

Session: P058 New data on new tetracyclines

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In vitro activity of omadacycline and comparators against Gram-negative bacterial isolates collected from patients in European medical centres (2016): results from the SENTRY antimicrobial surveillance programme

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Background: Omadacycline is a broad spectrum aminomethylcycline of the tetracycline family in late stage clinical development for community-acquired bacterial pneumonia and acute bacterial skin and skin structure infections (intravenous and oral formulations). Omadacycline has shown potent *in vitro* activity against key bacterial pathogens including Gram-negative bacterial isolates expressing resistance to β -lactams, fluoroquinolones and/or common tetracycline resistance mechanisms. This study evaluated the *in vitro* antibacterial activity of omadacycline and comparators against Gram-negative bacterial isolates collected from patients in European medical centres that participated in the 2016 SENTRY surveillance program.

Material/methods: A total of 4,131 clinically significant Enterobacteriaceae, 195 *Haemophilus influenzae*, 105 *Moraxella catarrhalis* and 266 *Acinetobacter baumannii* representing multiple infection types were collected during 2016. One isolate/patient/infection episode was included. Species identification confirmation and antimicrobial susceptibility testing was performed in a central laboratory according to reference (CLSI) broth microdilution methodology and results interpreted per EUCAST/CLSI breakpoints.

Results: Gram-negative isolates were collected from blood stream infection (BSI; 29.9%), pneumonia in hospitalized patients (PIHP; 20.3%), urinary tract infection (UTI; 19.1%), skin and skin structure infection (SSSI; 15.4%), intra-abdominal infection (IAI; 9.3%), respiratory tract infection (RTI; 5.6%) and other infection types (0.4%). Against Enterobacteriaceae, omadacycline (MIC_{50/90} 1/4 mg/L) was very active, inhibiting 90.7% of isolates at ≤ 4 mg/L; corresponding susceptibilities (EUCAST/CLSI) to ciprofloxacin, ceftazidime, piperacillin-tazobactam and tetracycline were 74.2%/76.1%, 77.5%/82.3%, 83.5%/87.6% and -/62.1%, respectively. Where treatment options may be limited, omadacycline remained active against resistant organisms/groups, including ESBL phenotype *Escherichia coli* (MIC_{50/90} 1/2 mg/L) and *Klebsiella pneumoniae* (MIC_{50/90} 2/8 mg/L; 84.6% inhibited at ≤ 4 mg/L),

ceftazidime non-susceptible *Enterobacter cloacae* species complex (MIC_{50/90} 2/4 mg/L) and *A. baumannii* (MIC_{50/90} 2/8 mg/L; 74.8% inhibited at ≤4mg/L). *H. influenzae* and *M. catarrhalis* isolates were also very susceptible to omadacycline with MIC_{50/90} values of 0.5/1 and 0.12/0.25 mg/L, respectively.

Conclusions: Omadacycline was very active against contemporary Gram-negative isolates from Europe, including resistant strains. Omadacycline inhibited ≥90% of Enterobacteriaceae, *A. baumannii*, *H. influenzae* and *M. catarrhalis* isolates at ≤4, 8, 1 and 0.25 mg/L, respectively. These data support further clinical investigation, especially where resistant pathogens may occur.

| Organism | # tested | Omadacycline MIC (mg/L) | | Tetracycline MIC (mg/L) | | %S EUCAST / CLSI |
|---------------------------------|----------|----------------------------|-------------------|----------------------------|-------------------|---------------------|
| | | MIC ₅₀ | MIC ₉₀ | MIC ₅₀ | MIC ₉₀ | |
| Enterobacteriaceae | 4,131 | 1 | 4 | 2 | >16 | ^a / 62.1 |
| <i>Escherichia coli</i> | 1,972 | 0.5 | 2 | 2 | >16 | - / 61.7 |
| <i>E. coli</i> (ESBL phenotype) | 413 | 1 | 2 | >16 | >16 | - / 37.8 |
| <i>Klebsiella pneumoniae</i> | 805 | 1 | 4 | 2 | >16 | - / 68.2 |
| <i>Enterobacter cloacae</i> | 325 | 1 | 4 | 2 | >16 | - / 85.2 |
| <i>A. baumannii</i> | 266 | 4 | 8 | >16 | >16 | - / 17.6 |
| <i>H. influenzae</i> | 195 | 0.5 | 1 | 0.5 | 0.5 | 100.0 / 100.0 |
| <i>M. catarrhalis</i> | 105 | 0.12 | 0.25 | 0.25 | 0.5 | 100.0 / 100.0 |

^a EUCAST breakpoints unavailable