1 Title: Alternative evolutionary paths to bacterial antibiotic resistance cause distinct 2 collateral effects 3 4 Authors: C. Barbosa¹, V. Trebosc², C. Kemmer², P. Rosenstiel³, R. Beardmore⁴, H. 5 Schulenburg^{1*} and G. Jansen^{1*} 6 7 Affiliations: 8 ¹Evolutionary Ecology and Genetics, Zoological Institute, CAU Kiel, Kiel 24118, 9 10 Germany. ²BioVersys AG, Basel CH-4057, Switzerland. 11 12 ³Institute of Clinical Molecular Biology (IKMB), CAU Kiel, Kiel 24105, Germany. ⁴Biosciences, Geoffrey Pope Building, University of Exeter, Exeter EX4 4QD, United 13 14 Kingdom. 15 16 *Correspondence to hschulenburg@zoologie.uni-kiel.de or gjansen@zoologie.uni-17 kiel.de 18

20 Abstract (max. 250 words)

21 When bacteria evolve resistance against a particular antibiotic, they may 22 simultaneously gain increased sensitivity against a second one. Such collateral 23 sensitivity may be exploited to develop novel, sustainable antibiotic treatment strategies 24 aimed at containing the current, dramatic spread of drug resistance. To date, the 25 presence and molecular basis of collateral sensitivity has only been studied in few 26 bacterial species and is unknown for opportunistic human pathogens such as 27 Pseudomonas aeruginosa. In the present study, we assessed patterns of collateral 28 effects by experimentally evolving 160 independent populations of *P. aeruginosa* to 29 high levels of resistance against eight commonly used antibiotics. The bacteria evolved 30 resistance rapidly and expressed both collateral sensitivity and cross-resistance. The 31 pattern of such collateral effects differed to those previously reported for other bacterial 32 species, suggesting inter-specific differences in the underlying evolutionary trade-offs. 33 Intriguingly, we also identified contrasting patterns of collateral sensitivity and cross-34 resistance among the replicate populations adapted to the same drug. Whole-genome 35 sequencing of 81 independently evolved populations revealed distinct evolutionary 36 paths of resistance to the selective drug, which determined whether bacteria became 37 cross-resistant or collaterally sensitive towards others. Based on genomic and 38 functional genetic analysis, we demonstrate that collateral sensitivity can result from 39 resistance mutations in regulatory genes such as *nalC* or *mexZ*, which mediate 40 aminoglycoside sensitivity in β -lactam-adapted populations, or the two-component 41 regulatory system gene *pmrB*, which enhances penicillin sensitivity in gentamicin-42 resistant populations. Our findings highlight substantial variation in the evolved 43 collateral effects among replicates, which in turn determine their potential in antibiotic 44 therapy.

46 Introduction

47 Bacteria have the potential to rapidly adapt to virtually any natural or laboratory 48 environment (Kussell 2013). The long-term evolution experiment with Escherichia coli 49 (LTEE) has shown that even in simple constant environments, bacteria can achieve 50 comprehensive fitness increases of about 25% within the first 2,000 generations (Lenski 51 et al. 1991). Although the LTEE populations show reduced adaptation rates at later time 52 points (e.g., after 50,000 generations), they still continue to accumulate an almost 53 constant number of new beneficial mutations (Barrick et al. 2009; Tenaillon et al. 54 2016). Thus, bacteria can adapt rapidly to new challenges and subsequently continue to optimize their fitness. Such remarkable adaptive potential was also observed under 55 56 more challenging conditions: Using evolution experiments with antibiotics, E. coli 57 evolved high levels of drug resistance through the step-wise accumulation of multiple 58 mutations when drug concentrations increased over time (Toprak et al. 2012) or across 59 space (Baym, Lieberman, et al. 2016). Bacteria also readily adapted when they were 60 challenged with two antibiotics simultaneously (Chait et al. 2007; Hegreness et al. 61 2008; Michel et al. 2008; Pena-Miller et al. 2013), or sequentially (Kim et al. 2014; 62 Fuentes-Hernandez et al. 2015; Roemhild et al. 2015).

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64 Rapid bacterial adaptation to new environments often involves evolutionary trade-offs 65 in the form of reduced fitness under alternative growth conditions (Kussell 2013). In the case of antibiotic resistance evolution, two types of trade-offs (or costs) are 66 67 commonly observed: (i) evolved resistance is costly in the absence of the drugs, thus 68 generating growth deficiencies relative to the susceptible ancestor (Andersson and 69 Hughes 2010; Melnyk et al. 2015), and (ii) resistance mutations may exacerbate 70 susceptibility against others (i.e. collateral sensitivity (Szybalski and Bryson 1952; Pál 71 et al. 2015); also referred to as hypersensitivity, or negative cross-resistance in previous 72 publications). However, adaptive mutations do not always entail a cost but instead may 73 increase resistance against other antibiotics (i.e., collateral resistance or cross-74 resistance); thus favoring multi-drug resistance.

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The phenomenon of collateral sensitivity was first described in the 1950s in a study by
Szybalski and Bryson, in which the authors tested if experimentally evolved resistant *E. coli* was less, equally or more sensitive to previously unmet drugs (Szybalski and
Bryson 1952). Despite finding that cross-resistance was much more prevalent than

80 collateral sensitivity, the authors hypothesized that these rare cases could then be exploited by rationally using more than one drug during treatment of resistant clinical 81 82 strains. The employment of drug pairs that produce reciprocal collateral sensitivity 83 might trap bacteria in an evolutionary 'double-bind', thus improving treatment efficacy 84 and decreasing the evolution of resistance. This idea was more recently tested by 85 exposing bacteria to such drug pairs being deployed sequentially (Imamovic and 86 Sommer 2013; Kim et al. 2014; Fuentes-Hernandez et al. 2015; Roemhild et al. 2015) 87 or simultaneously (Munck et al. 2014; Evgrafov et al. 2015). Additionally, several other 88 studies have further evaluated what factors could help to predict the changes in drug 89 sensitivity in experimentally evolved resistant *E. coli*. These showed that the strength 90 of selection and the chemogenomic profile similarity between antibiotics play 91 significant roles in the evolution of resistance and hence influence the patterns of cross-92 resistance and hypersensitivity (Lázár et al. 2013; Lázár et al. 2014; Oz et al. 2014).

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94 To fully determine the importance of such trade-offs during bacterial adaptation and 95 also their therapeutic potential, the patterns of collateral resistance/sensitivity observed 96 in E. coli need to be assessed in other, clinically relevant bacterial taxa, including those 97 known to possess high adaptive capacity such as members of the genus Pseudomonas. 98 This group of bacteria are able to colonize and thrive in a plethora of niches (Nikel et 99 al. 2014), and act as prominent plant and human pathogens (Loper et al. 2012; 100 Rodríguez-Rojas et al. 2012; Balasubramanian et al. 2013). For instance, the 101 opportunistic human pathogen P. aeruginosa is commonly associated with hospital-102 acquired infections, and it is a major cause of chronic lung disease, including the 103 ultimately fatal infections in cystic fibrosis patients (Govan and Deretic 1996; Arruda 104 et al. 1999; Kang et al. 2003; Folkesson et al. 2012). Its success as an opportunistic 105 pathogen can be largely attributed to its vast array of virulence factors, including the 106 production of alginate to form biofilms, its ability to survive oxidative stress, and the 107 availability of various secretion systems (Hauser 2009; Ma et al. 2009; Burrows 2012; 108 Jimenez et al. 2012; Korotkov et al. 2012). Moreover, it carries a large array of intrinsic 109 antibiotic resistance mechanisms and an exceptional potential to acquire resistance, 110 both de novo or horizontally transferred (Arruda et al. 1999; Carmeli et al. 1999; 111 Hancock and Speert 2000; Poole 2001; Drenkard and Ausubel 2002; Livermore 2002; 112 Overhage et al. 2008; Breidenstein et al. 2011). To date there is neither information on 113 the evolution of drug sensitivity trade-offs in P. aeruginosa, nor on its genomic

underpinnings. To rectify this knowledge gap, we experimentally selected 160 highly resistant populations of *P. aeruginosa* PA14 (plus 20 control populations) and evaluated the possibility of evolutionary trade-offs in the form of fitness deficiencies in the absence of antibiotics and hypersensitivity to other drugs. We assessed the underlying molecular mechanisms of such trade-offs through whole-genome sequencing of 81 evolved resistant populations.

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121 Results and discussion

122 Rapid evolution of antibiotic resistance

123 We used experimental evolution to generate independent populations of *P. aeruginosa* 124 PA14 with significantly increased resistance against eight different antibiotics. We 125 challenged 20 isogenic populations against increasing concentrations of one out of eight 126 different drugs (for abbreviations of all antibiotics see table 1), and included an evolutionary control grown in media only, resulting in a total of 180 independent 127 128 populations. Experiments were initiated at half the concentration inhibiting >90% of 129 growth (abbreviated IC90), as determined for the ancestral PA14. Populations were 130 then serially transferred every 12 h for 24 days (48 transfers; approximately 58 generations) until reaching around 40 times the IC90, or until less than half of the 131 132 starting populations from a given antibiotic were still growing (fig. 1A). In the cases of 133 DOR, IMI, and CAR, more than half of the populations went extinct at transfers 20, 28, 134 and 40, respectively; we accordingly isolated 10 populations adapted to the 2x, 5x and 135 17x environments for further analysis. In all other cases, we randomly chose 10 136 surviving populations per antibiotic for subsequent characterization. Frozen 137 populations adapted to GEN could not be recovered after thawing; we could only revive 138 10 of those adapted to the 5x environment. Altogether we obtained 80 populations 139 adapted to 8 different antibiotics and 10 additional ones adapted to media only.

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141 **Table 1.** List of antibiotics used during selection experiments.

Functional target	Class	Drug	Abbreviation
DNA repair	Quinolones	Ciprofloxacin	CIP
Protein synthesis	Aminoglycosides	Gentamicin	GEN
		Streptomycin	STR
Cell wall synthesis	Penicillins	Piperacillin + Tazobactam	PIT
		Carbenicillin	CAR

Carbapenems	Doripenem	DOR
	Imipenem	IMI
Cephalosporins	Cefsulodin	CEF

143 For the selected populations, we quantified the changes in resistance to the respective 144 drug used during the evolution experiment (see Materials and Methods). P. aeruginosa 145 could rapidly (within 58 generations or less) reach resistance levels of at least 32 times the IC90 of the ancestral PA14 for most antibiotics (fig. 1B-I). Interestingly, we 146 147 observed substantial variation within particular drug treatments, suggesting different 148 routes of adaptation to the antibiotic. Similar increases in drug resistance were found in 149 a recent study with the related P. aeruginosa strain PAO1 (Cabot et al. 2016), 150 highlighting the adaptive potential of this species. The same study also revealed in most 151 cases an association of increased resistance with genomic changes in well-known 152 resistance pathways. P. aeruginosa's resistance thus appears to be achieved fast 153 through diverse mechanisms. Several comparable E. coli evolution experiments 154 resulted in similar levels of resistance, although variation between populations adapted 155 to the same drug was less pronounced than observed here for *P. aeruginosa* (Imamovic 156 and Sommer 2013; Lázár et al. 2013; Oz et al. 2014).



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159 Fig. 1. Directional selection of highly resistant P. aeruginosa. (A) Illustration of the 160 experimental design used for the selection of resistant populations. Twenty replicate 161 populations for each of the eight included antibiotics (Table 1) and a control without antibiotic (a total of 180 populations) were serially transferred every 12h into fresh 162 medium and, for the drug treatments, increasing concentrations of each drug. Selection 163 was initiated at 0.5 times the concentration inhibiting >90% of growth (IC90) and 164 concluded at ~40 times of the IC90. (B-I) Ten populations for each antibiotic were 165 subsequently evaluated for their growth on different concentrations of the drug 166 167 experienced during the experiment. Dose-response curves are shown in the left panels and IC90 fold changes in the right panels. The ten replicate populations are shown in 168 169 different colors, while the black line represents the ancestral *P. aeruginosa* PA14.

171 Rapid resistance evolution entails a growth cost

172 To evaluate whether the evolution of high drug resistance levels was generally 173 associated with a fitness deficiency, we measured different growth parameters of all of 174 the evolved populations, and the ancestral PA14 in a drug-free environment. We found 175 that the control populations, which evolved without antibiotics, had significantly 176 shorter lag phases and lower growth rates relative to the ancestor (supplementary fig. 177 S1). These results suggest that adaptation to the medium alone can have strong effects 178 on fitness. These effects could in turn influence antibiotic resistance. To evaluate this, 179 we compared the sensitivity of the evolved control populations and the ancestor against 180 each of the eight antibiotics. In general, we found no significant differences between 181 the dose response curves of the controls and the ancestor (supplementary fig. S2). The 182 only exceptions refer to cases at sub-inhibitory drug concentrations where the evolved 183 populations showed higher growth than the ancestral PA14. More importantly, with 184 only a single exception, none of the replicate populations showed a change in the IC90, 185 thus indicating that the fitness alterations of the evolved controls do not translate into 186 changes in drug sensitivity (supplementary fig. S2).

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188 As evolution in the absence of drugs affected growth characteristics, we specifically 189 assessed the costs associated with the adaptation to antibiotics by relating our growth 190 measures of the 80 resistant populations to those of the evolved controls. Resistant 191 populations showed changes in at least one of the measured growth characteristics: lag 192 time, growth rate, and maximum yield (fig. 2). In all cases, we observed a significantly 193 longer time spent in lag phase, and in most cases (5 out of 8 drugs), a significant 194 reduction of about 20-50% in maximum yield. Only populations adapted to PIT and 195 GEN had significantly reduced growth rates. Overall, 90% of the resistant populations 196 spent longer times in lag phase, 49% produced lower maximum yields, and 36% had 197 lower growth rates (supplementary table S1). Interestingly, 60% of the resistant 198 populations had a significant cost in at least two of the parameters, whereas only five 199 of the populations showed no fitness costs at all.

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In most cases there was substantial variation among populations adapted to the same drug (fig. 2). This might have been the result of at least two paths: a direct outcome of costly adaptation resulting in varying lengths of lag phases depending on the favored 204 resistance mechanism, or, alternatively, an indirect consequence of our experimental 205 design in which selection independently acted in favor of tolerance. In the latter case, 206 an extended lag phase could have allowed *P. aeruginosa* to remain in the environment 207 without immediately changing its initial resistance levels but instead increasing 208 antibiotic tolerance. This could have ultimately resulted in varying levels of measured 209 resistance among the various populations (Levin-Reisman et al. 2017). However, we 210 found no significant correlation between the IC90 fold change and the lag time (or any 211 of the growth parameters) for any of the antibiotics used (supplementary table S2 and 212 supplementary fig. S3). This strongly suggests that the differences in resistance are not 213 a result of selection for tolerance, but rather due to underlying differences in the 214 resistance mechanisms that in turn have distinct effects on growth. This finding also 215 means that the extent of the resistance increase does not linearly translate into a fitness 216 cost, but most likely depends on the specific underlying mechanism.

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Fig. 2. Relative fitness in the absence of antibiotics. Shown, from top to bottom, is fitness relative to the average of the evolved control populations, calculated for growth

222 rate, lag time, and maximum yield for all populations adapted to one of the eight 223 antibiotics (X-axis) after 24h of growth in antibiotic-free media. Colored points 224 represent the replicate populations and the horizontal grey crossbars indicate the mean 225 for each antibiotic. Black dashed lines highlight equality to the controls; values above 226 indicate a fitness advantage whereas values below denote a cost. Plase note that for the 227 lag phase, this is inverted: values larger than 1 indicate a longer time spent in lag phase 228 and thus a fitness cost. Asterisks on top of each panel indicate significant difference 229 from 1 (i.e., a significant change in fitness) using a Wilcoxon Rank test with probability 230 adjustment based on the false discovery rate (FDR) to account for multiple testing.

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233 The extent to which growth costs are associated with antibiotic resistance evolution has 234 been evaluated for a variety of combinations of bacteria and drugs, including P. 235 aeruginosa (Kugelberg et al. 2005; Andersson and Hughes 2010; Melnyk et al. 2015). 236 These studies demonstrated that mutations conferring high levels of resistance usually 237 lead to larger fitness costs. Moreover, after adaptation to increasing drug 238 concentrations, a higher number and more complex types of mutations (i.e., large 239 deletions) coincide with larger defects in growth rate (Lázár et al. 2014). Considering 240 such substantial resistance costs, it is surprising that resistant mutants persist both in 241 clinical and experimental environments. Several factors were previously found to 242 ameliorate or completely alleviate the effects of resistance mutations on growth. For 243 instance, quinolone resistant P. aeruginosa showed a high prevalence of cost-free 244 mutations as well as the emergence of compensatory mutations in genes that, 245 unexpectedly, are not directly associated to the fitness defect (Kugelberg et al. 2005). 246 In fact, some of our populations showed an increase in fitness in some or all of the 247 growth parameters measured, emphasizing that the costs associated with some resistant 248 mechanisms can be ameliorated rapidly (within 58 generations) or incur no costs at all. 249 Furthermore, the role of epistatic effects, the genetic background in which mutations 250 occur, and the environment also seem to play an important role in the magnitude of the 251 cost (Melnyk et al. 2015). Therefore, there is a lack of predictability, constraining the 252 potential clinical use of such information for a rational design of treatment strategies.

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254 Comprehensive collateral effects upon antibiotic resistance evolution

255 We then tested the evolved populations for the presence of collateral sensitivity or 256 resistance against all other drugs. For this we challenged each population against 257 various concentrations (in triplicate) of all the antibiotics and compared their growth to 258 the ancestral PA14. To quantify the change in resistance or sensitivity we considered 259 growth relative to the no-drug environment, which accounts for general fitness changes 260 resulting from adaptation to the experimental environment. We then calculated the area 261 under the curve (AUC) of the ancestral PA14 and subtracted it from that of each 262 population (fig. 3A and B, for the IC90 fold changes see supplementary fig. S4). 263 Finally, we counted how often adaptation to one antibiotic led to resistance against any 264 other, hereby defined as direct adaptation, and also; how many times resistance to a 265 given drug evolved after adaptation to another one, hereby defined as indirect adaptation (fig. 3C). The same process was repeated to calculate the number of cases 266 267 of sensitivity by direct or indirect adaptation.

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272 Fig. 3. Evolution of collateral sensitivity and resistance. (A) Illustration of the 273 quantification of evolved collateral resistance or sensitivity. Bacterial growth (relative 274 to a no-drug environment) of all evolved populations and the ancestral *P. aeruginosa* 275 PA14 is first measured across concentrations of the various antibiotics. The area under 276 the curve of the ancestor is subsequently subtracted from that of each population; 277 resulting negative values indicate sensitivity (bottom panel), whereas positive values 278 denote resistance (top panel). (B) The collateral profiles of all experimentally evolved 279 populations (rows refer to the drugs used during experimental evolution), challenged 280 against all other antibiotics (as indicated by columns). The vertical bars within each

block represent the replicate population. The different shades of purple or green highlight the extent of sensitivity or resistance, respectively. *(C)* We counted the total number of cases, for which adaptation to a particular antibiotic (listed in the middle) led to collateral sensitivity or resistance (direct adaptation; left panel), and also the total number of cases, for which sensitivity or resistance towards the focal antibiotic was observed upon adaptation to any of the other drugs (indirect adaptation; right panel).

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288 Overall, we identified collateral effects in almost all population with evolved 289 resistances, whereby cross-resistance is generally more common than collateral 290 sensitivity (supplementary fig. S5 and fig. 3B and C; direct adaptation). Essentially 291 identical results are obtained if IC90 fold change is used for the analysis rather than 292 AUC differences (supplementary fig. S4). Five main conclusions can be drawn from 293 our analysis. (i) Adaptation to a given antibiotic leads to collateral resistance to drugs 294 of similar classes (see the aminoglycosides STR, and GEN, or the β-lactams CEF, PIT 295 and CAR). (ii) Resistance to most drugs leads to collateral sensitivity against 296 aminoglycosides, whereas resistance to aminoglycosides leads to collateral sensitivity 297 almost exclusively to the penicillin-type β -lactams (PIT and CAR; fig. 3B and C; 298 indirect adaptation). (iii) Adaptation to CIP or DOR leads to enhanced sensitivity 299 against most other drugs, but interestingly this effect appears to be unidirectional: 300 adaptation to other antibiotics rarely leads to sensitivity against these two drugs (fig. 3C; indirect resistance). (iv) Collateral resistance against CEF, a 3rd generation 301 302 cephalosporin with specific activity against P. aeruginosa, is found upon resistance 303 evolution towards all other drugs, suggesting that resistance to some cephalosporins 304 may be readily achieved indirectly, thus compromising its use as a second-line drug. 305 (v) In several cases, substantial variation was observed among populations adapted to 306 the same drug, suggesting that different resistance mechanisms may lead to contrasting 307 patterns of collateral effects.

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The evolution of collateral resistance and sensitivity seems to be a widespread tradeoff in bacteria following drug resistance evolution. For example, in *E. coli*, collateral resistance towards drugs of the same class was repeatedly observed (Imamovic and Sommer 2013; Lázár et al. 2013; Lázár et al. 2014; Oz et al. 2014). These previous studies also revealed interesting exceptions. Some drugs, such as CIP, were often targets of indirect multi-drug resistance evolution, regardless of the similarity of the drug used during experimental evolution. Also, the strength of cross-resistance was variable even among drugs with the same cellular targets. For instance, within the cellwall inhibitors, adaptation to penicillins seems to lead to cross-resistance more often than adaptation to carbapenems.

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320 It is noteworthy that the direction of collateral sensitivity differs in specific cases 321 between P. aeruginosa and E. coli. In particular, resistance to the aminoglycosides 322 often preceded a two-fold reduction in MIC against most other drugs in E. coli 323 (Imamovic and Sommer 2013; Lázár et al. 2013). In contrast, adaptation to the same 324 drugs in PA14 more often led to cross-resistance, while in some individual populations 325 collateral sensitivity was observed almost exclusively towards the penicillins. 326 Moreover, CIP-adapted E. coli strains usually exhibited cross-resistance to most other 327 drugs (Imamovic and Sommer 2013; Lázár et al. 2014), while our experiments with P. 328 aeruginosa produced hypersensitivity in such combinations. These findings highlight 329 the presence of key differences between species in the evolved collateral effects 330 following drug adaptation. Systematic evaluation of different pathogen-drug 331 combinations is thus essential for a full appreciation of incidences and diversity of 332 evolved collateral sensitivity (Imamovic and Sommer 2013; Lázár et al. 2014).

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334 Unexpectedly, our results further demonstrate the presence of substantial variation in collateral effects upon adaptation to one drug. In several cases, we even observed 335 336 contrasting patterns of either collateral sensitivity or resistance. For example, CEF-337 adapted populations exposed to GEN produced three cases of cross-resistance, five 338 cases of collateral sensitivity, and two neutral effects (fig. 3A; fig. S4). Similar variation 339 in collateral effects are also found for all other antibiotic treatments, with the exception 340 of IMI, most likely due to low sample size (i.e., only 2 populations could be included in the analysis). Moreover, such divergence in collateral effects upon antibiotic 341 342 resistance evolution has not yet been reported for other bacterial species. These findings 343 strongly suggest that our replicate P. aeruginosa populations from a particular 344 antibiotic treatment achieved resistance through different molecular mechanisms, 345 which in turn had opposite effects on the interaction with a second antibiotic.

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347 Cross-resistance may result from the chemical similarity between drugs

348 Recent studies have followed Szybalski and Bryson's hypothesis that the chemical 349 relatedness between different drugs could explain the prevalence of cross-resistance, 350 finding a partial correlation between them in E. coli (Lázár et al. 2014). However, the 351 reported relationship was strongly biased by the aminoglycosides, since no cross-352 resistance to such drugs was observed and these possess a chemical structure that is 353 fundamentally different to that of the other drugs. In the case of *P. aeruginosa*, we often 354 observed cross-resistance to the aminoglycosides, thus allowing us to further explore 355 the range of relationships between drug similarities and the frequency of cross-356 resistances. For such an analysis, we first inferred the chemical similarity among all 357 antibiotics by calculating the Jaccard's index obtained from the pairwise comparison of 358 their chemical fingerprints (supplementary fig. S6). We then related these similarities 359 to the frequencies of collateral resistances (FCR) for all drug pairs (see Materials and 360 Methods, and Lázár et al. 2014). Our analysis revealed a significant correlation between 361 these two parameters (fig. 4). Importantly, drugs targeting the same cellular process are 362 not necessarily chemically similar (e.g., IMI and PIT or DOR and CAR) and in these 363 cases we do not find high levels of cross-resistance. Altogether, chemical similarity 364 appears in most cases to be a key determinant of the probability of cross-resistance.



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Fig. 4. Chemical similarity correlates with frequency of collateral resistance. Pairwise Jaccard's similarity indexes where calculated based on the chemical fingerprints of each antibiotic. The frequency of collateral resistance (FCR) was then determined as $FCR = (R_{A\to B} + R_{B\to A}) / L_{AB}$, where $R_{A\to B}$ is the number of populations resistant to drug A with cross-resistance to drug B (and *vice versa* for $R_{B\to A}$), and L_{AB} is the total number of populations adapted to A and B. A significant correlation was then found between the chemical similarity and the FCR (Spearman's rank correlation). Each point 375 corresponds to a chemical comparison between any two given drugs. Labels are shown376 for some, but not all, of these pairwise comparisons.

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378 Distinct mutations underlie the evolution of high antibiotic resistance

379 To better understand the genetic mechanisms selected during the evolution of high 380 antibiotic resistance, we obtained whole genome sequences for 81 evolved populations: 381 71 antibiotic adapted populations and 10 controls. We characterized genomic variations 382 using a previously established analysis pipeline (see Materials and Methods; Jansen et 383 al. 2015). An important step of the pipeline is to remove substitutions which occurred 384 in the control populations, as these may result from adaptation to general experimental 385 conditions and could thus obscure the signals relevant for adaptation to the antibiotics 386 (see supplementary table S4 for a list of mutations found in the evolved control 387 populations). We further annotated the genes with mutations in coding regions using 388 DAVID, the *Pseudomonas* Database (available online at: http://pseudomonas.com), 389 and published information to group them by function and their likely involvement in 390 antibiotic resistance. In general, we observed an average of 10.5 genes affected per 391 antibiotic environment (fig. 5A), but with different degrees of mutational diversity 392 (supplementary fig. S7). Most mutations were non-silent and may thus have contributed 393 to adaptation (fig. 5B and C): 89% of the mutations were observed in coding regions (Intergenic vs. all other mutations, χ^2 test, $\chi^2 = 50.94$, df = 1, P < 0.0001); 83% of the 394 395 variants found in coding regions (e.g., different types of non-synonymous, 396 insertions/deletions [indels], or frameshift mutations) led to partial or complete loss of function (Intergenic and Synonymous SNPs vs. all other type of variants, χ^2 test, $\chi^2 =$ 397 39.15, df = 1, P < 0.0001), and more than half of the variants observed were fixed at 398 levels above 40% (Number of variants <40% fixed vs. variants \geq 40% fixed, χ^2 test, χ^2 399 400 = 50.94, df = 1, P = 0.003).

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For subsequent analysis we focused on genes having mutations in their coding regions only (fig. 5D). Interestingly, the only two surviving populations adapted to IMI showed mutations in *mutL*, a gene coding for a DNA repair enzyme generally associated with hypermutator phenotypes (Oliver et al. 2002; Montanari et al. 2007; Ciofu et al. 2010); these populations accumulated as many mutations in half the number of generations as the others during the entire experiment (supplementary table S5). The various DOR

- 408 adapted populations produced a unique SNP in a single gene, *oprD*: a membrane protein
- 409 (fig. 5D). The populations adapted to all other antibiotics showed a larger number of

410 genomic changes across a variety of genes (fig. 5D).



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413 Fig. 5. Genomics of adaptation. Distribution of the number of genes with substitutions 414 per (A) antibiotic used in the evolution experiment, (B) type of mutational change, and 415 (C) average frequency class within the replicate populations. (D) Functional effect of 416 mutations found in coding regions of the listed genes (vertical axis, left side) across 417 evolution experiments with different antibiotics (horizontal axis). Functional 418 information (right side) is inferred from a combined analysis using DAVID, the 419 Pseudomonas database and publications. Different shades of red indicate the percentage 420 of affected populations per evolution experiment with a particular antibiotic.

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422 The functional annotation revealed changes in three main functions across evolved 423 populations (fig. 5D): The first group of affected genes is related to direct targets of the 424 β -lactam antibiotics and was primarily identified in populations adapted to CEF, CAR 425 and PIT. This group included genes associated with peptidoglycan synthesis 426 (supplementary table S4): the penicillin-binding protein 3 (PBP3) *ftsI*, and also the 427 UDP-N-acetylmuramate: L-alanyl-gamma-D-glutamyl-meso-diaminopimelate ligase 428 *mpI*. Non-silent mutations in these genes were previously demonstrated to increase 429 resistance against β -lactams, either by limiting the interaction between antibiotics and 430 the products of these genes, or by indirectly inducing SOS responses or enhanced efflux 431 (Miller et al. 2004; Tsutsumi et al. 2013).

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433 The second group of genes is related to 7 different two-component regulatory systems 434 (fig. 5D). This group was generally affected in response to adaptation to β -lactam and 435 aminoglycoside antibiotics; whereby variation in mutated systems seem to depend on 436 the antibiotic class. Two-component systems are essential for bacteria to recognize 437 different environmental stimuli and coordinate a fine-tuned response via a complex 438 phosphorylation signal transduction system (Hoch 2000; Robinson et al. 2000; Ramos 439 et al. 2005). P. aeruginosa in particular possesses a large number of such regulatory 440 systems, which it uses to control cellular division, development, stress responses, and 441 pathogenicity (Rodrigue et al. 2000).

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443 The third main group of mutated genes was found in β -lactam and aminoglycoside 444 adapted populations, and included different efflux regulatory systems (fig. 5D). These 445 genes modulate the activity of distinct efflux pumps which can lead to single or multi-446 drug resistance (Hancock and Speert 2000; Li et al. 2000; Poole 2001; Piddock 2006). 447 Importantly, two of them (mexZ and nalC) are closely related to those regulating the tet 448 efflux pumps (TetR-like repressors), which were previously demonstrated to contribute 449 to collateral sensitivity against aminoglycosides in tetracycline resistant E. coli (reviewed in Baym, Stone, et al. 2016). These genes were further proposed as a pivotal 450 451 group to be exploited in sequential treatment strategies (Baym, Stone, et al. 2016).

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We additionally identified changes in several other known or at least suggested antibiotic resistance genes (fig. 5D), including the membrane protein main component *oprD*, the DNA gyrase subunits *gyrA* and *gyrB*, as well as other genes involved in cellular processes such as cell division and motility (Macfarlane et al. 2000; Drenkard and Ausubel 2002; Livermore 2002; Amin et al. 2005). Our analysis further revealed changes in genes with currently unknown function and/or no previous implication in antibiotic resistance, and/or mutations in non-coding regions, which may still influence 460 resistance if regulatory regions are affected (e.g., possibly relevant for DOR-adapted 461 populations). Some of these changes occurred at lower frequency within the replicate 462 populations, but their exact contribution to the observed evolutionary pattern is 463 uncertain and may be interesting to address in future studies. Furthermore, among the 464 PIT-adapted populations we also found substantial variation in the sets of mutated 465 genes, even though they almost all consistently affected the same two functional categories: peptidoglycan synthesis and efflux regulatory systems. This variation could 466 467 explain the different levels of resistance observed for these populations, whereby 468 different groups of mutated genes lead to higher or lower levels of resistance.

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470 Specific resistance mechanism associate with high growth costs

471 The accumulation of multiple mutations during adaptation to antibiotics could translate 472 into stronger reductions in fitness under drug-free conditions. In fact, in a similar study 473 with E. coli, populations accumulating a large number of mutations or deletions had 474 also very low fitness in drug-free environments (Lázár et al. 2014). Similarly, in P. 475 aeruginosa we found that the populations with the strongest decrease in growth rate 476 have a significantly larger number of mutations in their genomes (supplementary fig. 477 S8A). However, none of the other measured fitness parameters correlated with the 478 number of mutations, suggesting that this alone is not enough to explain the observed 479 variation in fitness. Moreover, when we looked for overrepresented genes in 480 populations with the most extreme growth costs, we observed some functions to be 481 more prevalent than others (supplementary fig. S8B-D). In particular, genes involved 482 in peptidoglycan synthesis (mpl, dacC or ftsI), regulation of efflux (nalC) or part of 483 two-component regulatory systems (*pmrB*) were more frequently found in populations 484 with lower relative fitness across the measured growth parameters. Interestingly, 485 multiple genes affecting these cellular processes were found within the same 486 populations having strong fitness reductions (nalC together with mpl and dacC were 487 often found in PIT resistant populations). Altogether, the costs of adaptation seem to 488 be dependent on both the number of mutations accumulated and the specific mutated 489 resistance mechanism.

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491 Parallel patterns of collateral resistance across treatments is not linked to similar 492 mutational profiles

493 Next, we assessed whether parallel mutational changes could explain the observed 494 patterns of collateral resistance across different treatments in *P. aeruginosa* (Fig. 3B). 495 In contrast to the findings for *E. coli* (Lázár et al. 2014), we found comparatively little 496 mutational overlap between the populations from different antibiotic treatments (supplementary fig. S9A). Interestingly, in the few cases where similar mutational 497 498 profiles were observed among populations resistant to different drugs, the two 499 compared antibiotics appear to be chemically related, and the populations showed 500 cross-resistance (supplementary fig. S9B and C). However, these correlations were not 501 statistically significant, because our data set also included several populations with high 502 cross-resistance against chemically similar drugs, but with completely distinct 503 mutational profiles (supplementary fig. S9B and C). Therefore, it seems that the parallel 504 patterns of cross-resistance across treatments are based on different sets of mutations.

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This is also true for populations from different treatments that adapted to drugs of the same class. For instance, the populations that adapted to the two aminoglycosides showed high levels of cross-resistance among them, but adaptation to GEN was more often accompanied by mutations in the two-component regulatory gene *pmrB*, while those adapted to STR predominantly showed mutations in genes involved in cellular division (i.e., *gidA* or *gidB*), or in efflux regulation (i.e., *mexZ*; fig. 5D and supplementary table S5).

513

514 Contrasting collateral effects have unique genomic profiles

515 We identified substantial variation in the incidence of collateral sensitivity and cross-516 resistance within particular evolution experiments. For instance, five of the CEF 517 adapted populations showed collateral sensitivity against GEN and STR, whereas the 518 rest suffered cross-resistance or neutral effects against the same drugs (fig. 3B). 519 Similarly, three of the GEN adapted populations displayed collateral sensitivity against 520 CAR and PIT, while the others were resistant (fig. 3B). Such variation could be the 521 result of distinct resistance mechanisms selected during adaptation to each drug, which 522 in turn led to contrasting sensitivities against other antibiotics. To explore this 523 possibility, we focused on four exemplary cases, for each of which we repeatedly found 524 contrasting variation in collateral effects to other antibiotics. These included the 525 populations adapted to the two aminoglycosides (GEN, STR), which both showed such 526 variation towards PIT and CAR (Fig. 3B). We also considered the reverse two cases,

527 for which populations that had adapted to either PIT or CAR produced contrasting 528 collateral patterns towards GEN and STR (Fig. 3B). For these four cases, we used 529 hierarchical cluster analysis (based on Ward's criterion method and bootstrapping to 530 assess cluster stability (Murtagh and Legendre 2014)) to relate populations with varying 531 collateral effects to corresponding genomic variation. In particular, we first assessed 532 whether populations adapted to a given drug would cluster together based on their 533 sensitivity against the two other antibiotics (fig. 6A, 6C, 6E, and 6G). Then, we asked 534 whether the same populations would also cluster together based on their sets of mutated 535 genes (fig. 6B, 6D, 6F, and 6H).





538 Fig. 6. Genomic determinants of collateral sensitivity. We employed a hierarchical 539 clustering analysis using the Ward's criterion method and bootstrapping to identify the 540 genomic determinants of variation in collateral profiles in four treatments. In two of 541 these treatments, replicate populations that had adapted to either GEN (A,B) or STR 542 (C,D) produced variation in collateral profile to PIT and CAR. In the other two 543 treatments, replicate populations that had adapted to either PIT (E,F) or CAR (G,H) 544 showed such variation towards GEN and STR. We first evaluated the clustering of 545 populations adapted to GEN (A), STR (C), PIT (E) and CAR (G) based on the strength 546 of collateral effects to the other two drugs (Fig. 3B), highlighting clusters of those with 547 collateral sensitivity (lines in different shades of purple, see legend to the right) versus 548 those with collateral resistance (lines in different shades of grey). The circled numbers 549 always indicate the same replicate populations from a particular treatment across the 550 related panels. Populations clustering together based on their collateral effects also 551 often clustered together based on their genomic profile (B, D, F, H). The mutated genes 552 present in the various clusters are given to the right of the dendrograms, followed by 553 letters for their functional annotation in brackets (see legend to the right for the 554 annotation categories). If a specific cluster mainly included populations associated with 555 collateral sensitivity, then the gene names are given in purple. In cases, where clusters 556 mainly included populations associated with collateral resistance, the gene name is 557 given in green.

558

559 We identified clusters that consistently link the contrasting patterns of collateral 560 sensitivity to particular genomic variations. Intriguingly, the two-component regulatory 561 system and TetR-like repressors appear to play a pivotal role in determining these 562 patterns. For the GEN-adapted populations, sensitivity to PIT and CAR was associated 563 with mutations in *pmrB* (fig. 6A and 6B), a sensor kinase implicated in resistance 564 against cationic antimicrobial peptides, polymyxins, and aminoglycosides in 565 Salmonella and P. aeruginosa (McPhee et al. 2003). Aminoglycoside resistance 566 mediated by *pmrB* is hierarchically controlled by two regulatory systems (PhoP-PhoQ 567 and PmrB-PmrA) that ultimately remodel lipid A in the outer membrane resulting in a 568 reduction of the membrane's negative charge. Such alterations were shown to enhance 569 sensitivity to β-lactams in aminoglycoside resistant E. coli (Lázár et al. 2013; Baym, 570 Stone, et al. 2016). Altogether, this suggests that *pmrB* could be the main driver of β -571 lactam sensitivity in GEN resistant populations.

573 Collateral sensitivity against penicillins in STR-adapted populations is linked to 574 mutations in the gene mexZ (fig. 6C and D), a TetR-like repressor modulating the 575 expression of the MexXY-OprM efflux system (Aires et al. 1999). This gene was found 576 to mediate aminoglycoside resistance in *P. aeruginosa* PAO1 and clinical isolates from 577 cystic fibrosis patients by increasing cellular drug efflux, trough an up-regulation of the 578 mexXY genes (Westbrock-Wadman et al. 1999). Interestingly, in P. aeruginosa, 579 extrusion of the aminoglycosides appears to be exclusively mediated by MexXY-580 OprM, which, when overexpressed, is also able to extrude most penicillins (except for 581 carbenicillin and sulbenicillin), some cephalosporins, and meropenem (Masuda et al. 582 2000). However, to the best of our knowledge, its possible role in mediating collateral 583 sensitivity against penicillins has not been reported before. In addition, the expression 584 of collateral sensitivity could be further influenced by other mutations. For instance, a 585 mutation in *motB*, a gene required for flagellar motility in *P. aeruginosa* (Doyle et al. 586 2004), is present in addition to mutated *mexZ* in population 10, which shows collateral 587 sensitivity to CAR but not PIT (fig. 6C and 6D).

588

589 In the case of the penicillin-adapted populations, collateral sensitivity against 590 aminoglycosides appears to be associated – among others – with mutations in the gene 591 *nalC*, an efflux regulator of the MexAB-OprM system known to confer intermediate to 592 high levels of resistance to multiple drugs (Cao et al. 2004). Populations adapted to 593 CAR and PIT with mutations in this gene consistently showed a more sensitive 594 phenotype against both aminoglycosides (fig. 6E-H). Interestingly, tet efflux regulators, 595 which are related in their function to *nalC*, were previously shown to mediate collateral 596 sensitivity against aminoglycosides in tetracycline resistant E. coli (reviewed in Baym, 597 Stone, et al. 2016), thus suggesting a pivotal role of this type of resistance mechanism 598 in determining antibiotic susceptibility trade-offs.

599

It is noteworthy that the exact distribution of the variation in sensitivity against aminoglycosides in CAR-adapted populations is not well captured by our approach. All the identified clusters show genomic changes that affect the same three functions, yet the exact mutations and their frequencies within the populations differ (fig. 6G and H, supplementary fig. S10 and supplementary table S5). The observed phenotypic variation may then be caused by only some of the variable genes, by specific mutations only, by the combination of specific allelic variants, or by the frequency difference of
certain mutations. Therefore, the observed collateral effects are likely influenced by
additional factors, which could not be identified directly by the cluster analysis.

609

610 Mutations in *nalC*, *mexZ*, and *pmrB* can cause collateral sensitivity

611 Different regulatory systems were generally associated with collateral sensitivities in 612 the evaluated populations. To further evaluate such a role, we assessed antibiotic 613 sensitivity in genetically modified ancestral PA14, in which we re-introduced a 614 selection of four of the identified mutational changes (Materials and methods), namely 615 the inferred ~500 bp deletion in *nalC*, a SNP in *mexZ* leading to an early stop codon 616 (Q95stop), and two non-synonymous mutations in *pmrB* causing a P254L and a V136E 617 amino acid substitution. In all cases, the constructed mutants showed almost the exact 618 same response as the evolved populations against at least two of the considered 619 antibiotics (fig. 7 and supplementary table S6). In particular, the SNPs introduced in 620 *pmrB* and *mexZ*, originally observed in the GEN- and STR-adapted populations, caused 621 high resistance to these aminoglycosides, and led to significantly increased sensitivity 622 to the penicillins PIT and CAR (fig. 7; supplementary table S6). Similarly, the 623 introduced deletion in *nalC*, originally observed in CAR-adapted populations, caused 624 resistance to the tested penicillins while significantly increasing sensitivity to both GEN 625 and STR (fig. 7; supplementary table S6). Thus, two-component regulatory systems 626 and efflux regulators can be responsible for the observed collateral sensitivity in P. 627 aeruginosa.



Fig. 7. Functional analysis of different regulatory genes. We focused on four specific 630 631 mutations identified in the evolved populations to associate with collateral sensitivity 632 and introduced these into the ancestral PA14 strain. The resulting mutants were then 633 tested against various concentrations of CAR, PIT, GEN and CAR (from left to right). 634 In all cases, the ancestral PA14 (always in black) and the adapted population (always 635 in darker colors), from which the particular mutation was extracted, were tested 636 simultaneously with the corresponding constructed mutants. Points and error bars show 637 the mean $OD \pm SD$ of 5 technical replicates per antibiotic concentration. For each set 638 of bacterial populations challenged against a particular drug we performed a GLM 639 followed by Tukey's honest significant difference (HSD) test. For a summary of the 640 statistical results see supplementary table S5.

The tested genes *nalC*, *mexZ*, and *pmrB* are involved in the regulation of efflux pumps or alteration of the outer membrane, and can thus influence antibiotic resistance (Westbrock-Wadman et al. 1999; McPhee et al. 2003; Cao et al. 2004; Daigle et al. 2007; Lázár et al. 2013; Baym, Stone, et al. 2016). To the best of our knowledge, the results of our functional genetic analysis demonstrated for the first time in *P*. 647 aeruginosa that such genes can also differentially lead to collateral sensitivity against 648 aminoglycosides (*nalC*) and penicillins (*mexZ* and *pmrB*). Importantly, two distinct 649 aminoglycoside resistance mechanisms independently led to penicillin 650 hypersensitivity: a loss of function (LOF) mutation in mexZ, and two different non-651 synonymous mutations in the two-component regulatory system gene pmrB. 652 Intriguingly, contrasting collateral effects emerged from alterations in functionally 653 related genes: both mexZ and nalC are from the TetR-family of repressors, and LOF 654 mutations in each of them led to completely opposite susceptibilities against penicillins 655 and aminoglycosides. Such contrasting results could be due to an impairment of one of 656 the efflux pumps upon up-regulation of the other, a phenomenon previously seen in 657 other efflux systems such as MexCD and MexAB, or MexEF and MexAB (Gotoh et al. 658 1998; Maseda et al. 2000; Jeannot et al. 2008), but not between MexXY and MexAB.

659

660 Conclusions

661

662 We here demonstrated that *P. aeruginosa* adapts rapidly to high-level antibiotic stress 663 and that such adaptation may influence resistance against other antibiotics. Cross-664 resistance correlates well with chemical similarity of the antibiotics, in agreement with 665 previous work. Collateral sensitivity was identified in several cases, yet different in 666 direction to those cases previously reported for other bacteria, such as E. coli. 667 Surprisingly, adaptation to a particular antibiotic produced both cross-resistance and 668 collateral sensitivity across the replicate populations. Our genomic analysis suggests 669 that alternative mechanisms were favored during resistance evolution, which then 670 resulted in these contrasting cross-resistance patterns. Intriguingly, regulatory systems 671 appear to play a key role in mediating the observed collateral effects. Functional genetic 672 analysis revealed that four of the identified mutations in three regulatory genes (*nalC*, 673 mexZ, and pmrB) can indeed cause collateral sensitivities in P. aeruginosa. Overall, we 674 expect our results to help the development of novel antibiotic therapy that exploits 675 fitness trade-offs during drug resistance evolution.

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- 677

678 Materials and methods

679 Bacteria and media

All experiments were conducted with *Pseudomonas aeruginosa* PA14. Cells were grown at 37°C in sterile M9 minimal medium supplemented with 0.2% glucose and 0.1% casamino acids. All antibiotics were prepared according to manufacturer's instructions (Table 1). All experiments were carried out in 96-well plates shaken and incubated at 37°C for 12h and treatments being randomized across each plate. After 12h of growth, optical density (OD) measurements were taken in BioTek plate readers. Randomization schemes of plates for each experiment were different from each other.

687

688 Selection of highly resistant mutants

689 We challenged 20 isogenic populations of PA14 against increasing concentrations of 690 each of the studied antibiotics (160 populations in total; Fig. 1A). As a control for the 691 adaptation to growth in medium without antibiotics we also included 20 populations 692 growing in M9 only, resulting in a total of 180 populations. Experiments were initiated 693 with half the antibiotic concentration that causes growth inhibition of at least 90% 694 (IC90) for each drug in a final volume of 100µl per well. Every 12h 50% volume was 695 transferred into a freshly prepared plate. Every fourth transfer (4 generations), OD was 696 measured and the antibiotic concentration was increased 1.5 times. Experiments were 697 concluded when reaching ~40 times the IC90 (48 transfers) or when 10 or less of the 698 20 populations had reached extinction. Whenever the antibiotic concentration was 699 increased, the preceding plates were frozen at -80° C in 1:4 (v/v) of 86% glycerol.

700

701 Fitness measurements

702 All evolved populations were grown overnight (ON) at 37°C and 180rpm in M9 media 703 with the corresponding antibiotic they were adapted to. Cultures were then centrifuged, 704 washed with fresh M9 media and diluted in 100µl of M9 without any drug to a starting OD of 0.08 (~10⁵ CFU/mL). For each population, 4 technical replicates were 705 706 considered, and then incubated inside a plate reader at 37°C for 24h. Within the plate 707 reader, OD measurements were taken at regular intervals of 15 min, for a total of 96 708 measurements per population and replicate. The collected growth data was then 709 analyzed using the R package 'grofit' to obtain three growth parameters: growth rate, 710 length of lag time, and maximum yield. We standardized the fitness of each population 711 relative to the mean of the evolved controls (adapted to M9 media only).

713 Collateral sensitivity and resistance assays

714 We measured collateral effects for the experimentally evolved populations with high 715 levels of resistance. We tested these populations and also the ancestral PA14 against 10 716 different concentrations of a given antibiotic in randomized order (each concentration 717 was replicated 3 times; total of 21120 concentration and population combinations). To 718 quantify the change in resistance or sensitivity we first considered growth relative to 719 the no-drug environment in order to account for differences in fitness defects among 720 populations originated after adaptation. We then calculated the area under the curve 721 using a spline approximation of the ancestral PA14 and subtracted the one obtained for 722 each population. Positive values reflect a higher cumulative growth at increasing 723 concentrations in the population compared to the ancestor, thus indicating cross-724 resistance; conversely, negative values represent collateral sensitivity. To derive 725 significant sensitivity or resistance, we performed a Wilcox rank test for all populations 726 adapted to a given environment when challenged against a given antibiotic, comparing 727 significant differences from 0. *P*-values were adjusted for multiple testing using the 728 false discovery rate, FDR (supplementary fig. S5). We subsequently asked how many 729 cases of direct or indirect adaptation had occurred for each antibiotic. Direct adaptation 730 considers how often adaptation to a given drug leads to resistance (or sensitivity) 731 against other drugs, whilst indirect adaptation reflects how often adaptation to other 732 drugs lead to resistance (or sensitivity) against a particular antibiotic. For example, we 733 asked how many cases of resistance against all other drugs were observed upon 734 adaptation to CIP (direct adaptation); as well as how many cases of resistance against 735 CIP were found upon adaptation to any other drug (indirect adaptation).

736

737 Chemical similarity

We inferred chemical relatedness as previously described by using the Jaccard's similarity index contrasting the chemical fingerprints of all antimicrobial compounds used here (Lázár et al. 2014). We then correlated these pairwise comparisons to the frequency of cross-resistance calculated by:

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- 743

$$FCR = \left(R_{A \to B} + R_{B \to A}\right) / L_{AB},$$

where $R_{A\to B}$ is the number of populations resistant to drug A with cross-resistance to drug B, $R_{B\to A}$ is the number of populations resistant to drug B with cross-resistance to A, and L_{AB} is the total number of populations adapted to A and B.

- 748
- 749

750 **DNA extraction**

751 To identify the genetic changes leading to high-level resistance evolution, we 752 sequenced full genomes for whole populations of the ancestral P. aeruginosa PA14, 10 753 evolved controls and 71 populations adapted to different drugs. Frozen material from 754 all populations was thawed, and 10µl of each were transferred into 15 ml of M9 minimal 755 medium with the corresponding antibiotic. All populations were shaken and incubated 756 at 37°C ON. DNA was extracted using the DNeasy Blood & Tissue Kit (Qiagen, 757 Hilden, Germany) following manufacturer's recommendations for Gram-negative 758 bacteria. Eighty-one populations in total were sequenced at the Institute for Clinical 759 Microbiology, Kiel University Hospital, using the Illumina HiSeq paired-end 760 technology (Bentley et al. 2008) with an insert size of 150bp and 300x coverage.

761

762 Genomic analysis

We employed an established pipeline encoded in serial bash and Perl scripts used
previously for the genomic analysis of *P. aeruginosa* PA14 (Jansen et al. 2015). Briefly,
reads with unreliable quality were removed using Skewer (Jiang et al. 2014). Samples
were then mapped to the published *P. aeruginosa*_UCBPP_PA14_uid57977 reference
genome available at
(ftp://ftp.ncbi.nih.gov/genomes/Bacteria/*Pseudomonas_aeruginosa*_UCBPP_PA14_u

id57977). Mapping was performed using bwa and samtools (Li et al. 2009; Li and
Durbin 2010) and then visually inspected for low-quality areas using IGV (Integrated
genome viewer, Broad Institute; www.broadinstitute.org/software/igv/).

772

773 Duplicated regions were removed for single nucleotide polymorphisms and structural 774 SV) variant calling (SNPs and using MarkDuplicates in Picardtools 775 (http://picard.source-forge.net). To call SNPs and small indels above a threshold 776 frequency of 0.1 and base quality above 20 we employed both frequentist and heuristic 777 methods using respectively SNVer and VarScan (Wei et al. 2011; Koboldt et al. 2012).

To identify larger indels and other SV, we used Pindel and CNVnator (Ye et al. 2009; Abyzov et al. 2011). The resulting output files were filtered for duplicates, ancestral variants, and variants found in the evolved controls. We used a combination of sources to identify and annotate the variants using snpEff (Cingolani et al. 2012), DAVID, the *Pseudomonas* database (available online at: http://pseudomonas.com) and information from published work. Further count statistics, analysis and visualizations were done in the R platform (R Core Team).

785

Mutational diversity was calculated as in (Chevereau et al. 2015). Briefly, we calculated the entropy $H = -\mathring{\alpha}[p_j(\log_2 p_j + (1 - p_j \log_2(1 - p_j))]]$, where p_j is the probability that a given locus *j* is mutated in a random population. *H* then measures the diversity of mutated loci in the populations adapted to a given drug. Standard error was obtained from jackknife resampling in the R platform.

791

792 In order to link the observed collateral effects to the underlying genetic changes we 793 performed a hierarchical clustering analysis. For this, we focused on four treatments, 794 which repeatedly produced contrasting patterns of collateral effects. These included 795 populations adapted to either GEN or STR (the two aminoglycosides), which produced 796 variation in their collateral profiles towards PIT and CAR. We also considered the 797 reverse two cases, for which replicated populations that had adapted to PIT and CAR 798 showed contrasting patterns of collateral effects towards GEN and STR. For these four 799 cases, we first obtained the Euclidean similarity of the sensitivities of evolved 800 populations against the considered drugs. Then we used hierarchical clustering based 801 on Ward's minimum variance method, including the Ward's criterion, which aims at 802 finding compact, spherical clusters, and combined it with bootstrapping to asses cluster 803 stability (Murtagh and Legendre 2014). The same process was then used to infer 804 clusters based on the genomic profiles of the same populations, including only genes 805 with mutations within their coding regions. For each antibiotic we then built 806 dendograms for the clustering results and assessed to what extent given genomic 807 clusters coincided with clusters having collateral resistance or sensitivity phenotypes.

808

809 The obtained genome sequences are available from NCBI SRA database under the810 BioProject number: PRJNA355367.

812 *P. aeruginosa* PA14 genome editing

813 Deletion of *nalC* and single nucleotide mutations in *pmrB* and *mexZ* were performed in 814 P. aeruginosa PA14 based on a two-step recombination method previously described 815 (Trebosc et al. 2016). DNA fragments corresponding to 700-bp up- and downstream of 816 the nalC region to be deleted (position 1,391,565-1,390,977 on PA14 genome, 817 GenBank CP000438.1) were amplified by PCR using primers oVT464/oVT465 and 818 oVT466/oVT467, respectively. The resulting DNA fragments were introduced into 819 pVT77 previously digested with EcoRI/XbaI using NEBuilder HiFi DNA assembly 820 (New England Biolabs). For the allelic replacement of wildtype pmrB and mexZ, 1.4-821 kb DNA fragments were amplified by PCR using primers oVT468/469, oVT470/471 822 and oVT472/473 on the evolved populations GEN-3, GEN-10, and STR-2, which 823 respectively contained the PmrB V136E, PmrB P254L and MexZ Q95stop 824 mutations. The resulting DNA fragments were cloned into pVT77, digested with 825 EcoRI/XbaI, using NEBuilder HiFi DNA assembly.

826

827 The obtained plasmids were transformed into E. coli conjugative strains MFDpir or 828 S17-1 and transferred into *P. aeruginosa* PA14 as described previously (Trebosc et al. 829 2016). After conjugation, genomic plasmid integration was tested on LB agar plates 830 containing 100 µg/ml sodium tellurite – when E. coli S17-1 was used additional 30 831 ug/ml Chloramphenicol were added to selection plates to eradicate the *E. coli* cells. 832 Plasmid integration into the PA14 genome was confirmed by PCR with primers oVT8 833 and oVT474, oVT476, oVT478 and oVT480 for nalC deletion, PmrB V136E, PmrB 834 P254L and MexZ Q95stop mutations, respectively. PA14 clones were transferred to 835 LB agar plates containing 1 mM isopropyl-β-D-1-thiogalactopyranoside and 200 µg/ml 836 3'-azido-3'-deoxythymidine to select for plasmid removal from the genome. Clones 837 were screened by PCR using primers oVT474/oVT475, oVT476/oVT477, 838 oVT478/oVT479 and oVT480/oVT481 for nalC deletion, PmrB V136E, PmrB P254L 839 and MexZ Q95stop mutations, respectively. The genomic deletion and mutations were 840 finally confirmed by DNA sequencing (Microsynth AG, Balgach, Switzerland).

841

842 Table 2. Oligonucleotides used

Oligo name	Sequence (5'-3')
oVT8	GTTTTCCCAGTCACGACGC

oVT464	AGAATTGAGGCCTCTCGAGGAATTCTTAGAGGTCCCAGGCATTG
oVT465	TGAGGAACAGGGTTTGCTGAGAGCGTTTC
oVT466	TCAGCAAACCCTGTTCCTCAAGGCCCTC
oVT467	CCGCAAGCTTCCTGCAGGCTCTAGACTGATGGAAACCTTTGCC
oVT468	AGAATTGAGGCCTCTCGAGGAATTCTCGATCTCGACGAACTGC
oVT469	CCGCAAGCTTCCTGCAGGCTCTAGACAACGACAGCTCGATGTC
oVT470	AGAATTGAGGCCTCTCGAGGAATTCCTCTCGCTGAAGCAGGTG
oVT471	CCGCAAGCTTCCTGCAGGCTCTAGAATCATCTTCGGCGTCAGTC
oVT472	AGAATTGAGGCCTCTCGAGGAATTCTCCTGGCCTTCCTCGTAC
oVT473	CCGCAAGCTTCCTGCAGGCTCTAGAAGGTAGGCGGAGAAAACG
oVT474	TCTGCGCGGATTCTGATAGC
oVT475	TCCCTGGAAATGCAGTGAGC
oVT476	GACGACTACCTGACCAAGCC
oVT477	CCTTCAGCCACAGGTCGATG
oVT478	CGAGGTCCATGTCCATCACC
oVT479	TCGTTCTCGTTGTAGTGGCG
oVT480	CCTTGATCAGGTCGGCGTAG
oVT481	AAGCTACCGTGACAGAACCC

844

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846

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852 cluster Inflammation at Interfaces.

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