F1-2112

In vitro Activity of GSK1322322, a Novel Peptide Deformylase Inhibitor, against 4,836 Pathogens from Skin and Soft Tissue Infections and Respiratory Tract Infections

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Abstract

Background: GSK1322322 is an antibacterial agent currently in development that inhibits peptide deformylase (PDF) function, a clinically unexploited target. GSK1322322 demonstrates targeted antibacterial activity against multi-drug resistant respiratory and skin pathogens, including methicillin-resistant Staphylococcus aureus (MRSA), and represents a new antibiotic class with a novel mode of action. In a large surveillance study, the in vitro activity of GSK1322322 azithromycin (AZ) clindamycin (CLINDA) and levofloxacin (LEVO) was investigated against community and hospital-associated skin and soft tissue infection (SSTI) pathogens, S. aureus (SA) and Streptococcus pyogenes (SP), and respiratory tract infection (RTI) pathogens, Streptococcus pneumoniae (SPN), Haemophilus influenzae (HI), and Moraxella catarrhalis (MC)

Methods: 4,836 recently collected (2004-2008) clinical SSTI and RTI pathogens including resistant phenotypes were evaluated. Minimum inhibitory concentrations (MICs) were determined by broth microdilution according to CLSI guidelines. Results: In vitro activities of GSK1322322, AZ, CLINDA and LEVO:

		MIC ₅₀ /MIC ₉₀ (mg/ml)					
Organism	N	GSK1322322	AZ	CLINDA	LEVO		
S. aureus	809	2/4	>8/>8	0.12/>4	0.25/>8		
MRSA	391	2/4	>8/>8	0.12/>4	8/>8		
MSSA	418	2/4	1/>8	0.12/0.25	0.25/0.5		
AZ RES	444	2/4	>8/>8	0.12/>4	4/>8		
LEVO RES	255	2/4	>8/>8	0.12/>4	8/>8		
D-Test-POS	90	2/4	>8/>8	0.12/0.25	0.25/>8		
S. pyogenes	398	0.5/0.5	0.12/0.25	0.03/0.06	0.5/1		
AZ_RES	38	0.25/0.5	>8/>8	0.06/>4	0.5/1		
S. pneumoniae	961	1/2	0.12/>8	0.06/>4	1/1		
PEN-RES	166	0.5/1	>8/>8	>4/>4	1/8		
AZ-RES	337	0.5/1	>8/>8	>4/>4	1/8		
LEVO-RES	56	0.5/2	4/>8	0.06/>4	>8/>8		
H. influenzae	2553	2/4	1/2	>4/>4 a	0.015/0.03 "		
BL-Pos	580	2/8	1/2	4/>4 b	0.015/0.03 b		
M. catarrhalis	115	1/1	≤0.03/0.06	1/2	0.03/0.06		
BL-Pos	39	1/2	≤0.03/0.06	1/2	0.03/0.03		

° n=1048 ° n=247

Conclusion: GSK1322322 demonstrates excellent in vitro activity against common SSTI and RTI pathogens including MRSA, AZ- and LEVO-resistant SA and PEN-, AZ-, and LEVOsistant SPN, HI and MC

Introduction

GSK1322322 is an antibacterial agent currently in development that inhibits peptide deformylase (PDF) function, a clinically unexploited target, GSK1322322 demonstrates targeted antibacterial activity against multi-drug resistant respiratory and skin pathogens. including methicillin-resistant Staphylococcus aureus (MRSA), and represents a new antibiotic class with a novel mode of action. In a large surveillance study, the in vitro activity of GSK1322322, azithromycin, clindamycin and levofloxacin, was investigated against community and hospital-associated skin and soft tissue infection (SSTI) pathogens, S. aureus and S. pyogenes, and respiratory tract infection (RTI) pathogens, S. pneumoniae, H. influenzae, and M. catarrhalis.

Methods

- All study organisms were clinical isolates previously collected and frozen at -70 °C in the years 2004 through 2008 with the exception of H. influenzae which were collected from 2001 - 2008. The isolates were collected from 50 countries in 6 global regions (Figure 1). All S. aureus and S. pyogenes were from skin and soft tissue infections (SSTI). and all S. pneumoniae, M. catarrhalis, and H. influenzae were from community-associated respiratory tract infections (RTI), one isolate per patient, all ages included (Figure 2).
- Minimum inhibitory concentration (MIC) endpoints were determined by broth microdilution according to CLSI guidelines [1]. Mueller Hinton broth was used for S. aureus and M. catarrhalis with 3% lysed horse blood added for S. pneumoniae and S. pvogenes. Haemophilus Test Medium (HTM) broth was used for *H. influenzae*. Testing was performed using panels prepared freshly on the same day of testing. Study drugs included GSK1322322, azithromycin, clindamycin, and levofloxacin.
- Resistant phenotypes were interpreted according to the breakpoints of penicillin, azithromycin, clindamycin, and levofloxacin as defined in CLSI document M100-S20 (2010) [2]. Beta-lactamase production was determined on all H. influenzae using the cefinase disk methodology. D-Test for inducible clindamycin resistance (Macrolide-Lincosamide-Streptogramin B [MLSBi] resistance phenotype) was performed against all azithromycinresistant/clindamycin-susceptible or intermediate S. aureus according to the disk approximation test as described by the CLSI [2].
- Quality control testing was performed each day of testing as specified by CLSI using the following isolates: S. aureus ATCC 29213: S. aureus BAA-977 (D-Test control); S. pneumoniae ATCC 49619; and H. influenzae ATCC 49247 and ATCC 49766.

Results

Figure 1. Distribution (%) of isolates categorized by geographic region and number of countries per region (n)

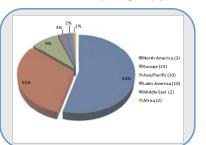


Figure 2 Distribution (%) of SSTI and RTI isolates categorized by Age Groups

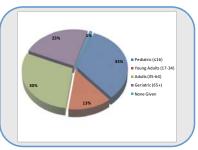


Table 1. Summary of in vitro activity for GSK1322322 and comparators against 398 isolates of S. pyogenes and macrolide-resistant phenotypes from SSTI sources

Organism/		MIC (μg/ml)			
Phenotype (n)	Drug	Range	MIC _{so}	MIC ₉₀	
S. pyogenes	GSK1322322	0.06-1	0.5	0.5	
(n=398)	Azithromycin	≤0.03->8	0.12	0.25	
	Clindamycin	≤0.015->4	0.03	0.06	
	Levofloxacin	0.008->8	0.5	1	
Macrolide-	GSK1322322	0.06-0.5	0.25	0.5	
Resistant *	Azithromycin	>8->8	>8	>8	
S. pyogenes	Clindamycin	0.03->4	0.06	>4	
(n=38)	Levofloxacin	0.12-2	0.5	1	

Table 2. Summary of in vitro activity for GSK1322322 and comparators against 809 isolates of S. aureus and resistant phenotypes from SSTI sources

Organism/		MI	C (µg/ml)	
Phenotype (n)	Drug	Range	MIC ₅₀	MIC ₉₀
S. aureus	GSK1322322	0.12-8	2	4
(n=809)	Azithromycin	0.5->8	>8	>8
	Clindamycin	≤0.015->4	0.12	>4
	Levofloxacin	0.12->8	0.25	>8
Methicillin-	GSK1322322	0.12-8	2	4
Resistant ^a	Azithromycin	1->8	>8	>8
S. aureus	Clindamycin	≤0.015->4	0.12	>4
(n=391)	Levofloxacin	0.12->8	8	>8
Macrolide-	GSK1322322	0.12-8	2	4
Resistant	Azithromycin	>8 ->8	>8	>8
S. aureus	Clindamycin	≤0.015->4	0.12	>4
(n=444)	Levofloxacin	0.12->8	4	>8
Levofloxacin-	GSK1322322	0.12-8	2	4
Resistant	Azithromycin	1->8	>8	>8
S. aureus	Clindamycin	≤0.015->4	0.12	>4
(n=255)	Levofloxacin	4->8	8	>8
D-Test ^b	GSK1322322	0.25-8	2	4
Positive	Azithromycin	>8->8	>8	>8
S. aureus	Clindamycin	0.06-0.5	0.12	0.25
(n=90)	Levofloxacin	0.12->8	0.25	>8

Table 3. Summary of in vitro activity for GSK1322322 and comparators against 961 isolates of S. pneumoniae and resistant phenotypes from RTI sources

Organism/		MIC (µg/ml)		
Phenotype (n) ^a	Drug	Range	MIC _{so}	MIC
S. pneumoniae	GSK1322322	≤0.03 - 4	1	2
(n=961)	Azithromycin	≤0.03 - >8	0.12	>8
	Levofloxacin	0.015 ->8	1	1
Penicillin-	GSK1322322	0.06 - 4	0.5	1
Resistant	Azithromycin	≤0.03 - >8	>8	>8
(n=166)	Levofloxacin	0.5 - >8	1	8
Macrolide-	GSK1322322	≤0.03 - 4	0.5	1
Resistant	Azithromycin	2 ->8	>8	>8
(n=337)	Levofloxacin	0.25 - >8	1	8
Levofloxacin-	GSK1322322	0.06 - 4	0.5	2
Resistant	Azithromycin	0.06 - >8	4	>8
(n=56)	Levofloxacin	8 - >8	>8	>8

Drug Resistant Prienotypes of S. prieumoniae were determined by the individual drugs as defined in CLSI document M100-S20, 2010.

Table 4. Summary of in vitro activity for GSK1322322 and comparators for 2553 Isolates of Haemophilus influenzae from RTI sources

Organism/		MIC (μg/ml)			
Phenotype (n)	Drug *	Range	MIC _{so}	MIC ₉₀	
H. influenzae	GSK1322322	≤0.03 - 32	2	4	
(n=2553)	Azithromycin	0.06 - >8	1	2	
	Levofloxacin ^a	0.008 - 1	0.015	0.03	
β-lactamase	GSK1322322	≤0.03 - 32	2	4	
Negative	Azithromycin	0.06 - >8	1	2	
(n=1973)	Levofloxacin b	0.008 - 1	0.015	0.03	
β-lactamase	GSK1322322	≤0.03 - 32	2	8	
Positive	Azithromycin	0.12 - >8	1	2	
(n=580)	Levofloxacin c	0.008 - 0.5	0.015	0.03	

Table 5. Summary of in vitro activity for GSK1322322 and comparators for 115 Isolates of Moraxella catarrhalis from RTI sources

Organism/		MIC (μg/ml)			
Phenotype (n)	Drug	Range	MIC _{so}	MIC	
M. catarrhalis	GSK1322322	0.06 - 2	1	1	
(n=115)	Azithromycin	≤0.03 - 0.12	≤0.03	0.06	
	Levofloxacin	0.015 - 0.06	0.03	0.06	
β-lactamase	GSK1322322	0.06 - 2	1	1	
Negative	Azithromycin	≤0.03 - 0.06	≤0.03	≤0.03	
(n=22)	Levofloxacin	0.015 - 0.06	0.03	0.06	
β-lactamase	GSK1322322	0.06 - 2	1	2	
Positive *	Azithromycin	≤0.03 - 0.06	≤0.03	0.06	
(n=39)	Levofloxacin	0.03 - 0.06	0.03	0.03	

Table 6. Summary of in vitro activity for GSK1322322 and comparators against 1328 pediatric (≤16 yo) isolates from RTI sources

		MIC (μg/ml)		
Organism	Drug ^a	Range	MIC _{so}	MIC
S. pneumoniae	GSK1322322	0.06-4	0.5	2
(n=295)	Azithromycin	<0.03->8	0.12	>8
	Levofloxacin	0.5->8	1	1
H. influenzae	GSK1322322	0.06-32	1	4
(n=989)	Azithromycin	0.06->8	1	2
	Levofloxacin b	0.008-0.5	0.015	0.03
M. catarrhalis	GSK1322322	0.12-2	1	1
(n=44)	Azithromycin	<0.03-0.06	< 0.03	0.06
	Levofloxacin	0.015-0.06	0.03	0.06

Conclusions

- GSK1322322 inhibited the in vitro growth of S. aureus and S. pyogenes, the two most common causative bacteria isolated from SSTI, with MICoo values of 4 and 0.5 µg/ml, respectively. For the same S. aureus isolates, the MIC₉₀ was >4 µg/ml for azithromycin, clindamycin, and levofloxacin. MICons for the comparators and S. pyogenes were azithromycin 0.25 μg/ml, clindamycin 0.06 μg/ml, and levofloxacin 1 μq/ml.
- GSK1322322 demonstrated a MIC_{so} value of 4 μg/ml against resistant subsets of S. aureus including methicillin, macrolide, and levofloxacin resistant isolates, and those indicating a positive MLSBi phenotype. GSK1322322 had a MIC₉₀ of 0.5 µg/ml against macrolide-resistant isolates of S. pyogenes.
- GSK1322322 inhibited the in vitro growth of common RTI pathogens H. influenzae, S. pneumoniae, and M. catarrhalis with MIC90 values of 4, 2, and 1 µg/ml, respectively.
- · GSK1322322 demonstrated excellent activity against the resistant phenotypes of S. pneumoniae with a MIC_{qq} of $\leq 2 \mu q/ml$ for the penicillin, macrolide and levofloxacin resistant strains. Although the GSK1322322 MIC₉₀ was 8 µg/ml for beta-lactamase producing H. influenzae in this study. 89.8% were inhibited at $\leq 4 \mu g/ml$ (data not shown).
- GSK1322322 holds promise as a new and more potent compound to combat resistance common in SSTI and RTI pathogens.

Acknowledgements

This study was funded by a grant from GlaxoSmithKline Research.

References

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