INTRODUCTION

• Ceftolozane is a novel 

• Ceftolozane/tazobactam exhibits greater β-lactamase stability than comparators against a broad array of β-lactamases compared with ceftazidime/tazobactam.

• Ceftolozane/tazobactam is active against most Enterobacteriaceae (93.3% susceptible, CLSI) bloodstream infection isolates, regardless of primary infection site, and Enterobacteriaceae (94.7% susceptible, CLSI) urinary tract infection isolates. [1] Among the antimicrobials tested here, ceftolozane/tazobactam was the most active β-lactam against P. aeruginosa bloodstream infection isolates, with >90% susceptibility (CLSI breakpoints) in every collected region from 2011 to 2015 as part of PACTS. [2,3] Cefepime exhibited the highest activity against Enterobacter aerogenes bloodstream infection isolates, with 98.5% susceptibility (CLSI breakpoints) in North America, Europe, and Asia-Western Pacific. [4,5]

MATERIALS AND METHODS

• Table 1. Percentage of susceptible isolates for ceftolozane/tazobactam and comparators against bloodstream isolates of the most common bloodstream isolates collected from 2011 to 2015 as part of PACTS.

• Table 2: Activity of ceftolozane/tazobactam and comparator antimicrobial agents when tested against ≥1,000 bloodstream isolates of the most common bloodstream isolates collected from 2011 to 2015 as part of PACTS. [2,3]

RESULTS

• Among the bloodstream infection isolates with a known primary infection site, urinary tract (UT) was the most common site (41.8%, 41.7%). [1] Bloodstream infection isolates, using CLSI breakpoints, ranging from 81.8% for E. coli bloodstream infection isolates (81.8% susceptible, CLSI) in North America to 98.5% for Enterobacter aerogenes bloodstream infection isolates (98.5% susceptible, CLSI) in North America, Europe, and Asia-Western Pacific. [4,5]

REFERENCES

CONCLUSIONS

• Ceftolozane/tazobactam was active against a large worldwide collection of P. aeruginosa (91% susceptible, CLSI) bloodstream infection isolates, regardless of primary infection site, collected from 2011 to 2015 as part of PACTS. [2,3]

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