



Diversity of coelomycetous fungi in human infections: A 10-y experience of two European reference centres

Dea Garcia-Hermoso ^{a,1}, Nicomedes Valenzuela-Lopez ^{b,c,1}, Olga Rivero-Menendez ^d, Ana Alastruey-Izquierdo ^d, Josep Guarro ^b, José F. Cano-Lira ^{b,*}, Alberto M. Stchigel ^b, the French Mycoses Study Group²

^a Institut Pasteur, CNRS, National Reference Center for Invasive Mycoses and Antifungals (NRCMA), Molecular Mycology Unit, UMR2000, Paris, France

^b Mycology Unit, Medical School and IISPV, University Rovira i Virgili, C/ Sant Llorenç 21, 43201, Reus, Spain

^c Microbiology Unit, Medical Technology Department, Faculty of Health Science, University of Antofagasta, Chile

^d Mycology Reference Laboratory, Spanish National Center for Microbiology, Instituto de Salud Carlos III, Madrid, Spain

ARTICLE INFO

Article history:

Received 5 November 2018

Received in revised form

30 January 2019

Accepted 8 February 2019

Available online 14 February 2019

Corresponding Editor: Steven Bates

Keywords:

Antifungal testing

Coelomycetes

Colletotrichum

Medicopsis

Mycosis

Phoma

ABSTRACT

The coelomycetous fungi are difficult to properly identify from their phenotypic characterization and their role as etiologic agents of human infections is not clear. We studied the species distribution of these fungi among clinical isolates that had been collected and stored over a ten-year period in two European reference laboratories (France and Spain). We identified phenotypically and molecularly 97 isolates by sequencing the D1–D2 fragment of the 28S nrRNA (LSU) gene and we provided the *in vitro* antifungal susceptibility pattern of seven antifungals against 46 isolates. Species of the orders *Pleosporales* and *Glomerellales* were present in both collections, and *Botryosphaerales* and *Diaporthales* only in the French one. The most prevalent species were *Medicopsis romeroi*, *Neocucurbitaria keratinophila*, *Neocucurbitaria unguis-hominis* and *Paraconiothyrium cyclothyrioides*, which had been recovered primarily from superficial tissues. The *Didymellaceae* was the most common family represented, with 27 isolates distributed into five genera. Most of the isolates tested were susceptible to antifungals, and only the geometric mean (GM) and minimal inhibitory concentration (MIC) values of itraconazole and caspofungin had higher values. This study provides a good picture of the great diversity of coelomycetous fungi in the European clinical context, and the basis for future studies on this interesting but neglected group of fungi.

© 2019 British Mycological Society. Published by Elsevier Ltd. All rights reserved.

1. Introduction

Human infections by coelomycetous fungi are rare and poorly characterized due to the difficulty in identifying these fungi using only phenotypic tools. The coelomycetous fungi are characterized by the production of conidia (asexual spores) into fruiting bodies (= conidiomata). The class Coelomycetes today lack scientific validity due to the demonstrated polyphyletic character of this sort of fungi (Wijayawardene et al., 2016). They cause superficial or

subcutaneous infections, mostly following a traumatic inoculation of contaminated plant material or soil particles during agricultural work in tropical and subtropical areas (Stchigel and Sutton, 2013). The most common coelomycetous fungi involved in these infections are the etiologic agents of black-grain eumycetoma, such as *Biatrispora mackinnonii*; *Falciformispora* spp., *Medicopsis romeroi*, and *Pseudochaetosphaeronema larense* (Ahmed et al., 2014). Other common coelomycetous fungi include *Lasiodiplodia theobromae* and *Neoscytalidium dimidiatum*, which typically cause onychomycosis, subcutaneous phaeohiphomycosis, and rarely eumycetoma (Stchigel and Sutton, 2013; de Hoog et al., 2000). In addition, many species of *Phoma* and *Pyrenochaeta* have been reported as occasional agents of localized and systemic infections in humans (Punithalingam, 1979; Ferrer et al., 2009). The taxonomy of several coelomycetous genera mentioned before have been revised recently but they still constitute a group of highly polyphyletic taxa

* Corresponding author. Unitat de Micologia, Facultat de Medicina i Ciències de la Salut, IISPV, Universitat Rovira i Virgili, 21 Sant Llorenç St., 43201, Reus, Spain. Fax: +34 977 759322.

E-mail address: jose.cano@urv.cat (J.F. Cano-Lira).

¹ D.G.-H. and N.V.-L. contributed equally to this article.

² The full list of French Mycoses Study members is presented in the Acknowledgements section.

that are usually difficult to identify phenotypically (de Gruyter et al., 2013; Chen et al., 2015).

In a recent study on coelomycetes conducted in the USA, Valenzuela-Lopez et al. (2017) identified 230 fungal strains by sequencing the D1-D2 domains of the 28S rRNA gene (LSU), from which 152 (66.1 %) strains belonged to the order *Pleosporales*, the rest being distributed in several orders of the phylum *Ascomycota*. Most of these strains were recovered from superficial tissue. *N. dimidiatum*, *Paraconiothyrium cyclothyrioides* and members of the family *Didymellaceae* were the most prevalent taxa. In addition, those authors demonstrated the usefulness of the LSU as a good molecular marker for a preliminary identification of coelomycetous fungi at genus level. However, the nucleotide sequences of more phylogenetically informative genes need analysing in order to identify the fungi at species level. Genes such as the RNA polymerase II subunit 2 (*rpb2*), translation elongation factor 1- α (*tef1*), beta-tubulin (*tub2*) and the ribosomal internal transcribed spacer region (ITS), combined in a multi-locus analysis, have all been recommended for this purpose (Valenzuela-Lopez et al., 2018a).

Until now, the coelomycetous fungi involved in invasive fungal infections (IFIs) are poorly known in Europe, probably due to the infrequency of these fungi and the complexity of their identification in the absence of characteristic fruiting bodies when grown on culture media used in the clinical lab. In a recent French study, eighteen proven cases of cutaneous and subcutaneous primary infections by coelomycetous fungi were reported and analysed in patients from tropical and subtropical regions (Guégan et al., 2016).

For a better knowledge of the diversity of coelomycetous fungi involved in human infections, we studied a large set of clinical isolates that had been identified in two mycology reference centres in France and Spain, and determined their *in vitro* antifungal susceptibility pattern.

2. Material and methods

2.1. Fungal isolates

We studied 97 isolates of coelomycetous fungi recovered from clinical specimens, 51 isolates (CNRMA) of which were provided by the French National Reference Centre for Invasive Mycoses and Antifungals (NRCMA) at the *Institut Pasteur*, Paris. The Spanish National Centre of Microbiology at the *Instituto de Salud Carlos III*, Madrid provided 46 isolates (CNM-CM). The isolates were collected between 2005 and 2015. Table 1 gives information about the country of isolation and the location of the infection in the body.

2.2. Morphological and physiological characterization

For morphology studies, the isolates were cultured following the recipes and descriptions by Valenzuela-Lopez et al. (2018b).

2.3. Molecular identification and phylogenetic analysis

Total genomic DNA was extracted following the protocols by Valenzuela-Lopez et al. (2017). Preliminary molecular identification of the isolates was made using LSU nucleotide sequences in BLAST_N searches. Twenty-eight LSU sequences of type or reference strains deposited in the GenBank database by the Westerdijk Fungal Biodiversity Institute (CBS) and the Mae Fah Luang University (MFLUCC) culture collections were used for identification and phylogenetic purposes. DNA sequences generated in this study were deposited in GenBank (accession numbers are given in Table 1).

For the phylogenetic study, sequences were aligned using the ClustalW application (Thompson et al., 1994) of the MEGA 6.06 (Tamura et al., 2013) computer program, and manually adjusted using the same software platform. Phylogenetic reconstructions were made by maximum-likelihood (ML) and Bayesian inference (BI) with MEGA 6.06 and MrBayes 3.2.4 (Huelsenbeck and Ronquist, 2001), respectively. The best substitution model for the gene matrix (TN93 + G) was estimated using MEGA 6.06. For ML analyses, nearest-neighbour interchange was used as the heuristic method for tree inference. Support for internal branches was assessed by 1000 ML bootstrapped pseudoreplicates. Bootstrap support (BS) of ≥ 70 was considered significant. For BI analyses, Markov chain Monte Carlo (MCMC) sampling was carried out with four million generations, with samples taken every 1000 generations. The 50 % majority rule consensus trees and posterior probability values (PP) were calculated after removing the first 25 % of the resulting trees for burn-in. A PP value of ≥ 0.95 was considered significant. Reference strains of *Colletotrichum gigasporum* (CBS 159.75), *Colletotrichum gloeosporioides* (CBS 122687) and *Colletotrichum hippeastri* (CBS 241.78) were used as outgroup.

2.4. Antifungal susceptibility testing

The *in vitro* susceptibility testing in both reference centres ($n = 46$ isolates) followed the European Committee on Antimicrobial Susceptibility Testing (EUCAST, 2008) procedure. The antifungals used were amphotericin B (Sigma–Aldrich Química, Madrid, Spain), itraconazole (Sigma–Aldrich Química, Madrid, Spain), posaconazole (Schering-Plough Research Institute, Kenilworth, N.J.), voriconazole (Pfizer S.A., Madrid, Spain), caspofungin (Merck & Co., Inc., Rahway, N.J.), micafungin (Astellas Pharma Inc, Tokyo, Japan) and terbinafine (Novartis, Basel, Switzerland). For the NCRMA, all antifungal drugs were obtained from ALSACHIM, Strasbourg, France.

The isolates were cultured on potato carrot agar (PCA; 20 g each of filtered potatoes and carrots, 20 g of agar, 1 L of distilled water) or oatmeal agar (OA; 30 g of filtered oat flakes, 15 g of agar–agar, 1 L tap water) for seven to 30 d at 25 °C and 30 °C to obtain sporulation. Conidia were then collected in sterile water containing 0.01 % (v/v) Tween 80 (Sigma–Aldrich, St. Louis, MO, USA), and the suspension was adjusted to $2\text{--}5 \times 10^5$ conidia/mL. The minimal effective concentration (MEC) was determined for each echinocandin and the minimal inhibitory concentration (MIC) for the other drugs (90 % inhibition for amphotericin B and 80 % for the azoles) after 24 h and 48 h of incubation at 35 °C. *Aspergillus flavus* ATCC 204304 and *Aspergillus fumigatus* ATCC 204305 were used as quality control strains in all tests carried out. Susceptibility profiles were determined for 46 isolates since non-sporulating isolates were excluded at the NRCMA.

3. Results

3.1. Locations of infections

The majority of the isolates were recovered from superficial tissue, mainly skin (44 %; 43/97), eyes (27 %; 26/97), nails/hairs (18 %; 17/97) and mouth/sinus (2 %; 2/97). A few were recovered from deeper sites: bones (4 %; 4/97), blood (2 %; 2/97), cerebrospinal fluid ($n = 1$), bone marrow ($n = 1$) and lung ($n = 1$) (Tables 1 and 2).

3.2. Phylogenetic analyses

The maximum-likelihood (ML) phylogenetic analysis of the LSU sequences (approximately 584 pb) demonstrated that the 97 isolates were distributed into four orders, but scattered into fourteen

Table 1

Taxonomical identification of the isolates studied, origin and GenBank accession numbers. New sequences generated are indicate in bold.

Order	Species	Strain no. ^a	Origin	Country	GenBank accession no. ^b	
<i>Botryosphaeriales</i>	<i>Diplodia seriata</i>	CBS 112555 ^T	<i>Vitis vinifera</i> dead plant	Portugal	KF766327	
		CNRMA 6.1007	bone	France	LT965964	
	<i>Lasiodiplodia</i> sp.	CNRMA 15.383	eye	France (West Indies, Guadeloupe)	LT965965	
		CBS 164.96 ^T	fruit along coral reef coast	Papua New Guinea	NG_042460	
	<i>Lasiodiplodia theobromae</i>	CNRMA 10.1369	skin	France (West Indies, Martinique)	LT965966	
		CNRMA 10.813	eye	France (West Indies, Martinique)	LT965967	
		CNRMA 11.360	eye	France (West Indies, Martinique)	LT965968	
		CNRMA 13.891	skin	France	LT965969	
		CNRMA 14.708	eye	France (West Indies, Guadeloupe)	LT965970	
		CBS 110299	<i>Vitis vinifera</i> cane	Portugal	AY928043	
	<i>Neofusicoccum luteum</i>	CNRMA 12.597	eye	France	LT965971	
		CBS 296.67 ^T	<i>Cucumis sativus</i> root	The Netherlands	AF439628	
<i>Diaporthales</i>	<i>Diaporthe sclerotioides</i>	CBS 477	<i>Cucumis sativus</i>	USA	AF439631	
		CNRMA 8.522	eye	France	LT965972	
	<i>Diaporthe</i> sp.	CNRMA 9.205	eye	France (West Indies, Guadeloupe)	LT965973	
		CNRMA 11.385	eye	France (West Indies, Martinique)	LT965974	
	<i>Glomerellales</i>	<i>Colletotrichum gigasporum</i>	CNRMA 12.311	blood	France	LT965975
			CNRMA 13.515	skin	France	LT965976
		<i>Colletotrichum gloeosporioides</i>	CNRMA 14.198	skin	France	LT965977
			CBS 159.75	air and stored grains	India	DQ286206
<i>Pleosporales</i>	<i>Colletotrichum hippeastri</i>	CNRMA 16.553	skin	France (West Indies, Guadeloupe)	LT965978	
		CBS 122687	<i>Leucospermum</i> sp. leaf litter	South Africa	EU552111	
	<i>Colletotrichum</i> sp.	CNRMA 15.504	eye	France (West Indies, Martinique)	LT965979	
		CBS 241.78	<i>Hippeastrum</i> sp.	The Netherlands	DQ286167	
	<i>Didymella gardeniae</i>	CNM-CM 4760	corneal swab	Spain	LT965980	
		CNM-CM 6116	conjunctival	Spain	LT965981	
		CNM-CM 7345	humour acuosus	Spain	LT965982	
		CBS 626.68 ^T	<i>Gardenia jasminoides</i> leaf	India	GQ387595	
		CNM-CM 3697	nail	Spain	LT965983	
		CNM-CM 3895	nail	Spain	LT965984	
CNM-CM 5036		scales	Spain	LT965985		
CNM-CM 5814		conjunctival exudate	Spain	LT965986		
CNM-CM 7499		conjunctival exudate	Spain	LT965987		
CNRMA 11.794		skin	France	LT965988		
<i>Didymella glomerata</i>		CBS 528.66	<i>Chrysanthemum</i> sp. cutting	The Netherlands	EU754184	
		CNM-CM 3356	toenail	Spain	LT965989	
<i>Epicoccum nigrum</i>	CNM-CM 3546	nail	Spain	LT965990		
	CNM-CM 4675	nail	Spain	LT965991		
	CNM-CM 7099	cutaneous exudate	Spain	LT965992		
	CNRMA 9.1046	skin	France	LT965993		
	CNRMA 10.867	skin	France	LT965994		
	CNRMA 15.6	mouth/sinus	France	LT965995		
	CBS 173.73 ^T	<i>Dactylis glomerata</i> seed	USA	GU237975		
	CNM-CM 5281	skin	Spain	LT965996		
	CNM-CM 5724	vitreous humour	Spain	LT965997		
	<i>Epicoccum sorghinum</i>	CBS 179.80	<i>Sorghum vulgare</i>	Puerto Rico	GU237978	
		CNRMA 7.167	bone	France (New Caledonia)	LT965998	
	<i>Medicopsis romeroi</i>	CNRMA 10.947	skin	France (New Caledonia)	LT965999	
CNRMA 10.948		skin	France (New Caledonia)	LT966000		
CBS 252.60 ^T		maduromycosis	Venezuela	EU754207		
CNM-CM 3387		knee ulcer	Spain	LT966001		
CNM-CM 7645		cutaneous exudate	Spain	LT966002		
CNRMA 4.200		eye	France	LT966003		
CNRMA 5.321		skin	France	LT966005		
CNRMA 7.1225		skin	France	LT966007		
CNRMA 8.1363		skin	France	LT966008		
CNRMA 11.680		skin	France	LT966010		
CNRMA 11.949		bone	France	LT966011		
CNRMA 14.407		skin	France	LT966013		
CNRMA 15.461	bone	France	LT966014			
CNRMA 15.7	skin	France	LT966015			
<i>Neoscochyta desmazieri</i>	CBS 297.69 ^T	<i>Lolium perenne</i>	Germany	KT389726		
	CNM-CM 6201	nail	Spain	LT966016		
<i>Neocucurbitaria cava</i>	CBS 257.68 ^T	wheat-field soil	Germany	EU754199		
	CNRMA 15.708	mouth/sinus	France	LT966017		
<i>Neocucurbitaria keratinophila</i>	CBS 121759 ^T	corneal scrapings	Spain	LT623215		
	CNM-CM 5882	cutaneous exudate	Spain	LT966018		
	CNM-CM 6401	finger nail	Spain	LT966019		
	CNM-CM 6455	cutaneous exudate	Spain	LT966020		
	CNM-CM 7013	cutaneous exudate	Spain	LT966021		
	CNM-CM 7457	cutaneous exudate	Spain	LT966022		
	CNM-CM 7731	cutaneous exudate	Spain	LT966023		
	CNM-CM 8010	conjunctival exudate	Spain	LT966024		

(continued on next page)

Table 1 (continued)

Order	Species	Strain no. ^a	Origin	Country	GenBank accession no. ^b	
	<i>Neocucurbitaria unguis-hominis</i>	CNM-CM 8674	toenail	Spain	LT966025	
		CBS 112.79	airborn	Wales	GQ387622	
		CNM-CM 7037	nail	Spain	LT966026	
		CNM-CM 7089	cutaneous lesion	Spain	LT966027	
		CNM-CM 8717	urine	Spain	LT966028	
		CNM-CM 8743	toenail	Spain	LT966029	
		CNRMA 4.1112	eye	France	LT966030	
		CNRMA 6.243	eye	France	LT966031	
		CNRMA 16.153	eye	France	LT966032	
		CNRMA 16.19	lung	France	LT966033	
	<i>Neocucurbitaria</i> sp.	CNM-CM 6489	wound exudate	Spain	LT966034	
		CNM-CM 7025	hair	Spain	LT966035	
	<i>Paraconiothyrium cyclothyrioides</i>	CNM-CM 7132	toenail	Spain	LT966036	
		CBS 972.95 ^T	soil	Papua New Guinea	JX496232	
		CNM-CM 6313	conjunctival exudate	Spain	LT966037	
		CNM-CM 6513	nail	Spain	LT966038	
		CNM-CM 4767	abscess	Spain	LT966039	
		CNRMA 11.383	skin	France (West Indies, Martinique)	LT966041	
		CNRMA 11.855	skin	France	LT966042	
		CNRMA 13.245	skin	France	LT966043	
		CNRMA 16.374	skin	France (West Indies, Guadeloupe)	LT966044	
		CNRMA 16.556	skin	France (West Indies, Guadeloupe)	LT966045	
	<i>Paraconiothyrium fuckelii</i>	CBS 797.95	<i>Rubus</i> sp. dead stem	Denmark	JX496226	
		CNRMA 3.240	eye	France	LT966046	
		CNRMA 4.493	eye	France	LT966047	
	<i>Paraphaeosphaeria michotii</i>	MFLUCC 13-0349	Poaceae dead leaves	Italy	KJ939282	
		CNM-CM 6000	skin	Spain	LT966048	
	<i>Paraphoma fimeti</i>	CBS 170.70 ^T	<i>Apium graveolens</i> seeds	The Netherlands	GQ387584	
	<i>Paraphoma</i> sp.	CNM-CM 8075	wound exudate	Spain	LT966049	
		CNRMA 9.467	skin	France	LT966050	
	<i>Phaeosphaeriopsis obtusispora</i>	CNRMA 15.665	skin	France	LT966051	
		CBS 246.64	<i>Aloe arborescens</i> dead leaf	Portugal	JX681119	
	<i>Phoma herbarum</i>	CBS 615.75	<i>Rosa multiflora</i> dead stem	The Netherlands	EU754186	
		CNM-CM 2132	right toe	Spain	LT966052	
		CNM-CM 3526	bone marrow	Spain	LT966053	
		CNM-CM 3597	blood culture	Spain	LT966054	
		CNM-CM 8031	nail	Spain	LT966055	
		CNRMA 9.1095	skin	France	LT966056	
		CNRMA 11.1097	eye	France	LT966057	
		CNRMA 12.1227	eye	France	LT966058	
		CNRMA 11.1115	skin	France	LT966059	
		pleosporelean fungus	CNM-CM 7343	nail	Spain	LT966060
		<i>Preussia</i> sp.	CBS 317.65 ^T	<i>Musa sapientum</i> rhizosphere	Honduras	GQ203725
		<i>Preussia terricola</i>	CBS 107.69	Dung of deer	Japan	GQ203726
		<i>Preussia typharum</i>	CNM-CM 7335	nail	Spain	LT966061
		<i>Pseudophaeosphaeria rubi</i>	MFLUCC 14-0259	<i>Rubus idaeus</i> dead branch	Italy	KX765299
			CBS 127737 ^T	anterior eye chamber cornea	Germany	KY090664
	<i>Tintelnotia destructans</i>	CNM-CM 7430	Unknown	Spain	LT966062	
		CNM-CM 7080	nail	Spain	LT966063	
	<i>Tintelnotia</i> sp.	CNM-CM 7981	cutaneous exudate	Spain	LT966064	
	<i>Xenodidymella saxea</i>	CBS 419.92 ^T	Corroded mediterranean marble	Unknown	GU238141	
		CNRMA 16.76	Cerebrospinal fluid	France	LT966065	

^a **CBS**: Strains from Westerdijk Fungal Biodiversity Institute, Utrecht, The Netherlands; **CNM-CM**: Isolates from the National Centre for Microbiology, Instituto Carlos III, Madrid, Spain; **CNRMA**: Isolates from the National Reference Center for Invasive Mycoses and Antifungals; Institut Pasteur, Paris, France; **MFLUCC**: Strains from Mae Fah Luang University Culture Collection, Chiang Rai, Thailand. Type strains are indicated by a superscript^T.

^b LSU, large subunit ribosomal DNA sequences. Sequences generated in this study are indicated in bold.

Table 2

Localization of infections due to coelomycetous fungi isolates.

Orders	no. of isolates obtained from:		
	Superficial infection	Deep infection	Total no. of isolates
<i>Botryosphaeriales</i>	7	1	8
<i>Diaporthales</i>	5	1	6
<i>Glomerellales</i>	5		5
<i>Pleosporales</i>	71	7	78
Total no. of isolates (%)	88 (91)	9 (9)	97 (100)

clades (Fig. 1). Most of the isolates (81 %; 78/97) belonged to the order *Pleosporales*, which were distributed into nine clades corresponding to 23 species of twelve genera, followed by those of the

Botryosphaeriales (8 %; 8/97), the *Diaporthales* (6 %; 6/97) and the *Glomerellales* (5 %; 5/97).

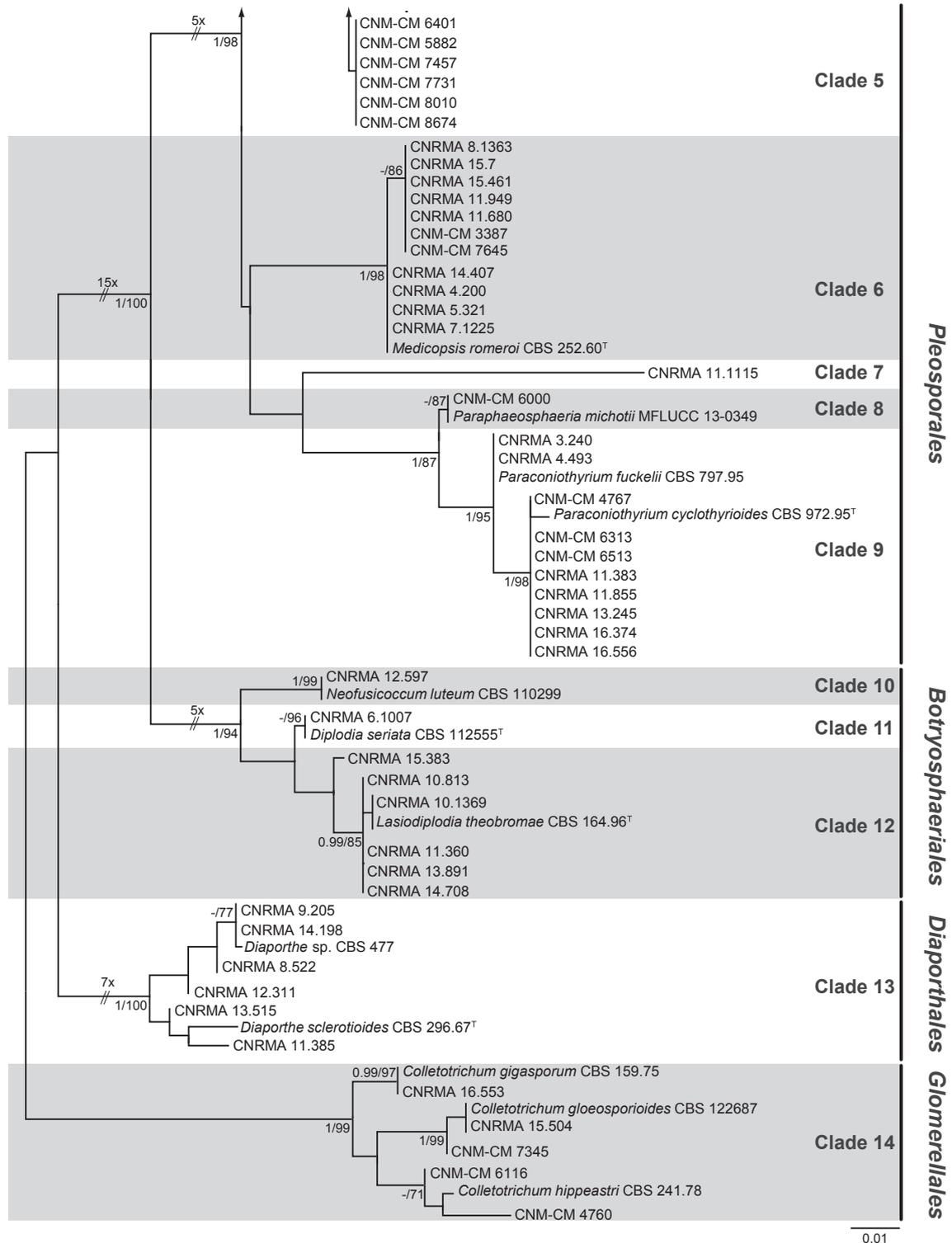


Fig. 1. (continued).

The most common species identified was *M. romeroi* (11 %; 11/97), followed by *P. cyclothyrioides*, *Neocucurbitaria keratinophila* and *Neocucurbitaria unguis-hominis* (8 % each; 8/97). These species were mostly isolated from cutaneous lesions (Table 2).

Clade 1 of the Pleosporales corresponded to the family Didymellaceae, which included 27 isolates distributed into five genera, morphologically characterized by their production of pycnidial

conidiomata and hyaline, aseptate conidia. The five genera were *Didymella*, *Epicoccum*, *Neascochyta*, *Phoma* and *Xenodidymella*. *Didymella* was represented by 13 isolates, six of them clustering with the type strain of *Didymella gardeniae* (CBS 626.68), and the other seven clustered with a reference strain of *Didymella glomerata* (CBS 528.66). The genus *Epicoccum* grouped five of the isolates, three of them clustering with a reference strain of *Epicoccum*

sorghinum (CBS 179.80) and the other two with the type strain of the type species of the genus, *Epicoccum nigrum* (CBS 173.73). The genus *Phoma* was represented by seven clinical isolates and a reference strain of *Phoma herbarum* (CBS 615.75). Two additional isolates included in this clade (CNRMA 16.76 and CNM-CM 6201) grouped with the type strains of *Xenodidymella saxea* (CBS 419.92) and *Neosascochyta desmazieri* (CBS 297.69), respectively.

Clade 2 had two species of *Preussia*: CNM-CM 7335 grouped with a reference strain of *Preussia typharum* (CBS 107.69), while CNM-CM 7343 represented an unknown species forming a sister clade with the type strain of *Preussia terricola* (CBS 317.65).

Clade 3 grouped three isolates of *Paraphoma*, one of them (CNM-CM 8075) clustered with the type strain of *Paraphoma fimeti* (CBS 170.70), and the remaining two (CNRMA 15.665 and CNRMA 9.467) representing unidentified phoma-like species.

Clade 4 had two sister clades of the genus *Tintelnotia*, which produced pycnidia and hyaline, aseptate conidia. The isolate CNM-CM 7430 was identified as *Tintelnotia destructans*. However, the other two isolates (CNM-CM 7080 and CNM-CM 7981) did not cluster with any known species of the genus and might represent new species.

Clade 5 had 20 isolates of *Neocucurbitaria*. *N. keratinophila* and *N. unguis-hominis* were the most common species, both with eight isolates each. *Neocucurbitaria cava*, with a single isolate (CNRMA 15.708), was also included in this clade. Three Spanish isolates, CNM-CM 6489, CNM-CM 7025 and CNM-CM 7132 were identified as *Neocucurbitaria* sp. due to being phylogenetically different from the other isolates and, again, might be a new species of the genus. *Neocucurbitaria* spp. produces pycnidia, ornamented or not, with bristle-like setose structures, and hyaline, aseptate conidia.

Clade 6 had eleven isolates of *M. romeroi* (syn. *Pyrenochaeta romeroi*), which produces pycnidia and hyaline, aseptate conidia.

Clade 7 is represented by a single isolate (CNRMA 11.1115), phylogenetically distinct from the known pleosporalean fungi, possibly representing a novel taxon.

Clades 8 and 9 belonged to the family *Didymosphaeriaceae*. Clade 8 included a single isolate (CNM-CM 6000) phylogenetically related to a reference strain of *Paraphaeosphaeria michotii* (MFLUCC 13-0349). Clade 9 grouped ten isolates, two related to a reference strain of *Paraconiothyrium fuckelii* (CBS 797.95) and eight with the type strain of *P. cyclothyrioides* (CBS 972.95). Members of the *Didymosphaeriaceae* form pycnidia and pale brown, 0-1 septate conidia.

The order *Botryosphaerales* are present in Clades 10 to 12. Clade 10 had only one isolate (CNRMA 12.597) which clustered with a reference strain of *Neofusicocum luteum* (CBS 110299); Clade 11 also had a single isolate (CNRMA 6.1007) that clustered with the type strain of *Diplodia seriata* (CBS 112555), and Clade 12 grouped six isolates, five of them clustering with the type strain of *L. theobromae*, and CNRMA 15.383 identified as *Lasiodiplodia* sp. These fungi produce stromatic conidiomata and aseptate, hyaline to brown, thick-walled conidia.

Clade 13 included the type strain of *Diaporthe sclerotioides* (CBS 296.67) and six isolates corresponding to unidentified species of the genus *Diaporthe* (*Diaporthales*), none of them able to be morphologically distinguished since they produce pycnidia and small hyaline conidia.

Clade 14, corresponding to the *Glomerellales*, was used as out-group. Five isolates nested in the *Colletotrichum* clade, two clustering with reference strains of *C. gigasporum* (CBS 159.75) and *C. gloeosporioides* (CBS 122687), respectively; and the other three, could not be identified. All the isolates showed the typical morphology of *Colletotrichum*, i.e., acervuli, conidia variable in shape, flattened with thickened tip branches (appressoria).

3.3. Antifungal susceptibility testing

The MIC was determined for 46 of the isolates included here (16 from Spain and 30 from France) (Table 3, Table S1). Globally, the geometric mean (GM) and MIC₅₀ values of itraconazole and caspofungin were the highest (Table 3). The MIC of amphotericin B (0.06–1 mg/L) was generally low among the *Pleosporales* with the exception of one isolate of *M. romeroi* and one of *D. gardeniae*, with MICs of 8 and 32 mg/L, respectively. The azole MICs ranged between 0.03 and 1 mg/L for isolates belonging to the genera *Paraconiothyrium*, *Paraphoma*, *Tintelnotia* and *Neocucurbitaria*, with the exception of two isolates of *N. unguis-hominis*, which showed higher values (16 mg/L). The terbinafine MIC was low except for *Diaporthe* spp. and a few isolates of *Colletotrichum* spp. and *M. romeroi*.

4. Discussion

The present study is the largest on this taxonomically complex group of fungi from clinical origin, with almost a hundred isolates morphologically and molecularly characterized from two southern European countries (France and Spain). Most of these coelomycetous fungi belonged to the order *Pleosporales* and were most commonly recovered from superficial infections. Similar results were observed in a previous work that focused on coelomycetous fungi collected at a North American reference centre (Valenzuela-Lopez et al., 2017). However, the diversity of the fungi identified in that study was higher, i.e. eleven orders were represented against four here.

In the present study, *M. romeroi* was the most frequently isolated species whereas the most common taxon in the American study was *N. dimidiatum*. Interestingly, while *M. romeroi* is usually reported as an etiologic agent of black grain eumycetoma (Ahmed et al., 2014; van de Sande, 2013), our isolates were mainly recovered from eye and non-mycetoma subcutaneous infections.

The second most frequently isolated species were *P. cyclothyrioides*, *N. unguis-hominis* and *N. keratinophila*. *P. cyclothyrioides* is an emerging pathogen (Colombier et al., 2015; Guégan et al., 2016; Valenzuela-Lopez et al., 2017) and was represented by eight isolates recovered from skin or superficial locations and mainly from tropical regions. *N. unguis-hominis*, initially described as an agent of human onychomycosis (Punithalingam and English, 1975), was equally distributed across both centres (n = 8 isolates). Regarding *N. keratinophila*, this species was reported for the first time from a corneal infection in Spain (Ferrer et al., 2009). Interestingly, as well as being the first case reported for this species, all the isolates of *N. keratinophila* were recovered in Spain from superficial tissue.

Table 3

Overall *in vitro* antifungal activity against the 46 coelomycetous isolates as determined by EUCAST^a methodology.

Antifungal agent	MIC/MEC values (mg/L) ^b				
	range	median	GM	MIC ₅₀	MIC ₉₀
Amphotericin B	0.03–16	0.5	0.41	0.25	1
Itraconazole	0.014–16	2	1.72	0.5	16
Voriconazole	0.03–16	0.5	0.70	0.6	4
Posaconazole	0.014–16	0.5	0.58	0.25	8
Caspofungin	0.125–16	2	2.17	1	8
Micafungin	0.015–16	0.5	0.53	0.125	8
Terbinafin	0.014–16	0.25	0.39	0.25	2

^a EUCAST, European Committee on Antimicrobial Susceptibility Testing procedure.

^b MIC, minimum inhibitory concentration; MEC, minimal effective concentration; MIC₅₀ and MIC₉₀, MIC encompassing 50 and 90 % of isolates tested, respectively.

Other coelomycetous fungi we identified in the present work were *D. glomerata* and *Phoma herbarum*. Although *Phoma* spp. are commonly reported as a coelomycete involved in human infections (Punithalingam, 1979; Bennett et al., 2018), recent extensive changes in taxonomy and nomenclature have spread all but one of the species into different genera of the *Didymellaceae*, *Phoma herbarum* conserved as the type species of the genus (Chen et al., 2015; Valenzuela-Lopez et al., 2018b). Interestingly, *D. gardeniae* was commonly found in our study (five isolates from Spain and one from France).

Recently, Ahmed et al. (2017) proposed *T. destructans*, a new phoma-like fungus belonging to the *Phaeosphaeriaceae* able to cause eye and nail infections. They reported the successful use of terbinafine against a case of keratitis by this species. Two of the Spanish isolates recovered from superficial specimens (one cutaneous exudate and one nail sample) were molecularly related to the above-mentioned species but phylogenetically different and might represent a new taxon.

L. theobromae (order *Botryosphaeriales*) is the only species of this genus involved in human opportunistic infections (Saha et al., 2012). Valenzuela-Lopez et al. (2017) found a higher species diversity in the North American study than we report here, since five of the French isolates were identified as *L. theobromae*. The other three isolates of the *Botryosphaeriales* we found were related, one to a different species of *Lasiodiplodia* and the other two to other genera, specifically *Neofusicoccum* and *Diplodia*.

Four species of the genus *Diaporthe* (formerly *Phomopsis*; order *Diaporthales*), i.e. *D. bougainvilleicola*, *D. longicolla*, *Diaporthe phaseolorum* and *D. phoenicicola*, are considered opportunistic pathogens that cause mycoses that range from superficial to deep infections (Cariello et al., 2013; Gajjar et al., 2011; Garcia-Reyne et al., 2011; Iriart et al., 2011). Six isolates from France were phylogenetically placed into the latter genus. However, our results are only preliminary since only one phylogenetic marker was analysed. This fact was pointed out by other authors in this genus, which is a polyphyletic fungus (Gomes et al., 2013).

We also report the finding of five clinical isolates of *Colletotrichum*. Two of the isolates corresponded to *C. gigasporum* (formerly *Colletotrichum crassipes*) and *C. gloeosporioides*, taxa that have previously been reported as agents of keratitis, endophthalmitis and phaeohyphomycotic cyst; the other three isolates could not be identified at species level. This genus encompasses numerous plant pathogens that are found worldwide, although mainly in tropical and subtropical regions (Cannon et al., 2012). The taxonomy of *Colletotrichum* is complicated and the genus is organized in species-complexes (Cannon et al., 2012; Liu et al., 2014). Species such as *Colletotrichum coccodes*, *C. crassipes*, *Colletotrichum dematium*, *C. gloeosporioides*, *Colletotrichum graminicola* and *Colletotrichum truncatum* cause superficial and deep infections (endophthalmitis, keratitis, subcutaneous cyst or more rarely arthritis) (Cano et al., 2004). Further studies, including different phylogenetic markers, are needed to delimit the different species and clarify their pathogenic role.

The antifungal susceptibility of coelomycetous fungi involved in human infections is poorly known, mainly because they do not easily sporulate. In spite of the limited number of isolates tested here, amphotericin B seemed the most active drug *in vitro* together with terbinafine, in agreement with Valenzuela-Lopez et al. (2017). Until more *in vitro* data is available, the antifungal treatment of the infection by this sort of fungus remains purely empirical. In a recent study, Guégan et al. (2016) recommended extensive surgical resection of affected tissues as a first-line treatment for solitary subcutaneous lesions by coelomycetous fungi, followed by an antifungal therapy (posaconazole or voriconazole) in the case of relapse or amphotericin B in refractory cases.

Since our study is based on isolates from the two reference centres, we cannot comment on the incidence of infections due to coelomycetes nor compare their epidemiology between France and Spain. However, we still provide a good picture of the great diversity of coelomycetous fungi in the clinical context, and the basis for future studies on this interesting but neglected group of fungi.

Conflicts of interest

No conflict of interest declared.

Acknowledgments

We thank Cécile Gautier (National Reference Center for invasive Mycoses and Antifungals [NRCMA]) for technical assistance. This work was supported by the Spanish *Ministerio de Economía y Competitividad*, grant CGL2017-88094-P.

Olga Rivero-Menendez holds a fellowship from the *Fondo de Investigaciones Sanitarias* (grant FI14CIII/00025). Ana Alastruey-Izquierdo is supported by a research project from the *Fondo de Investigación Sanitaria* (FIS) (project PI16CIII/00035).

Members of the French Mycoses Study Group who contributed their clinical isolates to this study are as follows: Annecy (S. Bland), Bichat (C. Chochillon), Boulogne-Billancourt (N.Ait-Ammar), Caen (C. Duhamel), Clermont Ferrand (P.Poirier), Cochin (A. Paugam), Corbeil-Essonnes (D. Kubab), Guadeloupe (M. Nicolas), La Réunion (S. Picot), Lyon (A.L. Bienvenu), Martinique (N. Desbois), Nantes (F. Morio), Necker (M.E. Bougnoux), Nouvelle Calédonie (R. Goursaud), Pitié (A. Fekkar), Poitiers (C. Kauffmann), Quinze-Vingts (L. Merabet), Rouen (L. Favennec), Saint Etienne (H. Raberin), Saint-Louis (A. Alanio), Toulouse (S. Cassaing).

Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.funbio.2019.02.001>.

References

- Ahmed, S.A., van de Sande, W.W., Stevens, D.A., Fahal, A., van Diepeningen, A.D., Menken, S.B., de Hoog, G.S., 2014. Revision of agents of black-grain eumycetoma in the order Pleosporales. *Persoonia* 33, 141–154.
- Ahmed, S.A., Hofmüller, W., Seibold, M., de Hoog, G.S., Harak, H., Tammer, I., van Diepeningen, A.D., Behrens-Baumann, W., 2017. *Tintelnotia*, a new genus in *Phaeosphaeriaceae* harbouring agents of cornea and nail infections in humans. *Mycoses* 60, 244–253.
- Bennett, A., Ponder, M.M., Garcia-Diaz, J., 2018. *Phoma* infections: classification, potential food Sources, and its clinical impact. *Microorganisms* 6, E58. <https://doi.org/10.3390/microorganisms6030058>.
- Cannon, P.F., Damm, U., Johnston, P.R., Weir, B.S., 2012. *Colletotrichum* - current status and future directions. *Stud. Mycol.* 73, 181–213.
- Cano, J., Guarro, J., Gené, J., 2004. Molecular and morphological identification of *Colletotrichum* species of clinical interest. *J. Clin. Microbiol.* 42, 2450–2454.
- Cariello, P.F., Wickes, B.L., Sutton, D.A., Castlebury, L.A., Levitz, S.M., Finberg, R.W., Thompson, E.H., Daly, J.S., 2013. *Phomopsis bougainvilleicola* prepatellar bursitis in a renal transplant recipient. *J. Clin. Microbiol.* 51, 692–695.
- Chen, Q., Jiang, J.R., Zhang, G.Z., Cai, L., Crous, P.W., 2015. Resolving the *phoma* enigma. *Stud. Mycol.* 82, 137–217.
- Colombier, M.A., Alanio, A., Denis, B., Melica, G., Garcia-Hermoso, D., Levy, B., Peraldi, M.N., Glotz, D., Bretagne, S., Gallien, S., 2015. Dual invasive infection with *Phaeoacremonium parasiticum* and *Paraconiothyrium cyclothyrioides* in a renal transplant recipient: case report and comprehensive review of the literature of *Phaeoacremonium* phaeohyphomycosis. *J. Clin. Microbiol.* 53, 2084–2094.
- de Gruyter, J., Woudenberg, J.H., Aveskamp, M.M., Verkley, G.J., Groenewald, J.Z., Crous, P.W., 2013. Redisposition of phoma-like anamorphs in Pleosporales. *Stud. Mycol.* 75, 1–36.
- de Hoog, G.S., Guarro, J., Figueras, M.J., Gené, J., 2000. Atlas of Clinical Fungi, second ed. Centraalbureau voor Schimmelcultures, Utrecht, The Netherlands.
- Ferrer, C., Pérez-Santonja, J.J., Rodríguez, A.E., Colom, M.F., Gené, J., Alio, J.L., Verkley, G.J., Guarro, J., 2009. New *Pyrenochaeta* species causing keratitis. *J. Clin. Microbiol.* 47, 1596–1598.

- Gajjar, D.U., Pal, A.K., Parmar, T.J., Arora, A.I., Ganatra, D.A., Kayastha, F.B., Ghodadra, B.K., Vasavada, A.R., 2011. Fungal scleral keratitis caused by *Phomopsis phoenicicola*. *J. Clin. Microbiol.* 49, 2365–2368.
- García-Reyne, A., López-Medrano, F., Morales, J.M., García Esteban, C., Martín, I., Eraña, I., Meije, Y., Lalueza, A., Alastruey-Izquierdo, A., Rodríguez-Tudela, J.L., Aguado, J.M., 2011. Cutaneous infection by *Phomopsis longicolla* in a renal transplant recipient from Guinea: first report of human infection by this fungus. *Transpl. Infect. Dis.* 13, 204–207.
- Gomes, R.R., Glienke, C., Videira, S.I., Lombard, L., Groenewald, J.Z., Crous, P.W., 2013. *Diaporthe*: a genus of endophytic, saprobic and plant pathogenic fungi. *Persoonia* 31, 1–41.
- Guégan, S., García-Hermoso, D., Sitbon, K., Ahmed, S., Moguelet, P., Dromer, F., Lortholary, O., French Mycosis Study Group., 2016. Ten-Year experience of cutaneous and/or subcutaneous infections due to Coelomycetes in France. *Open Forum Infect. Dis.* <https://doi.org/10.1093/ofid/ofw106>.
- Huelsenbeck, J.P., Ronquist, F., 2001. MRBAYES: Bayesian inference of phylogenetic trees. *Bioinformatics* 17, 754–755.
- Iriart, X., Binois, R., Fior, A., Blanchet, D., Berry, A., Cassaing, S., Amazan, E., Papot, E., Carne, B., Aznar, C., Couppié, P., 2011. Eumycetoma caused by *Diaporthe phaseolorum* (*Phomopsis phaseoli*): a case report and a mini-review of *Diaporthe/Phomopsis* spp invasive infections in humans. *Clin. Microbiol. Infect.* 17, 1492–1494.
- Liu, F., Cai, L., Crous, P.W., Damm, U., 2014. The *Colletotrichum gigasporum* species complex. *Persoonia* 33, 83–97.
- Punithalingam, E., English, M.P., 1975. *Pyrenochaeta unguis-hominis* sp. nov. on human toe-nails. *Trans. Br. Mycol. Soc.* 64, 539–541.
- Punithalingam, E., 1979. Sphaeropsidales in culture from humans. *Nova Hedwigia* 31, 119–158.
- Saha, S., Sengupta, J., Banerjee, D., Khetan, A., 2012. *Lasiodiplodia theobromae* keratitis: a case report and review of literature. *Mycopathologia* 174, 335–339.
- Stchigel, A.M., Sutton, D.A., 2013. Coelomycete fungi in the clinical lab. *Curr. Fungal Infect. Rep.* 7, 171–191.
- Subcommittee on Antifungal Susceptibility Testing of the ESCMID European Committee for Antimicrobial Susceptibility Testing (EUCAST), 2008. EUCAST Technical Note on the method for the determination of broth dilution minimum inhibitory concentrations of antifungal agents for conidia-forming moulds. *Clin. Microbiol. Infect.* 14, 982–984.
- Tamura, K., Stecher, G., Peterson, D., Filipksi, A., Kumar, S., 2013. MEGA6: molecular evolutionary genetics analysis version 6.0. *Mol. Biol. Evol.* 30, 2725–2729.
- Thompson, J.D., Higgins, D.G., Gibson, T.J., 1994. CLUSTAL W: improving the sensitivity of progressive multiple sequence alignment through sequence weighting, position-specific gap penalties and weight matrix choice. *Nucleic Acids Res.* 22, 4673–4680.
- Valenzuela-Lopez, N., Sutton, D.A., Cano-Lira, J.F., Paredes, K., Wiederhold, N., Guarro, J., Stchigel, A.M., 2017. Coelomycetous fungi in the clinical setting: morphological convergence and cryptic diversity. *J. Clin. Microbiol.* 55, 552–567.
- Valenzuela-Lopez, N., Cano-Lira, J.F., Stchigel, A.M., Guarro, J., 2018a. DNA sequencing to clarify the taxonomical conundrum of the clinical coelomycetes. *Mycoses* 61, 1–69.
- Valenzuela-Lopez, N., Cano-Lira, J.F., Guarro, J., Sutton, D.A., Wiederhold, N., Crous, P.W., Stchigel, A.M., 2018b. Coelomycetous dothideomycetes with emphasis on the families *Cucurbitariaceae* and *Didymellaceae*. *Stud. Mycol.* 90, 1–69.
- van de Sande, W.W., 2013. Global burden of human mycetoma: a systematic review and meta-analysis. *PLoS Negl. Trop. Dis.* 7, e2550. <https://doi.org/10.1371/journal.pntd.0002550>.
- Wijayawardene, N.N., Hyde, K.D., Wanasinghe, D.N., Papizadeh, M., Goonasekara, I.D., Camporesi, E., Bhat, D.J., McKenzie, E.H.C., Phillips, A.J.L., Diederich, P., Tanaka, K., Li, W.J., Tangthirasunun, N., Phookamsak, R., Dai, D.Q., Dissanayake, A.J., Weerakoon, G., Maharachchikumbura, S.S.N., Hashimoto, A., Matsumura, M., Bahkali, A.H., Wang, Y., 2016. Taxonomy and phylogeny of dematiaceous coelomycetes. *Fungal Divers.* 77, 1–316.