



MLST alleles and was ascribed to the sequence type (ST) 221 and serotype O34:H9. It further harboured several virulence factors including the ferric aerobactin receptor (*iutA*), increased serum survival (*iss*), heat-resistant agglutinin (*hra*), temperature-sensitive haemagglutinin (*tsh*), P fimbrial adhesin (*papA*, *papC*, *papD*, *papX*), type I fimbriae (*fimA*, *fimB*, *fimD*, *fimE*, *fimF*, *fimG*, *fimI*), F1C fimbriae (*focC*, *focD*, *focG*, *focH*, *focI*), salmochelin siderophore (*iroN*), yersiniabactin siderophore (*fyuA*) and haemolysin *HlyA* that are commonly detected in several *E. coli* strains responsible for human extraintestinal infections. Numerous mobile genetic elements such as the IncFIB(AP001918 [F89:A-B1]), IncI1 (ST3), and IncHI2 (unknown ST) plasmid incompatibility groups, the high-pathogenicity island (*HPI*), the transposon Tn6082 and an array of insertion sequences were also detected, as shown in Table 1.

To the best of our knowledge, this is the first report on the presence of an ExPEC ST221-fimH9 serotype O34:H9 harbouring the *HPI*, hypervirulent plasmid IncI1 ST3, and over 100 virulence factors isolated from the swine microbiome in SA, and indeed in Africa. Our report clearly shows that the gut microbiome of swine is also a reservoir of ESBL-producing ExPEC and a potential source of virulence and resistance genes that may be transferred to other bacteria prevailing in the microbiome. The combination of virulence and drug resistance in pathogenic bacteria highlights the worrisome situation of a likely dearth of therapeutic alternatives for some serious bacterial infections in the near future. This phenomenon, coupled with high prevalence of immunocompromised individuals in the sub-Saharan African region, calls for increased surveillance of the population structure of ExPEC in order to preserve the general public from highly virulent and resistant bacterial infections. Stringent efforts to ensure rational antibiotic use in agriculture are a further imperative to safeguard and preserve antibiotics for future generations.

**Ethical approval.** Ethical approval was obtained from the Biomedical Research Ethics Committee (ref. no. BE365/15) and the Animal Research Ethics Committee (ref. no. AREC/091/015D) of the University of KwaZulu-Natal, as well as from the National Ethics Committee for Research in Human Health of Cameroon (ref. no. 2016/01/684/CE/CNERSH/SP) prior to starting the study. Ministerial approvals were also obtained from the Cameroonian Ministry of Livestock, Fisheries and Animal Industries (ref. no. 061/L/MINEPIA/SG/DREPIA/CE) and Ministry of Scientific Research and Innovation (ref. no. 015/MINRESI/B00/C00/C10/C14). The study was further recorded by the Department of Agriculture, Forestry and Fisheries (ref. no. 12/11/1/5 (878)).

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#### Luria Leslie Founou

Antimicrobial Research Unit, College of Health Sciences, University of KwaZulu-Natal, Durban, South Africa; Department of Food Safety and Environmental Microbiology, Centre of Expertise and Biological Diagnostic of Cameroon, Yaoundé, Cameroon; Bioinformatics and Applied Machine Learning Research Unit, EDEN Foundation, Yaoundé, Cameroon; and AMR Insights Ambassador Network, Amsterdam, Netherlands  
luriafounou@gmail.com, luriafounou@cedbcam.com

#### Raspail Carrel Founou

Antimicrobial Research Unit, College of Health Sciences, University of KwaZulu-Natal, Durban, South Africa; AMR Insights Ambassador Network, Amsterdam, Netherlands; and Sequencing Core Facility, National Health Laboratory Service, Johannesburg, South Africa

#### Mushal Allam, Arshad Ismail

Sequencing Core Facility, National Health Laboratory Service, Johannesburg, South Africa

#### Sabiha Yusuf Essack

Antimicrobial Research Unit, College of Health Sciences, University of KwaZulu-Natal, Durban, South Africa; and AMR Insights Ambassador Network, Amsterdam, Netherlands

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