

Antimicrobial Activity of PZ-601 (SMP-601) Tested Against Selected Wildtype and Resistant Collections of Targeted Species (USA and Europe)

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Abstract
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Abstract

Background: PZ-601 (SMP-601) is a novel parenteral carbapenem (CARB) with a broad spectrum of activity against MRSA, some VRE and many species of Enterobacteriaceae (ENT). The purpose of this study was to establish PZ-601 wildtype (WT) MIC distributions for *S. aureus* (SA), *E. coli* (EC), *K. pneumoniae* (KPN), *K. oxytoca* (KOXY) as well as potency against resistant (R) subsets.

Methods: 1,500 WT organism strains (4 species) from Europe (EU) and USA were tested by reference broth microdilution method against PZ-601 and 24 comparator drugs according to the CLSI M7-A7 (2006) method. An additional 60 R subset strains of CARB-R ENT (serine and metallo enzymes [MBL]), VISA, VRSA, linezolid (LZD)-R and CA-MRSA were compared to WT MIC results.

Results:

Strains	Cum. % inhibited at PZ-601 MIC (µg/ml):						No. tested
	≤0.06	0.12	0.25	0.5	1	2	
MRSA-USA	2	10	40 ^a	59	81	99	100
MRSA-EU	6	19	39	54	81	98	99
CA-MRSA	0	0	100	-	-	-	10
VISA, VRSA	0	0	100	-	-	-	10
LZD-R SA	20	40	60	70	100	-	10
EC	2	20	74	95	98	99	100
KPN	1	28	82	94	98	99	100
KOXY	2	56	79	90	95	98	100

a. Underlined value is modal MIC

WT PZ601 MIC distributions for MRSA were bimodal (0.25 and 1 µg/ml) with different predominant modes for USA (0.25 µg/ml) and EU (1 µg/ml). CA-MRSA USA300 strains had PZ-601 MIC results at 0.25 µg/ml with VISA and VRSA isolates all inhibited at ≤2 µg/ml (see Table). LZD-R did not effect PZ-601 susceptibility. All ENT species tested had a PZ-601 MIC₅₀ at 0.5 µg/ml, highest MIC at 4 µg/ml. ENT strains producing serine carbapenemases or MBLs (KPC-2 and 3, Nmc-A, SME-2, VIM-1, IMP-1, from 8 species and 6 nations) had non-WT PZ-601 MIC values at ≥16 µg/ml.

Conclusions: PZ-601 was very active against WT MRSA isolated in the USA and EU. PZ-601 was also active against VISA, VRSA, CA-MRSA and LZD-R staphylococci. WT EC, KPN and KOXY strains were very PZ-601-S (MIC₅₀ 0.12-0.25 µg/ml), equally potent compared to imipenem. PZ-601 results demonstrate a promising spectrum of activity against targeted WT MRSA and key ENT species on two continents.

Introduction

The emergence of bacterial resistance against many commonly used antimicrobials has created a serious therapeutic concern and resulted in increased utilization of carbapenems for Gram-negative pathogens and vancomycin, daptomycin and linezolid for Gram-positive infecting organisms. The increased resistance has also created a need to produce new antimicrobial options especially agents stable to various emerging β-lactamases (extended spectrum β-lactamases; ESBL). PZ-601 (formerly SMP-601) is a novel parenteral carbapenem with a broad spectrum of activity against methicillin-resistant *Staphylococcus aureus* (MRSA), some vancomycin-resistant enterococci (VRE) and many species of Enterobacteriaceae. PZ-601 has a history of increased activity against MRSA and enterococci compared to existing carbapenems.

The purpose of this study was to establish the PZ-601 MIC distribution for wildtype (WT) *S. aureus*, *Escherichia coli*, *Klebsiella pneumoniae*, and *Klebsiella oxytoca* strains from both North America (United States; USA) and Europe, as well as potency against specific PZ-601-resistant subsets.

Materials and Methods

Bacterial Isolates. A total of 1560 non-duplicate strains were selected to represent a susceptible, WT set of isolates to produce a MIC distribution for PZ-601. Strains were identified as not having unusual resistance patterns to comparable carbapenem agents such as imipenem (examples: metallo β-lactamases, serine carbapenemases, hyper-producing Amp-C enzymes associated with porin alterations, etc.). The WT isolate distribution included MRSA (500), *E. coli* (500), *K. pneumoniae* (400), and *K. oxytoca* (100), with sufficient sample size to assure high confidence (Ordway ICPD, 2007).

The resistance subsets consisted of metallo β-lactamase producing Enterobacteriaceae (IMP-, VIM-series); serine β-lactamase-producing Enterobacteriaceae (KPC-, SME-, NmcA- types); 20, MRSA exhibiting elevated vancomycin results (VISA, hVISA, and VRSA); 10, staphylococci with linezolid resistance (10), and community-acquired MRSA (CA-MRSA) clone USA300-0114 and variants (10). Isolates originated from Europe and North America and were cultured in 2005-2006.

Susceptibility Test Methods. Isolates were tested by the reference broth microdilution method according to the Clinical and Laboratory Standards Institute (CLSI; formerly the NCCLS) M7-A7 (2006) standard against PZ-601 and 24 comparator antimicrobial drugs depending on the Gram's identification. Interpretive criteria for comparison agents were those published in the current M100-S17 (2007) document. Quality control (QC) applied recently determined PZ-601 ranges, published by an acceptable M23-A2 protocol design (CLSI Agenda Book, January 2007). Concurrently tested comparator agents had all QC results within published (M100-S17, 2007) ranges.

Results

•PZ-601 MIC distributions for all nine tested organism groups are shown in Table 1. PZ-601 had bimodal MICs of 0.25 and 1 µg/ml with a MIC₅₀ of 2 µg/ml against all staphylococci.

•Geographical analysis (Figure 1) showed that the two predominant modes for staphylococci were different for the USA (0.25 µg/ml) and Europe (1 µg/ml). CA-MRSA USA 300 strains had PZ-601 MIC results at 0.25 µg/ml which coincides with the modal MIC for all USA WT strains. The highest, reproducible MIC was observed in a WT European *S. aureus* isolate (16 µg/ml).

•All VISA and VRSA isolates were inhibited at ≤2 µg/ml of PZ-601, and linezolid resistance also did not affect PZ-601 susceptibility.

•The comparative activity of PZ-601 and 19 other agents tested against the MRSA is shown in Table 2. PZ-601 was at least four-fold more potent than imipenem against MRSA and showed similar activity to that of vancomycin.

•The WT *E. coli* and *Klebsiella* spp. strains were highly PZ-601-susceptible (MIC_{50/90}, 0.25/0.5 µg/ml) with the most elevated value at 4 µg/ml. Only the documented carbapenemase-producing enteric bacilli had PZ-601 MIC values at ≥4 µg/ml (Table 1).

•Enterobacteriaceae strains producing serine carbapenemases or MBLs (KPC-2 and 3, Nmc-A, SME-2, VIM-1, IMP-1; from 8 species and 6 nations) had non-WT PZ-601 MIC results at ≥16 µg/ml, clearly resistant.

•The activity of PZ-601 and 16 comparator drugs against WT *E. coli* is shown in Table 2. Imipenem was two-fold more active than PZ-601 against both *E. coli* and *Klebsiella* species (not shown).

Results

Table 1. MIC distributions of PZ-601 tested against nine groups of Gram-positive and Gram-negative bacteria (Europe and USA, 2006).

Organism group (no. tested) ^a	Occurrences at MIC (µg/ml):											
	≤0.015	0.03	0.06	0.12	0.25	0.5	1	2	4	8	16	>32
<i>S. aureus</i>												
MRSA (500)	6	6	7	52	127	86	120	91	4	0	1	0
CA-MRSA (10)	0	0	0	0	100	0	0	0	0	0	0	0
VISA, VRSA (10)	0	0	0	0	1	1	3	5	0	0	0	0
Linezolid-resistant (10)	1	0	1	2	2	1	3	0	0	0	0	0
<i>E. coli</i> (500)	0	1	10	87	274	101	17	7	3	0	0	0
<i>K. pneumoniae</i> (500)	0	0	4	138	297	35	17	8	1	0	0	0
<i>K. oxytoca</i> (100)	0	0	2	54	23	11	5	3	2	0	0	0
Carbapenemase producers												
Serine-types (20) ^b	0	0	0	0	0	0	0	0	0	1	1	18
Metallo-types (10) ^c	0	0	0	0	0	0	0	0	0	0	2	6

MRSA = multiple methicillin-resistant *S. aureus*, CA-MRSA = community-acquired MRSA (USA300), VISA = vancomycin-intermediate *S. aureus*, VRSA = vancomycin-resistant *S. aureus*.
Includes: *C. freundii* (2), *E. cloacae* (3), *E. coli* (2), *K. oxytoca* (4), *K. pneumoniae* (5) and *S. marcescens* (4).
^bIncludes: *C. cloacae* (4), *K. pneumoniae* (3), and one strain each of *E. aerogenes*, *P. mirabilis* and *S. marcescens*.

Table 2. Activity of PZ-601 and selected antimicrobial agents tested against MRSA and *E. coli* (500 strains each).

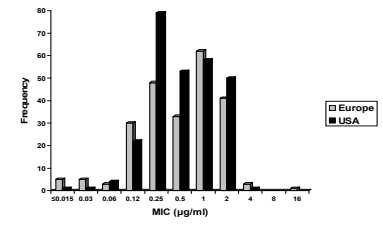
Organism (no. tested)/Antimicrobial agent	MIC ₅₀	MIC ₉₀	Range	% susceptible/resistant ^a
MRSA (500)				
PZ-601	0.5	2	≤0.015-16	-/-
Imipenem ^b	2	>32	≤0.03-32	56.2 / 37.6
Cefepime ^c	16	>16	0.25-16	43.4 / 40.0
Ceftazidime ^d	>16	>16	8-16	2.2 / 76.0
Ceftriaxone ^e	>32	>32	2-32	4.8 / 52.2
Ciprofloxacin	>4	>4	0.05-4	15.0 / 84.4
Clindamycin	≤0.25	>2	≤0.25-2	59.6 / 40.0
Daptomycin	0.25	0.5	0.12-2	99.8 / -
Ertapenem ^f	>1	>1	≤0.25-1	84.2 / 14.4
Erythromycin	>2	>2	≤0.25-2	19.8 / 1.8
Gentamicin	≤2	>8	≤2-8	86.4 / 13.2
Linezolid ^g	2	2	0.25-2	100.0 / -
Amoxicillin ^h	>16	>16	>1-16	0.0 / 100.0
Oxacillin ⁱ	>2	>2	>2	0.0 / 100.0
Piperacillin-tazobactam ^j	32	>64	2-64	18.8 / 81.2
Quinsipristin-dalfopristin	≤0.5	>2	≤0.25-2	99.4 / 0.6
Rifampin	≤0.25	>1	≤0.25-2	88.9 / 11.1
Tetracycline	≤2	>8	≤2-8	87.8 / 10.8
Trimethoprim-sulfamethoxazole	≤0.5	>5	≤0.5-2	95.8 / 4.2
Vancomycin	1	1	0.25-2	100.0 / 0.0
<i>E. coli</i> (500)				
PZ-601	0.25	0.5	0.03-4	-/-
Imipenem	0.12	0.25	0.06-1	100.0 / 0.0
Amoxicillin-clavulanic acid	8	16	>1-16	84.0 / 4.2
Ampicillin	>16	>16	>1-16	48.8 / 50.4
Cefazolin	≤2	8	≤2-16	92.2 / 4.6
Cefepime	≤0.12	≤0.12	≤0.12-16	99.4 / 0.4
Cefotaxime	≤2	8	≤2-16	95.2 / 0.8
Ceftazidime	≤1	≤1	>1-16	99.2 / 0.6 (1.2) ^k
Ceftriaxone	≤0.25	≤0.25	≤0.25-32	99.4 / 0.6 (0.8) ^k
Ciprofloxacin	≤0.03	>4	≤0.03-4	78.4 / 21.6
Ertapenem	≤0.06	0.06	0.06-0.25	100.0 / 0.0
Gentamicin	≤2	≤2	≤2-8	93.0 / 6.6
Meropenem	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0
Piperacillin-tazobactam	>1	4	>0.5-64	95.2 / 2.2
Polymyxin B	≤0.5	≤0.5	≤0.5-10	100.0 / 0.0
Tetracycline	≤2	>8	≤2-8	71.0 / 28.5
Trimethoprim-sulfamethoxazole	≤0.5	>2	>0.5-2	70.4 / 29.6

^a Criteria as published by the CLSI (2007). β-lactam susceptibility should be directed by the oxacillin test results.

^k Percentage of isolates with ESBL phenotypes (CLSI, M100-S17 (2007))

Results

Figure 1. MRSA MIC distributions for PZ-601 comparing USA and European isolates.



Conclusions

•PZ-601 was very active against WT MRSA in both the USA and Europe. A bimodal MIC population was discovered between the USA (0.25 µg/ml) and Europe (1 µg/ml). PZ-601 was also active against VISA, VRSA, CA-MRSA and linezolid-resistant staphylococci.

•WT *E. coli* (500 strains), *K. pneumoniae* (400 strains) and *K. oxytoca* (100 strains) isolated in Europe and the USA were all susceptible to PZ-601 at ≤4 µg/ml (99.4% inhibited at ≤2 µg/ml).

•Carbapenemases (serine- or metallo-types) in Enterobacteriaceae were associated with markedly elevated PZ-601 MIC results (≥16 µg/ml), approximately two-fold greater than the highest PZ-601 MIC detected in the WT distribution.

•PZ-601 results show a promising spectrum of activity against contemporary WT MRSA and key species members of the Enterobacteriaceae. These results can be valuable for the determination of optimal dosing via PK/PD target attainment models.

References Cited

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