Activity of a Novel Polymyxin Analog, QPX9003, Tested against **Resistant Gram-Negative Pathogens, Including Carbapenem-Resistant Acinetobacter, Enterobacterales, and Pseudomonas**

Mariana Castanheira¹, Jill Lindley¹, Holly Huynh¹, Rodrigo E. Mendes¹, Olga Lomovskaya² ¹JMI Laboratories, North Liberty, Iowa; ²Qpex Biopharma, San Diego, California

Introduction

- Polymyxins are cationic peptides that bind to lipopolysaccharide on the bacterial cell damaging the membrane and leading to cell death
- Polymyxins have good activity against gram-negative organisms, including Pseudomonas aeruginosa, Acinetobacter spp., and most Enterobacterales species
- Due to high rates of multidrug resistance (MDR) among these species, polymyxins are often used as a last resource for the treatment of serious infections caused by MDR gram-negative bacteria due to the limited active therapeutic options against these pathogens
- Polymyxins have been associated with reports of adverse renal effects and less commonly with neurological effects
- Although dosing strategies have been used to reduce the nephrotoxicity issues with polymyxins, an analog molecule with a better safety profile would be highly beneficial
- We evaluated the activity of QPX9003 against a large collection of gramnegative isolates collected worldwide that include MDR isolates

Materials and Methods

- A total of 1,015 Enterobacterales, 503 Acinetobacter baumannii isolates displaying elevated meropenem MIC values ($\geq 8 \text{ mg/L}$), and 1,000 P. aeruginosa isolates were tested
- Enterobacterales isolates included 507 isolates displaying ceftazidime and/ or ceftriaxone resistance and 508 carbapenem-resistant *Enterobacterales* (CRE) isolates screened for the presence of carbapenemases
- *P. aeruginosa* isolates included 400 isolates representing the normal distribution for meropenem and 600 challenge isolates displaying elevated MIC values for anti-pseudomonal β -lactam/ β -lactamase inhibitor combinations
- Isolates were susceptibility tested by reference broth microdilution against QPX9003, colistin, levofloxacin, tigecycline, gentamicin, amikacin, meropenem, cefepime, meropenem-vaborbactam, piperacillin-tazobactam, ceftolozanetazobactam, and ceftazidime-avibactam

Agents except meropenem and cefepime were provided by Qpex Biopharma

- Quality control (QC) was performed according to Clinical and Laboratory Standards Institute (CLSI) guidelines, and all QC MIC results were within acceptable ranges, as published in CLSI documents (M100, 2019)
- Categorical interpretations for β -lactams alone were those found in European Committee on Antimicrobial Susceptibility Testing (EUCAST) breakpoint tables (version 9.0, January 2019), the CLSI criteria in M100 (2019), or the US Food and Drug Administration (FDA) website

Results

- QPX9003 (MIC_{50/90}, 0.25/0.25 mg/L) had potent activity against *P. aeruginosa* isolates and this new agent was 4-fold more potent than colistin (MIC_{50/90} of 1/1 mg/L; Figure 1a)
- These results were similar to the results for these compounds tested against a subset of 600 *P. aeruginosa* isolates enriched for resistance against β -lactam/ β -lactamase inhibitor combinations (MIC_{50/90}, 0.25/0.25 mg/L for QPX9003 versus MIC_{50/90} of 1/1 mg/L for colistin)
- QPX9003 (MIC_{50/90}, 0.12/1 mg/L) was 4-fold more potent than colistin (MIC_{50/90}, 0.5/4 mg/L) when tested against 503 carbapenem-resistant Acinetobacter spp. (Figure 1b)
- QPX9003 (MIC_{50/90}, 0.06/16 mg/L) had a modal MIC of 0.06 mg/L against 1,015 Enterobacterales isolates (Figure 1c)
- Overall, the activities of QPX9003 and colistin (MIC_{50/90}, 0.12/>8 mg/L) were similar against Enterobacterales isolates regardless of the resistance group (CRE or cephalosporin resistant) or main species (*Klebsiella pneumoniae* and Escherichia coli)
- The activity of QPX9003 against 358 CRE isolates that did not carry a metallo- β -lactamase (MIC_{50/90}, 0.06/16 mg/L) was similar to the activity of this compound against isolates that produced these enzymes (MIC_{50/90}, 0.06/8 mg/L
- QPX9003 (MIC_{50/90}, 0.06/16 mg/L) displayed potent activity against cephalosporin-resistant Enterobacterales isolates
- QPX9003 (MIC_{50/90}, 0.06/16 mg/L) had potent activity against 511 K. pneumoniae isolates included in this collection (data not shown)
- E. coli isolates had considerably lower MIC results for QPX9003 (MIC 50/90, 0.06/0.12 mg/L) than K. pneumoniae isolates
- (Figure 2)

Conclusions

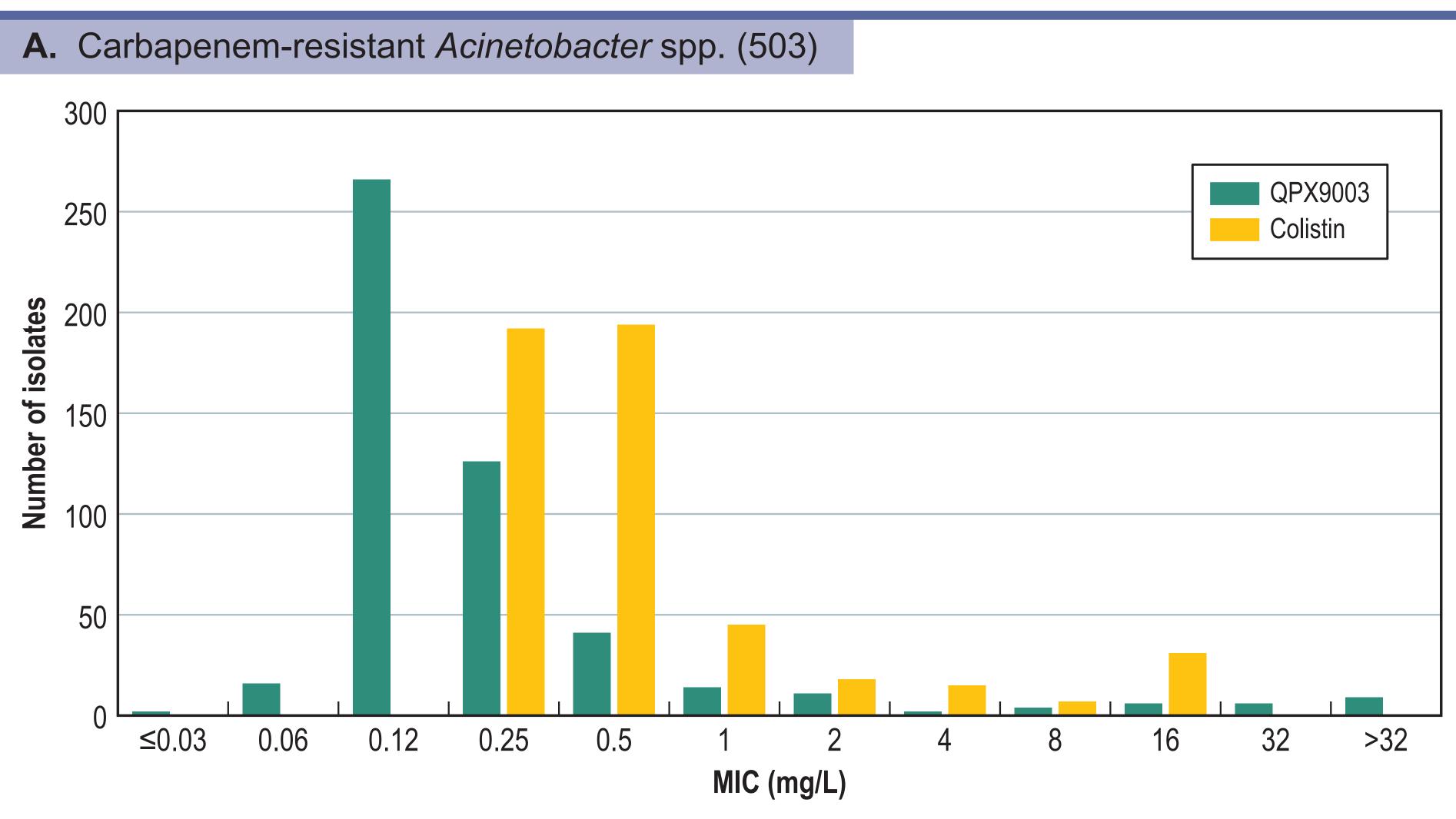
- QPX9003 had excellent activity against this collection of highly resistant gramnegative isolates for which non-polymyxin comparator agents had limited
- QPX9003 was more active than colistin against *P. aeruginosa* and carbapenemresistant Acinetobacter spp., and its activity was similar to that of colistin against Enterobacterales isolates
- QPX9003 is a promising next-generation polymyxin agent that has improved safety features compared to colistin and polymyxin B

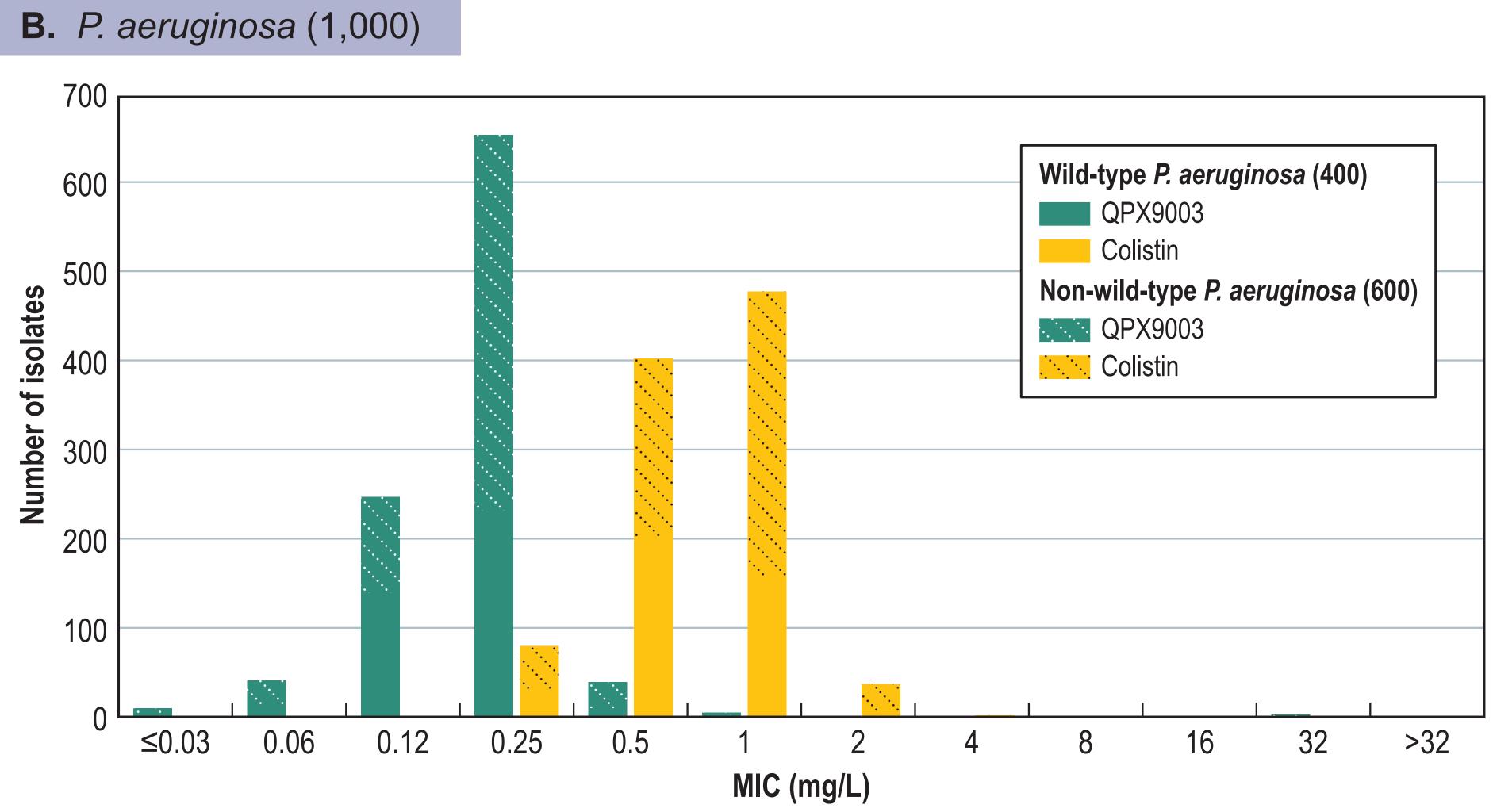
Acknowledgements

This project has been funded in whole or in part with federal funds from the Department of Health and Human Services; Office of the Assistant Secretary for Preparedness and Response; Biomedical Advanced Research and Development Authority (BARDA), under OTA number HHSO100201600026C.

Isolates evaluated in this study were highly resistant to comparator agents

Figure 1 Activity of QPX9003 and colistin against *P. aeruginosa*, carbapenem-resistant Acinetobacter spp., and Enterobacterales





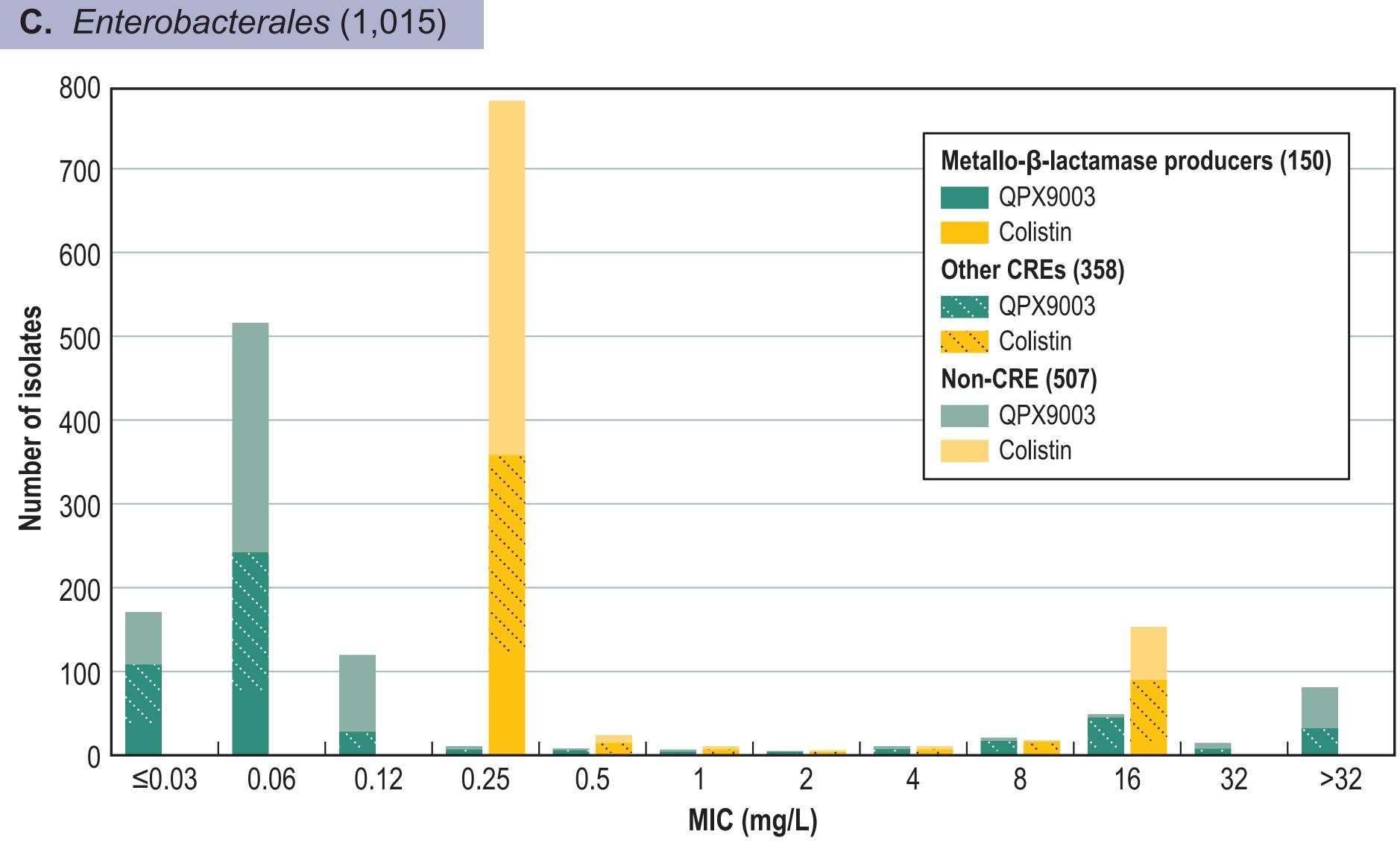
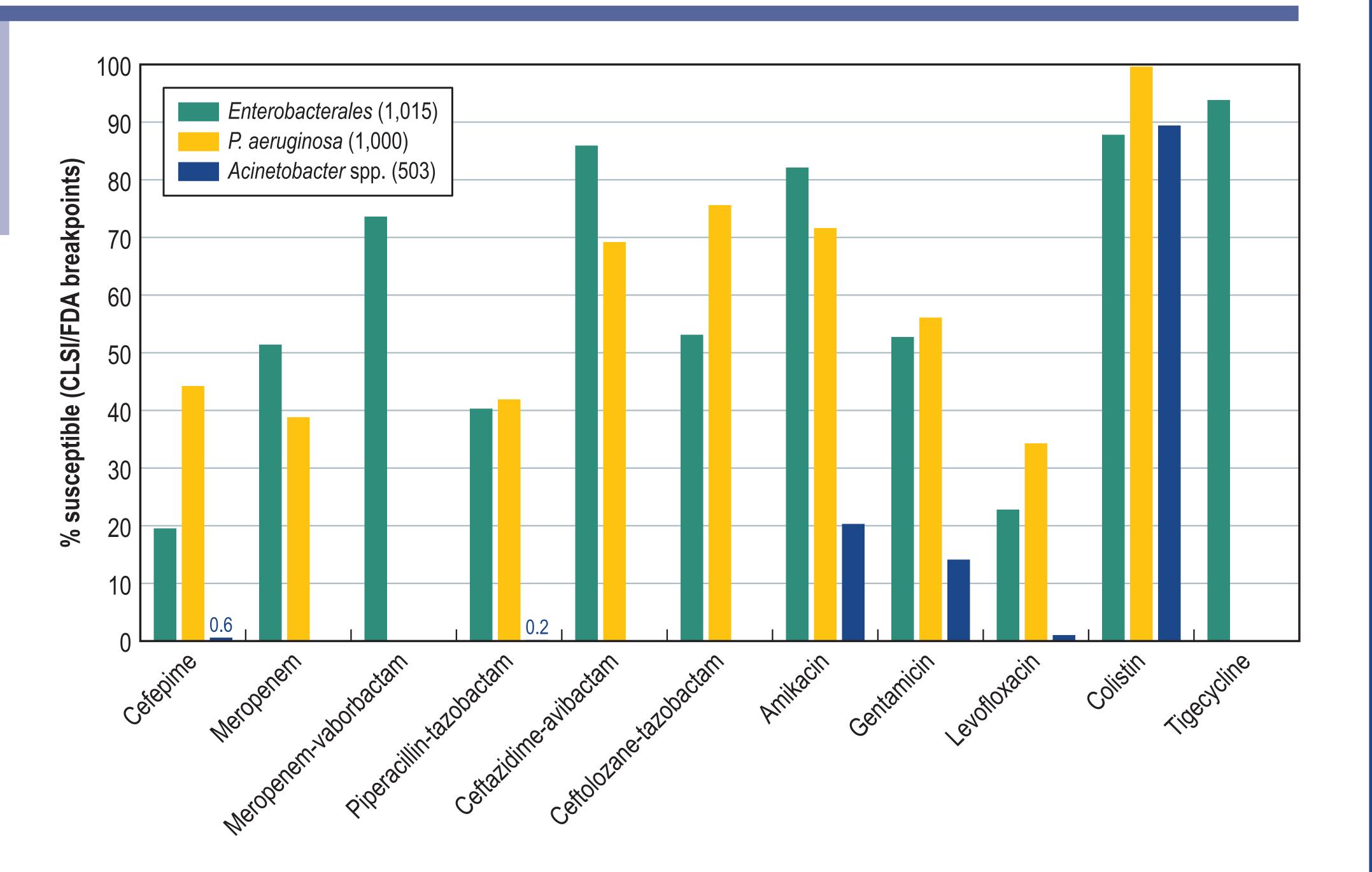


Figure 2 Activity of comparator agents against main organism groups tested



References

Clinical and Laboratory Standards Institute (2018). M07Ed11. Methods for dilution antimicrobial susceptibility tests for bacteria that grow aerobically; approved standard: eleventh edition. Wayne, PA: CLSI.

Clinical and Laboratory Standards Institute (2019). M100Ed29. Performance standards for antimicrobial susceptibility testing: 29th informational supplement. Wayne, PA: CLSI.

EUCAST (2019). Breakpoint tables for interpretation of MICs and zone diameters. Version 9.0, January 2019. Available at: http://www.eucast.org/fileadmin/src /media/PDFs/EUCAST_files/Breakpoint_tables/v_9.0_Breakpoint_Tables.pdf. Accessed January 2019.

FDA (2019). US FDA-Recognized antimicrobial susceptibility test interpretive criteria. Available at: https://www.fda.gov/Drugs/DevelopmentApprovalProcess /DevelopmentResources/ucm410971.htm. Accessed January 2019.

Ordooei Javan A, Shokouhi S, Sahraei Z (2015). A review on colistin nephrotoxicity. *Eur J Clin Pharmacol* 71: 801–810.

Poirel L, Jayol A, Nordmann P (2017). Polymyxins: antibacterial activity, susceptibility testing, and resistance mechanisms encoded by plasmids or chromosomes. Clin Microbiol Rev 30: 557–596.

Contact



Mariana Castanheira, PhD JMI Laboratories 345 Beaver Kreek Centre, Suite A North Liberty, Iowa 52317 Phone: (319) 665-3370 Fax: (319) 665-3371 Email: mariana-castanheira@jmilabs.com

To obtain a PDF of this poster: Scan the QR code or visit https://www .jmilabs.com/data/posters/IDWeek2019 -QPX9003-polymyxin.pdf

Charges may apply. No personal information is stored.