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# Activity of Ceftobiprole (BPR) Tested Against Gram-Positive and -Negative Pathogens in the Asia-Pacific Region: Report From the **SENTRY Antimicrobial Surveillance Program (2006)**

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## **Updated Abstract**

**Background**: Ceftobiprole, an investigational, parenteral cephalosporin with broad activity against Gram-negative and -positive pathogens including oxacillin-resistant staphylococci, is currently in clinical trials for skin and skin structure infections and pneumonia. We evaluated the activity of ceftobiprole against pathogens, including resistant subsets, originating from the Asia-Pacific region (SENTRY Program, 2006).

**Methods**: Clinically significant patient isolates (N=7531) of staphylococci, streptococci, enterococci, Enterobacteriaceae, and nonfermentative Gram-negative bacilli except *Pseudomonas* spp. were submitted from 42 medical centres in 10 countries. Identifications were confirmed by the regional monitor and tested using validated broth microdilution panels according to CLSI methods.

Results: Ceftobiprole showed high-level activity against staphylococci regardless of oxacillin resistance, streptococci, *Enterococcus faecalis*, and extended-spectrum  $\beta$ -lactamase (ESBL)-negative Escherichia coli, and Klebsiella spp. Its activity was affected by ESBLs and some carbapenemases. Like other cephalosporins, ceftobiprole MICs were elevated in strains of Streptococcus pneumoniae with altered PBPs, but retained useful activity.

Conclusions: Ceftobiprole displayed potent activity against major pathogens from 10 countries in the Asia-Pacific region, including those countries with high resistance rates among key pathogens. Ceftobiprole would particularly be a welcome addition for therapy of MRSA infections in this region.

## Introduction

Ceftobiprole is a novel investigational, broad-spectrum cephalosporin, especially noted for its activity against Gram-positive species with altered penicillin-binding proteins, particularly methicillin-resistant Staphylococcus aureus (MRSA). The rates of MRSA and related resistances in the Asia-Pacific region are known to be high in many of its countries. We evaluated the activity of ceftobiprole against recognized Gram-negative and Gram-positive pathogens, including resistant subsets, originating from the Asia-Pacific region (SENTRY Program, 2006).

## Methods

#### **Bacterial Isolates**

• Nonduplicate clinically significant patient isolates were submitted from 42 medical centres in 10 countries (Australia, 5 sites; China 11; Thailand 2; Korea 3; Taiwan 2; Hong Kong 1; Singapore 1; Philippines 2; India 11; Indonesia 4)

- Gram-positive isolates included *S. aureus* (n=1678); coagulasenegative staphylococci (CoNS) (n=396); Streptococcus pneumoniae (n=256); Enterococcus faecalis (n=379), and E. faecium (n=264)
- Gram-negative isolates included *Escherichia coli* (n=918); *Klebsiella* species (n=906); *Pseudomonas* species (n=754); *Acinetobacter* species (n=546); and *Enterobacter* species (n=360).
- Identification of all isolates was confirmed in a central laboratory (Women's and Children's Hospital, Adelaide, Australia) using reference methodologies (1, 2).

### **Susceptibility Tests**

- Isolates were tested against ceftobiprole using validated dry-form broth microdilution MIC panels (TREK Diagnostic Systems) according to reference Clinical and Laboratory Standards Institute (CLSI) methods (2006) and interpretive criteria (2006).
- MIC tests were performed in cation-adjusted Mueller-Hinton broth (with the addition of 2–5% lysed horse blood for testing of streptococci).
- Quality control strains utilized included E. coli ATCC 25922 and 35218, P. aeruginosa ATCC 27853, S. aureus ATCC 29213, and S. pneumoniae ATCC 49619; all MIC results were within CLSI specified ranges.

### Analysis

- Data were analysed for MIC<sub>50</sub> and MIC<sub>60</sub>.
- Analyses were performed by species and specific subsets.
- Enterobacteriaceae with elevated MIC values ( $\geq 2 \mu g/ml$ ) for ceftazidime and/or ceftriaxone and/or aztreonam were considered as extended-spectrum  $\beta$ -lactamase (ESBL)-producing phenotypes.
- Acinetobacter species, and Pseudomonas species with imipenem or meropenem MIC  $\ge 8 \mu g/ml$ ; and Enterobacteriaceae with imipenem or meropenem MIC  $\geq 2 \mu g/ml$ , were screened for metallo- $\beta$ -lactamase (MBL) enzymes and OXA-23, -24, -51, and -58 enzymes.
- Enterobacteriaceae with ertapenem MIC  $\geq 1 \mu g/mI$  were screened for KPC-type carbapenemases.

## Results

- Ceftobiprole inhibited all tested staphylococci at MICs  $\leq 4 \mu g/ml$ , with the exception of 2 coagulase-negative staphylococci from India which had reproducible ceftobiprole MIC values of 8 µg/ml (**Table 1**).
- The MIC<sub>oo</sub> for oxacillin-resistant strains when compared to susceptible strains were 4- and 16-fold higher for *S. aureus* and coagulase-negative staphylococci, respectively.
- Oxacillin resistance in the Asia-Pacific region *S. aureus* was 41.8% overall. Oxacillin resistance ranged from 29% in Australia to 80% in Singapore (**Figure 1**).
- All except 5 strains (Korea n=3; China n=2) of *S. pneumoniae* were inhibited at  $\leq 1 \mu g/ml$  of ceftobiprole despite the increased rates of penicillin and ceftriaxone nonsusceptibility (37.9 and 18.8%). Ceftobiprole and ceftriaxone were 4- to 8-fold more potent against penicillin-susceptible strains compared with penicillin-resistant strains.

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able 1. Activity of ceftobiprole against Gram-positive organisms collected as part of the Asia-Pacific SENTRY Surveillance Program (2006)												
	MIC (J	Number of isolates inhibited at each MIC (µg/ml)										
rganism (no. tested)	<b>50</b> %	90%	≤0.06	0.12	0.25	0.5	1	2	4	8	>8	% ≤4 µg/ml
nterococcus faecium (264) nterococcus faecalis (379)	>8 0.5	>8 4	3	9	38	200	54	7 24	8 23	1 6	248 22 ª	5.7 92.6
aphylococcus aureus Oxacillin-susceptible (977) Oxacillin-resistant (701)	0.25 2	0.5 2	3	6	726	240 114	2 158	418	11			100.0 100.0
<i>reptococcus pneumoniae</i> Penicillin-susceptible (159) Penicillin-intermediate (24) Penicillin-resistant (73)	≤0.06 ≤0.06 0.5	≤0.06 0.25 1	159 15	4	5 7	49	12	1	3	1		100.0 100.0 98.6
oagulase-negative staphylococci Oxacillin-susceptible (57) Oxacillin-resistant (339)	0.25 1	0.25 4	5 1	21 11	31 37	70	68	27	123	2		100.0 99.4
hese strains were penicillin-resistant. All <i>E. faecalis</i> strains were ampicillin-susceptible.												

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**Figure 1.** Oxacillin resistance among *S. aureus* (n=1678) isolates from the Asia-Pacific region.



The 4 strains with ceftobiprole MICs above 1 µg/ml all had grossly elevated penicillin and ceftriaxone MICs ( $\geq 4$  and  $\geq 8 \mu g/ml$ , respectively) compared to the ceftobiprole MICs of 2 and 4 µg/ml.

• ESBLs are quite prevalent in many countries in the Asia-Pacific region (Figure 2). Ceftobiprole was very active against ESBL-negative strains but was inactivated by most ESBLs in *E. coli, Klebsiella* species, and Proteus mirabilis (Table 2).

• Salmonella species, including the invasive Typhi and Paratyphi serovars, were generally inhibited by ceftobiprole at MICs <0.12 µg/ml (**Table 2**). One strain from Thailand with ceftobiprole MIC  $>8 \mu g/ml$ contained TEM- and CTX-M-group 9 ESBLs.

Figure 2. ESBL phenotypes among *E. coli* (n=918) and K. pneumoniae (n=850) isolates from the Asia-Pacific region.



- For *Enterobacter* species which possess chromosomal cephalosporinases, ceftobiprole resembles the extended-spectrum cephalosporins in being highly active against those strains whose enzymes are not de-repressed (**Table 2**).
- The activity of ceftobiprole in the absence of a confirmed metalloβ-lactamase *P. aeruginosa* was bimodal. About half of these strains were inhibited by concentrations  $\leq 4 \mu g/ml$ . A similar picture was seen with Acinetobacter baumannii (Table 3).
- Ceftobiprole had no useful activity against *Stenotrophomonas maltophilia* (**Table 3**) or *Burkholderia cepacia* complex.

#### Table 2. Activity of ceft

#### Organism (no. tested)

## No chromosomal ceph

E. coli ESBL-negative (437) ESBL-positive (481) Klebsiella species ESBL-negative (449 ESBL-positive (457) P. mirabilis ESBL-negative (92) ESBL-positive (42) Salmonella species Typhi/Paratyphi (86) Nontyphoidal (22) Citrobacter species othe

#### Chromosomal cephalos

than *C. freundii* (28)

Enterobacter species Ceftriaxone MIC ≤1 (17 Ceftriaxone MIC >1 (18 Other Proteus species (19 Morganella morganii (35) Serratia species (94) C. freundii (52)

#### Organism (no. tested)

P. aeruginosa MBL-negative (654) MBL-confirmed<sup>a</sup> (66)

- Other Pseudomonas spe
- A. baumannii Carbapenemase-negativ Carbapenemase-positive

Other Acinetobacter speci

- Stenotrophomonas malto
- class B metallo-β-lactamase detect

## Conclusions

#### References

1. CLSI. 2006. Methods for Dilution Antimicrobial Susceptibility Tests for Bacteria That Grow Aerobically M7-A7. Wayne, PA: Clinical and Laboratory Standards Institute. 2. CLSI. 2007. Performance Standards for Antimicrobial Susceptibility Testing; 17th informational supplement M100-S17. Wayne, PA: Clinical and Laboratory Standards Institute.

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biprole against Enterobacteriaceae collected as part of the Asia-Pacific SENTRY Surveillance Program (2006)											
MIC (µg/ml)		Number of isolates inhibited at each MIC (µg/ml)									
50%	90%	≤0.06	0.12	0.25	0.5	1	2	4	8	>8	% ≤4 µg/ml
es											
≤0.06 >8	≤0.06 >8	413 7	17 4	6 5	1 1	2	2		3	457	100 4.4
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≤0.06	>8	20	3							5	
≤0.06 >8 ≥8 ≤0.06 0.12 ≤0.06	≤0.06 >8 >8 >8 >8 0.25 >8	163 3 1 24 25 32	10 10 4 50	2 6 2 10	3 1 1	5 1 1	3 2 2	4	3 7 1 2	142 18 5 4 12	98.3 18.6 5.3 85.7 94.7 73.1
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**Table 3.** Activity of ceftobiprole against nonfermentative Gram-negative bacilli collected as part of the Asia-Pacific SENTRY Surveillance Program (2006)

	MIC (µg/ml)			Number of isolates inhibited at each MIC (µg/ml)									
	<b>50</b> %	<b>90</b> %	≤0.06	0.12	0.25	0.5	1	2	4	8	>8	% ≤4 µg/ml	
ies (32)	4 >8 8	>8 >8 >8	1		1	3	64	153 3	121 5	81 5	232 66 13	52.1 0.0 43.8	
′e (365) e <sup>b</sup> (149) es (32)	>8 >8 ≤0.06	>8 >8 >8	5 20	14 3	62 4	45	34 1 1	13	3	3	186 148 4	48.2 0.7 87.5	
ohilia (127)											127	0.0	
ted. <sup>b</sup> class D/B carbapenemases detected.													

• Ceftobiprole displayed potent *in-vitro* activity against major Gram-positive pathogens from the Asia-Pacific region, including resistant subsets expressing altered penicillin-binding protein targets.

• Ceftobiprole had similar potency as the extended-spectrum cephalosporins against Gram-negative bacteria.

• These characteristics warrant continued development of ceftobiprole as therapy for cSSSI and pneumonia in the region.