

Rezafungin Activity Against Echinocandin–Nonwildtype *Candida glabrata* Clinical Isolates Collected in European countries (2014–2021)

Mariana Castanheira, Paul R Rhomberg, Lalitagauri M Deshpande, Cecilia G. Carvalhaes[‡]

Element Materials Technology (JMI Laboratories), North Liberty, Iowa, USA; [‡] New affiliation: bioMerieux, Hazelwood, Missouri, USA

Introduction

- Echinocandins are often used as first-line therapy against *C. glabrata* infections due to the high fluconazole resistance rates in this species.
- Resistance to echinocandins has been reported in *C. glabrata* isolates and is associated with mutations in hot spots (HS) regions of the Fks1- and Fks2-encoding genes
- Rezafungin is a long-acting echinocandin approved by the US FDA to treat candidemia and invasive candidiasis
- The activity of rezafungin and other echinocandins was evaluated against a collection of echinocandin–nonwildtype (NWT) *C. glabrata* isolates

Methods

- A total of 1,257 *C. glabrata* isolates were collected in 2014–2022 from 41 European hospitals from 2014–2022.
- Only 1 isolate per patient episode was included.
- All isolates were identified by MALDI-TOF MS and/or DNA sequencing.
- Isolates were tested by CLSI reference broth microdilution method (M27).
- CLSI breakpoints (M27M44S) and epidemiological cut-off values (M57S) were applied, including recently approved rezafungin breakpoints (≤ 0.5 mg/L for susceptible).
- Echinocandin-NWT isolates were submitted to FKS analysis by PCR or whole genome sequencing as previously described.

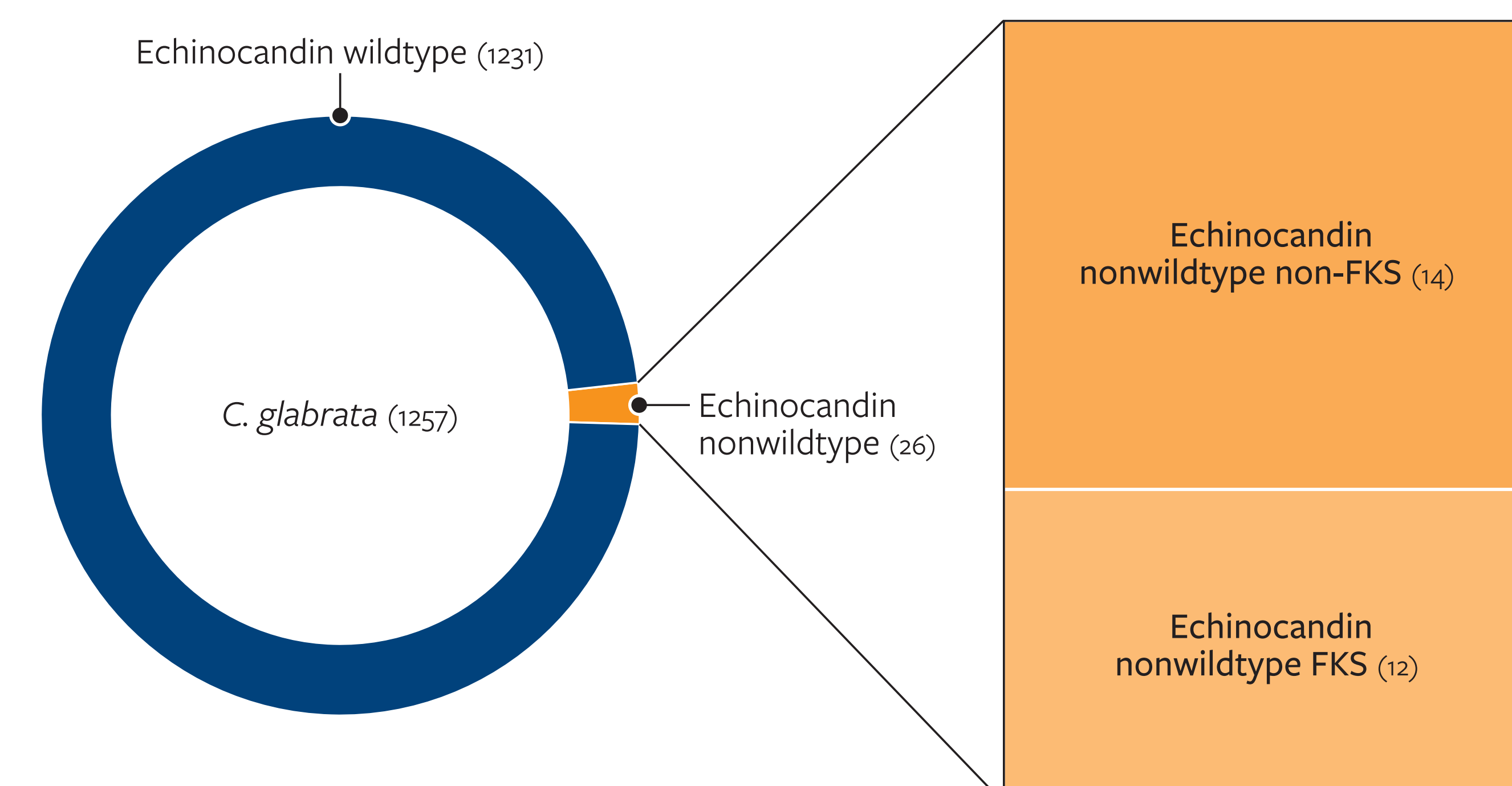
Results

- Among 1,257 *C. glabrata* isolates, 26 (2.1%) were NWT to the echinocandins (Figure 1).
- 12 NWT isolates displayed Fks alterations (46.2% of echinocandin-NWT isolates; 0.9% overall)
 - 11 isolates exhibited Fks2 HS1 alterations (7 S663F and 4 F659Y/deletion) and 1 isolate displayed a Fks1 HS1 L630Q amino acid change
- Rezafungin displayed similar activity to other echinocandins against the overall *C. glabrata* isolates, inhibiting 99.4% at ≤ 0.5 mg/L (Figure 2).
- Anidulafungin, caspofungin, and micafungin susceptibility rates were 98.0%, 98.8%, and 99.0%, respectively.
- Rezafungin was active against 73.1% of the 26 echinocandin-NWT *C. glabrata*.
- The susceptibility rates to anidulafungin, caspofungin, and micafungin were 46.2%, 65.4%, and 57.7%, respectively.
- Rezafungin was active against 41.7% of the echinocandin-NWT isolates that carried Fks alterations while anidulafungin, caspofungin, and micafungin were active against 8.3%, 25.0%, and 25.0% of these isolates.
- Against echinocandin-NWT isolates that did not carry FKS mutations (non-FKS), the activity of rezafungin, anidulafungin, caspofungin, and micafungin was 100.0%, 78.6%, 100.0%, and 85.7%, respectively.
- Fluconazole susceptibility rates ranged from 50.0% to 95.9% and was lowest among non-FKS echinocandin-NWT isolates.

Conclusions

- Rezafungin and other echinocandins demonstrated potent *in vitro* activity against *C. glabrata* isolates collected in European hospitals from 2014 to 2022.
- Rezafungin remained active against 73.1% of the most isolates of the *C. glabrata* displaying an echinocandin-NWT phenotype with or without Fks alterations.
- Rezafungin favourable PK/PD profile allow for the activity against some echinocandin-NWT phenotype with or without Fks alterations.

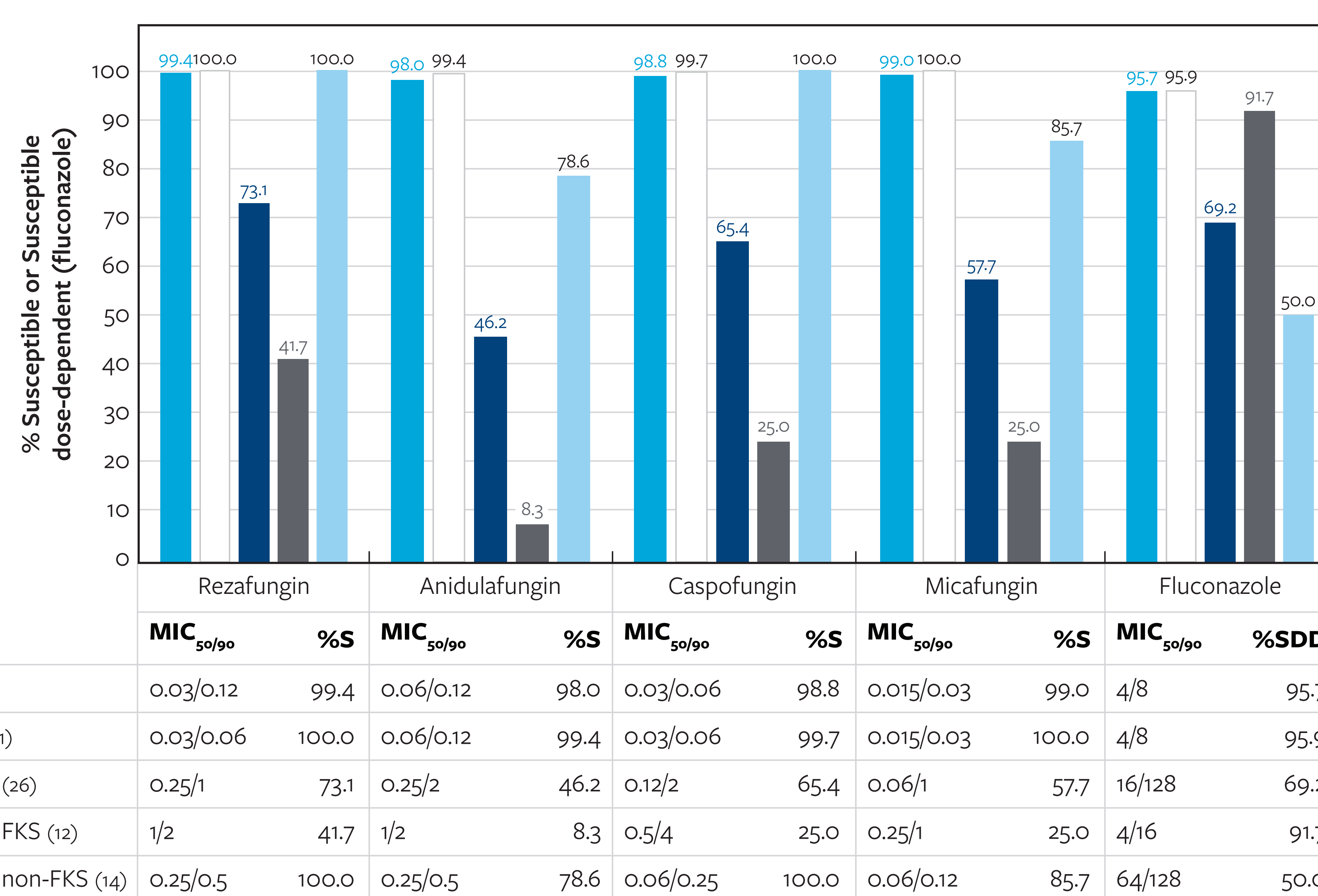
Figure 1. Echinocandin NWT and Fks alteration among *C. glabrata* isolates collected in European hospitals from 2014 to 2022



Echinocandin nonwildtype FKS (12)

Country	MIC (mg/L)					Fks alteration
	Rezafungin	Anidulafungin	Caspofungin	Micafungin	Fks alteration	
Italy	0.12	0.25	0.06	0.03		Fks1 HS1 L630Q
Hungary	1	1	1	0.5		Fks2 HS1 F659 deletion
Spain	1	1	0.25	0.25		Fks2 HS1 F659 deletion
Spain	0.5	1	0.5	0.25		Fks2 HS1 F659 deletion
Slovenia	0.5	1	0.25	0.06		Fks2 HS1 F659Y
France	1	2	0.5	0.5		Fks2 HS1 S663P
Ireland	2	4	2	0.5		Fks2 HS1 S663P
Ireland	0.25	0.5	0.12	0.12		Fks2 HS1 S663P
Ireland	0.06	0.12	0.12	0.06		Fks2 HS1 S663P
Turkey	1	2	1	1		Fks2 HS1 S663P
Spain	1	2	>4	1		Fks2 HS1 S663P
Greece	1	2	4	1		Fks2 HS1 S663P

Figure 2. Activity of echinocandins and fluconazole against *C. glabrata* isolates collected in European hospitals from 2014 to 2022



Acknowledgments

The authors thank all the SENTRY Program participants for providing the isolates used in this study.

References

- Pappas, P.G., Kauffman, C.A., Andes, D.R., Clancy, C.J., Marr, K.A., Ostrosky-Zeichner, L., et al., *Clinical Practice Guideline for the Management of Candidiasis: 2016 Update by the Infectious Diseases Society of America*. Clin Infect Dis, 2016. **62**(4): e1-50.
- Carvalhaes, C.G., Klauer, A.L., Rhomberg, P.R., Pfaller, M.A., and Castanheira, M., *Evaluation of Rezafungin Provisional CLSI Clinical Breakpoints and Epidemiological Cutoff Values Tested against a Worldwide Collection of Contemporaneous Invasive Fungal Isolates (2019 to 2020)*. J Clin Microbiol, 2022. **60**(4): e0244921.
- CLSI, *M27 M44S Ed3. Performance standards for antifungal susceptibility testing of yeasts*. 2022, Clinical and Laboratory Standards Institute: Wayne, PA.
- CLSI, *M57S Ed4. Epidemiological cutoff values for antifungal susceptibility testing*. 2022, Clinical and Laboratory Standards Institute: Wayne, PA.
- CLSI, *M27 Ed4. Reference method for broth dilution antifungal susceptibility testing of yeasts*. 2017, Clinical and Laboratory Standards Institute: Wayne, PA.

Funding

This study was supported by Mundipharma. M Castanheira, PR Rhomberg, LM Deshpande, CG Carvalhaes were of Element Materials Technology (JMI Laboratories) at the time of this study, which was paid consultant to Mundipharma in connection with the development of this poster.

Contact



SCAN ME



Mariana Castanheira, Ph.D.,
FIDSA, FAAM
345 Beaver Creek Centre, Suite A
North Liberty, IA 52317
Phone: (319) 665-3370
Fax: (319) 665-3371
Email: mariana.castanheira@element.com

To obtain a PDF of this poster:
Scan the QR code or visit
https://www.jmilabs.com/data/posters/ECCMID2024_23-MUN-03_P1_ECH_NWT_C_glabrata.pdf
Charges may apply. No personal information is stored.