and standardised as described  
20 above to  $1 \times 10^8$  cells/mL in selected media. Standardised cell suspensions were  
21 added to Thermanox™ cover slips (Fisher Scientific, Loughborough, UK) and  
22 allowed to adhere for 90 minutes before removing media and washing to remove  
23 non-adherent cells. Following washing, biomass was subsequently removed  
24 from the cover slips via sonication in 1mL PBS in an ultrasonic water bath (Fisher  
25 Scientific, Loughborough, UK) at 35kHz for 10 minutes, defined as Day 0. In  
26 addition, cells were also maintained at ambient temperature for a period of 14  
27 days after initial adherence. Following growth and sonication, biomass was  
28 serially diluted for viable cell quantification using the miles and misra colony  
29 counting technique.

30

31 *Fluorescent Imaging*

32 For microscopic analysis, dry biofilms were prepared for 14 days as described  
33 above. Following incubation, biofilms were stained with FUN-1 dye (20µM  
34 [ThermoScientific, Loughborough, UK]). The dye was added to the biofilms and

1 incubated in the dark at 37°C for 30 minutes. Following staining, biofilms were  
2 washed 3 times with PBS, before images were captured and processed using  
3 an EVOS fluorescent microscope (ThermoScientific, Loughborough, UK).

#### 4 5 *Transcriptional analysis*

6 *C. auris* cells were grown as described above and RNA was extracted as  
7 described previously [8]. In brief, cells were removed from substrates by  
8 sonication, before being homogenized using a bead beater and RNA extracted  
9 using the TRIzol™ method. Following clean up with the RNeasy minikit (Qiagen,  
10 Crawley, UK), cDNA was synthesized using the High Capacity RNA to cDNA kit  
11 (Life Technologies, Paisley, UK) as per the manufacturer's instructions. All  
12 primer sequences used for quantitative polymerase chain reaction (qPCR) are  
13 shown in supplementary Table 1. The following PCR thermal profiles were used:  
14 holding stage at 50°C for 2 minutes, followed by denaturation stage at 95°C for  
15 10 minutes and then 40 cycles of 95°C for 3 seconds and 60°C for 15 seconds.  
16 Expression levels of each gene of interest were calculated using the  $\Delta\Delta C_t$   
17 method, with expression normalised to the housekeeping gene *ACT*.

#### 18 19 *Disinfection susceptibility testing*

20 For disinfection experiments, *C. auris* cells were standardised and prepared as  
21 described above in 10% FCS. Following the adhesion phase, non-adherent cells  
22 were removed through washing with PBS, before substrates were challenged  
23 with NaOCl at 1000 ppm (0.1%) for 5 and 10 minutes or 10000 ppm (1%) for 5  
24 minutes, with NaOCl diluted to working concentration in sterile water. Active  
25 agents were neutralised with 5% sodium thiosulphate (Fisher Scientific,  
26 Loughborough, UK) for 10 minutes, which has previously been shown to have  
27 no detrimental effects on *C. auris* viability [2]. Viable cells were both quantified  
28 immediately (Day 0) after neutralisation and 14 days after treatment using the  
29 colony counting technique as described above.

#### 30 31 32 *Statistical analysis*

33 Data distribution, statistical analysis and graph production was performed using  
34 GraphPad Prism (version 8; La Jolla, CA, USA). A Kruskal-Wallis with post-hoc

1 Dunns test was used to compare viable cell counts following desiccation.  
2 Student t-tests were used to compare cell recoveries following treatment. All  
3 experiments were performed in triplicate with differences in means were deemed  
4 significant if  $p < 0.05$ .

5

6

7

## 1 **Results**

2 Biofilm formation is typically associated with treatment failure and the recurrence  
3 of chronic infections, however recent studies have suggested that it may also be  
4 employed as an environmental survival strategy of nosocomial pathogens. To  
5 test the theory of biofilm formation being employed as an endurance strategy of  
6 *C. auris*, we performed survival studies using two phenotypically distinct isolates  
7 based on their ability to form cellular aggregates. Similar to previous findings [7],  
8 *C. auris* was found to remain viable for at least two weeks within a dry  
9 environment, regardless of the organic material it was suspended in (Fig 1A). It  
10 was shown that aggregating cells survived considerably greater than their  
11 single-cell counter parts in PBS ( $>2.5$  log CFU/mL;  $P < 0.001$ ) and 10% FCS ( $>4$   
12 log CFU/mL;  $P < 0.01$ ). Although not deemed statistically significant, the  
13 aggregating isolate was shown to recover over 2-log CFU/mL more viable cells  
14 than the single-celled isolate when suspended in artificial saliva. These findings  
15 were reinforced microscopically (Fig 1B), where aggregates of viable *C. auris*  
16 cells (red fluorescence) could be seen after 14 days following suspension in 10%  
17 FBS, compared to a sparsely populated surface with single cells which were not  
18 viable (green fluorescence). When compared to *C. glabrata* and *C. parapsilosis*,  
19 the single celled *C. auris* isolate was shown to yield significantly less viable cells  
20 than *C. glabrata* in both PBS ( $p < 0.001$ ) and AS ( $p < 0.001$ ). In addition, recovery  
21 of this isolate was also significantly less than that of *C. parapsilosis* in AS ( $P <$   
22  $0.01$ ). The aggregative *C. auris* isolate also yielded significantly less viable cells  
23 than *C. glabrata* in AS ( $p < 0.01$ ), however  $>1 \times 10^4$  CFU/mL were recovered.  
24 Given these observed differences between singled celled and aggregating  
25 strains of *C. auris*, we then assessed the potential role biofilm characteristics to  
26 confer these findings. Using transcriptional analysis of a panel of biofilm  
27 associated genes including genes involved in drug resistance (*Cdr1* and *Mdr2*),  
28 adhesion (*Als5* and *Hyr3*) and extracellular matrix (*Kre6* and *Exg*) were shown  
29 to be up-regulated in the aggregating *C. auris* phenotype (Fig 1C). Following 14  
30 days of starvation, both drug resistance genes were up-regulated by 1.6 and 2.6  
31  $\log_2$  fold change (*Cdr1* and *Mdr1* respectively) in the aggregative *C. auris* strain.  
32 In addition, the adhesin *Als5* (2.8  $\log_2$  fold change) and the glucan production  
33 protein *Kre6* (2.4  $\log_2$  fold change) also demonstrated increased expression in  
34 the aggregating strain compared to the single celled isolate.



1 Given the propensity of *C. auris* to survive for prolonged periods, we next tested  
2 the survival ability of the organism post disinfection treatment. Quantification  
3 immediately after NaOCl treatment revealed that viable *C. auris* cells were  
4 recovered regardless of exposure time or concentration, with the aggregating  
5 strain consistently yielding significantly more viable quantities irrespective of  
6 treatment condition (Fig 2). Interestingly, despite previously exposure to  
7 1000ppm NaOCl for 5 min, greater than  $1 \times 10^3$  CFU/mL of aggregating cells  
8 were recovered 14 days after treatment, compared to no recovery of viable  
9 single-celled equivalents (Fig 2A). However, following an increase in exposure  
10 time to 10 minutes (Fig 2B) or increase in NaOCl concentration to 10000ppm  
11 (Fig 2C), no viable *C. auris* cells were detected following 14 days' incubation.

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1 **Discussion**

2 Microorganisms employ various survival strategies to adapt and aid persistence  
3 in various ecological niches, enhancing the likelihood of effectively establishing  
4 transmission of infection. Here we show that cellular aggregation and expression  
5 of biofilm like characteristics of *C. auris* can facilitate prolonged survival after  
6 disinfection processes.

7

8 Biofilm formation is typically associated with treatment failure and the recurrence  
9 of chronic infections, however recent studies have suggested that it may also be  
10 employed as an environmental survival strategy of nosocomial pathogens. It has  
11 been previously shown that *C. auris* can survive and persist on various  
12 substrates including steel and plastic for up to four weeks [7]. In accordance with  
13 previous studies, we have demonstrated that viable *C. auris* cells can be  
14 recovered 14 days after inoculation across a number of biologically relevant  
15 soiling agents. The aggregating strain of *C. auris* was shown to have comparable  
16 survival properties to *C. glabrata* and *C. parapsilosis* in PBS, with *C. glabrata*  
17 recovering more viable cells in AS, likely due to the fact that *C. glabrata* is a  
18 commensal of the oral microbiota.

19

20 The aggregation phenomena were first described by Borman *et al* (2016), and  
21 was shown to be to less virulent *in vivo* in comparison to a single celled isolate,  
22 likely due to an inability of these isolates to disseminate in host [6]. These  
23 phenotypes were initially hypothesised to be related with their associated  
24 genetic clade, however more recently, the ability to aggregate has been shown  
25 to be an inducible trait, with exposure to triazoles and echinocandins triggering  
26 single-celled isolates to form aggregates [9]. Although it is not as virulent, we  
27 have shown that an aggregative isolate has an enhanced survival capacity  
28 compared to a single-celled isolate and can continually persist for at least 2  
29 weeks after exposure to clinical concentrations of NaOCl. The effect of the  
30 reversible switch in *C. auris* with regards to disinfection remains unknown, it  
31 could however be speculated that induction of aggregate formation from the  
32 single celled phenotype could be employed as a mechanism to facilitate  
33 environmental survival.

34

1 A recent study from Ledwoch and Maillard (2019) assessed the ability of a *C.*  
2 *auris* dry biofilm to withstand a panel of different disinfectants such as peracetic  
3 acid and chlorine dioxide [10]. In support with this and our previous study [2],  
4 they showed that adherent *C. auris* cells could selectively tolerate various  
5 different biocides, as well as significant levels of transferability post-treatment.  
6 The authors model used the *C. auris* type strain DSMZ 20192, which using  
7 traditional methodologies produces single cells, minimal levels of biofilm  
8 biomass and is susceptible to fluconazole (unpublished data). Therefore, it could  
9 be speculated that clinical isolates of this organism which can form more robust  
10 biofilms and have the capacity to aggregate, may have enhanced implications  
11 for both tolerance and transferability to treatment.

12  
13 To confirm a role for biofilms in facilitating environmental persistence, a panel of  
14 biofilm associated genes, chosen based upon our group's previous  
15 transcriptional characterisation of *C. auris* biofilms were assessed [8]. These  
16 genes were highly expressed across both phenotypes, however comparative  
17 analysis revealed increased expression of approximately 2-fold of several of  
18 these genes which are involved in adhesion, extracellular matrix (ECM)  
19 production and efflux pumps. ECM production is a well-documented resistance  
20 mechanism in pathogenic fungal biofilms such as *C. albicans*. Increasing ECM  
21 production could provide the necessary protection for *C. auris* to survive  
22 extended periods of desiccation and retain viability following terminal  
23 disinfection.

24  
25 In conclusion, this study reveals a survival mechanism employed by this  
26 emerging pathogenic yeast which can facilitate its environmental persistence,  
27 even after being challenged with NaOCl. Further studies understanding the  
28 underlying biology associated with the aggregative phenotype and dry surface  
29 biofilms will allow the development of more effective infection, prevention and  
30 control measures to control *C. auris* within the nosocomial environment.

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1 **Figure 1. *C. auris* cellular aggregates display biofilm characteristics to aid**  
2 **environmental survival**

3 The ability of *C. auris* to survive for prolonged periods of time was compared to  
4 *Candida glabrata* and *Candida parapsilosis* (A). Fungal cells were allowed to  
5 adhere to plastic coverslips for 90 minutes in PBS, Artificial Saliva (AS) and 10%  
6 FCS before removing non adherent cells and media. Viable cells were quantified  
7 after 14 days using the miles and misra technique. *C. auris* communities initially  
8 adhered in 10% FBS and left for 14 days were imaged following staining with  
9 FUN-1 dye (B). Gene expression profiles of dry *C. auris* cells on day 0 and 14  
10 was used to confirm up-regulation of biofilm associated genes following survival.  
11 (C). Positive fold changes indicate more up-regulation in aggregating cells and  
12 genes more highly up-regulated in single-celled *C. auris* are represented by  
13 negative fold changes.

14

15 **Figure 2. Cellular aggregates of *C. auris* can survive for prolonged periods**  
16 **following NaOCl disinfection.**

17 Survival was also monitored after a 14-day period following disinfection  
18 challenge with NaOCl. Viable cells of aggregating and single-celled *C. auris*  
19 strains were enumerated by CFU quantification following treatments with NaOCl  
20 at 1000ppm for 5 (A) and 10 minutes (B) and at 10000ppm for 5 minutes (C).  
21 Experiments were performed in triplicate on three separate occasions (\*,  $P <$   
22 0.05 \*\*,  $P < 0.01$  comparing day 0; ###,  $P < 0.0001$  comparing day 14), ND – not  
23 detected.

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