

Antimicrobial Activity of Ceftazidime Avibactam (formerly NXL104) Tested Against Gram-Negative Organisms Causing Infections in Medical Centers from Europe, Latin America and the Asia-Pacific Region

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Abstract

Background: Avibactam (NXL104) is a novel non-β-lactam β-lactamase inhibitor (BLI) that inhibits Ambler class A, C and some D enzymes. Ceftazidime avibactam (CAZ104) is in development for treatment of hospital infections, including those caused by antimicrobial-resistant (R) Gram-negative bacilli (GNB).

Methods: CAZ104 and various comparators were tested by CLSI broth microdilution methods against 3,233 GN pathogens cultured from 92 medical centers located in Europe (EU; 2,092 isolates/56 centers), Latin America (LA; 509/13) and Asia-Pacific region (APAC; 632/23) in 2010. The collection included: *E. coli* (EC; n=934; 26.2% ESBL phenotype), *Klebsiella* spp. (KSP; n=1003; 35.7% ESBL phenotype), *M. morganii* (298; 4.0% meropenem [MER]-non-susceptible [NS]), *Enterobacter* spp. (ESP; n=361; 33.2% CAZ-NS), *Citrobacter* spp. (n=312; 23.4% CAZ-NS), *S. marcescens* (n=325; 6.5% CAZ-NS) and *M. morganii* (n=298; 9.4% CAZ-NS).

Results: ESBL-phenotype among EC/KSP was highest in APAC (39.8/39.3%), followed by LA (26.6/37.0%) and EU (24.3/34.2%), while 39.3, 37.0 and 34.2% of ESP were CAZ-NS in APAC, LA and EU, respectively. CAZ104 was active against all Enterobacteriaceae (ENT) species (MIC_{50} ranging from ≤0.06–0.25 µg/mL; MIC_{90} from 0.12–0.5 µg/mL), and retained activity against ESBL-phenotype (MIC_{50} ranging from 0.25–1 µg/mL), CAZ-NS (MIC_{50} ; 1–2 µg/mL) and MER-NS KSP (MIC_{50} ; 4 µg/mL) strains. Overall, 99.2% of strains had CAZ104 MIC of ≤2 mg/mL.

Conclusion: CAZ104 was very active against ENT, including ESBL, KPC, and AmpC producers. NXL104, a broad-spectrum BLI, in combination with a GN β-lactam, such as CAZ, appears to offer a useful option for treatment of infections caused by multidrug-R GNB.

Introduction

Gram-negative bacteria resistant to currently approved agents continue to present a challenge to successful treatment of serious infections. β-lactamase-mediated resistance, in particular, represents a significant clinical threat because it is widespread in nature and many of the genes encoding the enzymes are mobile. An approach to restore the utility of a β-lactam compound is to combine it with novel agents that inhibit β-lactamases, thereby allowing the β-lactam to retain target concentrations.

Avibactam (NXL104) is a non-β-lactam β-lactamase inhibitor with promising activity against class A, C and some D β-lactamases. β-lactamases are activated very efficiently by avibactam, with low IC_{50} (concentration resulting in 50% inhibition) values and low turnover numbers. Avibactam protects β-lactams from hydrolysis by a variety of enzymes.

Avibactam combined with ceftazidime (ceftazidime avibactam [CAZ104]) is currently undergoing clinical development for treatment of complicated urinary tract and intra-abdominal infections (including hospital infections and resistant infections, in each case), including those caused by antimicrobial-resistant Gram-negative bacteria. In this study, we evaluated the activity of ceftazidime avibactam against a contemporary (2010) collection of Gram-negative pathogens collected from 92 medical centers located in Europe (EU), Latin America (LA), and the Asia Pacific (APAC) region.

Materials and methods

Bacterial isolates: A total of 3,233 non-duplicate, consecutive Gram-negative strains were collected during 2010 from 92 medical centers located in the EU (2,092 isolates/56 centers), LA (509/13) and APAC (632/23). These isolates were collected from bloodstream, respiratory tract, and skin and soft tissue infections, according to defined protocols. Only clinically significant isolates were included in the study (one per patient episode). Species identification was confirmed by standard biochemical tests and/or use of the Vitek 2 System (bioMérieux; Hazelwood, Missouri, USA), as necessary. The collection included: *Escherichia coli* (n=934; 26.2% extended spectrum β-lactamases [ESBL]-phenotype), *Klebsiella* spp. (n=1003; 35.7% ESBL-phenotype and 4.0% meropenem-non-susceptible [NS]), *Enterobacter* spp. (n=361; 33.2% ceftazidime-non-susceptible [CAZ-NS]), *Citrobacter* spp. (n=312; 23.4% CAZ-NS), *Serratia marcescens* (n=325; 6.5% CAZ-NS) and *Morganella morganii* (n=298; 9.4% CAZ-NS).

Susceptibility testing: Susceptibility testing was performed by a reference broth microdilution procedure (Clinical and Laboratory Standards Institute [CLSI], 2009) using validated microdilution panels manufactured by TREK Diagnostics (Cleveland, Ohio, USA). The concentration of avibactam was maintained at 4 µg/mL for all test concentrations of ceftazidime. Susceptibility testing results were interpreted according to CLSI (2011) or EUCAST (2011) criteria. As there are currently no established susceptibility criteria for ceftazidime avibactam, interpretation was based on either the CLSI or EUCAST susceptible breakpoint criteria for ceftazidime alone (CLSI, S at ≤4 µg/mL and EUCAST, S at ≤1 µg/mL). *E. coli* ATCC 25922 and *Pseudomonas aeruginosa* ATCC 27853 were concurrently tested for quality assurance; all results were within the published ranges.

E. coli and *Klebsiella* spp. isolates for which the MIC results of ceftriaxone, ceftazidime, or aztreonam were ≥2 µg/mL were considered to be phenotype-positive for ESBL production (CLSI, 2011).

Table 1. Cumulative frequency distribution of ceftazidime avibactam MIC values for Gram-negative pathogens from EU, LA, and APAC regions (2010)^a

Organism/region (no. tested)	Cumulative % inhibited at ceftazidime avibactam MIC (µg/mL) of:							
	≤0.06	0.12	0.25	0.5	1	2	4	8
<i>E. coli</i> (934)	58.0	88.7	97.2	99.9	100.0	—	—	—
ESBL-phenotype (245)	29.0	69.4	91.0	99.6	100.0	—	—	—
<i>Klebsiella</i> spp. (1003)	36.3	70.1	83.6	94.3	97.8	98.9	99.2	99.2
ESBL-phenotype (358)	8.4	32.4	57.5	84.1	93.9	96.9	97.8	97.8
Meropenem-NS (40)	5.0	10.0	27.5	60.0	75.0	87.5	90.0	90.0
<i>Enterobacter</i> spp. (361)	10.5	40.4	74.8	91.1	95.6	98.9	99.7	99.7
CAZ-NS (120)	4.2	10.8	37.5	75.0	87.5	97.5	99.2	99.2
<i>Citrobacter</i> spp. (312)	27.2	63.1	88.1	95.8	99.0	99.4	100.0	—
CAZ-NS (73)	1.4	16.4	58.9	83.6	95.9	97.3	100.0	—
<i>M. morganii</i> (298)	79.5	93.3	96.3	98.3	98.7	98.7	99.3	100.0
<i>S. marcescens</i> (325)	6.2	45.5	79.4	96.0	97.9	98.8	99.1	99.7

^aAs there are currently no established susceptibility criteria for ceftazidime avibactam, interpretation was based on either the CLSI or EUCAST susceptible breakpoint criteria for ceftazidime alone (CLSI, S at ≤4 µg/mL and EUCAST, S at ≤1 µg/mL).

Table 2. Activity of ceftazidime avibactam and comparator agents tested against 3233 Gram-negative clinical isolates collected from 92 medical centers in EU, LA, and APAC regions (2010)

Antimicrobial agent (N)	All Regions				EU				LA				APAC				
	MIC_{50}	MIC_{90}	CLSI ^a %S / %R	EUCAST ^a %S / %R	MIC_{50}	MIC_{90}	CLSI ^a %S / %R	EUCAST ^a %S / %R	MIC_{50}	MIC_{90}	CLSI ^a %S / %R	EUCAST ^a %S / %R	MIC_{50}	MIC_{90}	CLSI ^a %S / %R	EUCAST ^a %S / %R	
<i>E. coli</i>			(934)				(585)						(207)			(142)	
Ceftazidime avibactam	0.06	0.25	100.0 / 0.0 ^b	100.0 / 0.0 ^b	0.06	0.25	— / —	— / —	0.06	0.25	— / —	— / —	0.06	0.25	— / —	— / —	
Ceftazidime	0.12	16	80.8 / 14.9	76.9 / 19.2	0.12	16	81.7 / 14.2	77.8 / 18.3	0.25	32	77.8 / 18.8	75.4 / 22.2	0.25	16	81.7 / 12.0	75.4 / 18.3	
Cefepime	≤0.12	>16	83.8 / 13.2	76.3 / 19.1	≤0.12	>16	84.8 / 12.5	78.3 / 17.3	≤0.12	>16	83.1 / 12.6	76.3 / 21.3	≤0.12	>16	81.0 / 16.9	68.3 / 23.2	
Ciprofloxacin	≤0.03	>4	63.5 / 36.3	62.7 / 36.5	≤0.03	>4	67.9 / 32.0	67.4 / 32.1	0.12	>4	56.0 / 44.0	55.6 / 44.0	0.25	>4	56.3 / 43.0	54.2 / 43.7	
Meropenem	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	
Piperacillin/tazobactam	2	16	90.1 / 3.9	83.9 / 9.9	2	32	89.6 / 4.1	82.7 / 10.4	2	32	81.6 / 11.6	78.1 / 14.2	2	16	95.1 / 4.2	92.3 / 4.9	
<i>Klebsiella</i> spp.			(245)				(142)						(55)			(48)	
Ceftazidime avibactam	0.12	0.25	100.0 / 0.0 ^b	100.0 / 0.0 ^b	0.12	0.25	— / —	— / —	0.12	0.25	— / —	— / —	0.12	0.25	— / —	— / —	
Ceftazidime	16	>32	26.9 / 56.7	11.8 / 73.1	16	>32	24.6 / 58.5	8.5 / 75.4	16	>32	16.4 / 70.9	7.3 / 83.6	8	>32	45.8 / 35.4	27.1 / 54.2	
Cefepime	>16	>16	38.4 / 50.2	10.6 / 72.7	>16	>16	37.3 / 51.4	12.0 / 71.1	16	>16	36.4 / 47.3	10.9 / 80.9	16	>16	43.8 / 50.0	6.3 / 68.8	
Ciprofloxacin	>4	>4	19.2 / 80.4	18.0 / 80.8	>4	>4	21.8 / 78.2	20.4 / 78.2	>4	>4	10.9 / 89.1	9.0 / 89.1	>4	>4	20.8 / 77.1	18.8 / 97.2	
Meropenem	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12	≤0.12	100.0 / 0.0	100.0 / 0.0	≤0.12</td				

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