**Efficacy and Safety of Omadacycline in Patients With Acute Bacterial Skin and Skin Structure Infections (ABSSSI) and High Body Mass Index or Diabetes: A Subgroup Analysis From the OASIS Trial**

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**BACKGROUND**

- The incidence and severity of acute bacterial skin and skin structure infections (ABSSSI) have increased in recent years, imposing a substantial burden on the healthcare system. ABSSSI include cellulitis, wounds, eczematous infections, and infections in patients with diabetes mellitus or obesity.
- The risk of any antibacterial agent, including beta-lactams, aminoglycosides, and glycopeptides, is increased in obese patients, and dosing adjustments are suggested for this population.

**METHODS**

- OASIS-1 was a randomized (1:1), double-blind, active comparator-controlled, phase 3 study comparing OMC with LZD for the treatment of adults with ABSSSI with comparable safety in the general population.
- Patients randomized to OMC treatment were administered OMC 100 mg IV q12h or Oral OMC demonstrated non-inferiority to 1 dose of OMC or LZD, and overall clinical response was not indeterminate at PTE.
- There were very few severe or serious TEAEs and no drug-related serious TEAEs.
- Within the high BMI group, overweight patients had a higher ECR rate with LZD and obese patients had a higher ECR rate with OMC.

**RESULTS**

- Clinical success at PTE in (≥)17 population and ≥18 population.
- Pathogens from OASIS-1 were classified on the basis of BMI and medical history of diabetes mellitus.
- Baseline infections in normal BMI, high BMI, and diabetic subgroups.
- Baseline infections did not differ significantly between the normal BMI and high BMI subgroups. For example, S. aureus was the most common bloodstream pathogen in both patient groups.

**REFERENCES**

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