

### Ceftaroline activity against clinical isolates from United States hospitals: results from the 2011 Assessing Worldwide Antimicrobial Resistance Evaluation programme

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**Objective:** To evaluate the activity of ceftaroline (CPT) tested against prevalent Gram-positive and -negative species isolated in USA hospitals (2011). CPT, the active form of CPT fosamil, is a new, parenteral, broad-spectrum cephalosporin exhibiting in vitro bactericidal activity against Gram-positive organisms, including MRSA and multidrug-resistant (R) *Streptococcus pneumoniae* (SPN), as well as common Gram-negative pathogens. CPT is approved in the USA for treatment of acute bacterial skin and skin structure infection (ABSSSI) and community-acquired bacterial pneumonia (CABP). **Methods:** 5635 consecutive, nonduplicate isolates from bloodstream, ABSSSI, and respiratory tract infections were collected from 52 medical centres and tested for susceptibility (S) to CPT and comparator agents at a central laboratory using the reference CLSI broth microdilution method. CLSI and EUCAST breakpoint criteria were used to determine S/R rates for comparator agents. USA-FDA interpretive criteria were used for CPT. **Results:** CPT inhibited all *S. aureus* strains (49.3% MRSA) at  $\leq 2$  mg/L and 98.8% of MRSA were S to CPT (Table). CPT was 8- to 16-fold more active than ceftriaxone (CRO; MIC<sub>50/90</sub>, 4/4 mg/L) against MSSA. CPT inhibited all tested SPN at  $\leq 0.5$  mg/L and remained active against penicillin-R and CRO-non-S SPN (MIC<sub>90</sub>, 0.25 mg/L for both subsets; see Table). The highest CPT MIC value among beta-haemolytic streptococci was only 0.03 mg/L. CPT activity against coagulase-negative staphylococci (CoNS; 61.6% methicillin-R) was similar to that against *S. aureus*. CPT showed only moderate activity against *E. faecalis* (MIC<sub>50/90</sub>, 2/8 mg/L). *Haemophilus influenzae* (MIC<sub>90</sub>, 0.03 mg/L; 27.2% beta-lactamase [BL] producers), *H. parainfluenzae* (MIC<sub>90</sub>, 0.12 mg/L) and *Moraxella catarrhalis* (MIC<sub>90</sub>, 0.12 mg/L) were highly CPT-S. CPT activity against the most frequently isolated Enterobacteriaceae species (MIC<sub>50</sub>, 0.12-0.25 mg/L) was similar to that of CRO (MIC<sub>50</sub>,  $\leq 0.06$ -0.25 mg/L) and ceftazidime (MIC<sub>50</sub>, 0.12-0.25 mg/L). Extended-spectrum BL (ESBL) phenotype was observed in 9.9% of *E. coli* and 12.4% of *Klebsiella* spp., and all cephalosporins tested showed limited activity against ESBL-producing strains. **Conclusions:** CPT demonstrated enhanced activity against staphylococci, including MRSA, various streptococcal groups, and *H. influenzae* strains recently isolated from USA hospitals. CPT activity against Enterobacteriaceae was similar to that of currently marketed broad-spectrum cephalosporins.

Organism (no. tested)	No. of isolates (cumulative %) inhibited at ceftaroline MIC (mg/L) of:						
	$\leq 0.03$	0.06	0.12	0.25	0.5	1	2
<i>S. aureus</i> (1496)	0(0.0)	4(0.3)	124(8.6)	629(50.6)	500(84.0)	230(99.4)	9(100.0)
MSSA (758)	0(0.0)	4(0.5)	121(16.5)	611(97.1)	22(100.0)	-	-
MRSA (738)	0(0.0)	0(0.0)	3(0.4)	18(2.9)	478(67.6)	230(98.8)	9(100.0)
<i>S. pneumoniae</i> (956)	669(70.0)	69(77.2)	131(90.9)	841(99.4)	6(100.0)		
Penicillin-R (222)	0(0.0)	12(5.4)	123(60.8)	81(216)	6(100.0)		
Ceftriaxone-non-S (124)	2(1.6)	0(1.6)	38(32.3)	118(95.1)	6(100.0)		
β-haemolytic strep. (360)	360(100.0)	-	-	-	-	-	-
CoNS (172)	1(0.6)	49(29.1)	26(44.2)	56(76.7)	36(96.7)	3(99.4)	1(100.0)
<i>E. faecalis</i> (132)	0(0.0)	0(0.0)	0(0.0)	2(1.5)	5(5.3)	26(25.0)	65(74.2)
Viridans group strep. (63)	57(90.5)	5(98.4)	1(100.0)	-	-	-	-
<i>H. influenzae</i> (389)	367(94.3)	16(98.5)	4(99.5)	1(99.7)	1(100.0)	-	-
β-lactamase-neg. (283)	281(99.3)	2(100.0)	-	-	-	-	-
β-lactamase-pos. (106)	86(81.1)	14(94.3)	4(98.1)	1(99.1)	1(100.0)	-	-
<i>H. parainfluenzae</i> (56)	50(89.3)	0(89.3)	3(94.6)	1(96.4)	0(96.4)	2(100.0)	-
<i>M. catarrhalis</i> (63)	23(36.5)	18(65.1)	16(90.5)	5(98.4)	1(100.0)	-	-