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Abstract

Background: Omadacycline is the first aminomethylcycline in late stage clinical development for acute bacterial skin and skin structure infection (ABSSSI) as oncedaily oral and IV formulations. In vitro bacterial activities against a collection of resistant S. aureus were investigated.

Materials/methods: The *in vitro* activity of omadacycline (OMC) was compared with that of doxycycline (DO), tigecycline (TI), linezolid (LI), ceftaroline (CE), levofloxacin (LE), moxifloxacin (MO), telithromycin (TE), azithromycin (AZ) and erythromycin (ER) against a total of 239 resistant S. aureus, by microdilution procedures (CLSI, M7-A12, M100-S25). The tested strains included S. aureus that were methicillin-resistant (mecA (150)), macrolide-resistant (*erm*A, B or C (50)) and ciprofloxacin-resistant (*gyr*A and *par*C

Results: Against methicillin-resistant (*mec*A genotype) S. aureus, the MIC of **OMC** ranged from 0.016 to 0.25 mg/L and **OMC** (MIC_{∞} 0.25 mg/L) and TE (MIC_{∞} 0.12 mg/L) were more active than TI (MIC₉₀ 0.5 mg/L), DO (MIC₉₀ 1 mg/L), CE (MIC₉₀ 1 mg/L), LI (MIC_{on} 2 mg/L), MO (MIC_{on} 4 mg/L), LE (MIC90 \geq 16 mg/L), AZ (MIC_{on} \geq 16 mg/L) and ER (MIC₀₀ \geq 16 mg/L). **OMC** (MIC₀₀ 0.25 mg/L) showed higher activity than TI (MIC₀₀ 0.5 mg/L), DO (MIC_{oo} 1 mg/L), CE (MIC_{oo} 1 mg/L), LI (MIC_{oo} 2 mg/L), MO (MIC_{oo} 4 mg/L), LE (MIC₉₀ 4 mg/L), TE (MIC₉₀ 4 mg/L), AZ (MIC₉₀ \geq 16 mg/L) and ER (MIC₉₀ \geq 16 mg/L) against macrolide-resistant (ermA, B, C genotype) S. aureus. Against ciprofloxacinresistant (gyrA and parC genotype) S. aureus, the MIC of OMC ranged from 0.06 to 0.25 mg/L and AZ (MIC₉₀ ≥16 mg/L), ER (MIC₉₀ ≥16 mg/L), LE (MIC₉₀ ≥16 mg/L), LI (MIC₉₀ 4 mg/L), CE (MIC_{an} 1 mg/L) and DO (MIC_{an} 1 mg/L) were less active than OMC (MIC_{an} 0.25 mg/L), TE (MIC₀₀ 0.25 mg/L) and TI (MIC_{<math>00} 0.5 mg/L).</sub></sub>

Conclusions: The results of this study suggest that **OMC** may have use in infections caused by resistant S. aureus and highlights the potential utility of this oral and IV agent for the treatment of ABSSSI.

Introduction

Staphylococcus aureus is a frequent cause of serious bacterial infections worldwide. Acute bacterial skin and skin structure infections (ABSSSI) have increased in recent years, and S. aureus is the most frequent bacteria accounting for 45% of pathogens isolated from infectious sites. **Omadacycline** is the first aminomethylcycline to be developed as a once daily, oral and IV treatment of ABSSSI and Community-Acquired Bacterial Pneumonia (CABP). The Phase 3 development program has now been completed for these indications. **Omadacycline** has excellent activity against the primary pathogens associated with ABSSSI and CABP, including antibiotic resistant organisms, including S. aureus, β-hemolytic streptococci, S. pneumoniae, H. influenzae, Legionella and C. pneumoniae.

Objective

The goal of this study was to investigate the in vitro activity of **omadacycline** against resistant Staphylococcus aureus. We determined the minimum inhibitory concentration (MIC) of **omadacycline** and comparators (doxycycline, tigecycline, linezolid, ceftaroline, levofloxacin, moxifloxacin, telithromycin, azithromycin and erythromycin) against 239 resistant S. aureus including methicillin-resistant (mecA group), macrolide-resistant (*erm*A, B or C group) and ciprofloxacin-resistant (*gyr*A and *par*C group) strains, isolated from respiratory tract or blood cultures sources.

In Vitro Activity of Omadacycline Against resistant Staphylococcus aureus

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Materials and Methods

Strains: A total of 239 resistant strains of S. aureus including: methicillin-resistant (mecA group (150)), macrolide-resistant (ermA, B or C group (50)) and ciprofloxacinresistant (gyrA and parC group (39)) strains. Strains were collected mostly from respiratory tract or blood cultures sources, from 1995 to present and were identified by standard methods such as described by Versalovic et al¹. Genomic DNA was isolated⁴ and multiplex PCR were performed with primers specific for mec A, erm A, erm B and erm C⁵ or for gyrA and parC⁶.

Determination of MICs

MICs were determined using the CLSI broth medium microdilution method^{2,3} using microdilution plating of the organisms onto a series of broth medium microplates of increasing concentrations from 0.004 mg/L to 16 mg/L. Cation supplemented Mueller-Hinton broth medium (M-H) supplemented by 2% NaCl was used as broth medium against S. aureus strains. S. aureus ATCC 29213 was included as quality control strain.

Results

Table 1 Susceptibility of resistant Staphylococcus aureus

		MIC (mg/L)						
Organism (no. tested)	Antibiotic	Range	50%	90%				
Staphylococcus aureus all tested	Omadacycline	0.016-1	0.25	0.25				
resistant strains (239 strains)	Doxycycline	0.06-≥16	0.5	1				
	Tigecycline	0.25-2	0.5	0.5				
	Linezolid	0.5-4	1	2				
	Ceftaroline	0.06-2	0.5	2				
	Levofloxacin	0.5-≥16	4	≥16				
	Moxifloxacin	0.25-≥16	4	≥16				
	Telithromycin	0.016-≥16	0.12	4				
	Azithromycin	0.016-≥16	2	≥16				
	Erythromycin	0.06-≥16	2	≥16				
<i>Staphylococcus aureus</i> Methicillin- resistant (mec A genotype group) (150 strains)	Omadacycline	0.16-1	0.25	0.25				
	Doxycycline	0.06-≥16	0.5	1				
	Tigecycline	0.25-2	0.5	0.5				
	Linezolid	0.5-4	1	2				
	Ceftaroline	0.06-2	0.05	1				
	Levofloxacin	1-≥16	4	≥16				
	Moxifloxacin	0.25-≥16	2	4				
	Telithromycin	0.016-≥16	0.06	0.12				
	Azithromycin	1-≥16	2	≥16				
	Erythromycin	0.5-≥16	1	≥16				
<i>Staphylococcus aureus</i> Macrolide- resistant (erm A,B,C genotype group) (50 strains)	Omadacycline	0.06-0.25	0.25	0.25				
	Doxycycline	0.25-1	1	1				
	Tigecycline	0.25-1	0.5	0.5				
	Linezolid	14	2	2				
	Ceftaroline	0.12-2	1	1				
	Levofloxacin	0.5-4	2	4				
	Moxifloxacin	0.25-4	1	4				
	Telithromycin	0.12-≥16	2	4				
	Azithromycin	4-≥16	≥16	≥16				
	Erythromycin	8-≥16	≥16	≥16				
Staphylococcus aureus Ciprofloxacin- Resistant (gyrA & parC genotype group) (39 strains)	Omadacycline	0.06-0.25	0.25	0.25				
	Doxycycline	0.5-1	1	1				
	Tigecycline	0.25-0.5	0.5	0.5				
	Linezolid	14	2	4				
	Ceftaroline	0.06-1	0.5	1				
	Levofloxacin	8-≥16	≥16	≥16				
	Moxifloxacin	4-≥16	≥16	≥16				
	Telithromycin	0.016-4	0.06	0.25				
	Azithromycin	0.016-≥16	0.12	≥16				
	Erythromycin	0.12-≥16	1	≥16				

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Results continued

Table 2 Frequency MIC distribution of omadacycline and comparators against Staphylococcus aureus

Organism	Antibiotic	Number of Strain(s) susceptible to MIC = mg/L											
(no. tested)		≤0.008	0.016	0.03	0.06	0.12	0.25	0.5	1	2	4	8	≥16
<i>Staphylococcus aureus</i> all tested resistant strains (239 strains)	Omadacycline Doxycycline Tigecycline Linezolid Ceftaroline Levofloxacin Moxifloxacin		1	1	24 1 5	36 8	165 12 26 11 21	6 142 201 2 133 3 53	6 78 96 77 22 46	6 128 5 75 62	13 81 11	2 3 1	4 55 45
	Azithromycin Erythromycin		7 3	36	77 3 1	57 11 2	4 2 4	4 0 54	11 30 77	12 85	23 12 3	3 8 3	5 82 95
<i>Staphylococcus aureus</i> Methicillin- resistant (mec A group) (150 strains)	Omadacycline Doxycycline Tigecycline Linezolid Ceftaroline		1	1	13 1 2	17 5	106 10 9 1	6 96 130 2 106	6 37 5 85 33	6 56 3	7	2	4
	Levofloxacin Moxifloxacin Telithromycin Azithromycin Erythromycin		5	19	61	52	14 2	36 2	1 24 1 30 71	54 58 2 77	76 10 1 6 3	2 1 1	17 7 4 37 33
<i>Staphylococcus aureus</i> Macrolide- resistant (erm A,B,C group) (50 strains)	Omadacycline Doxycycline Tigecycline Linezolid Ceftaroline Levofloxacin Moxifloxacin Telithromycin				3	10 1	37 2 9 1 7 2	37 40 6 3 17 2	11 1 6 40 21 22 10	41 2 21 4 10	3 5 22	2	1
	Azithromycin Erythromycin										4	8 2	38 48
Staphylococcus aureus Ciprofloxacin- Resistant (gyrA & parC group) (39 strains)	Omadacycline Doxycycline Tigecycline Linezolid				8	9	22 8	9 31	30 5	31	3		
	Ceftaroline Levofloxacin Moxifloxacin Telithromycin		2	17	3 16	2	9	21	4		1	1	38 38
	Azithromycin Erythromycin		3	3	3 1	11 2	2 4	12	6	8	2		7 14

Discussion

- **Omadacycline** exhibits *in vitro* activity against resistant strains of *S. aureus*.
- Omadacycline demonstrated more consistent activity than other older tetracyclines, ketolides, macrolides, quinolones, oxazolidinone or third generation cephalosporins.
- Against all resistant strains of S. aureus, the activity of **omadacycline** (MIC_{∞} = 0.25 mg/L) was more potent than other tested antibiotics.
- 95% (227/239) of the tested S. aureus were inhibited by a concentration of **≤0.25** mg/L of omadacycline compared to respectively 76%, 10%, 10% and 5% inhibition in the case of telithromycin, tigecycline, ceftaroline and doxycycline.

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Discussion

- MIC₀₀ of **0.25 mg/L** was obtained against methicillin-resistant *S. aureus* (*mecA*) genotype group) with omadacycline that was comparable to tigecycline and more potent than doxycycline, ceftaroline, linezolid and moxifloxacin.
- 138 strains (92%), 139 strains (93%), 11 strains (7%), 9 strains (6%) and 8 strains (5%), showed a MIC **≤0.25 mg/L** to respectively **omadacycline**, telithromycin, doxycycline, tigecycline and ceftaroline.
- Against macrolide-resistant S. aureus (ermA, B, C genotype group) strains, omadacycline (MIC_{on} = 0.25 mg/L) was the most active agent and was more active than doxycycline, ceftaroline, linezolid, levofloxacin, moxifloxacin, telithromycin, azithromycin and erythromycin.
- MIC of ≤0.25 mg/L to omadacycline was obtained by 50 strains (100%) compared to respectively 9 strains (18%), 2 strains (4%) and 2 strains (4%) in the case of moxifloxacin, ceftaroline and tigecycline.
- Against ciprofloxacin-resistant S. aureus (gyrA and parC genotype group), MIC_{on} for omadacycline (0.25 mg/L) remained lower than doxycycline, ceftaroline and linezolid, and was comparable to telithromycin and tigecycline.
- $MIC_{00} \ge 16 \text{ mg/L}$ was observed with levofloxacin, moxifloxacin, azithromycin, and erythromycin.

Conclusion

Based on the *in vitro* results of this study, **omadacycline** exhibits potent *in vitro* activity against resistant S. aureus (MRSA and macrolide- or ciprofloxacin-resistant) and these results support completed clinical studies as a antimicrobial agent for the treatment of ABSSSI and CABP caused by S. aureus MRSA.

Acknowledgments

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