

Therapeutic Characterization and Efficacy of Bacteriophage Cocktails Infecting *Escherichia coli*, *Klebsiella pneumoniae* and *Enterobacter* species

Prasanth Manohar¹, Cecilia Stalsby Lundborg², Ashok J. Tamhankar², Ramesh Nachimuthu^{1*}

¹VIT University, India, ²Karolinska Institutet (KI), Sweden

Submitted to Journal:
Frontiers in Microbiology

Specialty Section:
Virology

ISSN:
1664-302X

Article type:
Original Research Article

Received on:
21 Oct 2018

Accepted on:
06 Mar 2019

Provisional PDF published on:
06 Mar 2019

Frontiers website link:
www.frontiersin.org

Citation:

Manohar P, Stalsby_lundborg C, Tamhankar AJ and Nachimuthu R(2018) Therapeutic Characterization and Efficacy of Bacteriophage Cocktails Infecting *Escherichia coli*, *Klebsiella pneumoniae* and *Enterobacter* species. *Front. Microbiol.* 10:574. doi:10.3389/fmicb.2019.00574

Copyright statement:

© 2019 Manohar, Stalsby_lundborg, Tamhankar and Nachimuthu. This is an open-access article distributed under the terms of the [Creative Commons Attribution License \(CC BY\)](https://creativecommons.org/licenses/by/4.0/). The use, distribution and reproduction in other forums is permitted, provided the original author(s) or licensor are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

Provisional

1 **Therapeutic Characterization and Efficacy of Bacteriophage**
2 **Cocktails Infecting *Escherichia coli*, *Klebsiella pneumoniae* and**
3 ***Enterobacter* species**

4 Prasanth Manohar¹, Ashok J Tamhankar^{2,3}, Cecilia Stalsby Lundborg², Nachimuthu
5 Ramesh^{1*}

6 ¹Antibiotic Resistance and Phage Therapy Laboratory, Department of Biomedical Sciences,
7 School of Bioscience and Technology, Vellore Institute of Technology, Vellore, Tamil Nadu,
8 India.

9 ²Global Health-Health Systems and Policy: Medicines, focusing antibiotics, Department of
10 Public Health Sciences, Karolinska Institutet, Stockholm, Sweden.

11 ³Indian Initiative for Management of Antibiotic resistance, 302, Aryans, Deonar Farm Road,
12 Deonar, Mumbai, India.

13 **Running title:** Characterization of Bacteriophages infecting *E. coli*, *K. pneumoniae* and
14 *Enterobacter* species

15 **For Correspondence:**

16 Dr. N. Ramesh
17 drpnramesh@gmail.com

18 **Abstract**

19 Infections due to antibiotic resistant bacteria are increasing globally and this needs immediate
20 attention. Bacteriophages are considered an effective alternative for the treatment of bacterial
21 infections. The aim of this study was to isolate and characterize the bacteriophages that infect
22 *Escherichia coli*, *Klebsiella pneumoniae* and *Enterobacter* species. For this, clinical bacterial
23 isolates of the mentioned species were obtained from diagnostic centers located in Chennai,
24 Tamil Nadu, India. The bacteriophages were isolated from sewage water samples collected from
25 Tamil Nadu, India. Phage isolation was performed using enrichment method and agar overlay
26 method was used to confirm the presence of bacteriophages. All the phages were characterized
27 for their life cycle parameters, genome analysis and *in vitro* phage cocktail activity. The three
28 bacteriophages exhibited broad host range activity: *Escherichia* virus myPSH2311 infecting *E.*
29 *coli* belonging to six different pathotypes, *Klebsiella* virus myPSH1235 infecting *K. pneumoniae*
30 belonging to four different serotypes and *Enterobacter* virus myPSH1140 infecting four different
31 species of *Enterobacter*. Morphological observations suggested that the bacteriophages belonged
32 to, *Phi*eco32virus (*Escherichia* virus myPSH2311), *Podoviridae* (*Klebsiella* virus myPSH1235)
33 and *Myoviridae* (*Enterobacter* virus myPSH1140). The life cycles (adsorption, latent period and
34 cell burst) of *Escherichia* virus myPSH2311, *Klebsiella* virus myPSH1235 and *Enterobacter*
35 virus myPSH1140 were found to be 26 min, 40 min and 11 min respectively. Genomic analysis
36 revealed that *Escherichia* virus myPSH2311 is closely related to *Escherichia* phage
37 vB_EcoP_SU10, *Klebsiella* virus myPSH1235 is closely related to *Klebsiella* phage
38 vB_KpnP_KpV48 and *Enterobacter* virus myPSH1140 is closely related to *Enterobacter* phage
39 PG7 and *Enterobacter* phage CC31. When phage cocktail was used against multiple bacterial

40 mixtures, there was a reduction in bacterial load from 10^6 CFU/mL to 10^3 CFU/mL within 2
41 hours. All the three characterized phages were found to have a broad host range activity and the
42 prepared phage cocktails were effective against mixed bacterial population that are resistant to
43 meropenem and colistin, two last resort antibiotics. Infections caused by drug resistant bacteria
44 will be a serious threat in the future and the use of virulent bacteriophages in therapy may offer
45 an effective solution.

46 **Keywords:** Bacteriophage genome, *E. coli*, *Klebsiella pneumoniae*, *Enterobacter cloacae*, Phage
47 cocktail, Phage therapy.

48 1.0 Introduction

49 Bacteriophages are the viruses of bacteria that live in the same ecological niche, where their host
50 bacteria are present (Rohwer, 2003). Phages are generally very specific (species-specific and
51 strain-specific) to their bacterial host but some phages are polyvalent, and can infect more than
52 one species or strain of bacteria (Chibani-Chennaoui et al. 2004). Phage therapy largely
53 involves the treatment of bacterial infections using bacteriophages/phages (Levin and Bull,
54 2004). Phages with broad host range are mostly chosen for therapy, because of their broad
55 spectrum host-range activity against multiple bacteria. The phages belonging to the order
56 *Caudovirales* (Family-*Myoviridae*, *Siphoviridae* and *Podoviridae*) with proteinaceous tail, that
57 follow only lytic pathway, are preferred for therapy (Gill and Hyman, 2010). The use of
58 bacteriophages for therapeutic purpose is an old concept that is re-emerging after about a century
59 (Sulakvelidze et al. 2001). Antibiotic resistance has become a human health concern globally as
60 the infections caused by resistant bacteria are becoming difficult to cure (Ventola, 2015; WHO
61 report, 2014). Phage therapy can be one of the alternatives for combating antibiotic resistant
62 bacterial infections (Rios et al. 2016).

63 *Escherichia coli*, *Klebsiella pneumoniae* and *Enterobacter cloacae* are Gram-negative bacteria
64 that belong to the family *Enterobacteriaceae*. All the three are enteric pathogens causing serious
65 opportunistic infections in humans (Morens et al. 2004; CID report, 2015). They cause hospital
66 acquired and community acquired infections such as diarrhea, meningitis, urinary tract infections
67 (UTI), bacteremia, pneumonia, surgical site infections and sepsis (CID report, 2015). The
68 increasing reports of resistance to carbapenem and colistin, two last resort drugs, among
69 *Enterobacteriaceae* world over (WHO report, 2014) and more particularly so in the developing
70 countries (Ventola, 2015) is a serious threat to their therapeutic use, which prompts search for
71 alternative treatment options. Studies using bacteriophages as an antibacterial agent have shown
72 promising outcomes in both *in vitro* and *in vivo* studies, and therefore phage therapy is being
73 studied as a candidate to cure bacterial infections (Cao et al. 2015; Hung et al. 2011; McVay et
74 al. 2007; Mirzaei and Nilsson, 2015). Phage cocktails have shown broad spectrum activity
75 against many bacterial strains (Yen et al. 2017; Mendes et al. 2014). The characterization of
76 phages for therapeutic purpose involves isolation of potential lytic phages, multi-step *in vitro*
77 characterization, cocktail preparation and purification, dosing and *in vivo* studies. More than 50
78 *Escherichia* phages belonging to families *Myoviridae*, *Siphoviridae* and *Podoviridae* have been
79 reported with complete genome sequences
80 (<https://www.ncbi.nlm.nih.gov/genome/?term=escherichia+phage>). Genome sequenced phages
81 against *Klebsiella* (≈ 29) and *Enterobacter* (≈ 10) have been reported much lesser in number
82 (<https://www.ncbi.nlm.nih.gov/>). Here, we report characterization of three lytic bacteriophages
83 that showed promising ability to lyse *E. coli*, *K. pneumoniae* and *Enterobacter* species, report

84 their host range specificity and also efficacy of phage cocktails made using these three phages in
85 various permutations and combinations, in effectively killing combinations of host bacteria using
86 *in vitro* phage killing assay.

87 **2.0 Methods**

88 **2.1 Isolation of clinical bacterial strains for the study**

89 This study does not include any human subjects; therefore, ethical approval was not required for
90 this study according to national and institutional guidelines. The clinical isolates of *Escherichia*
91 *coli*, *Klebsiella pneumoniae*, *Enterobacter cloacae*, *E. hormaechei*, *E. asburiae* and *E. aerogenes*
92 used in this study were collected from diagnostic centers in Chennai, Tiruchirappalli and
93 Madurai located in the state of Tamil Nadu in India, during December 2014- September 2016.
94 All the isolates were preserved in 30% glycerol stocks at -20°C. The clinical samples used for
95 bacterial isolation were urine, sputum, pus, blood, wound swab and bronchial aspirate. Bacterial
96 identification was performed using VITEK identification system (bioMérieux Inc., USA) and
97 16S rRNA analysis. Universal primers, 27F (5'-AGAGTTTGATCCTGGCTCAG-3') and 1492R
98 (5'-GGTTACCTTGTTACGACTT-3'), were adopted for gene amplification and sequences of
99 16S rRNA genes were deposited in GenBank. All the clinical isolates were studied for resistance
100 against meropenem and colistin, two last resort antibiotics, using microbroth dilution method
101 following CLSI guidelines, 2018. For the study, a total of 150 non-repetitive, Gram-negative
102 bacterial isolates belonging to three genera *Escherichia*, *Klebsiella* and *Enterobacter* were used.
103 The isolated clinical pathogens included 80 *E. coli* isolates, 44 *Klebsiella pneumoniae* isolates
104 and in the case of *Enterobacter* isolates, there were four different species namely *E. cloacae*
105 (n=15), *E. hormaechei* (n=4), *E. asburiae* (n=4) and *E. aerogenes* (n=3) (Table 1). The results
106 for meropenem and colistin resistance screening of these isolates are presented in table S1.

107 **2.2 Phage isolation and enrichment**

108 Bacteriophages were isolated from water samples collected from Ganges River near Varanasi in
109 Northern part of India and sewage water treatment plants (secondary treatment stage) from
110 different locations in Chennai, Bangalore, Tirupathi, Vellore, Karur and Trichy in Southern part
111 of India. Initially, the isolated bacterial strains (one isolate at a time) were grown in Luria-
112 Bertani broth (Himedia, India) medium and were used as a host for phage isolation. Briefly, to a
113 5 mL of exponentially grown bacterial culture (optical density at 600 nm = 0.6), 10 mL of phage
114 containing water samples was added and incubated at 37°C for 24 hours in shaking incubator to
115 enrich the phages against the host bacterium. This mixture was centrifuged for 15 min at 12,000
116 × g and the supernatant was filtered in 0.22-µm pore-sized membrane syringe filters for
117 separation of phages from other contaminants. The filtrate was used for double-agar overlay
118 method (Li et al. 2016). Briefly, to the exponentially grown host bacterial culture (400 µL), the
119 phage filtrate (200 µL) was added and incubated for 15 min. To the mixture, 3 mL of molten soft
120 agar (0.75% agar) was added and over-laid onto prepared LB agar plate (1.5% agar). The plates
121 were incubated at 37°C for 10 hours and the appearance of clear plaques indicated the presence
122 of phages against the host bacterium. The phage plaques were picked-up from the plate for
123 further purification and the phage titer was determined. For spot test method, the bacterial (using
124 exponentially grown host bacterial culture) lawn was prepared in LB agar plates and 10-50 µL of
125 phage filtrate was placed as a spot over the target bacterial lawn to evaluate the phage activity.
126 The development of clear spots indicated the phage activity and the time taken for bacterial

127 clearance indicated the lytic activity of phages. The bacterium initially used for phage isolation
128 was deemed as a host bacterium against the phage. Multiplicity of Infection (MOI) was
129 calculated using the number of phage particles against the potent host bacteria (PFU/CFU).

130 **2.3 Purification of lytic phages**

131 The isolated phage lysates were prepared in high titers using phage multiplication strategy
132 (propagation on host bacterium). Briefly, the phages were multiplied using host bacterium for 24
133 hours (day 1) and centrifuged at $6000 \times g$ for 15 min. The collected supernatant was mixed with
134 exponentially grown host bacterium (day 2) and allowed to multiply. Similar passages were
135 carried out for 5 days and evaluated for phage activity/ titer by spot test and double agar overlay
136 method against *E. coli*, *K. pneumoniae* and *Enterobacter* species. The obtained high titer phages
137 were precipitated using 10% PEG 6000 (polyethylene glycol) and 1M NaCl. Briefly, to the
138 phage lysate 10% PEG 6000+1M NaCl was added, mixed gently (did not vortex) and the
139 mixture was stored at 4°C for 24 hours. The precipitated phage particles were centrifuged at
140 $15,000 \times g$ for 45 min and the obtained pellet was resuspended in sterile SM buffer (For 1 L:
141 5.8g, NaCl; 50 mL, 1M Tris-HCl [pH 7.5]; 2g, MgSO₄.7H₂O; 5 mL, 2% gelatin). The extraction
142 was carried out by adding equal volume of chloroform and the aqueous phase was sedimented by
143 centrifugation at $18,000 \times g$ for 80 min. The obtained phage particles were dialyzed against
144 Phosphate Buffer Saline (PBS) for 6 hours by changing buffer every two hours and the purified
145 phage suspension was stored at 4°C for further analysis.

146 **2.4 Electron microscopic analysis**

147 The purified phage particles (10^5 PFU/mL) were negatively stained using phosphotungstic acid,
148 PTA (2% [w/v], pH 7.0). Briefly, 10 μ L of phage lysate was added over the copper grid and the
149 liquid was allowed to absorb for 10 min. The remaining liquid was removed using tissue paper
150 and the prepared 2% PTA solution (staining solution) was added. After allowing it to stain for 5
151 min, the excess stain was removed and the grid was washed twice with sterile water. The
152 negatively stained phage particles in the copper grid were allowed to dry at room temperature for
153 20-30 min and visualized under Transmission Electron Microscopy (FEI-TECNAI G2-20 TWIN,
154 Bionand, Spain). The phage morphology was determined and head/ tail lengths (10
155 measurements each) were measured using ImageJ software.

156 **2.5 Host-range specificity determination and efficiency of plating (EOP)**

157 The lytic activity of isolated phages was tested against the target bacteria. Accordingly,
158 *Escherichia* phage was tested against 80 *E. coli* isolates belonging to pathotypes: EPEC
159 (enteropathogenic *E. coli*), EHEC (enterohemorrhagic *E. coli*), ETEC (enterotoxigenic *E. coli*),
160 EIEC (enteroinvasive *E. coli*), EAEC (enteroaggregative *E. coli*), and UPEC (uropathogenic *E.*
161 *coli*). *Klebsiella* phage was tested against 37 *K. pneumoniae* isolates that belonged to serotypes
162 K1, K2, K5 and *Enterobacter* phage was tested against 15 *E. cloacae*, 4 *E. hormaechei*, 4 *E.*
163 *asburiae* and 3 *E. aerogenes* isolates. Spot test was carried out to assess the host-range
164 specificity of phages against the test bacteria and the resulting positive isolates were again tested
165 for their plaque forming ability in double agar overlay method for calculating Efficiency of
166 plating (EOP) (Mirzaei and Nilsson, 2015). EOP was calculated using the number of virus
167 particles infecting the test bacterium against the same titer of virus particles infecting the host
168 bacterium. Accordingly, all the test bacterial strains were grown overnight (16 hours) and the

169 concentration of $10^6 - 10^9$ (CFU/mL) was used for double agar overlay method. For the assay,
170 200 μ L of bacterial culture was mixed with 100 μ L of phage lysate (MOI=0.01) and EOP was
171 determined using the formula, Plaque Forming Units (PFU) on the test bacterium / PFU on the
172 host bacterium, evaluated by double agar overlay method. EOP was classified as 'High',
173 'Moderate' and 'Low' based on the productive infection on the target bacterium. EOP was
174 deemed as 'High' only if the phage-bacterium combination against the test bacterium had a
175 productive infection of at least 50% ($EOP \geq 0.5$) compared to the host bacterium. EOP between
176 $>10\%$ and $<50\%$ ($EOP >0.1 - <0.5$) was considered 'Moderate' and $EOP <10\%$ ($EOP \leq 0.1$) was
177 recorded as 'Low' (Mirzaei and Nilsson, 2015).

178 **2.6 Characterization: Adsorption rate, latency period and burst size**

179 Exponentially grown bacterial cells were mixed with the respective phages at a MOI of 0.001
180 and incubated at 37°C. Aliquots of 100 μ L were removed after every 4 min interval for 40 min
181 and diluted in 4.4 mL LB broth and 0.5 mL of chloroform was added. After incubating the
182 mixture for 30 min at 37°C, the number of non-adsorbed phages was determined subsequently
183 using double agar overlay method. The adsorption curve was constructed using the ratio of non-
184 adsorbed phage particles at different time intervals to the number of initial phages. One-step
185 growth experiment was performed to determine the latent period and burst size (14). Briefly, the
186 bacterial cells (10^8 CFU/mL) were infected with the phage particles (MOI of 0.001) and allowed
187 to adsorb (based on the adsorption time determined previously) at 37°C. The mixture was then
188 centrifuged at $12,000 \times g$ for 5 min and the pellet was resuspended in 10 mL of LB broth and the
189 incubation was continued at 37°C. The samples were taken at 5 min intervals for 80 min and
190 titrated against the host bacterium. The latent-period was calculated as the duration between the
191 phage adsorbed until the release of phage virions. The burst size of the phage was calculated
192 using the final number of free phage particles to the initial number of phages.

193 **2.7 Phage stability studies**

194 Stability studies were conducted at different pH and temperature. For thermal stability tests,
195 phage lysates (10^8 PFU/mL) were incubated at 4, 20, 35, 45, 50, 55, 60, 70 and 80°C for 60
196 minutes in temperature-controlled water bath and immediately transferred to the ice cold
197 condition (-20°C) which was further tested for phage activity using double agar overlay method.
198 The pH stability studies were performed using SM buffer and pH was adjusted using 1N NaOH
199 and 1N HCl. The phage lysates (10^8 PFU/mL) were incubated at pH 1-14 for 60 minutes and the
200 aliquots were removed for stability analysis. The results were expressed as phage viability in
201 terms of percentage of initial viral counts. All the stability studies were tested using *E. coli*
202 ec311, *K. pneumoniae* kp235 and *E. cloacae* el140, and the experiments were repeated in
203 triplicates.

204 **2.8 DNA isolation, genome sequencing and analysis**

205 The phage DNA was extracted from purified phage particles using phenol-chloroform (24:1)
206 method and precipitated using ethanol (100%). The purified phage DNA was visualized on 0.8%
207 agarose gels and the PE libraries were prepared using Illumina TruSeq Nano DNA library Prep
208 kit. The prepared libraries were sequenced using Illumina Nextseq 500 system (using 2×150 bp
209 chemistry) at Eurofins Genomics, Bangalore, India. The sequenced raw data was processed to
210 obtain high quality clean reads using Trimmomaticv0.35 to remove adapter sequences,

211 ambiguous reads (reads with unknown nucleotides “N” larger than 5%), and low-quality
212 sequences (reads with more than 10% quality threshold (QV) <20 phred score). The sequenced
213 high quality reads were *de novo* assembled using CLC Genomics Workbench version 9.5.2.
214 Protein-coding and tRNA genes were identified using the final assembly. The transfer-RNA
215 (tRNA) genes were predicted using tRNAscan-SE 2.0 web server while the protein coding genes
216 (CDS) were predicted using FGENESV web server. Functional annotation of the predicted
217 proteins was performed using the amino acid sequences via BLASTp program online against a
218 custom database of viral proteins in NCBI. Gene ontology (GO) annotations of the genes were
219 determined by the Blast2GO platform. Distribution of GO terms across the categories –
220 Biological Process, Molecular Function and Cellular Component was obtained through
221 WEGOportal (<http://wego.genomics.org.cn/cgi-bin/wego/index.pl>). The NCBI sequence was
222 downloaded from NCBI (<https://www.ncbi.nlm.nih.gov>) for sequence comparison and the
223 scaffolds were then subjected to reference-based assembly via CONTIGuator2. The final
224 assembly generated by CONTIGuator was validated based on sequence homology to known
225 bacteriophage sequences in NCBI via BlastN.

226 **2.9 Composition and preparation of phage cocktails**

227 Phage cocktails containing different compositions of isolated phages under study were prepared
228 and evaluated for activity against target species. For cocktail preparation, two or three different
229 phages were mixed together in equal proportions to obtain a concentration of 10⁶ PFU/mL.
230 Briefly, cocktail EK1 contained *Escherichia* phage plus *Klebsiella* phage; KL2 contained
231 *Klebsiella* phage plus *Enterobacter* phage; EL3 contained *Escherichia* phage plus *Enterobacter*
232 phage and EKL4 contained *Escherichia* phage plus *Klebsiella* phage plus *Enterobacter* phage.
233 The prepared cocktails were tested for *in vitro* phage-killing assay against respective bacterial
234 strains. The results were compared to the activity of phages in cocktails to the activity of phages
235 alone, and one bacterium from each genus was used for this study. Accordingly, 1 mL of host
236 bacterium (6 × 10⁷ CFU/mL) was diluted in LB broth to yield a final concentration of 6 × 10⁶
237 CFU/mL. For each study, 100 µL (each phage at the concentration of 10⁶PFU/mL; MOI of 1.0)
238 of bacteriophage suspension was added and the mixture was incubated at 37°C and the aliquots
239 (100 µL) were removed at 0, 2, 4, 6 and 24 hours to calculate the reduction in bacterial count. To
240 test the activity of phage cocktails, bacteria were also used in combination similar to phage
241 combinations (Table S2). In the case of control experiments, bacteriophage buffer alone was
242 used with the bacterial inoculum and bacterial growth was determined. All the cocktail studies
243 were tested using *E. coli* ec311, *K. pneumoniae* kp235 and *E. cloacae* el140, and the experiments
244 were repeated in triplicates.

245 **3.0 Results**

246 **3.1 Nomenclature and morphological characterization of phages**

247 The phages were named as *Escherichia* virus myPSH2311, *Klebsiella* virus myPSH1235 and
248 *Enterobacter* virus myPSH1140 following the bacteriophage nomenclature guidelines (Krupovic
249 et al. 2016). Examination of phage morphology by Transmission Electron Microscopy (TEM)
250 analysis showed that *Escherichia* virus myPSH2311 had an icosahedral head of 33±3.0 nm, a
251 non-contractile tail length of 65±2.5 nm and belonged to genus *Phi*co32virus, *Klebsiella* virus
252 myPSH1235 had the icosahedral head of 80±4.5 nm and very short non-contractile tail that
253 showed the phage belonged to family *Podoviridae* and *Enterobacter* virus myPSH1140 had an

254 elongated head of approximately 80 ± 2.0 nm and long contractile tail of 101 ± 3.5 nm in length
255 indicating that it belonged to the family *Myoviridae* (Fig.1).

256 **3.2 Host-range activity determination and efficiency of plating (EOP)**

257 The spot test assay showed that the *Escherichia* virus myPSH2311 had lytic activity against 73%
258 of the tested *E. coli* isolates, *Klebsiella* virus myPSH1235 had activity against 52% *K.*
259 *pneumoniae* isolates and *Enterobacter* virus myPSH1140 showed activity against 15 *E. cloacae*
260 (n=15), 3 *E. hormaechei* (n=4), 2 *E. asburiae* (n=4) and 2 *E. aerogenes* (n=3) isolates. In the
261 case of double agar overlay method, *Escherichia* virus myPSH2311 had plaques against 43/80
262 tested *E. coli* isolates, *Klebsiella* virus myPSH1235 had plaques against 17/44 *K. pneumoniae*
263 isolates and *Enterobacter* virus myPSH1140 had plaques against 11/15 *E. cloacae*, 2/4 *E.*
264 *hormaechei*, 2/4 *E. asburiae* and 2/3 *E. aerogenes* isolates. The percentage activity difference
265 between the spot test and double agar overlay method was found to be 29.7% for *Escherichia*
266 virus myPSH2311, 30% for *Klebsiella* virus myPSH1235 and for *Enterobacter* virus
267 myPSH1140, it was 30.7% for *E. cloacae*, 40% for *E. hormaechei*, 0% for both *E. asburiae* and
268 *E. aerogenes*. The EOP analysis that was used to differentiate the phage infectivity between spot
269 test and double agar overlay method, showed a different scenario (Table 1). Though, spot test
270 results showed that *Escherichia* virus myPSH1311 produced clear zone (spot) against 58/80
271 tested *E. coli* isolates; the EOP analysis showed high productive infection in 34/80 *E. coli*
272 isolates whereas against 9 *E. coli* isolates it was moderate or low productive infection and 15/80
273 *E. coli* isolates had no infection. *Klebsiella* virus myPSH1235 had high productive infection
274 against 10/44 *K. pneumoniae* isolates with 23/44 in spot test assay and the percentage difference
275 was 78.7%. Even if all the EOP results (High + Moderate + Low) were considered for *Klebsiella*
276 phage myPSH1235, the number of isolates producing (17/44) plaques in double agar overlay
277 assay was still lower than the spot test (23/44) results. *Enterobacter* virus myPSH1140 had high
278 productive infection against 7/15 tested *E. cloacae* isolates compared to 15/15 in spot test assay.
279 The same phage showed high productive infection against 2/4 *E. hormaechei*, 2/4 *E. asburiae*
280 and 2/3 *E. aerogenes* respectively (Table 1).

281 **3.3 Phage characterization: one-step and stability studies**

282 The multiplication capacity of phages was determined by one-step growth experiment to analyze
283 the adsorption velocity, latency period and burst size (Fig.2). Accordingly, for *Escherichia* virus
284 myPSH2311, the adsorption velocity was 1.1×10^{-9} mL/min with latency period of 26 min and the
285 burst size of approximately 110 phages/infected cell. The adsorption velocity for *Klebsiella* virus
286 myPSH1235 was 4.35×10^{-9} and the latency period was 40 min with the burst size of 120
287 phages/infected cell. *Enterobacter* virus myPSH1140 had an adsorption velocity of 2.8×10^{-9} , a
288 very short latency period of 11 min and a burst size of 135 phages/infected cell (Fig.2). When
289 sensitivity of phages to different pH conditions was determined by exposing them to varying
290 range of pH from 1 to 14 for 60 min, all the three phages were found to be viable from pH 4 up
291 to pH 11, but the phages were inactivated at $\text{pH} \leq 3$ and ≥ 12 (Fig.3). In the case of thermal
292 stability, all the phages were found to uphold their activity up to 55°C and reduction in activity
293 was observed at higher temperatures (Fig.3). The complete characterization report is available in
294 table S3.

295 **3.4 Genomic analysis and annotation**

296 The genome of *Escherichia* virus myPSH2311 measured 68,712 bp in size with a GC content of
297 42.4%. The genome contains 89 proteins or coding sequences (CDS) and it includes 27 proteins
298 of known putative function and 62 hypothetical proteins. A total of 1.01 Gb data was assembled
299 into scaffolds using CLC workbench version 9.5.2, and the assembly size was 5,945,203 bp with
300 the average scaffold size of 12,133 bp. The arranged complete genome of *Escherichia* virus
301 myPSH2311 is closely related to *Escherichia* phage vB_EcoP_SU10 (88%) and *Escherichia*
302 virus phiEco32 (72%) (Fig.4A, Fig. S1 & S2, A). The NCBI accession number for this sequence
303 is MG976803. The complete list of all the proteins is available in table S4. *Klebsiella* virus
304 myPSH1235 was found to have a genome size of 45,135 bp with a GC content of 53.7%. The
305 genome contains 49 proteins or CDS, of which 21 were found to have known putative function
306 and 28 were hypothetical proteins. The obtained 1.37 Gb data was assembled into scaffolds using
307 CLC workbench version 9.5.2, and the assembly size was 5,740,807 bp with the average scaffold
308 size of 1,321 bp. The genome was closely related to *Klebsiella* phage vB_KpnP_KpV48 (95%)
309 (Fig.4B, Fig. S1 & S2, B). The complete genome of *Klebsiella* virus myPSH1235 is free of
310 toxins or toxin-related genes, and none of the proteins representing a temperate or lysogenic
311 lifestyle was detected (Table S4). The NCBI accession number for this phage is MG972768. The
312 complete list of all the proteins is available in table S5. *Enterobacter* virus myPSH1140 was
313 having a genome size of 172,614 bp with a GC content of 39.9%. The gene annotation studies
314 showed 102 proteins with known function and 138 proteins were hypothetical proteins. The
315 obtained 1.22 Gb data was assembled into scaffolds using CLC workbench version 9.5.2, and the
316 assembly size was 5,193,726 bp with the average scaffold size of 6,059 bp. The complete
317 genome was having 92% similarity with *Enterobacter* phage CC31 and 90% similarity with
318 *Enterobacter* phage PG7 (Fig.4C, Fig. S1 & S2, C). The NCBI accession number is MG999954.
319 The complete list of all the proteins is available in table S6.

320 **3.5 *In vitro* activity of phage cocktail**

321 Phage cocktails were prepared to evaluate the activity of phages against multiple bacterial
322 strains. When the phage cocktail containing all the three phages was tested against the three
323 meropenem and colistin resistant test bacteria, the growth declined after 2 hours from 10^6
324 CFU/mL to $<10^5$ CFU/mL and at the end of 24 hours the bacterial density reached to zero with
325 no viable cells. For EK1 cocktail, >2 fold decrease in bacterial cell count (both *E. coli* and *K.*
326 *pneumoniae*) was observed after two hours, for KL2 cocktail, the bacterial cell count (both *K.*
327 *pneumoniae* and *E. cloacae*) decreased from 10^6 CFU/mL to 10^3 CFU/mL within 2 hours and for
328 EL3 cocktail, 2 fold reduction of bacterial cells (both *E. coli* and *E. cloacae*) was observed after
329 4 hours. In phage cocktail containing all the three phages, EKL4, a two-fold decrease in bacterial
330 count (*E. coli*, *K. pneumoniae*, *E. cloacae*) was observed in 2 hours as comparable to the phages
331 alone. In the case of prepared phage cocktails, all the combinations had similar to better activity
332 in comparison to the phages alone (Fig.5). Our experiment proved the activity of prepared phage
333 cocktails against multiple bacterial genera and showed promising results against meropenem and
334 colistin resistant bacteria *in vitro*.

335 **4.0 Discussion**

336 Phage therapy is currently gaining attention in clinical medicine, because the infections caused
337 by 'superbugs – Multi-Drug Resistant (MDR) bacteria' are almost impossible to treat, using
338 available antibiotics (Chan et al. 2013). From clinical point-of-view, bacteriophages are likely to
339 be used in treatment, only when the patient is infected with multi-drug resistant bacteria or

340 during the antibiotic crisis of non-curable infections (Lin et al. 2017). The increasing studies on
341 bacteriophages and phage therapy could put forth phage therapy as one of the alternative
342 treatment options to treat ‘superbug’ infections (Rios et al. 2016). This study is one such effort to
343 characterize bacteriophages infecting Gram-negative bacteria, *E. coli*, *K. pneumoniae* and
344 *Enterobacter* species.

345 In the present study, we characterized the phenotypic, morphological and genomic properties of
346 three bacteriophages that are independently specific in their activity against pathogenic *E. coli*,
347 *K. pneumoniae* and *Enterobacter* species. All the three characterized phages belong to order
348 *Caudovirales* that are lytic phages which are generally considered for therapy (*Podoviridae* and
349 *Myoviridae*). There are earlier studies on *Escherichia* phages that showed many of the studied
350 phages are specific to a strain of *E. coli* (e.g., *Escherichia* phage OSYSP infecting only *E. coli*
351 O157:H7) or had a narrow host range activity (Lin et al. 2017; Carter et al. 2012; Dalmasso et al.
352 2016; Baig et al. 2017). In our study, the characterized *Escherichia* virus myPSH2311 was found
353 to have broad host range activity infecting *E. coli* isolates that belonged to six different
354 pathotypes EPEC, EHEC, ETEC, EIEC, EAEC, and UPEC besides some unknown pathotypes.
355 This is one of the rarest reports where an *Escherichia* phage infecting six different pathotypes of
356 *E. coli* was characterized. But another study also report the broad host range activity of
357 *Escherichia* phage against multiple pathotypes of *E. coli* (Manohar et al. 2018). The studied
358 *Klebsiella* virus myPSH1235 showed broad host range activity against *K. pneumoniae* belonging
359 to serotypes K1, K2, K5 besides some unknown serotypes. An earlier study showed that a multi-
360 host *Klebsiella* phage ϕ K64-1 was capable to infect *Klebsiella* capsular types K1, KN4, KN5,
361 K11, K21, K25, K30, K35, K64 and K69. It is stated that the multi-host infectivity of the
362 bacteriophages is due to the presence of multiple depolymerases in the tail-fibers (Pan et al.
363 2017). The role of polyvalent phages in phage therapy needs more detailed investigation. The
364 studies on *Enterobacter* phage thus far are very minimal or reports of established *Enterobacter*
365 phages capable of infecting various strains or species are scarce (Pereira et al. 2016; Li et al.
366 2016). The characterized *Enterobacter* virus myPSH1140 in our study belonging to *Myoviridae*
367 family showed activity against four species of *Enterobacter* *E. cloacae*, *E. hormaechei*, *E.*
368 *asburiae* and *E. aerogenes*. Our study and those of some others strongly suggest that there are
369 bacteriophages that can have broad host range activity against different strains or species or
370 genera of bacteria (Hamdi et al. 2017). A recent study showed that bacteriophages SH6 and SH7
371 were capable of infecting bacteria from different genera – *E. coli* O157:H7, *Shigella flexneri*,
372 *Salmonella paratyphi* and *Shigella dysenteriae* (Hamdi et al. 2017). There are studies that
373 showed ‘narrow’ host range specificity of bacteriophages mainly because of the use of standard
374 isolation procedure where single host strain of bacteria is used (Li et al. 2016; Hamdi et al. 2017;
375 Ross et al. 2016). Future studies should focus on testing the host range activity of bacteriophages
376 but it is also believed that host range activity is not a fixed property of bacteriophages and can
377 evolve overtime (Hamdi et al. 2017; Ross et al. 2016). It should also be noted that we found
378 dissimilarities in the results obtained between spot test and plaque assay in host range activity
379 determination, therefore plaque assay is recommended in order to obtain productive infection for
380 the determination of host range activity of phages (Mirzaei and Nilsson, 2015).

381 The three characterized bacteriophages had different growth profile, which is one of the
382 important characteristics of lytic bacteriophages. In this study, *Escherichia* virus myPSH2311
383 (*Podovirus*) had a growth profile with the latent period of 26 min and burst size of 110
384 phages/infected cell, which is beneficial for therapy. Earlier studies using *Podoviridae* phages

385 showed latency period of \approx 15-25 min and burst size of \approx 50-80 phages/infected cell (Dalmasso et
386 al. 2016). An earlier study on *Podoviridae* phages infecting *Klebsiella* species was found to have
387 a growth profile with the latency period of 15 min and burst size of \approx 50-60 phages/infected cell
388 (Chaturongakul and Ounjai, 2014). In our study, *Klebsiella* virus myPSH1235 belonging to
389 *Podoviridae* family was found to have a latent period of 40 min and burst size of 120
390 phages/infected cell, which is beneficial for therapy. It was very clear from this study that the
391 growth profile of bacteriophages is not completely dependent on either the family or the host
392 these bacteriophages infect. The bacteriophages belonging to *Myoviridae* family are known to
393 have shorter life cycles and similarly the characterized *Myoviridae* phage (*Enterobacter* phage
394 myPSH1140) had a latent period of 11 min and burst size of 135 phages/infected cell. It was also
395 noted in this and earlier studies that the number of progeny phage particles (burst size) largely
396 depends on the availability of host bacterial cells (Dalmasso et al. 2016). Life cycle parameters
397 of bacteriophages will play significant role in determining both *in vitro* and *in vivo* phage
398 activities (during therapy), because phage multiplication is directly proportional to reduction in
399 bacteria.

400 The genomes of all the three characterized phages showed 70-100% similarities to the already
401 existing phage genomes in the database. *Escherichia* virus myPSH2311 (68,712 bp) was found
402 to have 88% sequence similarity with *Escherichia* phage vB_EcoP_SU10 (77,327 bp). The
403 endolysin gene (ORF 12) was found to have 98% sequence similarity with *Escherichia* virus
404 phiEco32 and 97% sequence similarity with *Escherichia* phage vB_EcoP_SU10. The DNA
405 injection protein (ORF 17) was detected to have 98% sequence similarity with *Escherichia*
406 phage vB_EcoP_SU10. The genome does not have toxins or toxin-related genes, and none of the
407 genomic markers representing a temperate or lysogenic lifestyle was detected (Table S4).
408 *Escherichia* phage vB_EcoP_SU10 is a C3 morphotype phage but *Escherichia* virus
409 myPSH2311 does not have any elongated regions in its morphological characterization (Mirzaei
410 et al. 2014) and related to T4-phages (Petrov et al. 2010). *Klebsiella* virus myPSH1235 was
411 found to have 80% similarity with *Klebsiella* phage vB_KpnP_KpV48. *Klebsiella* virus
412 myPSH1235 has a genome size of 45,135 bp with 49 CDS compared to *Klebsiella* phage
413 vB_KpnP_KpV48, which has a genome size of 44,623 bp with 57 CDS. According to the
414 genome morphology, phylogenetic analysis and sequence similarities, the *Klebsiella* virus
415 myPSH1235 is classified within the genus *Kp34virus*, subfamily *Autographivirinae*, family
416 *Podoviridae*. *Klebsiella* phage vB_KpnP_KpV48 has no capsular specificity and similarly,
417 *Klebsiella* virus myPSH1235 was also found to infect *K. pneumoniae* of capsular types K1, K2
418 and K5 (Solovieva et al. 2018). From clinical point of view, the *K. pneumoniae* capsular types
419 K1 and K2 are the most virulent strains and that the infections caused by these strains can be
420 eliminated using *Klebsiella* virus myPSH1235 is a promising result, which needs further
421 exploration. *Enterobacter* virus myPSH1140 was found to have a large genome size of 172,614
422 bp with 240 CDS with 92% similarity with *Enterobacter* phage CC31 (165,540 bp and 279 CDS)
423 and 90% similarity to *Enterobacter* phage PG7 (173,276 bp and 294 bp). The genome contains
424 240 proteins or CDS and all the identified proteins were found to have 90-100% sequence
425 similarity with the *Enterobacter* phage CC31 and *Enterobacter* phage PG7. Similarities in the
426 phage genome showed that there is abundance of these phages in the environment and therefore
427 they may be isolated for therapeutic purpose.

428 Earlier studies on phage cocktails showed promising results in reducing the bacterial load in both
429 *in vitro* and *in vivo* models (Lin et al. 2017; Pan et al. 2017). In our *in vitro* experiments, a phage

430 cocktail that was prepared using the three newly isolated bacteriophages infecting three different
431 genera of bacteria (*Escherichia* virus myPSH2311 against *E. coli*, *Klebsiella* virus myPSH1235
432 against *K. pneumoniae* and *Enterobacter* virus myPSH1140 against *Enterobacter* species)
433 showed promising results in totally suppressing the bacterial load within 24 hours. The phage
434 cocktails reported in this study consisting of multiple phage types could thus prove to be
435 effective as clinical therapeutic agents (Kesik-Szeloch et al. 2013, Chan et al. 2013). Ours is one
436 of the rarest studies to use phage cocktails against different genera of bacteria. *In vivo* activity of
437 these phage cocktails also showed promising results and the results are published elsewhere
438 (Manohar et al. 2018).

439 The strength of our study is that we established the lytic effectiveness of the phages and their
440 cocktail against clinical bacterial isolates of three genera that are known to be pathogenic.
441 Further we also demonstrated the lytic effectiveness of these phages and their cocktail against
442 pathogenic bacteria that were resistant to two last resort antibiotics, meropenem and colistin.
443 Thus further experiments can be taken up for *in vivo* studies in search of a therapeutic treatment
444 against bacterial infections resistant to these drugs.

445 **5.0 Conclusion**

446 The emergence of multi-drug resistant bacterial strains is a global threat which needs to be
447 addressed by using alternative therapies, such as phage therapy. The three highlighted
448 bacteriophages (*Escherichia* virus myPSH2311 against *E. coli*, *Klebsiella* virus myPSH1235
449 against *K. pneumoniae* and *Enterobacter* virus myPSH1140 against *Enterobacter* species) and
450 their cocktails showed promising *in vitro* results that may be extended for use as biocontrol
451 agents in some clinical applications. The development of phage cocktails could be considered for
452 the effective treatment of bacterial infections consisting of broad targets. Hopefully, in future,
453 availability of increased repertoire of phages may allow the development of multi-phage cocktail
454 therapy possible.

455 **Acknowledgement**

456 The authors would like to thank Vellore Institute of Technology (VIT) for providing research
457 facilities to complete the work. This research was partly supported by Swedish Research Council
458 with grants to CSL (Grant no.2012-02889 and 2017-01327). I would like to thank Council of
459 Scientific and Industrial Research (CSIR) for providing financial assistance (SRF) to support this
460 research.

461 **Authors Contribution**

462 PM and NR, collected the isolates and did bacteriophage experiments. PM and NR undertook the
463 laboratory work. AJT, CSL and NR interpreted the data. PM and NR wrote the initial
464 manuscript. CSL and AJT revised and edited the manuscript. All authors approved the final
465 version of the manuscript.

466 **Conflict of Interest**

467 Authors have no financial or any other conflicts of interest.

468 **Data availability**

469 All the data that support the findings of this study have been deposited in Genbank with the
470 accession numbers MG976803 (*Escherichia* phage myPSH2311), MG972768 (*Klebsiella* phage
471 myPSH1235) and MG999954 (*Enterobacter* phage myPSH1140).

472 References

- 473 1. Rohwer, F. (2003). Global Phage Diversity. *Cell*. 113, 141.
- 474 2. Chibani-Chennoufi, S., Bruttin, A., Dillmann, M. L., Brüssow, H. (2004). Phage-host
475 interaction: an ecological perspective. *J. Bacteriol.* 186 (12), 3677-3686.
- 476 3. Levin, B. R., and Bull, J. J. (2004). Population and evolutionary dynamics of phage
477 therapy. *Nat. Rev. Microbiol.* 2(2), 166.
- 478 4. Gill, J. J., and Hyman, P. (2010). Phage choice, isolation, and preparation for phage
479 therapy. *Curr. Pharma. Biotechnol.* 11(1), 2-14.
- 480 5. Sulakvelidze, A., Alavidze, Z., Morris, J.G. (2001). Bacteriophage Therapy. *Antimicrob.*
481 *Agents. Chemother.* 45(3), 649–659.
- 482 6. Ventola, C. L. (2015). The antibiotic resistance crisis: part 1: causes and threats. *Pharm.*
483 *Therapeut.* 40(4), 277.
- 484 7. Antimicrobial resistance: global report on surveillance 2014. World Health Organization.
485 <http://www.who.int/drugresistance/documents/surveillancereport/en/>
- 486 8. Rios, A.C., Moutinho, C.G., Pinto, F.C., Del Fiol, F.S., Jozala, A., Chaud, M.V., et al.
487 (2016). Alternatives to overcoming bacterial resistances: state-of-the-art. *Microbiol. Res.*
488 191:51-80.
- 489 9. Morens, D.M., Folkers, G.K., Fauci, A.S. (2004). The challenge of emerging and re-
490 emerging infectious diseases. *Nat.* 430 (6996), 242.
- 491 10. Clinical Infectious Disease. David Schlossberg. Cambridge University
492 Press, (2015) Medical - 1508 pages.
- 493 11. Cao, F., Wang, X., Wang, L., Li, Z., Che, J., Wang, L., Li, X., Cao, Z., Zhang, J., Jin, L.,
494 Xu, Y. (2015). Evaluation of the efficacy of a bacteriophage in the treatment of
495 pneumonia induced by multidrug resistance *Klebsiella pneumoniae* in mice. *BioMed.*
496 *Res. International.*
- 497 12. Hung, C.H., Kuo, C.F., Wang, C.H., Wu, C.M., Tsao, N. (2011). Experimental phage
498 therapy in treating *Klebsiella pneumoniae*-mediated liver abscesses and bacteremia in
499 mice. *Antimicrob. Agents. Chemother.* 55(4), 1358-65.
- 500 13. McVay, C.S., Velásquez, M., Fralick, J.A. (2007). Phage therapy of *Pseudomonas*
501 *aeruginosa* infection in a mouse burn wound model. *Antimicrob. Agents. Chemother.*
502 51(6), 1934-8.
- 503 14. Mirzaei, M.K., and Nilsson, A.S. (2015). Isolation of phages for phage therapy: a
504 comparison of spot tests and efficiency of plating analyses for determination of host
505 range and efficacy. *PLoS One.* 10(3), e0118557.
- 506 15. Yen, M., Cairns, L.S., Camilli, A. (2017). A cocktail of three virulent bacteriophages
507 prevents *Vibrio cholerae* infection in animal models. *Nat. Comm.* 8, 14187.
- 508 16. Mendes, J.J., Leandro, C., Mottola, C., Barbosa, R., Silva, F.A., Oliveira, M., et al.
509 (2014). *In vitro* design of a novel lytic bacteriophage cocktail with therapeutic potential
510 against organisms causing diabetic foot infections. *J. Med. Microbiol.* 63(8), 1055-65.
- 511 17. Clinical and Laboratory Standards Institute. Performance standards for antimicrobial
512 susceptibility testing; twenty-fifth informational supplements. Approved standard M100-
513 S28. Wayne, PA: CLSI; 2018.

- 514 18. Li, E., Zhao, J., Ma, Y., Wei, X., Li, H., Lin, W., et al. (2016). Characterization of a
515 novel *Achromobacter xylosoxidans* specific siphoviruse: phiAxp-1. *Sci. Rep.* 6, 21943.
- 516 19. Krupovic, M., Dutilh, B.E., Adriaenssens, E.M., Wittmann, J., Vogensen, F.K., Sullivan,
517 M.B., et al. (2016). Taxonomy of prokaryotic viruses: update from the ICTV bacterial
518 and archaeal viruses subcommittee. *Arch Virol.* 161(4), 1095-1099.
- 519 20. Chan, B. K., Abedon, S. T., Loc-Carrillo, C. (2013). Phage cocktails and the future of
520 phage therapy. *Future Microbiol.* 8(6), 769-783.
- 521 21. Lin, D.M., Koskella, B., Lin, H.C. (2017). Phage therapy: An alternative to antibiotics in
522 the age of multi-drug resistance. *World J Gastrointest. Pharmacol. Therapeut.* 8(3), 162.
- 523 22. Carter, C.D., Parks, A., Abuladze, T., Li, M., Woolston, J., Magnone, J., et al. (2012).
524 Bacteriophage cocktail significantly reduces *Escherichia coli* O157: H7 contamination of
525 lettuce and beef, but does not protect against recontamination. *Bacteriophage.* 2(3), 178-
526 85.
- 527 23. Dalmaso, M., Strain, R., Neve, H., Franz, C.M., Cousin, F.J., Ross, R.P., et al. (2016).
528 Three new *Escherichia coli* phages from the human gut show promising potential for
529 phage therapy. *PloS one.* 11(6), e0156773.
- 530 24. Baig, A., Colom, J., Barrow, P., Schouler, C., Moodley, A., Lavigne, R., et al. (2017).
531 Biology and genomics of an historic therapeutic *Escherichia coli* bacteriophage
532 collection. *Front. Microbiol.* 8, 1652.
- 533 25. Manohar, P., Tamhankar, A.J., Lundborg, C.S. and Ramesh, N., (2018). Isolation,
534 characterization and in vivo efficacy of *Escherichia* phage myPSH1131. *PloS*
535 *one*, 13(10), e0206278.
- 536 26. Pan, Y.J., Lin, T.L., Chen, C.C., Tsai, Y.T., Cheng, Y.H., Chen, Y.Y., et al. (2017).
537 *Klebsiella* phage Φ K64-1 encodes multiple depolymerases for multiple host capsular
538 types. *J. Virol.* 91(6), e02457-16.
- 539 27. Pereira, S., Pereira, C., Santos, L., Klumpp, J., Almeida, A. (2016). Potential of phage
540 cocktails in the inactivation of *Enterobacter cloacae*-An in vitro study in a buffer
541 solution and in urine samples. *Virus Res.* 211, 199-208.
- 542 28. Li, E., Wei, X., Ma, Y., Yin, Z., Li, H., Lin, W., et al. (2016). Isolation and
543 characterization of a bacteriophage phiEap-2 infecting multidrug resistant *Enterobacter*
544 *aerogenes*. *Sci. Rep.* 6, 28338.
- 545 29. Hamdi, S., Rousseau, G.M., Labrie, S.J., Tremblay, D.M., Kourda, R.S., Slama, K.B., et
546 al. (2017). Characterization of two polyvalent phages infecting Enterobacteriaceae. *Sci.*
547 *Rep.* 7, 40349.
- 548 30. Ross, A., Ward, S., Hyman, P. (2016). More is better: selecting for broad host range
549 bacteriophages. *Front. Microbiol.* 7, 1352.
- 550 31. Chaturongakul, S., and Ounjai, P. (2014). Phage–host interplay: examples from tailed
551 phages and Gram-negative bacterial pathogens. *Front. Microbiol.* 5, 442.
- 552 32. Mirzaei, M.K., Eriksson, H., Kasuga, K., Haggård-Ljungquist, E., Nilsson, A.S. (2014).
553 Genomic, proteomic, morphological, and phylogenetic analyses of vB_EcoP_SU10, a
554 podoviridae phage with C3 morphology. *PLoS One.* 9(12), e116294.
- 555 33. Petrov, V.M., Ratnayaka, S., Nolan, J.M., Miller, E.S., Karam, J.D. (2010). Genomes of
556 the T4-related bacteriophages as windows on microbial genome evolution. *Virol. J.* 7(1),
557 292.
- 558 34. Solovieva, E.V., Myakinina, V.P., Kislichkina, A.A., Krasilnikova, V.M., Verevkin,
559 V.V., Mochalov, V.V., et al. (2018). Comparative genome analysis of novel Podoviruses

- 560 lytic for hypermucoviscous *Klebsiella pneumoniae* of K1, K2, and K57 capsular types.
561 *Virus Res.* 243, 10-8.
- 562 35. Kęsik-Szeloch, A., Drulis-Kawa, Z., Weber-Dąbrowska, B., Kassner, J., Majkowska-
563 Skrobek, G., et al. (2013). Characterising the biology of novel lytic bacteriophages
564 infecting multidrug resistant *Klebsiella pneumoniae*. *Virol. J.* 10(1), 100.
- 565 36. Chan, B.K., Abedon, S.T., Loc-Carrillo, C. (2013). Phage cocktails and the future of
566 phage therapy. *Future Microbiol.* 8(6), 769-83.
- 567 37. Manohar, P., Nachimuthu, R., Lopes, B.S. (2018). The therapeutic potential of
568 bacteriophages targeting gram-negative bacteria using *Galleria mellonella* infection
569 model. *BMC Microbiol.* 18(1), 97.

570 **Figures legends**

571 **Figure 1: Transmission Electron Microscopy (TEM) images of A) *Escherichia* virus**
572 **myPSH2311, B) *Enterobacter* virus myPSH1140, C) *Klebsiella* virus myPSH1235.** The smaller
573 images in A and C represent 100nm.

574 **Figure 2: A) Adsorption rate of phages to their bacterial host, A1) *Escherichia* virus**
575 **myPSH2311, A2) *Enterobacter* virus myPSH1140, A3) *Klebsiella* virus myPSH1235, and B)**
576 **One-step growth curve experiment of phages, B1) *Escherichia* virus myPSH2311, B2)**
577 ***Enterobacter* virus myPSH1140, B3) *Klebsiella* virus myPSH1235.** Legend within figure B: L-
578 latency period; B-burst size.

579 **Figure 3: A) Stability of phages at varying temperatures; A1) *Escherichia* virus myPSH2311,**
580 **A2) *Enterobacter* virus myPSH1140, A3) *Klebsiella* virus myPSH1235 and B) Stability of**
581 **phages at varying pH at 37°C, B1) *Escherichia* virus myPSH2311, B2) *Enterobacter* virus**
582 **myPSH1140, B3) *Klebsiella* virus myPSH1235.**

583 **Figure 4: Phylogenetic tree of A) *Escherichia* virus myPSH2311, B) *Klebsiella* virus**
584 **myPSH1235 and C) *Enterobacter* virus myPSH1140 constructed based on the complete**
585 **genome sequences of selected bacteriophages in NCBI-BLAST.** The tree was produced using
586 BLAST pairwise alignment using Neighbor-Joining method. The query sequence is highlighted
587 in yellow.

588 **Figure 5: *In vitro* phage activity of prepared phage cocktails.** A) activity of *Escherichia* virus
589 myPSH2311 and *Klebsiella* virus myPSH1235 and their combination (EK1); B) activity of
590 *Klebsiella* virus myPSH1235 and *Enterobacter* virus myPSH1140 and their combination (KL2);
591 C) activity of *Escherichia* virus myPSH2311 and *Enterobacter* virus myPSH1140 and their
592 combination (EL3); D) activity of *Escherichia* virus myPSH2311, *Klebsiella* virus myPSH1235,
593 *Enterobacter* virus myPSH1140 and their combination (EKL4). (Control for all the experiments-
594 bacterial growth without antibacterial agents and phages)

595 **Table:**

596 **Table 1: Host range infection and Efficiency of plating (EOP) of the phages *Escherichia***
597 **virus myPSH2311, *Klebsiella* virus myPSH1235 and *Enterobacter* virus myPSH1140**

Bacteria	Spot test (%)	High (EOP ≥ 0.5)	Moderate (EOP >0.1 - <0.5)	Low (EOP ≤ 0.1)	No activity (EOP <0.001)	Sum of EOP values
<i>Escherichia virus myPSH2311</i> lytic activity against different pathotypes of <i>E. coli</i>						
EPEC (n=12)	10 (83%)	5	1	1	3	5.30
EHEC (n=10)	6 (60%)	2	0	1	3	1.91
ETEC(n=8)	4 (50%)	3	0	0	1	3.10
EIEC(n=11)	9 (82%)	5	3	0	1	5.55
EAEC(n=14)	10 (71%)	6	0	2	2	5.86
UPEC(n=21)	17 (81%)	11	0	1	5	10.75
Unknown(n=4)	2 (50%)	2	0	0	0	1.60
Total (n=80)	58 (73%)	34	4	5	15	34.07
<i>Klebsiella virus myPSH1235</i> lytic activity against different serotypes of <i>K. pneumoniae</i>						
Serotype K1 (n=3)	2 (67%)	1	1	0	0	1.20
Serotype K2 (n=7)	5 (71%)	2	1	1	1	2.85
Serotype K5 (n=9)	6 (67%)	2	0	2	2	2.10
Unknown (n=25)	10 (40%)	5	1	1	3	5.85
Total (n=44)	23 (52%)	10	3	4	6	12.0
<i>Enterobacter virus myPSH1140</i> lytic activity against different species of <i>Enterobacter</i>						
<i>E. cloacae</i> (n=15)	15(100%)	7	3	1	4	8.50
<i>E.hormaechei</i> (n=4)	3(75%)	2	0	0	1	2.72
<i>E. asburiae</i> (n=4)	2(50%)	2	0	0	0	2.10
<i>E. aerogenes</i> (n=3)	2(67%)	2	0	0	0	1.44

598 Values represent the lytic activity of the respective phage against the target bacterium. EPEC
599 (enteropathogenic *E. coli*), EHEC (enterohemorrhagic *E. coli*), ETEC (enterotoxigenic *E. coli*),
600 EIEC (enteroinvasive *E. coli*), EAEC (enteroaggregative *E. coli*), UPEC (uropathogenic *E. coli*).
601 EOP was calculated using double agar overlay method. EOP was deemed as 'High' if the test
602 bacterium had at least 50% activity (EOP ≥ 0.5) compared to the host bacterium, 'Moderate' if
603 between $>10\%$ and $<50\%$ (EOP >0.1 - <0.5), anything $<10\%$ (EOP ≤ 0.1) was reported as 'Low'.

Figure 01.JPEG

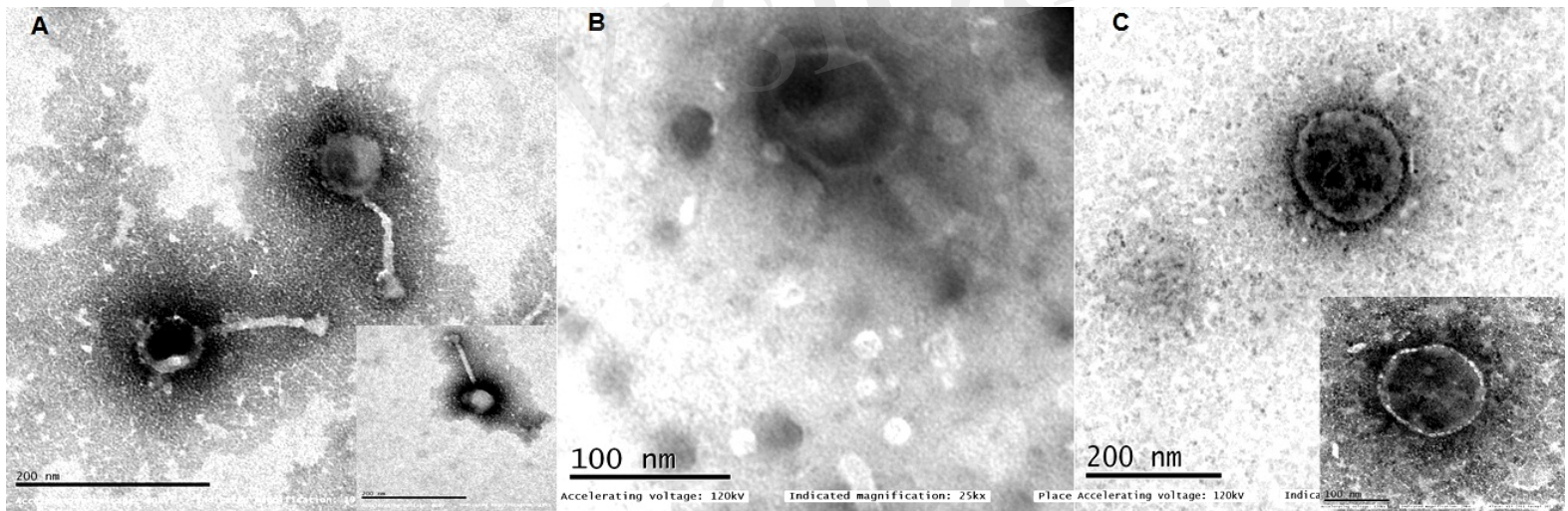


Figure 02.JPEG

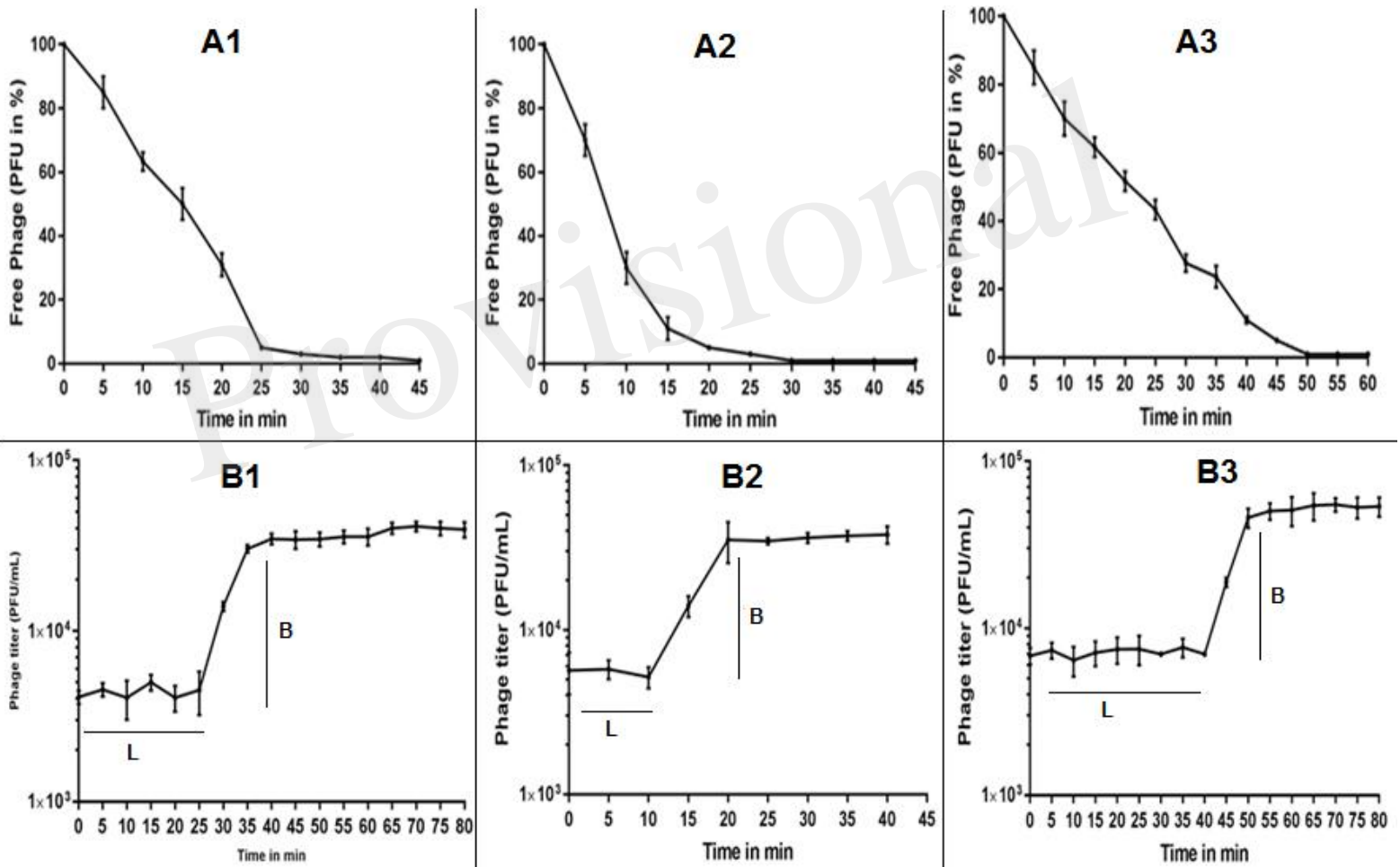


Figure 03.JPEG

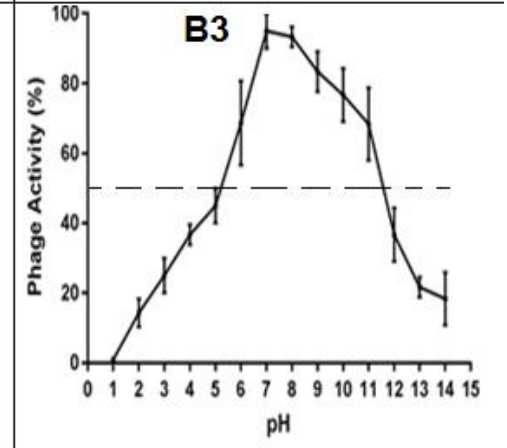
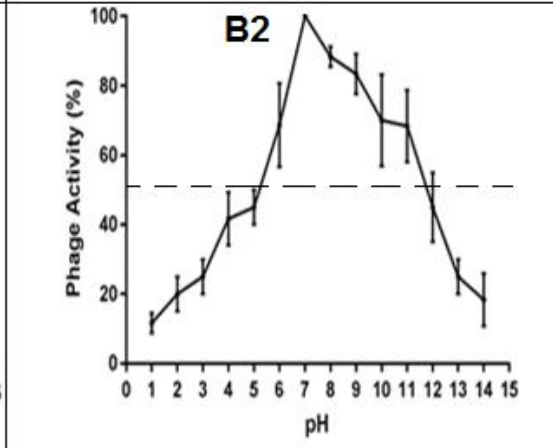
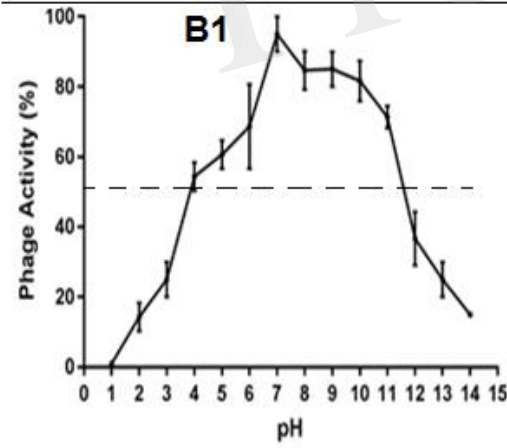
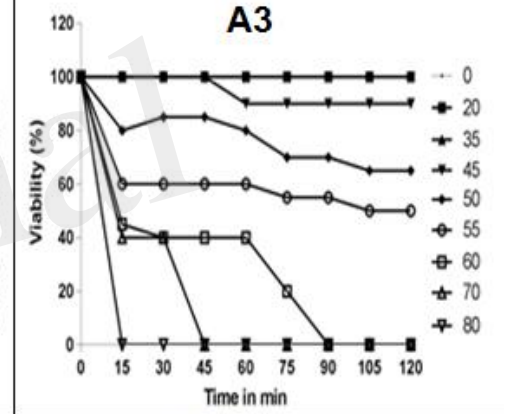
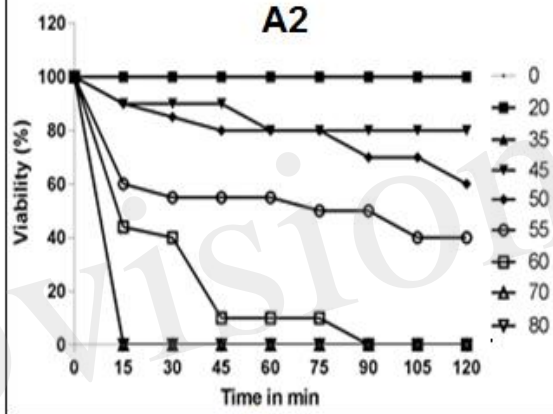
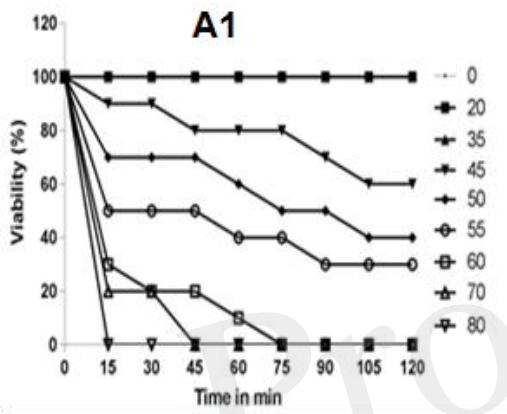


Figure 04.JPEG

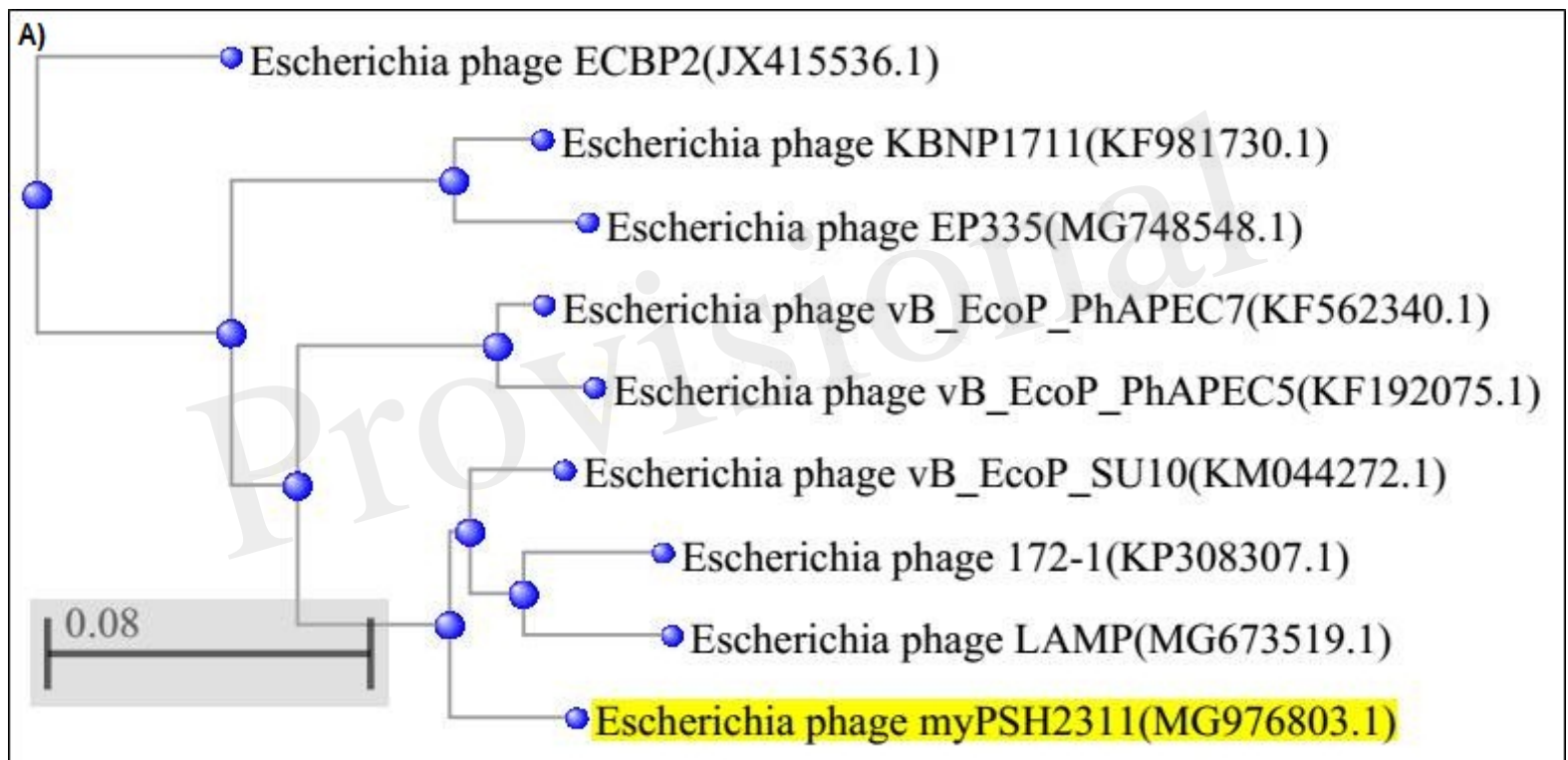
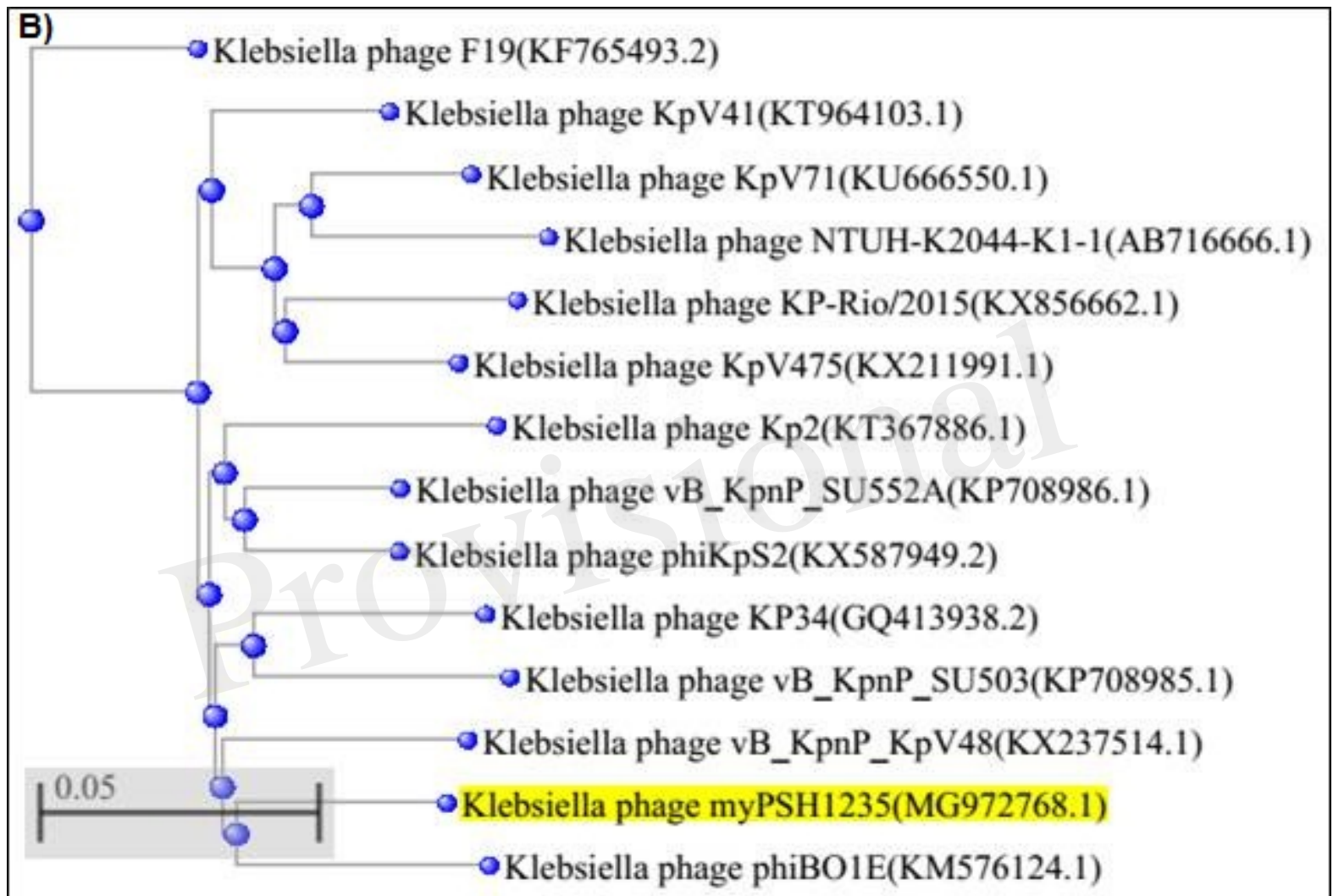
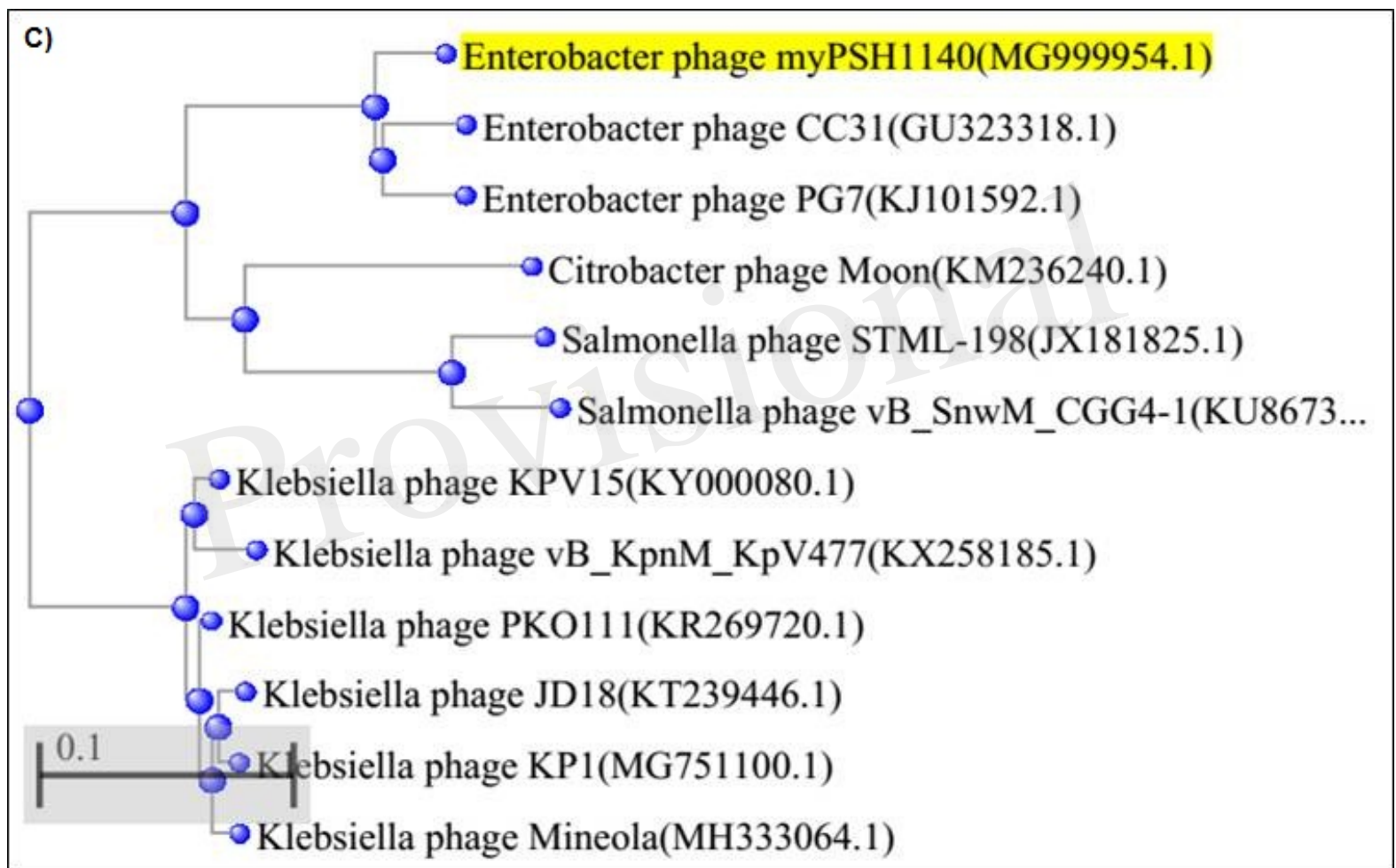


Figure 05.JPEG





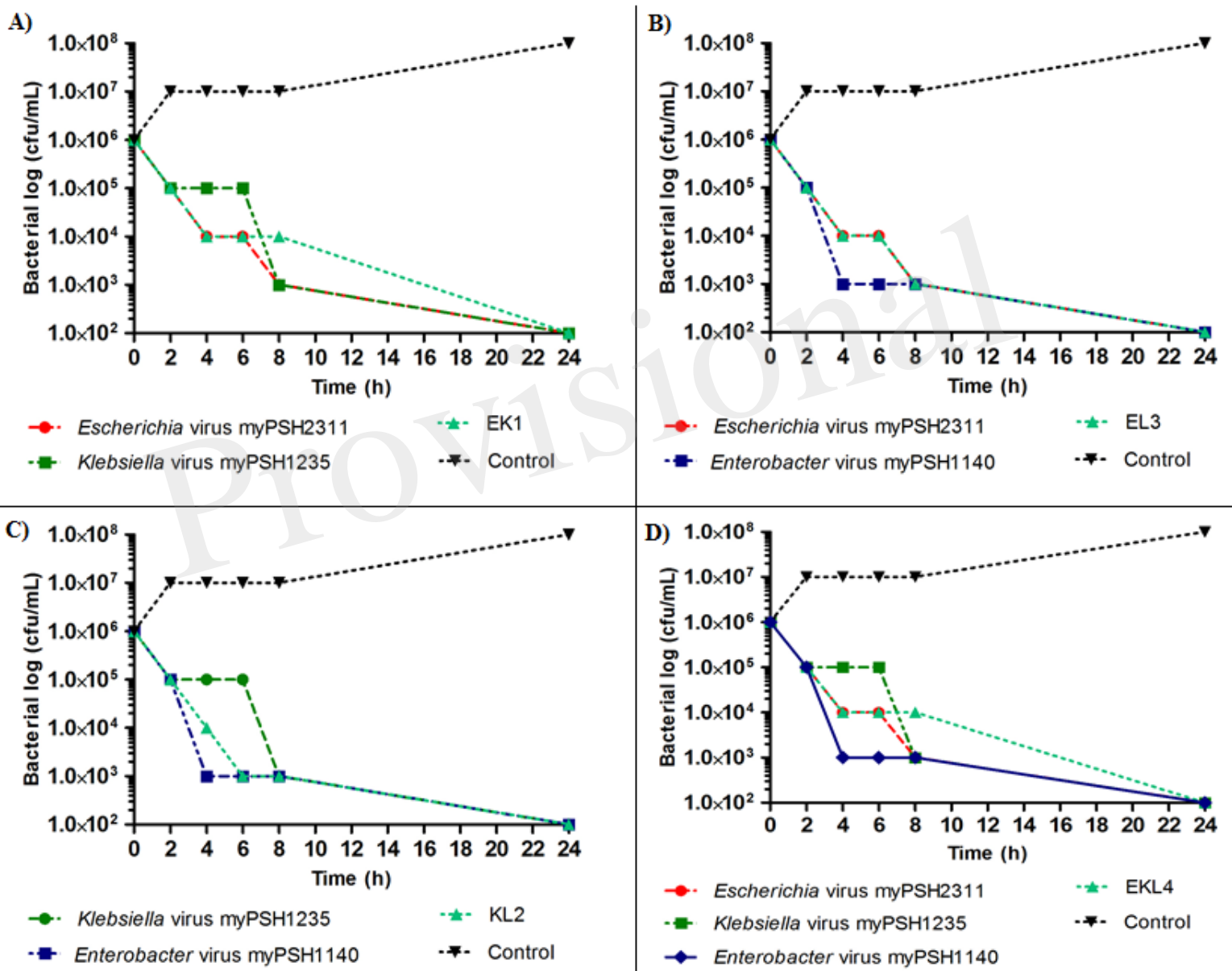


Figure 5: A) Control- bacterial growth without antibacterial agents and activity of *Escherichia virus myPSH2311* and *Klebsiella virus myPSH1235* and their combination (EK1); B) Control- bacterial growth without antibacterial agents and activity of *Klebsiella virus myPSH1235* and *Enterobacter virus myPSH1140* and their combination (KL2); C) Control- bacterial growth without antibacterial agents and activity of *Escherichia virus myPSH2311* and *Enterobacter virus myPSH1140* and their combinations (EL3); D) Control- bacterial growth without antibacterial agents and activity of *Escherichia virus myPSH2311*, *Klebsiella virus myPSH1235* and *Enterobacter virus myPSH1140* and their combinations (EKL4).