Chapter 10 Synergism Between Quorum Sensing Inhibitors and Antibiotics: Combating the Antibiotic Resistance Crisis



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Abstract With the alarming increase in the antibiotic resistance, there is an immediate need for alternative therapeutic strategies to combat this ever-changing bacterial battle. Combinatorial therapies have gained attention owing to their multiple targeted actions. The use of antibiotic is inevitable and antibiotics in combinations have been in use to treat drug resistant infections. Nevertheless, the multidrug resistant strains have found their own mechanisms to surpass such combinatorial treatments. Quorum sensing (QS) inhibition is considered to be the silver lining but is yet to find its way to commercial use. Hence, to combat the antibiotic resistance crisis, the synergy of QSIs and antibiotics is one of the possible revolutionary approaches. In this chapter, we have highlighted the importance and need for the synergy approach with the successful *in vitro* and *in vivo* studies that can possibly be extended to the commercial use.

Keywords Biofilm · Antibiotic · Resistance · Quorum sensing inhibition · Synergy

10.1 Introduction

Antibiotics have been the wonder drugs since 1928 when Sir Alexander Fleming discovered Penicillin, from *Penicillium notatum*, which was a breakthrough in the field of medicines. By 1940, due to the extensive use of antibiotics, there was an accelerated development of antibiotic-resistant strains which C. Lee Ventola describes as 'The Antibiotic resistance crisis'. The major causes were the overuse and misuse of drugs for the up growth of the antibiotic-resistant strains (Ventola 2015).

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This is also attributed to improper sanitation, poor public health system and also irregular prescription (amr-review.org). The resistance is developed through bacterial evolution by spontaneous mutations making various drugs incompetent. Humans are affected either by direct contact or indirectly by the consumption of livestock, as antibiotics are used largely in animal feeds to prevent microbial infections. It is supported by the fact that 80% of antibiotics are used in livestock feed, in the US (Ventola 2015). Antibiotic resistance has also become an economic crisis, and many countries have employed various measures to overcome this crisis. It is estimated that by 2050, the death toll will exceed 10 million each year which extends to the cost of 100 trillion USD loss in output (amr-review.org). The main players involved are the pharmaceutical and biotechnology companies who are threatened by the resistance development. This crisis needs to be immediately addressed to avoid the economic loss of a nation.

Bacteria adopt numerous mechanisms to defend against the antimicrobials (Munita and Arias 2016). These mechanisms further ease the way for acquiring phenotypic and genotypic resistance to those antibiotics and make the pathogen to evolve as a superbug. Hence to overcome drug resistance, there is a pressing need for alternative therapeutic approaches. Among them, quorum sensing (OS) inhibition proves to be an encouraging strategy (Kalia and Purohit 2011), as these small molecules will not induce resistance (Gerdt and Blackwell 2014). Quorum sensing is the cell to cell communication, contributes to the defense mechanism and also produces virulence factors. Quorum sensing is attributed not only to the infectious diseases but also to different fields. Subsequently, quorum sensing inhibitors are reported to have varied applications (Kalia et al. 2014a; Kalia and Kumar 2015a). Though many quorum sensing inhibitors (OSIs) have been reported, the use of OSI alone in treatment has not been very successful (Sengupta et al. 2013) because of which commercialization of QSI is not in existence till now. A QSI can attenuate virulence of the pathogenic bacteria by targeting the OS signaling pathway. It is to be noted that QSI will not affect the bacterial growth, rather stop the pathogen to establish a community (Kalia 2013, 2015). A few research works claim that the host immune response will be sufficient enough to clear the bacteria after QS inhibition. However, in a real clinical setting, it may not be sufficient for the complete clearance of the high bacterial load, especially the ones which are in biofilm and may lead to re-emergence of the pathogen as resistant strains. Also to tackle the multidrug resistant strains, resensitization of resistant drugs has become the need of the hour. In spite of being considered as an alternative therapy to antibiotics, a few claims and theories state that bacteria might develop resistance to the QSIs which requires strong experimental evidence (Kalia et al. 2014b; Kalia and Kumar 2015b; Koul et al. 2016). Hence combinatorial treatment of QSI with antibiotics will be a promising approach, as target specific QSI will not pose survival stress and the antibiotic will aid in curbing the pathogenesis, at low concentrations.

10.2 Synergy Between QSIs and Antibiotics

10.2.1 Natural QSIs and Antibiotics

To date, many quorum sensing inhibitors have been tested along with conventionally used antibiotics that are listed in Table 10.1. Many naturally occurring QSIs are reported previously which were shown to have remarkable synergistic activity with conventional antibiotics. The following are a few reports which support the combinatorial action. A well-known QSI, furanone C-30, enhanced the susceptibility to tobramycin against *P. aeruginosa* biofilm (Hentzer et al. 2003). Fujita et al. (2005) have shown baicalein, a QSI compound from thyme leaves extract reduced the minimum inhibitory concentrations of tetracycline and other β -lactams antibiotics against Methicillin-resistant *Staphylococcus aureus* (MRSA). Also, they have proposed the possible mechanisms for the synergistic action: inhibition of penicillinbinding protein 2'(2a) by baicalein, and damage of peptidoglycan. A similar study was extended to vancomycin-resistant *Enterococcus* where the synergy with gentamicin was reported (Chang et al. 2007). Later, baicalein was shown to interfere with the transcriptional activator protein (TraR) of *P. aeruginosa* QS system, and also having combinatorial activity with ampicillin (Zeng et al. 2008).

Farnesol, a quorum signal of *Candida* sp. inhibited *S. epidermidis* biofilm in synergy with nafcillin and vancomycin (Pammi et al. 2011). Synergism between tobramycin and baicalin hydrate against *Burkholderia cenocepacia* was shown in a lung infected animal model (Brackman et al. 2011). It was also shown that the extracts of *Nymphaea tetragona* and antibiotics could be effective against drug-resistant Salmonella (Hossain et al. 2014). Synergistic efficacy of sub-MIC concentrations of curcumin with ceftazidime and ciprofloxacin against *P. aeruginosa* QS system was well documented (Roudashti et al. 2017). The synthetic derivatives of natural compounds have also been reported for QS inhibition activity. Zeng et al. (2011) investigated the combinatorial action of 14-alpha-lipoyl andrographolide (AL-1) and traditionally used antibiotics in inhibiting not only the *P. aeruginosa* biofilm but also the EPS and pyocyanin.

10.2.2 Synthetic QSIs and Antibiotics

Like natural QSIs, several synthetic small molecule inhibitors have been described to possess combinatorial action with conventional antibiotics with less or no toxicity. Balaban et al. (2003) have shown the synergistic actions of the RNAIII-inhibiting peptide (RIP) with conventional antibiotics in 100% clearance of graft-associated *S. epidermidis* infections *in vivo*, suggesting that RIP may be used to coat medical devices to prevent staphylococcal infections. The activity of 2-aminoimidazole/triazole conjugate with conventional antibiotics promoted the biofilm dispersion and along with resensitization of MRSA and multi-drug resistant *Acinetobacter*

Table 10.1 Synergis	Table 10.1 Synergistic action of quorum sensing inhibitors and antibiotics	ng inhibitors and	l antibiotics			
Quorum sensing inhibitors	Proposed mechanism of quorum sensing inhibition	Concentration of QSI	Antibiotics	Target organism	Effective synergistic action	References
RNAIII-inhibiting	Phosphorylation	10 μg/ml	Cefazolin	Staphylococcus	>10-100-fold bacterial	Balaban et al. (2003)
peptide	inhibition of target of		Rifampin	epidermidis	clearance in vivo	
	KNAIII activating		Imipenem			
	protein (1KAF)		Levofloxacin			
			Teicoplanin			
			Mupirocin			
			Quinupristin			
]	Dalfopristin			
Furanone C-30	Interference in	10 µM	Tobramycin	Pseudomonas	Two to three orders of	Hentzer et al. (2003)
	Acyl-homoserine			aeruginosa	magnitude more sensitive	
	lactone signaling				in bacterial clearance in biofilm	
Baicalein	Efflux pump inhibition 25 µg/ml	25 μg/ml	β-lactam	Methicillin-resistant	Reduction in MIC of	Fujita et al. (2005)
			antibiotics tetracycline	Staphylococcus aureus	tetracycline in MRSA strain OM584, from 128 µg/ml to 0.06 µg/ml	
	NA	32 μg/ml	Gentamicin	Vancomycin-resistant	Two orders of magnitude	Chang et al. (2007)
				Enterococcus	higher activity in reduction of bacterial	
					growth	
	Interference in quorum sensing system, transcription activator protein (TraR)	200 mM	Ampicillin	Pseudomonas aeruginosa	NA	Zeng et al. (2008)
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Dispersin B	Dispersal of matured biofilm	20–600 μg/ml Cefamandole nafate	Cefamandole nafate	Staphylococcus epidermidis	NA	Donelli et al. (2007)
2-Aminoimidazole/	2-Aminoimidazole/ Inhibition and dispersal	2.6–325 nM	Novobiocin	Acinetobacter	Three orders magnitude	Rogers et al. (2010)
triazole conjugates	of biofilm		Colistin	baumannii and	increase of biofilm	
		,	Tobramycin	Staphylococcus aureus	dispersion	
			Novobiocin			
			Tobramycin etc.,			
Baicalin hydrate	Acyl-homoserine	100 µM	Tobramycin	Burkholderia	Significant decrease in	Brackman et al. (2011)
	lactone QS signaling			cenocepacia,	biofilm as compared to	
				Burkholderia	antibiotic alone	
				multivorans and		
				Pseudomonas		
				aeruginosa		
Cinnamaldehyde		250 μM	Clindamycin	Pseudomonas		
				aeruginosa and		
				Staphylococcus aureus		
Hamamelitannin		250 μM	Vancomycin	Staphylococcus aureus		
14-Alpha-lipoyl	Interference in QS	0.5 mM	Azithromycin	Pseudomonas	Significant inhibition of	Zeng et al. (2011)
andrographolide	system		Ciprofloxacin	aeruginosa	biofilm, EPS and	
(AL-1)			Fosfomycin		pyocyanin compared to	
			Streptomycin		antibiotic alone	
			Gentamicin			
Lactonase	Increasing antibiotic	0.3 units	Ciprofloxacin	Pseudomonas	5-6 folds reduction in	Kiran et al. (2011)
	susceptibility of the biofilm		Gentamicin	aeruginosa	minimum biofilm eradication concentration	
						(continued)

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Ouorum sensing	Proposed mechanism of auorum sensing	Concentration			Effective svnergistic	
inhibitors	inhibition	of QSI	Antibiotics	Target organism	action	References
Nanosilver	Antibacterial and	0.25 – 2 μg/	Ampicillin	Escherichia coli	Reduction of antibiotic	Hwang et al. (2012)
	antibiofilm	mL	Chloramphenicol	Pseudomonas	concentration	
				aeruginosa		
			Kanamycin	Staphylococcus aureus		
				Streptococcus mutans		
Silver nanocolloids	Antiquorum and	10 μg/mL	Amoxicillin	Escherichia coli	Increase in antagonistic	Arunkumar et al.
	antibacterial		Methicillin	Pseudomonas	activity	(2013)
				aeruginosa		
			Ampicillin	Staphylococcus aureus		
Isobutyl-DPD	Inhibiting the genotypic	40 and	Gentamicin	Escherichia coli	Reduction in biofilm	Roy et al. (2013)
Phenyl DPD	QS responses and	100 µM	Gentamicin	Pseudomonas	thickness by more than	
5	dispersal of preformed			aeruginosa	80% for <i>E. coli</i> and 90%	
	biofilm			,	for P. aeruginosa	
Fimbrolide	Antivirulent and	NA	NO hybrids	Pseudomonas	Increased biofilm	Kutty et al. (2013)
	anti-biofilm agents			aeruginosa	inhibition at picomolar to	
Biogenic Silver	Antibacterial and	0.1-1 μg/mL	Ampicillin	Pseudomonas	Enhanced antibacterial	Gurunathan et al.
nanoparticles	antibiofilm agent			aeruginosa	activity	(2014)
			Chloramphenicol	Shigella flexineri		
			Erythromycin	Staphylococcus aureus		
			Gentamicin	Streptococcus		
			Tetracycline	pneumoniae		
			Vancomycin			
Citrate-capped	Biofilm inhibition and	56-10 μg/	Aztreonam	Pseudomonas	Synergistic antimicrobial Habash et al. (2014)	Habash et al. (2014)
silver nanoparticles	eradication	mL		aeruginosa	activity	

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Mycofabricated Silver nanoparticles	Antibiofilm agent	25 μg/mL	Tobramycin	Pseudomonas aeruginosa	100% killing of biofilm cells	Singh et al. (2015)
4-(Benzylamino) cyclohexyl2- hydroxycinnamate	SarA inhibitor	15 and 65 μg/ Gentamicin mL	Gentamicin	Staphylococcus aureus	Staphylococcus aureus Significant clearance of Staphylococcus aureus in vivo at lower concentration of gentamicin	Balamurugan et al. (2015)
Biogenic Silver	Antimicrobial and	1-128 μg/mL Amikacin	Amikacin	Escherichia coli	Synergistic antibacterial	Barapatre et al. (2016)
nanoparticles (Fungus derived)	antibiofilm		Kanamycin	Pseudomonas aeruginosa	activity	
			Oxytetracycline	Oxytetracycline Staphylococcus aureus		
			Streptomycin			
2,3-Pyrazine dicarboxylic acid	LuxO modulator	25 μM	Chloramphenicol Vibrio cholerae Doxycycline	Vibrio cholerae	Significant reduction in Vibrio cholerae growth	Hema et al. (2016)
			Erythromycin Tetracycline			
1, 3-Disubstituted Ureas	ComA inhibitors	0.23–15 µM	Sodium fluoride	Streptococcus mutans	Reduced the fluoride concentration to 31.25 ppm	Kaur et al. (2016, 2017)

baumannii (Rogers et al. 2010). Roy et al. (2013) have shown the clearance of preformed biofilm by DPD derivatives with a significant increase by 80 and 90% for E. coli and P. aeruginosa respectively. In another study, the combined use of 2.3-Pyrazine dicarboxylic acid and conventional antibiotics against V. cholerae showed a significant reduction in growth (Hema et al. 2016). The combined use of 1,3-disubstituted urea derivatives specifically targeted against the ComA (a bacteriocin associated ABC transporter) of Streptococcus mutans and sodium fluoride showed a significant inhibition of growth and biofilm (Kaur et al. 2016). Interestingly, in this case, the results showed a remarkable decrease in the fluoride concentration to 31.25–62.5 ppm (~1000 ppm is presently used in toothpaste formulations). Additionally, 1,3-di-m-tolylurea (DMTU) which is a 1,3-disubstituted ureas derivative along with fluoride was capable of reducing dental caries in vivo which was evident from the macroscopic observations and pathological studies (Kaur et al. 2017). Similarly, combinatorial treatments showed promising activity in animal models as shown in Balamurugan et al. (2015). In this study, a significant reduction in gentamicin concentration was reported with SarA (a quorum regulator) targeted 4-(benzylamino)cyclohexyl OS inhibitor. 2-hydroxycinnamate against Staphylococcus aureus associated with gestational urinary tract infection.

10.2.3 Quorum Quenching Enzymes and Antibiotics

Enzymes such as acyl homoserine lactone (AHL) lactonases and acylases have also shown potent quorum quenching activities and are found in diverse set of organisms which makes them more versatile to explore (Kalia et al. 2011; Huma et al. 2011; Kalia 2014; Kumar et al. 2015; Koul and Kalia 2017). Interestingly, quorum quenching enzymes also have a significant role in the combinatorial approaches to biofilm treatment. Donelli et al. (2007) have shown the mature biofilm dispersal by dispersin B (β -*N*-Acetylglucosaminidase) thereby enhancing the antibiotic activity against adherent cells on polyurethane surfaces. Similarly, the lactonase enzyme eradicated biofilm and increased the susceptibility to antibiotics ciprofloxacin and gentamicin against *Pseudomonas aeruginosa* biofilm (Kiran et al. 2011).

10.2.4 Nanoparticles and Antibiotics

In recent times, metal nanoparticles have been explored extensively for antimicrobial activities against multidrug resistant pathogens (Bose and Chatterjee 2015; Dobrucka and Długaszewska 2015; Szweda et al. 2015; Deng et al. 2016; Wan et al. 2016). As an advancement, quorum sensing inhibitory as well as antibiofilm activity of nanoparticles have also been reported (Agarwala et al. 2014; Gurunathan et al. 2014; Ahiwale et al. 2017). The combination of the nanoparticles and antibiotics is proven to have potential synergistic activities enhancing the efficiency of the antibiotic. Silver nanoparticles are the most widely used metal nanoparticle for the antibacterial application which is extended to the combinatorial action with antibiotics. Mycofabricated silver nanoparticles were utilized along with tobramycin which improved the clearing of biofilm cells by facilitating the efficient penetration of the antibiotic (Singh et al. 2015). Gurunathan et al. (2014) have shown the antibiofilm activity of biogenic silver particles with different antibiotics against a wide range of Gram-positive and Gram-negative bacteria. Similar results were obtained for the combination of nano-silver and antibiotics (Hwang et al. 2012). Silver nanocolloids were shown to have effective combinatorial action with the conventionally used antibiotics against S. aureus, E. coli and P. aeruginosa (Arunkumar et al. 2013). The antimicrobial activity of aztreonam has been synergistically enhanced in the presence of citrate-capped silver nanoparticles against P. aeruginosa biofilms (Habash et al. 2014). Green synthesized silver nanoparticles from lignin-degrading fungus, Aspergillus flavus and Emericella nidulans, having antibiofilm activity showed synergistic antimicrobial activity against Gram-positive and Gram-negative bacteria (Barapatre et al. 2016).

Recently, Ilk et al. (2017), have encapsulated the quorum sensing inhibitor, kaempferol, in chitosan nanoparticles, and have shown the increased stability and QSI activity. Hence, the combined use of antibiotics with nanoparticles and QSIs with nanoparticles would be an exciting new choice of treatment in alternative therapies.

10.2.5 Combined Toxicity of Antibiotics and QSI

Even though the combined use of QSIs and antibiotic reduces the concentration of antibiotics, studies on assessing the combined toxicity are limited currently. A recent QSAR-based mechanistic study has assessed the combined toxicity of antibiotics and QSIs against *E. coli*. They have reported the toxicity effects of commonly used antibiotics such as sulfonamides, β -lactams and tetracyclines, and some potential QSIs (including furanone, pyrrolidones, and pyrroles). The eight QSIs taken showed an additive or antagonistic effect in combination with sulphonamides and had antagonistic effects with β -lactams and tetracyclines (Wang et al. 2017).

10.3 Synergy Mechanism

From the above examples, it can be clearly seen that the combinatorial use of QSI and antibiotics work in such a way that the QSI will inhibit/eradicate biofilm formation as well as virulence factors which will favor the effective functioning of antibiotics (Figs. 10.1a and 10.1b). As explained in the mechanism (Figs. 10.1a and 10.1b), QSI targets the quorum sensing pathway thereby reducing the production of QS signals and virulence factors. This interference in the virulence then paves a way for the antibiotics to complete their action in reduced dosage. If the QSI has biofilm

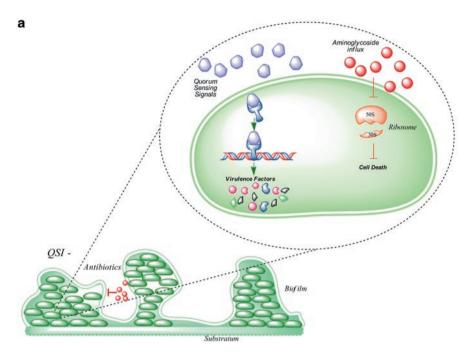


Fig. 10.1a Treatment of biofilm with antibiotics (aminoglycoside) and without quorum sensing inhibitor, QSI–. In the absence of QSI, the mature biofilm impose an antibiotic diffusion barrier for antibiotics. As the antibiotics are unable to enter the biofilm cells and bind to the 30s ribosomal unit, cell death is inhibited even at higher concentrations

disruption activity, then the combination with antibiotics will have an enhanced effect in biofilm dispersal (QSI action) by limiting the antibiotic diffusion barrier as well as the bacterial clearance (antibiotic action).

10.4 Methods of Measurement

In order to evaluate the synergistic action of the drugs, different models have been proposed. When the drugs are given in combination, the resulting effect can be either equal to, greater or less than the corresponding individual drugs' effect, which is termed as additive, synergism or antagonism respectively (Yang et al. 2014). In the case of QSI and antibiotics combination, the desired outcome is synergy rather than additive effect. QSI and antibiotics have independent targets and both the agents should have mutual participation in bringing out the desired effect. Thus, the interaction between a QSI and antibiotics is best explained in terms of synergy.

The most common assays that are carried out to understand synergy are checkerboard assay and time-kill assays (TKA). The checkerboard assay data are analyzed

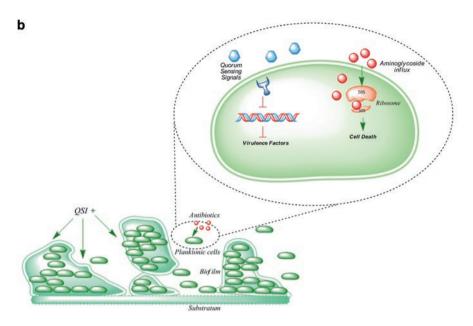


Fig. 10.1b Treatment of biofilm with antibiotics (aminoglycoside) and with quorum sensing inhibitor, QSI+. In the presence of QSI has disrupted the biofilm thereby paving a way for the antibiotic to enter the cell and complete its action. In this case, at low concentrations, the aminoglycoside is able to bind with 30s ribosomal subunit and interfere with the protein translational process and thereby causing cell death

using fractional inhibitory concentration (FIC). The data obtained from TKA gives the rate of killing in addition to the optimum concentration (Doern 2014).

10.4.1 Fractional Inhibitory Concentration Index (FICI)

The effect of the combinatorial treatment can be interpreted as synergistic, indifferent or antagonistic based on the non-parametric method, FICI (Kaur et al. 2016; Subramaniam et al. 2014). The following are the formulae to calculate the FICI of the drug interaction.

Let us consider the two drugs, A and B,

$$FICI = FIC_A + FIC_B$$

Where,

 $FIC_A = (MIC \text{ of } A \text{ in combination}) / (MIC \text{ of } A \text{ alone})$

 $FIC_{B} = (MIC \text{ of } B \text{ in combination}) / (MIC \text{ of } B \text{ alone})$

FICI ≤ 0.5 denotes Synergy; 0.5 < FICI < 4 denotes indifference or absence of interaction; FICI >4 denotes antagonism.

10.4.2 Bliss Independence Model

Synergism is a mutually non-exclusive action of two drugs leading to the enhanced inhibitory activity. Thus, application of independence probability theory, Bliss model explains the synergistic action of the two drugs be informational (Yang et al. 2014). This model is particularly useful when QSI with antibiofilm activity is given in combination with the antibiotics.

The bliss independence model or BI theory (Goldoni and Johansson 2007; Sun et al. 2008) is described by the following equations.

$$\mathbf{I}_{i} = \left(\mathbf{I}_{A} + \mathbf{I}_{B}\right) - \left(\mathbf{I}_{A} \mathbf{X} \mathbf{I}_{B}\right)$$
(10.1)

Where,

Ii = predicted inhibition percentage of A and B.

 $I_A =$ experimental inhibition percentage of A (alone).

 I_{B} = experimental inhibition percentage of B(alone).

$$I = 1 - E$$
 (10.2)

Where,

E = growth percentage

Equation 10.3 is obtained by substituting (10.2) in (10.1)

$$\mathbf{E}_{i} = \mathbf{E}_{A} \mathbf{X} \mathbf{E}_{B} \tag{10.3}$$

Where,

 E_i = predicted growth percentage of A and B.

 E_A = observed growth percentage of A

 E_{B} = observed growth percentage of B.

Interaction (ΔE) is given by the formula (10.4):

$$\Delta E = \mathbf{E}_{\text{predicted}} - \mathbf{E}_{\text{observed}} \tag{10.4}$$

By the nonparametric approach described by Prichard et al. (1991,1993), E_A and E_B are obtained directly from the experimental data. With the obtained results, the interpretations are as follows: ΔE – positive (synergy) and ΔE – negative (antagonism).

With the previous studies, both the above said models correlated with each other (Barapatre et al. 2016; Kaur et al. 2016; Hema et al. 2016). Response surface methodology can also be used to understand the synergistic pattern of the above synergy. Thus these methods give a mathematical validation to the synergistic activity of the QSIs and antibiotics.

10.5 Conclusion

Combinatorial therapies are currently used in the treatment of complex diseases like cancer. The idea behind the combinatorial therapy is to target different molecular mechanisms thereby disarming the proliferation of the infectious diseases. Antibiotics are broad spectrum and require a very high dosage for the treatment of multidrug resistant strains. On the other hand, QSIs are target specific which works at very low concentrations without inducing a survival stress. With the aforementioned examples, it can be clearly seen that the use of these antibiotics with QSIs potentiates significant synergistic action and is a thoughtful way to combat the over-use of antibiotics.

10.6 Opinion

Currently, a broad range of antibiotics is used to scale down the infections. It is well known that continuous administration of antibiotics leads to resistance development. Therefore, a cocktail of antibiotics will also eventually lead to more resistant strains causing a disastrous epidemic. On the contrary, the use of QSI may not contribute to resistance development but it makes the bacteria more susceptible to antibiotics at low levels. This way the bacteria are exposed to the minimal level of antibiotics such that they are unable to trigger the evolution of resistant strains. Thus, the combinatorial use of antibiotics with quorum sensing inhibitors uplifts the condition of the antibiotics resistance crisis and also the market per se.

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