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Activity of SPR206 and Comparator Agents Against Pseudomonas aeruginosa and Acinetobacter baumannii Causing Infections in United States Hospitals

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Introduction

- Non-fermentative Gram-negative bacilli (NF-GNB) are opportunistic organisms that have emerged as important healthcare-associated pathogens, mainly in immunocompromised patients.
- These organisms are innately less susceptible and/or resistant to many antimicrobial classes due to the presence of intrinsic genes encoding β-lactamases and efflux pumps.
- SPR206 is a next generation polymyxin under clinical development to treat pneumonia, bloodstream, and urinary tract infections caused by GNB multidrug-resistant (MDR) pathogens.
- The in vitro activity of SPR206 and comparators was monitored against GNB pathogens causing infection in US and European hospitals during 2021 as part of the SENTRY Antimicrobial Surveillance Program.
- This study reports the in vitro activity of SPR206 and comparator agents against Acinetobacter baumannii-calcoaceticus species complex (described here as A. baumannii) and Pseudomonas aeruginosa recovered from patients hospitalized in the USA.

Materials and Methods

Bacterial organisms

- This study included 238 A. baumannii and 450 P. aeruginosa recovered from patients hospitalized in medical centers in 9 US Census Divisions during 2021. Only consecutive isolates (1 per patient infection episode) responsible for documented infections according to local criteria were included.
- Bacterial identification was confirmed by standard algorithms supported by matrix-assisted laser desorption ionization-time of flight mass spectrometry (Bruker Daltonics, Bremen, Germany).

Susceptibility testing

- Isolates were tested for susceptibility by broth microdilution following the Clinical and Laboratory Standards Institute (CLSI) M07 (2018) guidelines.
- Frozen-form broth microdilution panels were manufactured by JMI Laboratories (North Liberty, IA, USA) and contained cationadjusted Mueller-Hinton broth as per CLSI guidelines.
- Quality assurance was performed by sterility checks, colony counts, and testing CLSI-recommended quality control reference strains. MIC interpretations were performed using CLSI breakpoints for comparators. A susceptible breakpoint of ≤2 mg/L was used for SPR206 for comparison purposes.

Subset definitions

MDR was defined as any isolate resistant to ≥3 classes of antibiotics, whereas an extensively drug-resistant (XDR) phenotype was any isolate susceptible to ≤2 classes of antibiotics.

Results

- A total of 34.9% (83/238) and 14.7% (35/238) of A. baumannii displayed an MDR or XDR phenotype, respectively (Table 1).
- Overall, SPR206 had MIC_{50/90} of 0.12/0.5 mg/L against all A. baumannii and MIC₅₀ and MIC₉₀ values of 0.12 mg/L and 0.25-1 mg/L against resistant subsets, respectively (Table 1).
- Various antimicrobial agents showed *in vitro* activity (≥91.4% susceptible) against the non-MDR subset of A. baumannii. In contrast, only SPR206 (MIC_{50/90}, 0.12/0.25-1 mg/L) and colistin $(MIC_{50/90}, 0.5/1 \text{ mg/L})$ remained active against the resistant subsets (Table 2).
- A total of 17.8% (80/450) and 8.0% (36/450) of *P. aeruginosa* displayed an MDR or XDR phenotype, respectively (Table 1).
- MIC₅₀, MIC₉₀, and MIC₁₀₀ of 0.25 mg/L, 0.25 mg/L, and 2 mg/L were obtained for SPR206 against all P. aeruginosa, respectively
- All agents had good *in vitro* activity (≥91.1% susceptible) against the non-MDR subset of P. aeruginosa, except for piperacillintazobactam (88.9% susceptible) and levofloxacin (82.4% susceptible) (Table 3).
- SPR206 (MIC_{50/90}, 0.25/0.5 mg/L) and collistin (MIC_{50/90}, 1/1 mg/L) remained active against the resistant subsets, whereas other comparator agents had MIC_{oo} values ≥16 mg/L (Table 3).

Table 1. MIC distribution of SPR206 obtained against A. baumannii and P. aeruginosa and resistant subsets

Organism/	No. and cumulative % of isolates inhibited at MIC (mg/L) of:								MIC	MIO				
Group (no. of isolates)	≤0.03	0.06	0.12	0.25	0.5	1	2	4	8	16	32	>32	MIC ₅₀	MIC ₉₀
A. baumannii (238)	3	73	82	48	15	7	5	3	0	2			0.12	0.5
	(1.3)	(31.9) 42	(66.4) 57	(86.6) 37	(92.9) 10	(95.8)	(97.9)	(99.2)	(99.2)	(100.0)			0.40	О Г
Non-MDR (155)	(0.6)	(27.7)	(64.5)	(88.4)	(94.8)	(96.1)	(98.1)	(99.4)	(99.4)	(100.0)			0.12	0.5
MDR (83)	2 (2.4)	31 (39.8)	25 (69.9)	11 (83.1)	5 (89.2)	5 (95.2)	2 (97.6)	1 (98.8)	0 (98.8)	(100.0)			0.12	1
XDR (35)		17 (48.6)	11 (80.0)	5 (94.3)	1 (97.1)	0 (97.1)	0 (97.1)	0 (97.1)	0 (97.1)	1 (100.0)			0.12	0.25
P. aeruginosa (450)	3 (0.7)	14 (3.8)	123 (31.1)	284 (94.2)	22 (99.1)	2 (99.6)	2 (100.0)						0.25	0.25
Non-MDR (370)	3 (0.8)	8 (3.0)	105 (31.4)	237 (95.4)	14 (99.2)	1 (99.5)	2 (100.0)						0.25	0.25
MDR (80)		6 (7.5)	18 (30.0)	47 (88.8)	8 (98.8)	1 (100.0)							0.25	0.5
XDR (36)		(8.3)	(33.3)	19 (86.1)	5 (100 0)								0.25	0.5

Table 2. Antimicrobial activity of SPR206 and comparator agents against A. baumannii and resistant subsets

	MIC (mg/L)		CLSI ^a				
50 %	90%	Range	%S	%	% R		
0.12	0.5	≤0.03 to 16	98.1ª				
0.5	1	0.12 to >8		97.4	2.6		
2	8	1 to 16	97.4	2.6	0.0		
0.25	1	0.12 to 2	100.0	0.0	0.0		
4	8	1 to >32	96.1	1.9	1.9		
8	16	2 to 32					
≤0.06	16	≤0.06 to >128	91.4	3.3	5.3		
4	4	1 to >32	98.7	0.0	1.3		
1	1	0.25 to >16	98.1	0.0	1.9		
0.25	0.5	0.12 to 4					
0.12	0.5	0.06 to 16	96.8	1.3	1.9		
0.12	1	≤0.03 to 16	97.6 ^a				
0.5	1	0.12 to >8		96.4	3.6		
32	>64	4 to >64	20.5	15.7	63.9		
>32	>32	0.25 to >32	9.6	1.2	89.2		
>32	>32	4 to >32	16.9	12.0	71.1		
32	>32	0.5 to >32					
>128	>128	8 to >128	3.6	13.3	83.1		
8	>32	1 to >32	56.6	4.8	38.6		
4	>16	0.5 to >16	51.8	6.0	42.2		
2	4	0.12 to >8					
16	>32	0.25 to >32	4.8	3.6	91.6		
0.12	0.25	0.06 to 16	97.1 ^a				
0.5	1	0.12 to >8		91.4	8.6		
32	>64	16 to >64	0.0	11.4	88.6		
>32	>32	16 to >32	0.0	0.0	100.0		
>32	>32	16 to >32	0.0	17.1	82.9		
>32	>32	8 to >32					
>128	>128	64 to >128	0.0	2.9	97.1		
>32	>32	1 to >32	22.9	8.6	68.6		
>16	>16	0.5 to >16	17.1	8.6	74.3		
4	4	1 to >8					
16	>32	4 to >32	0.0	2.9	97.1		
	0.12 0.5 2 0.25 4 8 ≤0.06 4 1 0.25 0.12 0.12 0.5 32 >32 >32 >128 8 4 2 16 0.12 0.5 32 >128 8 32 >128 >32 >32 >128 >32 >32 >32 >32 >128 >32 >32 >33	0.12 0.5 0.5 1 2 8 0.25 1 4 8 8 16 ≤0.06 16 4 4 1 1 0.25 0.5 0.12 1 0.5 1 32 >64 >32 >32 >32 >32 >32 >32 >128 >128 8 >32 4 >16 2 4 16 >32 0.12 0.25 0.5 1 32 >64 >32 >32 >32 >32 >32 >32 >32 >32 >128 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32 >32	50% 90% Range 0.12 0.5 ≤0.03 to 16 0.5 1 0.12 to >8 2 8 1 to 16 0.25 1 0.12 to 2 4 8 1 to >32 8 16 ≥ to 32 ≤0.06 16 ≤0.06 to >128 4 4 1 to >32 1 1 0.25 to >16 0.25 0.5 0.12 to 4 0.12 0.5 0.06 to 16 0.12 1 ≤0.03 to 16 0.5 1 0.12 to >8 32 >64 4 to >64 >32 >32 >32 32 >32 0.25 to >32 32 >32 0.5 to >32 32 >32 0.5 to >32 32 >32 0.5 to >32 32 >32 1 to >32 4 16 0.5 to >16 2 4 0.12 to >8 4 0.12 to >8<	50% 90% Range %S 0.12 0.5 ≤0.03 to 16 98.1° 0.5 1 0.12 to >8 1 to 16 97.4 0.25 1 0.12 to 2 100.0 100.0 14 8 1 to >32 96.1 2 to 32 96.1 8 16 2 to 32 96.1 2 to 32 98.7 1 1 to >32 98.7 1 1 1 to >32 96.8 1 1 to >32 96.8 1 1 to >32	0.12		

a Criteria as published by CLSI (2022). A susceptible breakpoint of ≤ 2 mg/L was used for SPR206 for comparison purposes.

Table 3. Antimicrobial activity of SPR206 and comparator agents against P. aeruginosa and resistant subsets

Austinaio voltiol octoret		MIC (mg/L)		CLSI ^a				
Antimicrobial agent	50%	90%	Range	% S	%	%R		
Non-MDR (370)								
SPR206	0.25	0.25	≤0.03 to 2	100.0 ^a				
Colistin	1	1	0.12 to 4		99.7	0.3		
Meropenem	0.5	2	≤0.015 to 16	92.7	4.6	2.7		
Ceftazidime	2	8	0.25 to >32	91.1	1.9	7.0		
Ceftazidime-avibactam	2	4	0.03 to >32	99.2		0.8		
Piperacillin-tazobactam	4	32	0.12 to >128	88.9	5.7	5.4		
Amikacin	4	8	≤0.25 to 16	100.0	0.0	0.0		
Tobramycin	0.5	1	≤0.12 to >16	98.4	0.0	1.6		
Levofloxacin	0.5	2	≤0.015 to >32	82.4	9.2	8.4		
Ceftolozane-tazobactam	0.5	1	≤0.12 to >16	99.2	0.3	0.5		
MDR (80)								
SPR206	0.25	0.5	0.06 to 1	100.0a				
Colistin	1	1	0.12 to 2		100.0	0.0		
Meropenem	8	32	0.25 to >32	17.5	11.2	71.2		
Ceftazidime	32	>32	4 to >32	25.0	13.8	61.2		
Ceftazidime-avibactam	8	16	1 to >32	75.0		25.0		
Piperacillin-tazobactam	64	>128	8 to >128	11.2	42.5	46.2		
Amikacin	4	32	0.5 to >32	85.0	5.0	10.0		
Tobramycin	1	16	≤0.12 to >16	78.8	8.8	12.5		
Levofloxacin	4	32	0.12 to >32	21.2	15.0	63.8		
Ceftolozane-tazobactam	2	8	0.5 to >16	86.2	7.5	6.2		
XDR (36)								
SPR206	0.25	0.5	0.06 to 0.5	100.0a				
Colistin	1	1	0.25 to 2		100.0	0.0		
Meropenem	16	32	0.5 to 32	5.6	13.9	80.6		
Ceftazidime	32	>32	4 to >32	5.6	11.1	83.3		
Ceftazidime-avibactam	8	32	1 to >32	66.7		33.3		
Piperacillin-tazobactam	128	>128	16 to >128	8.3	30.6	61.1		
Amikacin	8	>32	1 to >32	77.8	5.6	16.7		
Tobramycin	1	>16	0.25 to >16	63.9	13.9	22.2		
Levofloxacin	8	32	0.5 to >32	5.6	13.9	80.6		
Ceftolozane-tazobactam	2	16	0.5 to >16	72.2	13.9	13.9		
MDR, multidrug-resistant (resistant to ≥3 classes); XDR, extens	sively drug-resistant (susceptible to ≤2 classes)	•						

MDR, multidrug-resistant (resistant to ≥ 3 classes); XDR, extensively drug-resistant (susceptible to ≤ 2 classes). ^a Criteria as published by CLSI (2022). A susceptible breakpoint of ≤2 mg/L was used for SPR206 for comparison purpose

Conclusions

- SPR206 showed potent in vitro activity against these recent collections of A. baumannii and P. aeruginosa from the USA. SPR206 potency was consistently greater than clinically available in-class and other comparator agents.
- These results, plus favorable safety and tolerability profiles of SPR206 in Phase 1 studies, support the clinical development of SPR206 for difficult-to-treat infections caused by these pathogens and their resistant subsets.

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