**Methods**

**1. Clinical Evaluation (CE):** all ITT patients who received study drug, with no impact of increasing BMI on clinical success of OMC (Table 3), with no impact of increasing BMI on clinical success of OMC (Table 3).

**2. Safety and Efficacy:** safety and efficacy were determined in a randomized, double-blind, active comparator controlled, Phase 3 study comparing OMC with MOX for the treatment of adults with CABP (Fig. 1).

**Results**

**1. Approximately two-thirds of patients included were overweight (34.3% OMC; 34.8% MOX) or obese (27.2% OMC; 27.8% MOX).**

**2. Clinical Success at ECR:** clinical success was determined by resolution of signs and symptoms to normal at baseline, with no impact of increasing BMI on clinical success of OMC (Fig. 2).

**3. Percentages for obese subgroups are represented as a proportion of the total treatment group.**

**4. TEAEs were lower with OMC (7.7%-12.3%) than MOX (17.6%-20.0%), with no impact of increasing BMI on clinical success of OMC (Table 3).**

**Conclusions**

**1. OMC is an aminomethylcycline antibiotic in the tetracycline class recently approved in the USA to treat Community- acquired bacterial pneumonia (CABP).**

**2. OMC is associated with similar efficacy and safety profiles across all body sizes when compared to moxifloxacin in a clinical study of CABP.**

**References**

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