

Daptomycine

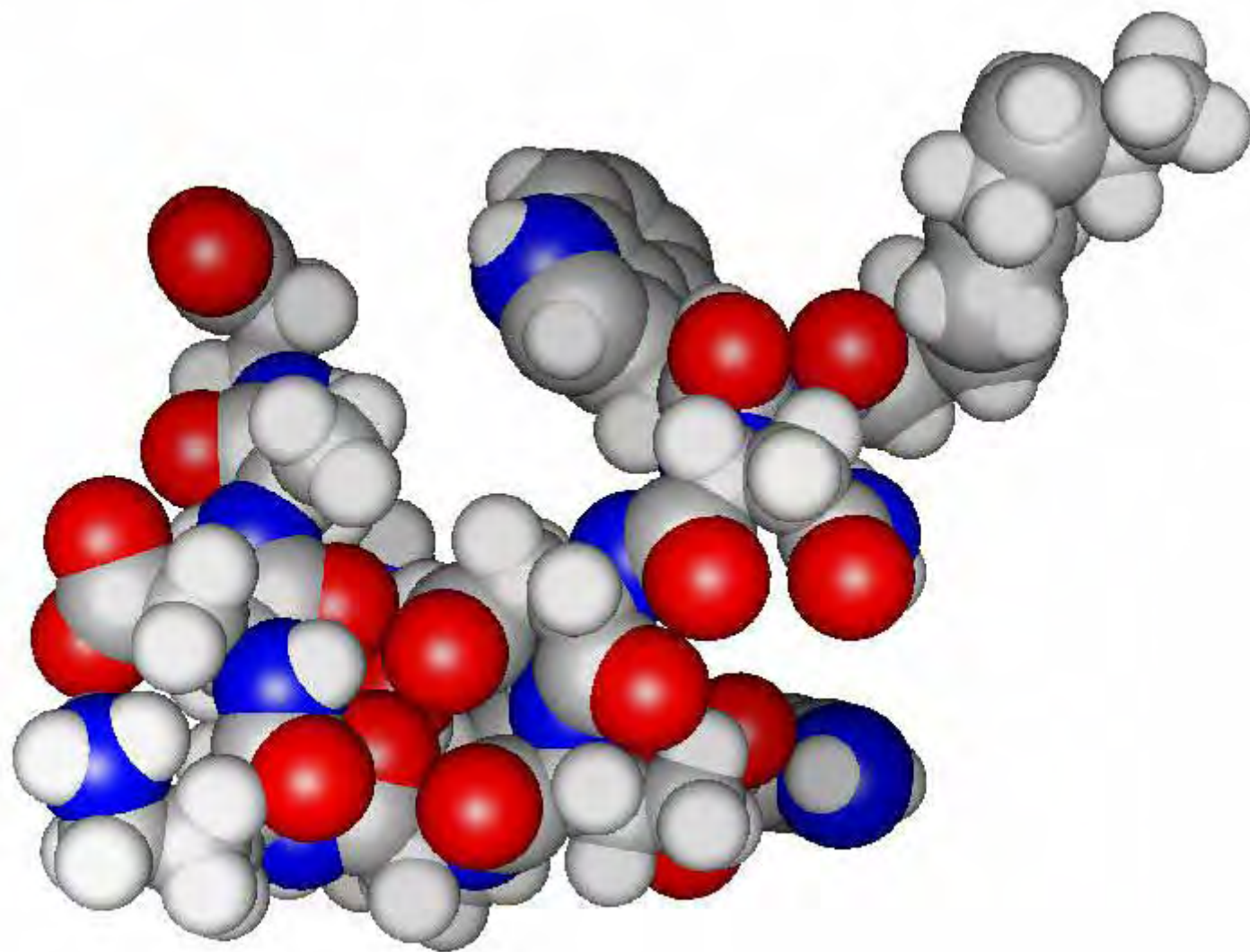
Cubicin®

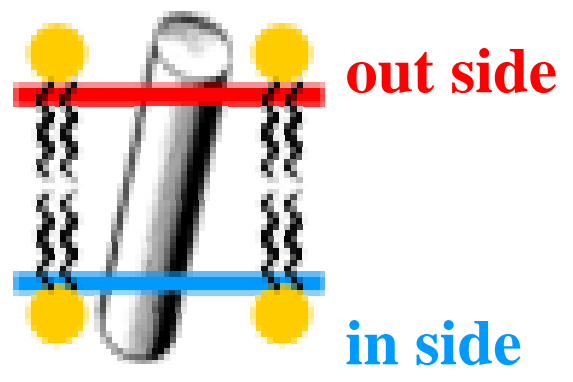
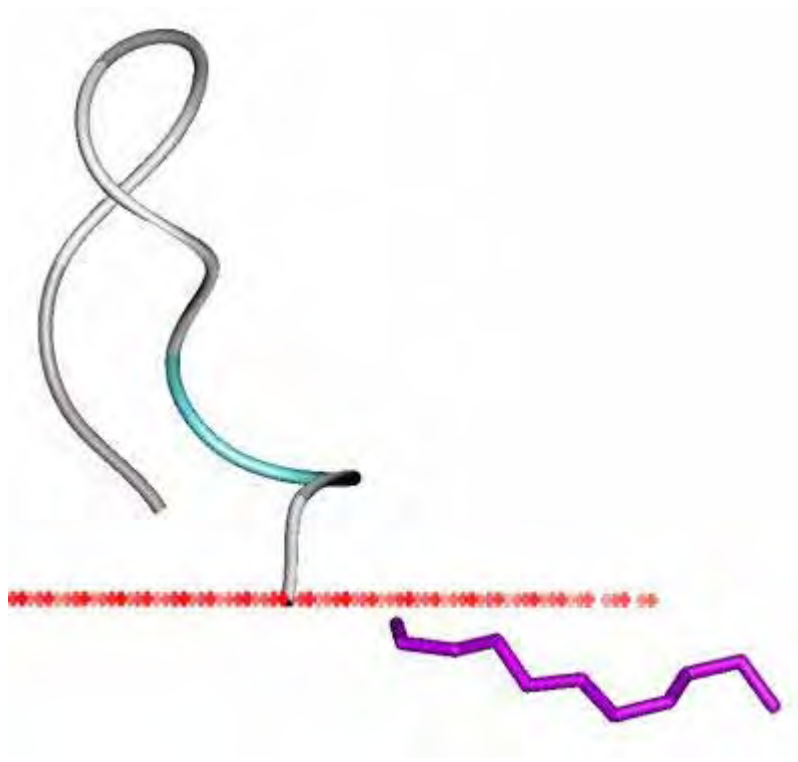
Novartis Europharm Limited

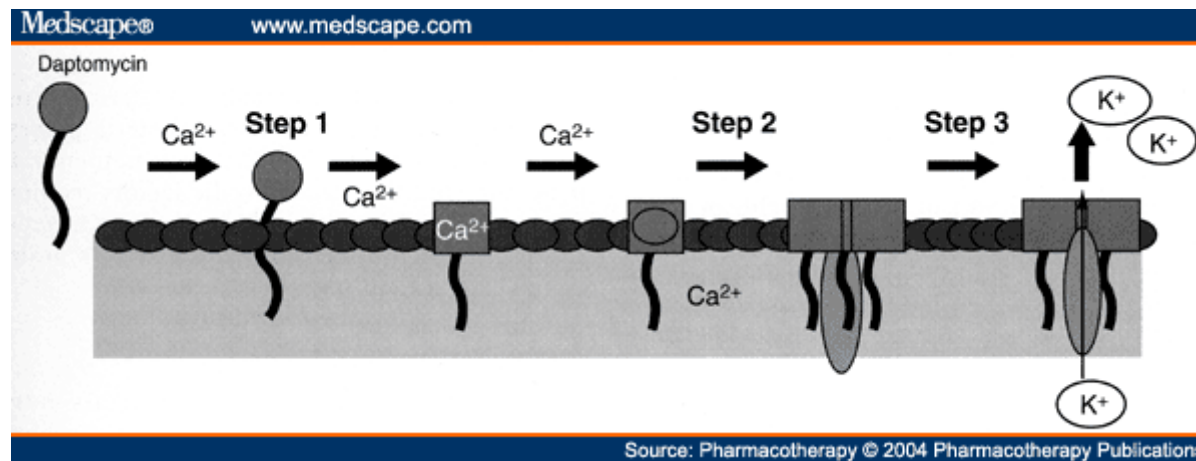
Journée des Référents

JNI, Dijon, Juin 2007

P Chavanet







« collapsus » électro-chimique de la membrane

• Arrêt de :

- la synthèse des protéines,
- ARN
- ADN
- Peptoglycan
- Acide lipoteichoïque

•=> bactéricide sans bactériolyse

Dapto – in vitro 1

- **Gram +**

- SA

- MS
- MR
- **GI ou R**
- **heamolyticus**

- S coag neg

- MS
- MR

- E faecalis

- **Vanco S**
- **Vanco R**

- E faecium

- **Vanco S**
- **Vanco R**

CMI90 (mg/l)

0.5-1
0.25-1
4
0.25-0.5
0.25-2
0.5-1

CA-SFM 2007
Dapto S ≤ 1
R > 1

CA-SFM 2007
.....

Dapto – in vitro 2

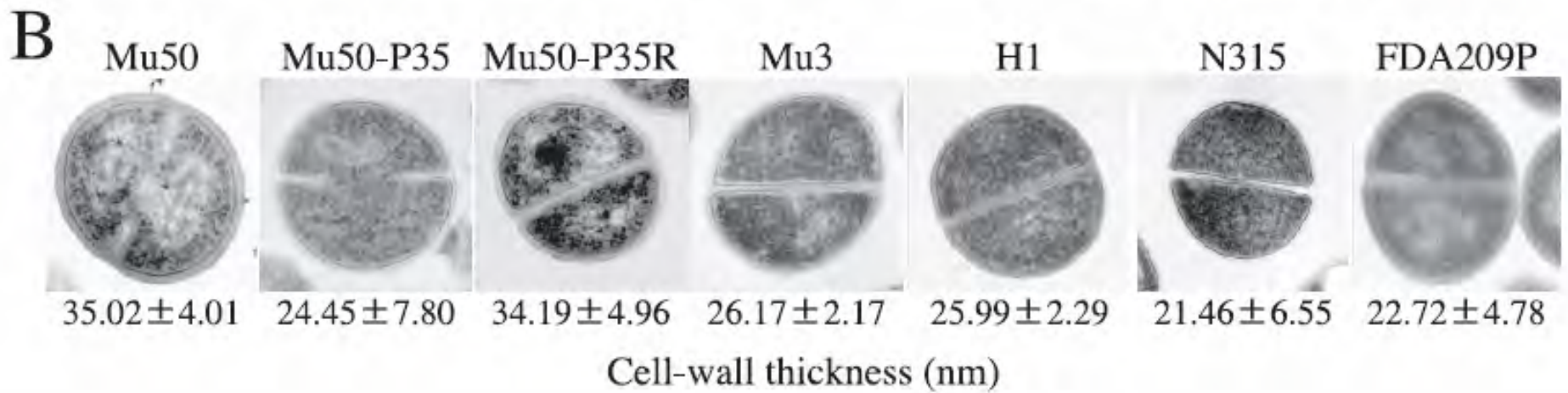
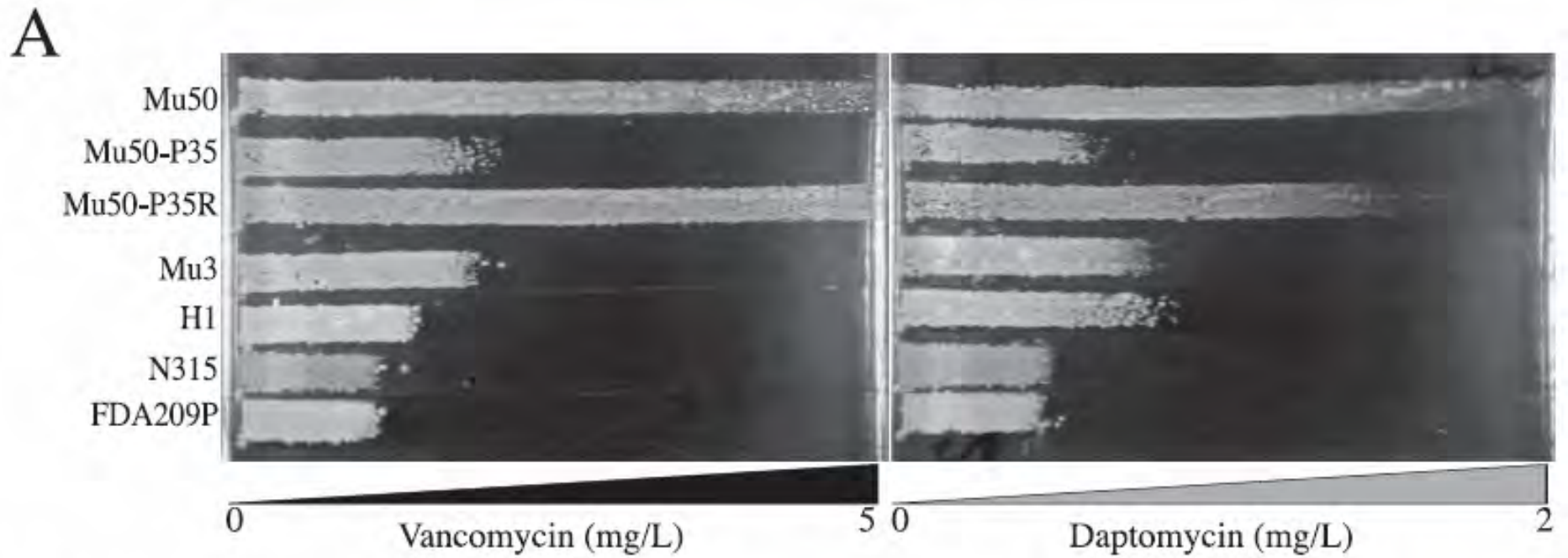
CMI90 (mg/l)

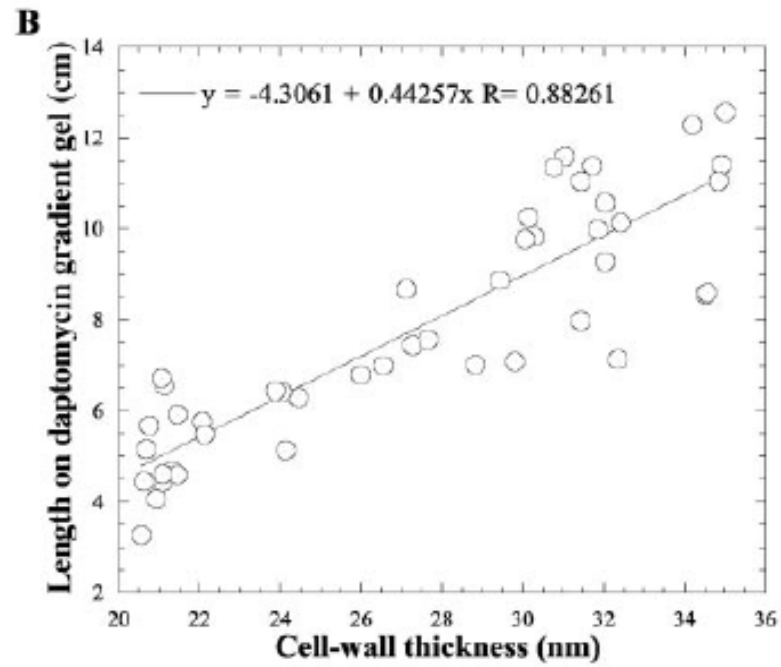
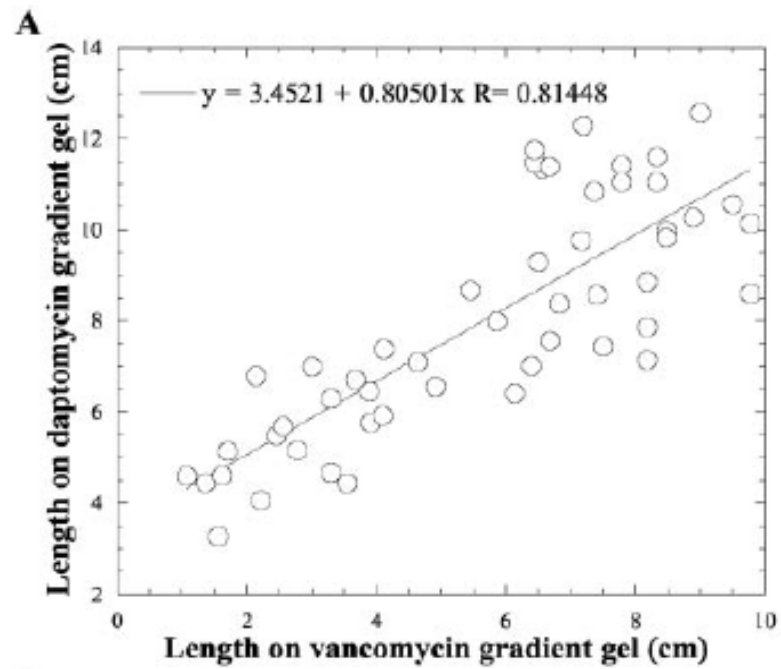
- Anaerobie
 - Actinomyces 4
 - C difficile 1
 - C perfringens 0.5
 - Lactobacillus 16
 - Peptostretococcus 0.06-1
 - Propionibacterium 2
 - C jeikeium 0.25

 - BGN
 - = pénétration ?
-

Dapto - résistance

- SAMR – foyer osseux
 - Marty FM, JCM 2006
 - Skiest DJ, JCM 2006
- SA
 - VISA : souches de référence

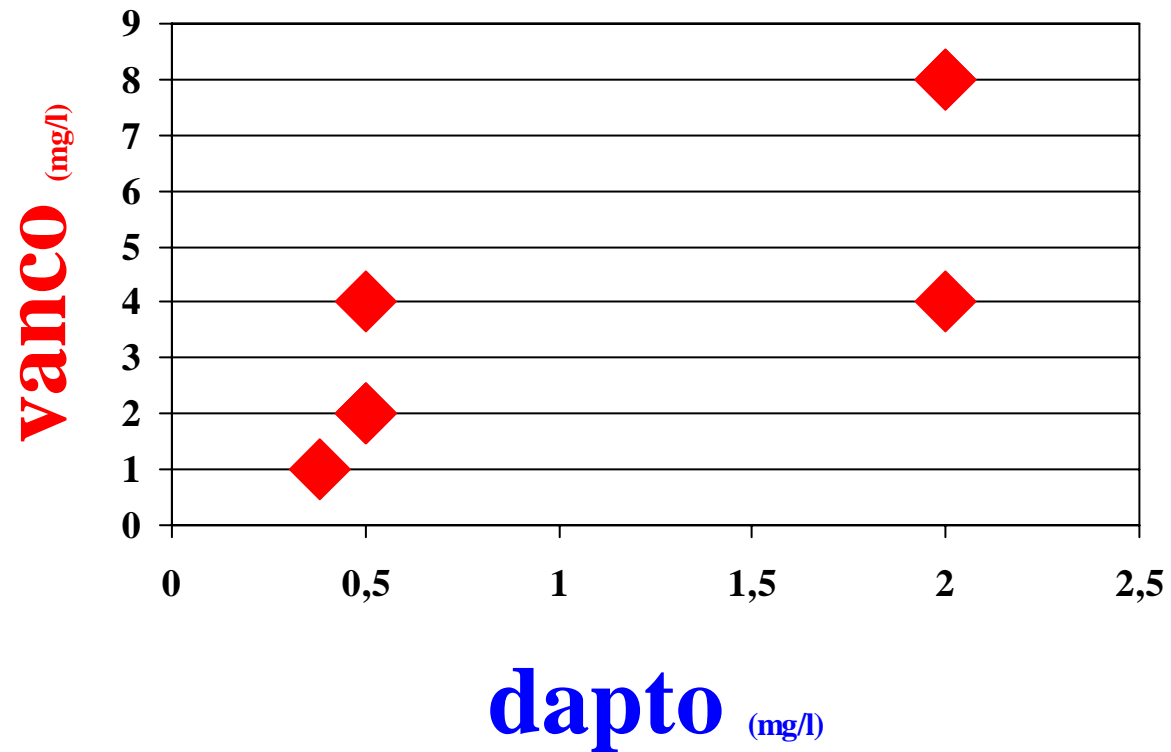




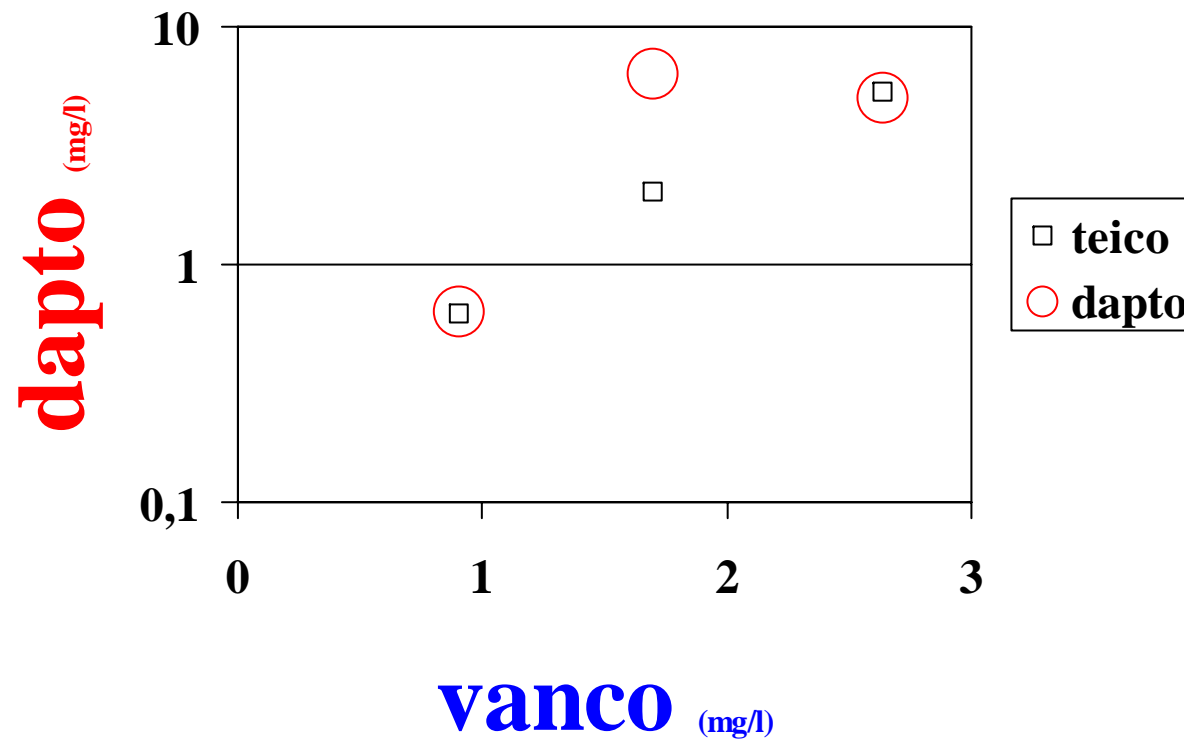
Dapto - résistance

- SAMR – foyer osseux
 - Marty FM, JCM 2006
 - Skiest DJ, JCM 2006
- SA
 - VISA : souches de référence
 - » Cui L, AAC 2006;50:1079
 - Souches cliniques pré-exposées à la vanco
 - » Sakoulas G, AAC 2006;50:1581
- Enterocoque résistant à la vanco

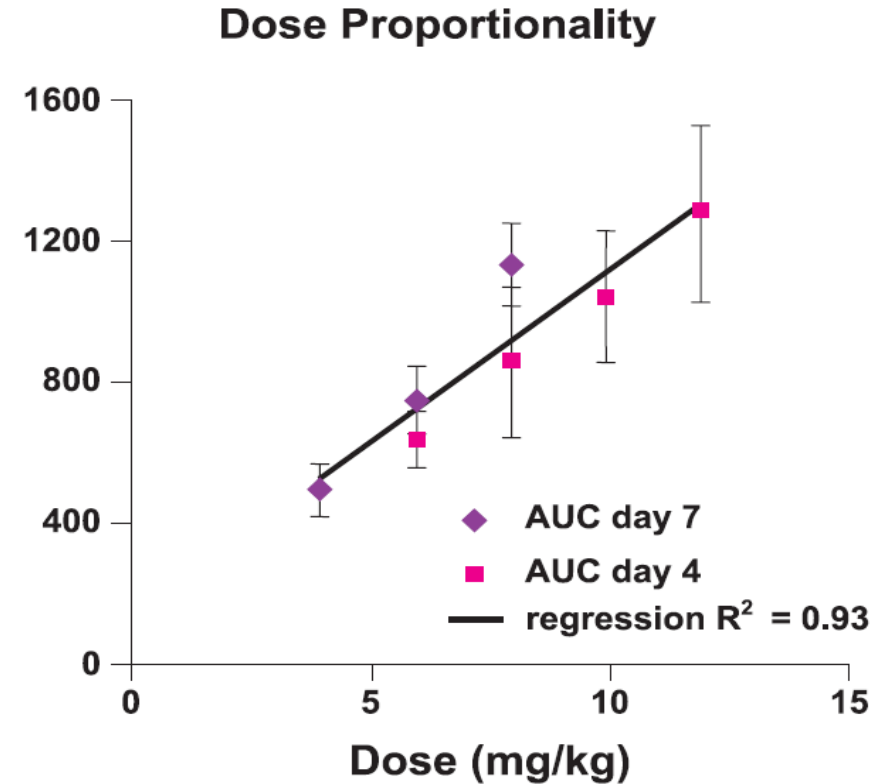
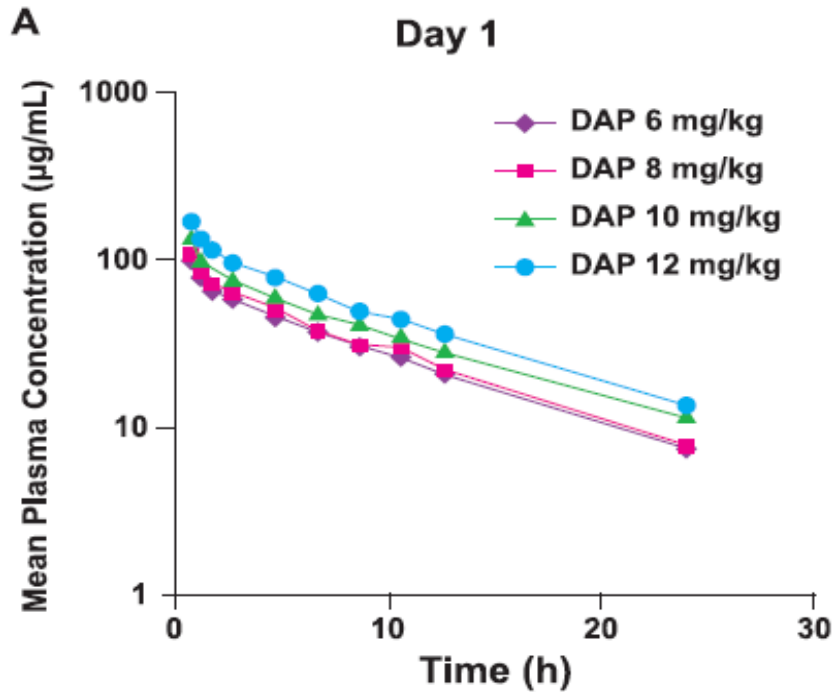
Pré-exposition **vanco** > **dapto**



Pré exposition **dapto** > glycopeptide



Dapto pk



Clairance ml/mn

➤ >80

➤ 40-80

➤ <40

➤ Dialyse

Dvorchik B, AAC 2004;48:2799

T1/2 (h)

8-11

9

19

29

Benvenuto M AAC 2006;50:3245

Dapto: clinique - efficacité

	dapto	comparateur
Peau – tissus mous	4 mg/kg/j od	PeniM, vanco..
	74%	73%
SA, Strepto	82%	71%
Endocardite SA	6 mg/kg/j od	PeniM, vanco..
	44.2%	41.7%
• Rechute (n)	19	11
	<small>augmentation de CMI dapto</small>	<small>si vanco augmentation CMI</small>
Pneumonie comm.	4 mg/kg/j od	ceftriaxone 1g
usa	85.7%	84.8%
europe	74.3%	85.3%

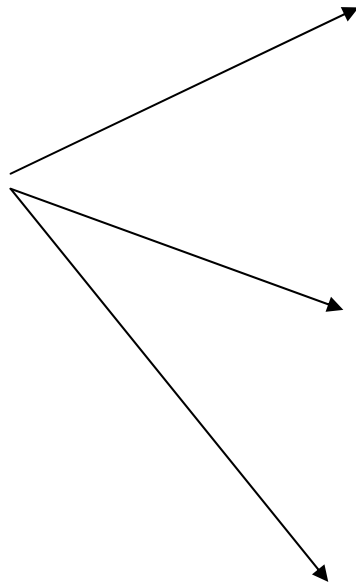
Dapto: clinique - toxicité

- **Troubles digestifs**
- **Douleur – inflammation au site de perfusion**
- **Céphalées**
- **Arrêt pour toxicité: 2.8%**

- **CPK augmentées 5-10%**

**Succession ineluctable et dangereuse, rompre le cercle
Gram +, nécessité d'une diversité anti-staphylococcique**

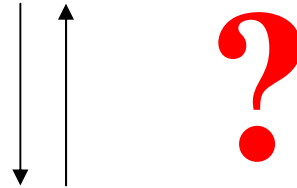
MRSA
Non-pulmonaire



**Succession ineluctable et dangereuse, rompre le cercle
Gram +**

MRSA
Non-pulmonaire

vancomycine



daptomycine

Linezolide
Quinupristine/dalfopristine
Tigecycline
Ceftobibrole, ceftaroline

Dapto - espoir

- Daptomycine
 - Rapidement bactéricide
 - Sans bactériolyse
 - => traitement des méningites bactériennes
 - » Grandgirard D, AAC 2007;51:2173
 - » Stucky A, AAC 2007;51:2249
 - » Gerber P JAC 2006;57:720

Merci de votre attention

Posaconazole

Noxafil®

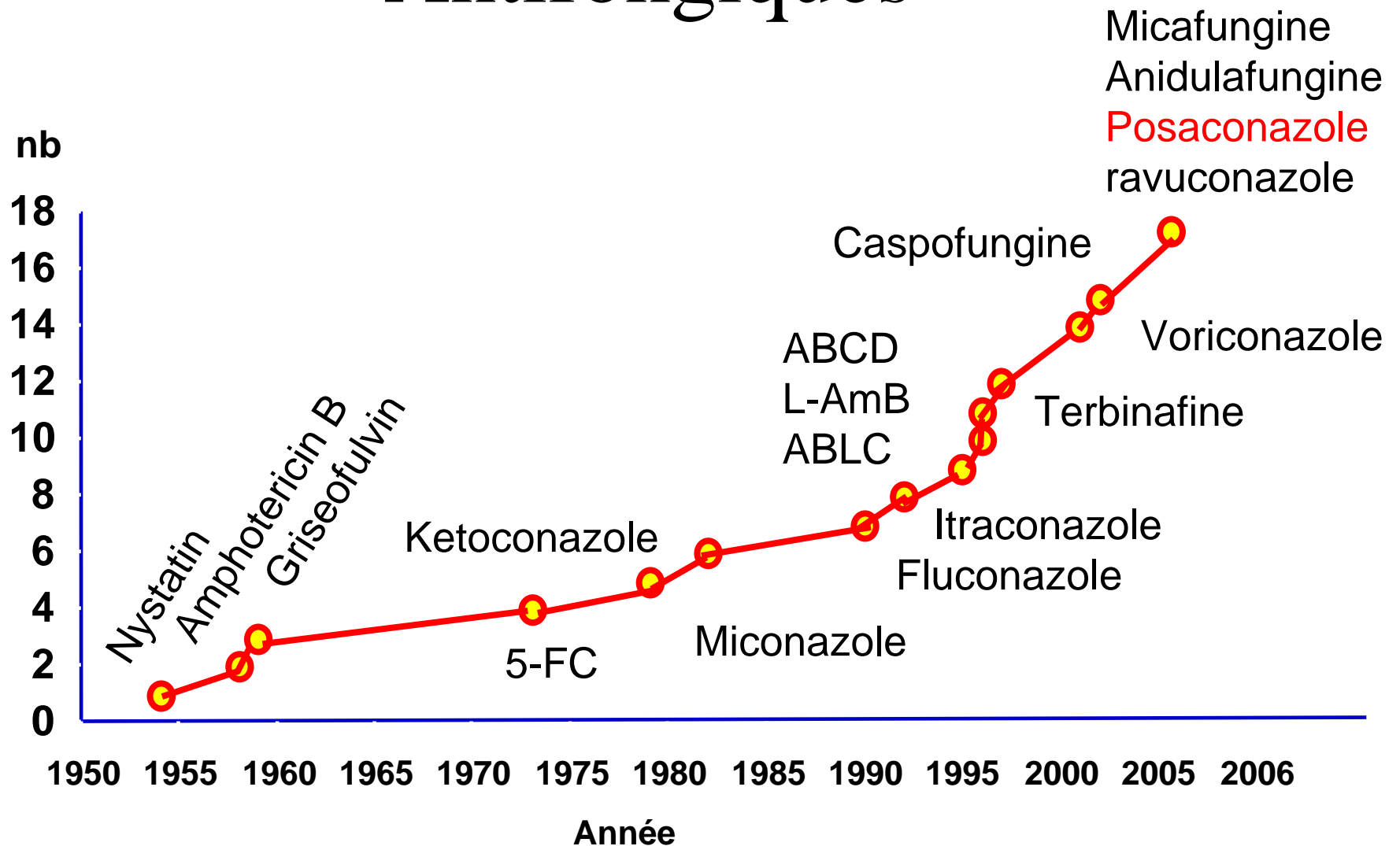
Schering Plough

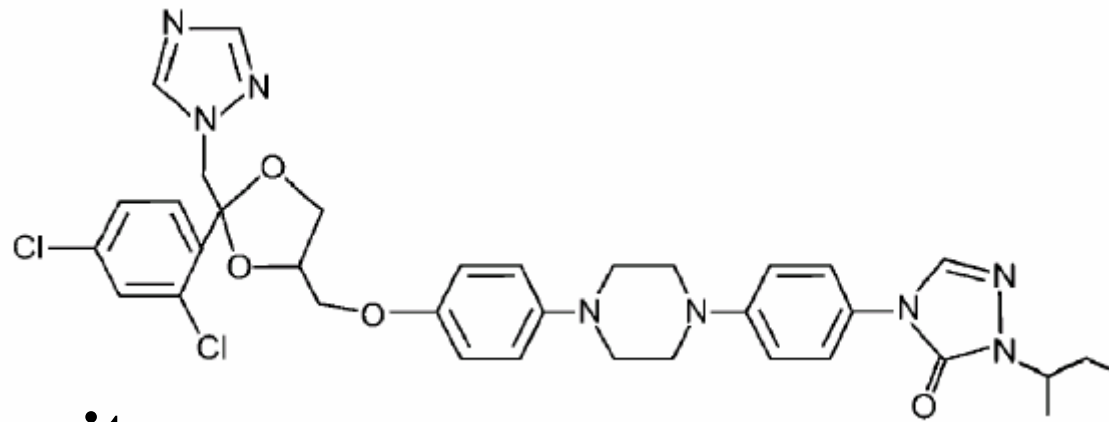
Journée des Référents

JNI 2007

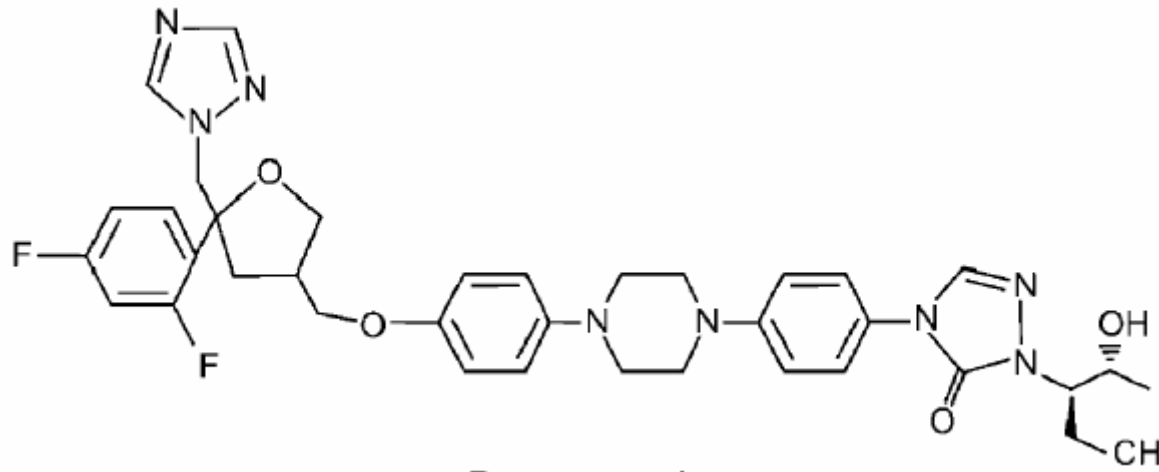
P Chavanet

Antifongiques

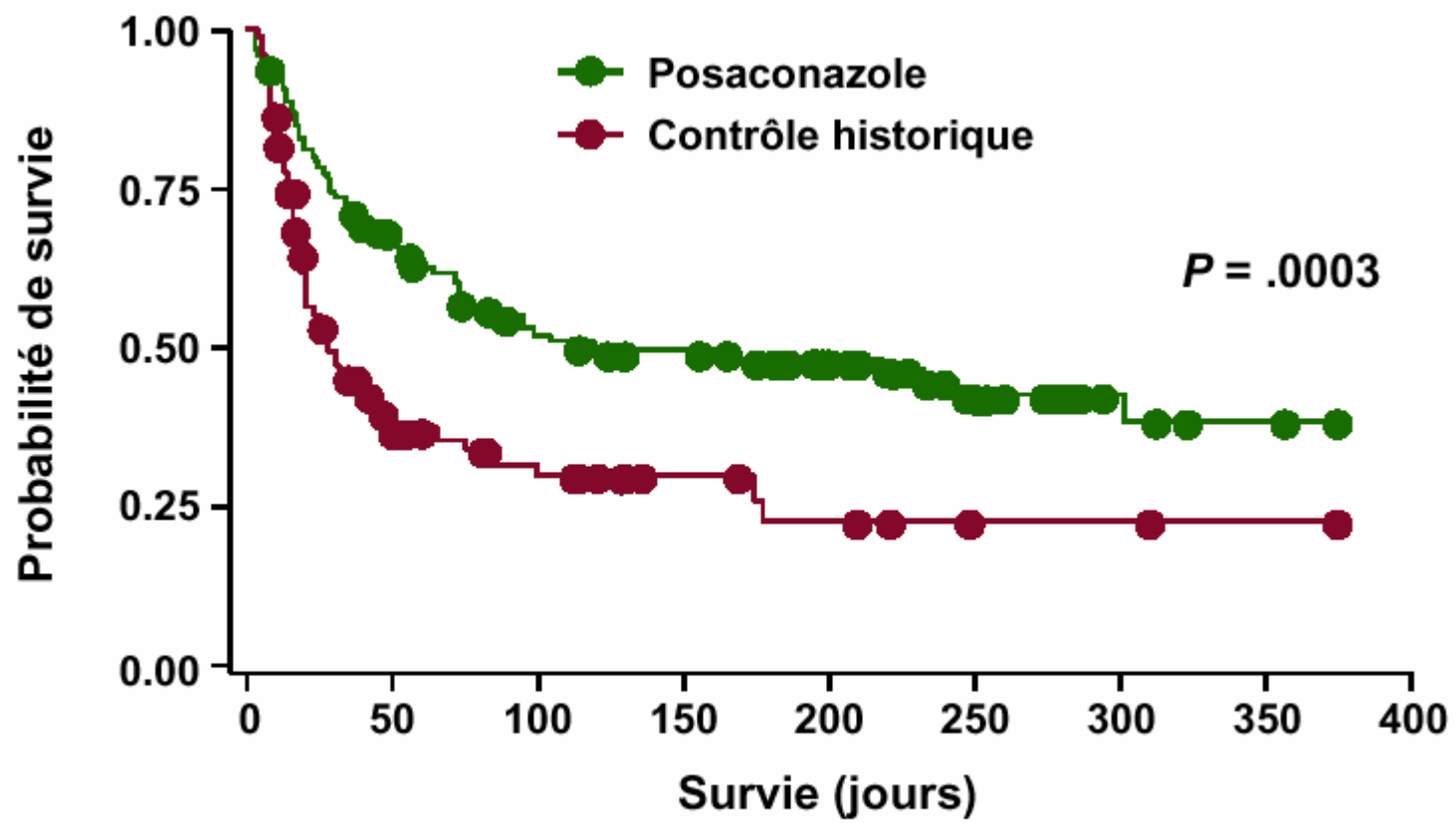




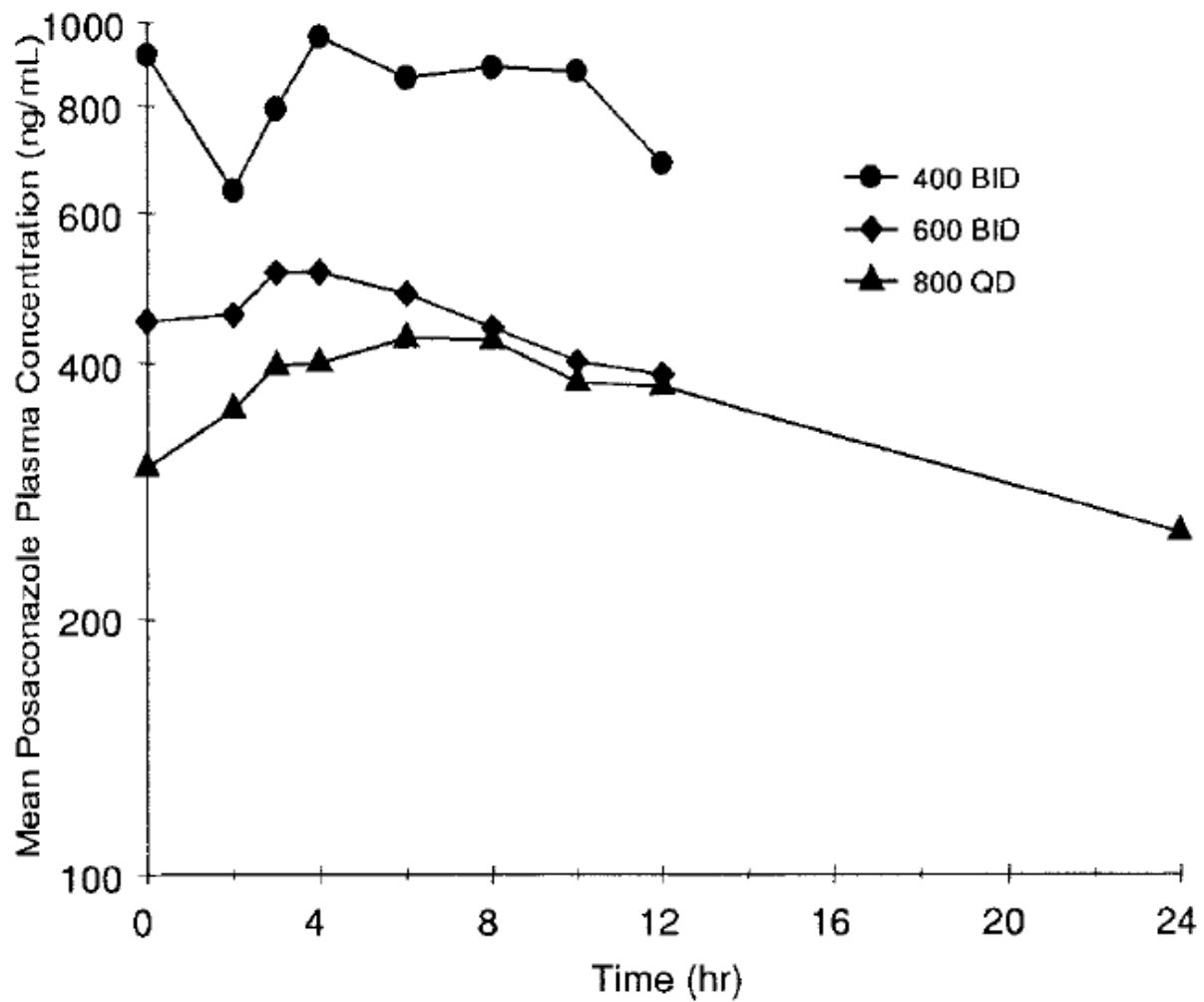
itraco



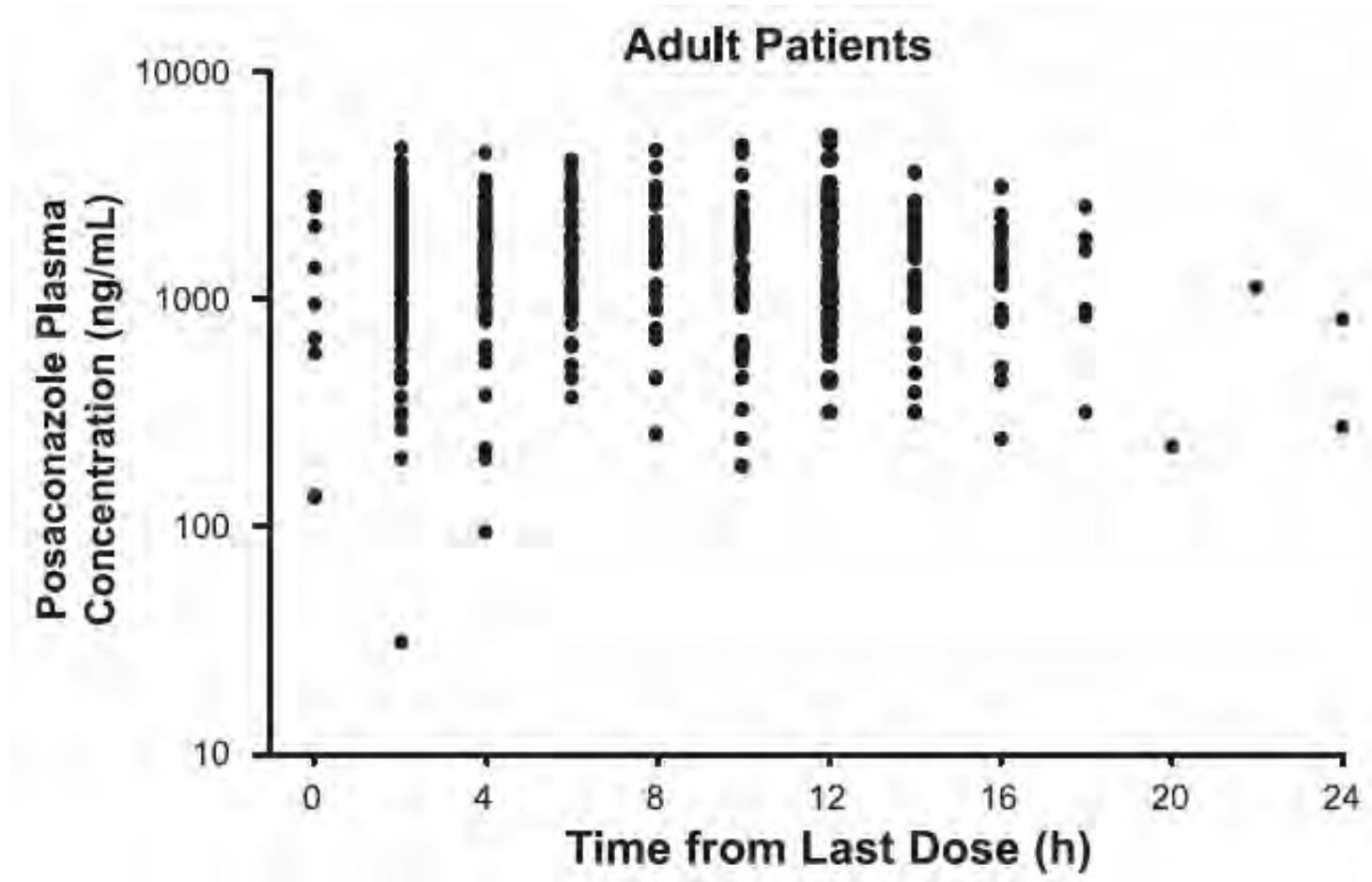
posaco

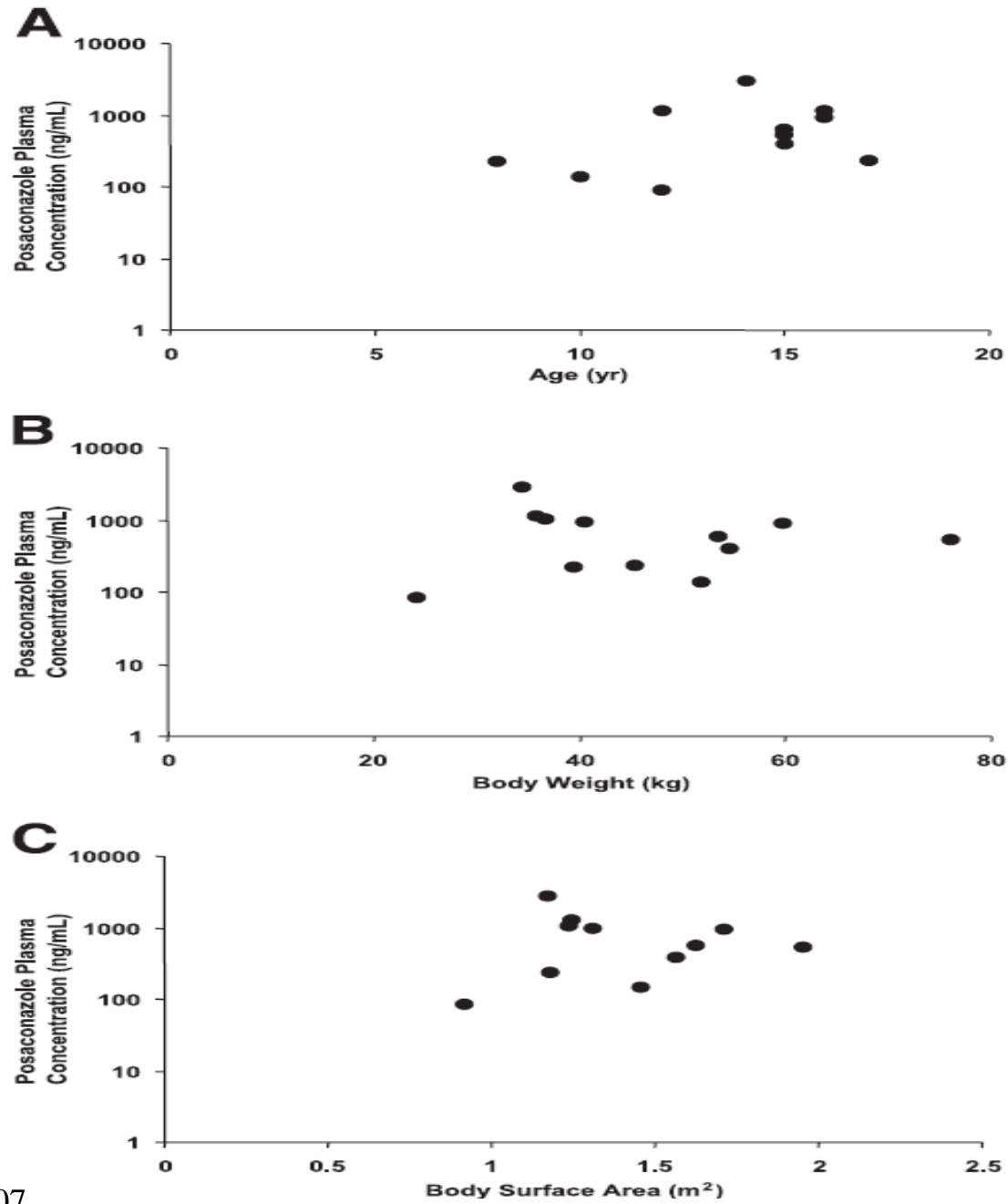


Raad I et al. ICAAC 2004. Abstract M-669.



Posaco pk





Posaco PK

- $800 \times 1 < \mathbf{400 \times 2} \ll 200 \times 4$

Posaco PK

- 800 x 1 < **400 x 2** << 200 x 4
- Interactions ++
- Suivi des concentrations ?
 - 0.25 mg/l au creux ?

Comparaisons in vitro des antifongiques azolés

-Candida

	CMI 90			
	Fluco	Itra	Vori	Posa
C.albicans	16	1	0,5	0.063
C.glabrata	64	4	2	2
C.paraps	4	0.5	0.125	0.25
C.tropical	4	0.5	0.5	0.25
C.krusei	>64	1	0.5	1

Posaco vs candidose oesophagienne

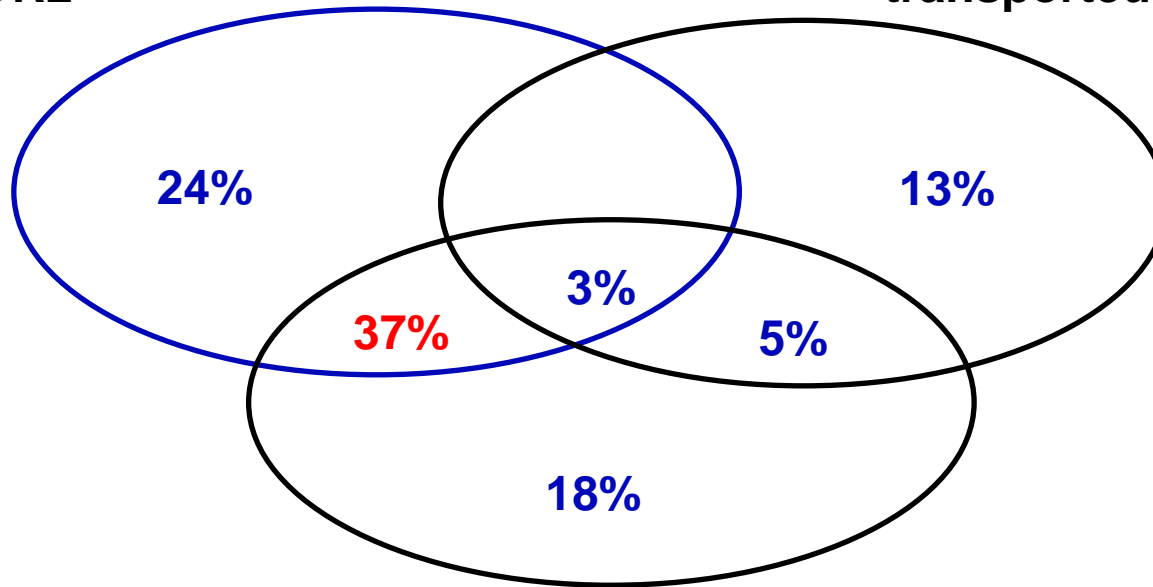
« vih »

- **Candidose oesophagienne**
 - **Fluco = posaco** (Vasquez CID 2006)

Résistance aux azolés chez C.albicans

Surepression de transporteurs
CDR1/CDR2

Surepression de
transporteurs CaMDR1



Mutations ERG11

Fluco <<< vorico < posaco

Comparaisons in vitro des antifongiques azolés

-Candida

	CMI 90			
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C.albicans	16	1	0,5	0,063
C.glabrata	64	4	2	2
C.paraps	4	0.5	0.125	0,25
C.tropical	4	0.5	0.5	0.25
C.krusei	>64	1	0.5	1

Sur souche fluco-R

C. albicans	-	32	32	16	
C. glabrata	-	16	8	16	> x 250

Posaco vs candidoses orales VIH résistantes au fluco

- Posaco
- Succès: 73-75%
 - en rattrapage des candidoses orales VIH résistantes au fluco:
 - Skiest Dj, CID 2007

Comparaisons in vitro des antifongiques azolés

-Aspergillus

	CMI 90		
	Itra	Vori	Posa
A flavus	1	1	0.25
A fumigatus	1	0.5	0.5
A niger	2	2	0.5
A terreus	0.5	0.5	0.25

Posaco vs aspergillose

- Rattrapage de candin et/ou vorico
 - Succès = 42%
 - Walsh TJ, CID 2007 Jan 1;44(1):2-12

Posaco vs zygomycetes in vitro

= trou du vorico

In vitro

	posaco		vorico	
	CMI 90	<0.5 (%)	CMI 90	<2 (%)
Rhizopus	1	80	>8	5
Mucor	2	70	>8	0
Absidia c	0.03-0.25	-	>8	-
Cunninghamella	0.01-1	75	>8	10

Posaco vs zygomycose des succès cliniques

- Van Burik CID 2006
 - 91 pts en sauvetage
 - Succès: 60%
- Greeberg AAC 2006
24 pts en sauvetage
 - Succès: 79% (+ chir.)
- Mullane K, Transpl Infect Dis. 2007 Jun;9(2):89-96
- Page RL, Pharmacotherapy. 2007 Feb;27(2):290-8
-

Posaconazole en 2007

- Zygomycose
- Protocoles
 - Curatif
 - prophylaxie

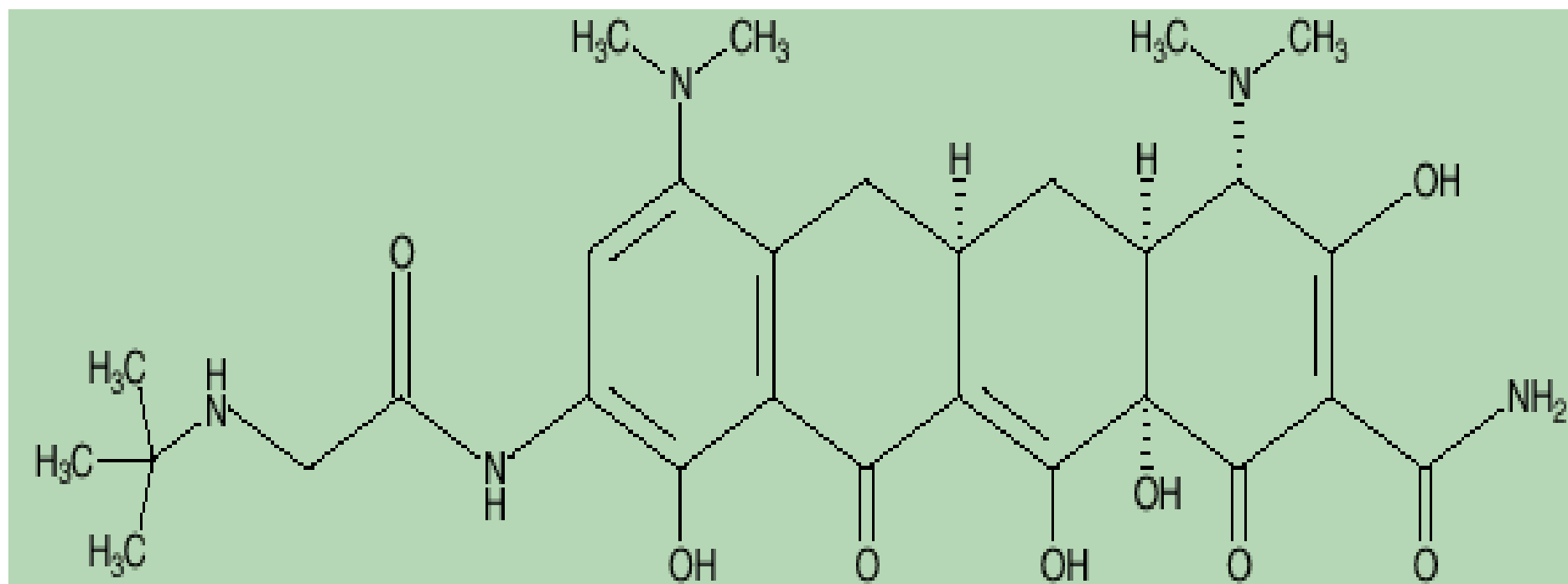
Tigecycline

Tigacyl® , Wyeth

Journée des Référents

JNI 2007, Dijon

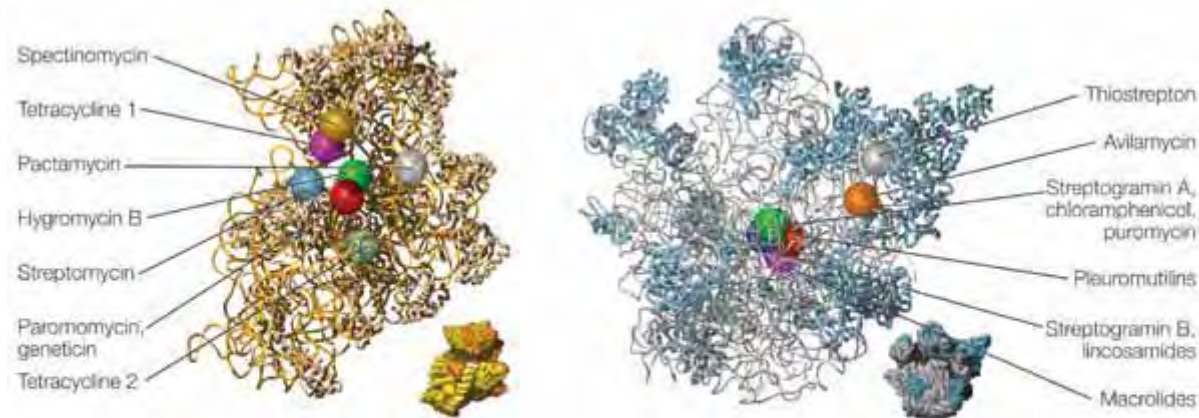
P Chavanet



tigecycline



+ Tet +, +,
+ acrA/B, AdeABC



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 Nature Reviews | Microbiology

+ Affinité: x 5
+ ↓ synth. Prot: x 10

Sensibilité « aerobie »

BGN Soussy CJ, icaac 06

BACTERIAL SPECIES (Number of strains)	MIC ₅₀ (μg / mL)		MIC ₉₀ (μg / mL)	
	A	B	A	B
<i>Enterobacteriaceae</i> (400) except <i>Proteus spp</i>	0.5	0.5	2	2
<i>Proteus spp</i> (100)	2	1	8	4
<i>P.aeruginosa</i> (100)	16	8	32	32
<i>A.baumannii</i> (100)	0.5	0.25	2	2
<i>S.maltophilia</i> (50)	0.5	0.25	2	2

Sensibilité « aerobie »

Gram + Soussy CJ, icaac 06

BACTERIAL SPECIES (Number of strains)	MIC ₅₀ (μg / mL)		MIC ₉₀ (μg / mL)	
	A	B	A	B

MSSA (100)	0.12	0.06	0.5	0.5
MRSA (150)	0.12	0.06	0.5	0.5
GISA (30)	0.25	0.12	0.5	0.5
MSCNS (50)	0.12	0.06	0.5	0.5
MRCNS (50)	0.25	0.12	0.5	0.5
<i>E. faecalis</i> (100)	0.12	0.06	0.5	0.5
<i>E. faecium</i> (50)	0.12	0.06	0.25	0.25
Streptococci A, C & G (100)	0.06	0.03	0.25	0.25
PSSP (50)	0.03	0.03	0.12	0.12
PRSP (48)	0.03	0.03	0.12	0.12

Sensibilité « aerobie »

Soussy CJ, icaac 06

BACTERIAL SPECIES (Number of strains)	MIC ₅₀ (μg / mL)		MIC ₉₀ (μg / mL)		<i>C. critique</i>
	A	B	A	B	
<i>Enterobacteriaceae</i> (400) except <i>Proteus spp</i>	0.5	0.5	2	2	≤ 2
<i>Proteus spp</i> (100)	2	1	8	4	
<i>P.aeruginosa</i> (100)	16	8	32	32	
<i>A.baumannii</i> (100)	0.5	0.25	2	2	≤ 0.5
<i>S.maltophilia</i> (50)	0.5	0.25	2	2	
MSSA (100)	0.12	0.06	0.5	0.5	
MRSA (150)	0.12	0.06	0.5	0.5	
GISA (30)	0.25	0.12	0.5	0.5	
MSCNS (50)	0.12	0.06	0.5	0.5	≤ 0.25
MRCNS (50)	0.25	0.12	0.5	0.5	
<i>E.faecalis</i> (100)	0.12	0.06	0.5	0.5	
<i>E.faecium</i> (50)	0.12	0.06	0.25	0.25	
Streptococci A, C & G (100)	0.06	0.03	0.25	0.25	
PSSP (50)	0.03	0.03	0.12	0.12	
PRSP (48)	0.03	0.03	0.12	0.12	

Sensibilité « anaérobie »

Dubreuil L, icaac 06

TABLE 1. ACTIVITY OF TIGECYCLINE AGAINST 230 ANAEROBIC BACTERIA

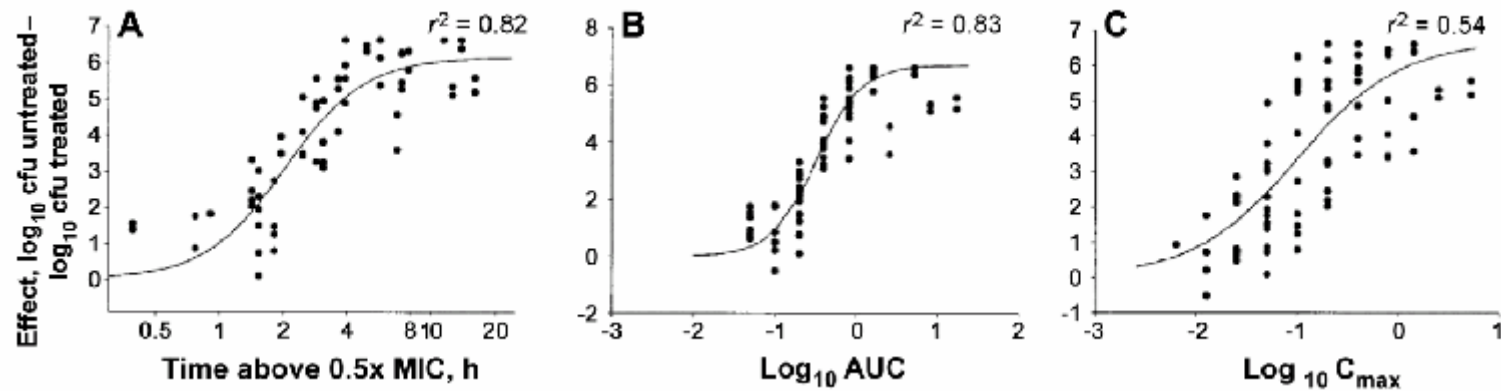
BACTERIAL SPECIES	MIC RANGE (mg / L)	MIC (mg / L)	
		MIC ₅₀	MIC ₉₀
<i>Bacteroides fragilis</i> (84)	[0.06 - 16]	0.5	2
<i>Bacteroides thetaiotaomicron</i> (14)	[0.06 - 16]	2	16
Other <i>Bacteroides</i> (19) ^[1]	[0.06 - 2]	0.25	1
All <i>Bacteroides</i> of the fragilis group (117)	[0.06 - 16]	0.5	2
<i>Prevotella spp</i> (4) ^[2]	[0.06 - 0.125]	N D	N D
All gram-negative anaerobes (121)	[0.06 - 16]	0.5	2
<i>C. perfringens</i> (48)	[0.06 - 2]	0.5	1
<i>C. difficile</i> (18)	[0.06 - 0.25]	0.125	0.25
Other clostridia (6) ^[3]	[0.06 - 0.5]	N D	N D
<i>Fingoldia magna</i> (13)	[0.06 - 0.5]	0.125	0.25
<i>Parvimonas (Micromonas) micros</i> (10)	[0.06 - 0.5]	0.125	0.25
Other GPAC: gram-positive cocci (14) ^[4]	[0.06 - 0.5]	0.125	0.25
All gram-positive anaerobes (109)	[0.06 - 2]	0.125	1
All anaerobes (230)	[0.06 - 16]	0.25	2

C critique

≤ 4

Tigecycline relation dose response

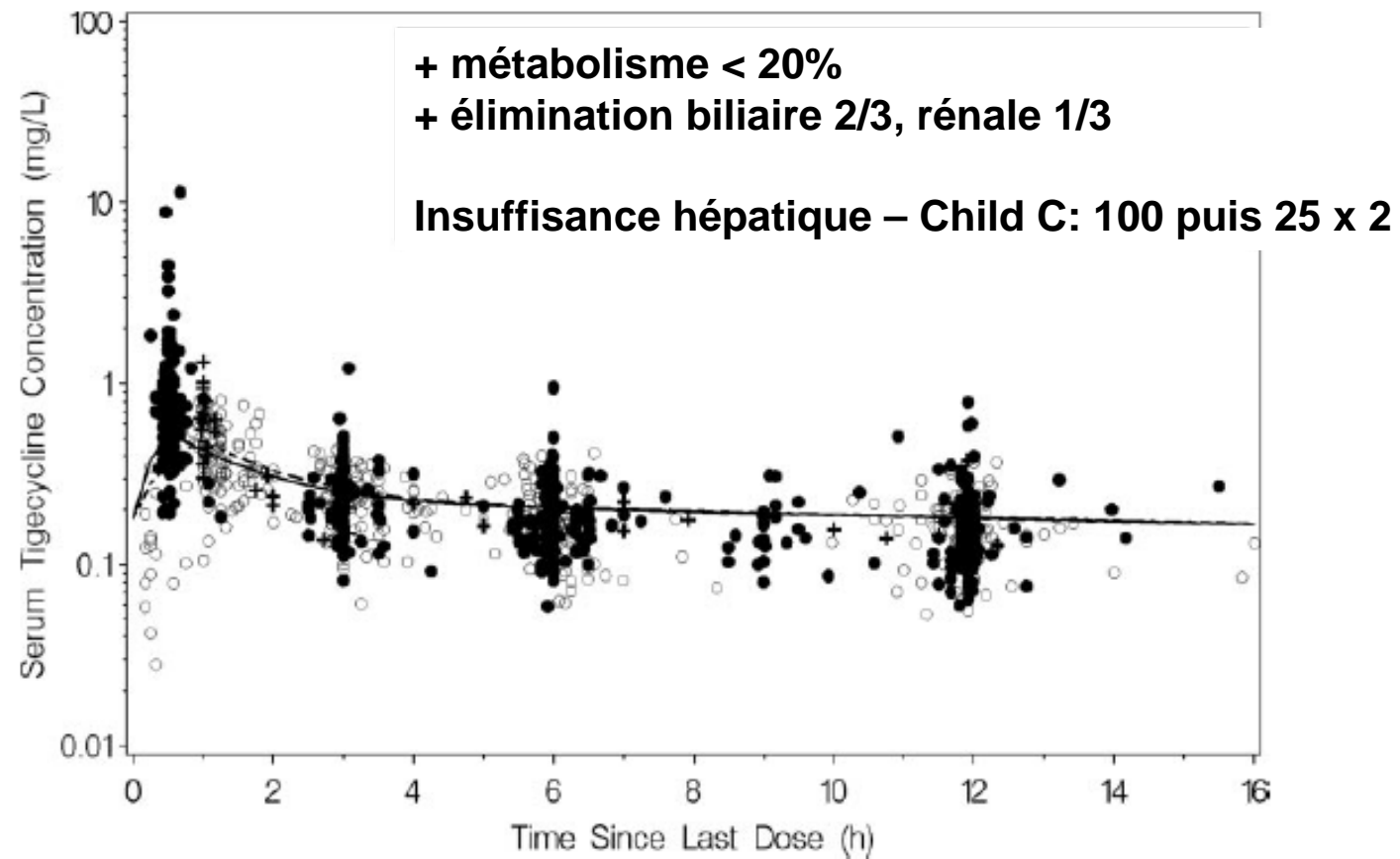
Infection cuisse - Souris neutropéniques



Chez l'homme
AUC/MIC ???

mais antibiotique intra-cellulaire

Tigecycline: PK



Tigecycline elf, cellules

	Cmax	Tmax	Cmin	AUC 0-12	T1/2
Serum	0.72	0.52	0.1	1.73	15

Tigecycline elf, cellules

	Cmax	Tmax	Cmin	AUC 0-12	T1/2
Serum	0.72	0.52	0.1	1.73	15
Film alvéolaire	0.37	6	0	2.28	39

Tigecycline elf, cellules

	Cmax	Tmax	Cmin	AUC 0-12	T1/2
Serum	0.72	0.52	0.1	1.73	15
Film alvéolaire	0.37	6	0	2.28	39
Cellules alvéolaires	15.2	2	6.4	134	23.7

Efficacité 1

Infections « tissus mous »

	tige (%)	vanco+aztreo (%)
succès	75.5-84.3	76.9-86.9

Efficacité 2

Infections « tissus mous »

	tige (%)	vanco+aztreo (%)
succès	75.5-84.3	76.9-86.9

Infection « abdominales »

	tige (%)	imipenem(%)
succès	80.6-91.3	82.4-89.9

Efficacité pneumonie

Dukart G, ICAAC 2006

	tige (%)	levo (%)
<i>Fine II-IV</i>	80.7	74.4
succès	89.7	86.3

Efficacité pneumonie

Dukart G, ICAAC 2006

	tige (%)	levo (%)
<i>Fine II-IV</i>	80.7	74.4
succès	89.7	86.3
Pneumo	92.3	88.9
Bactériémie pneumo	90	72

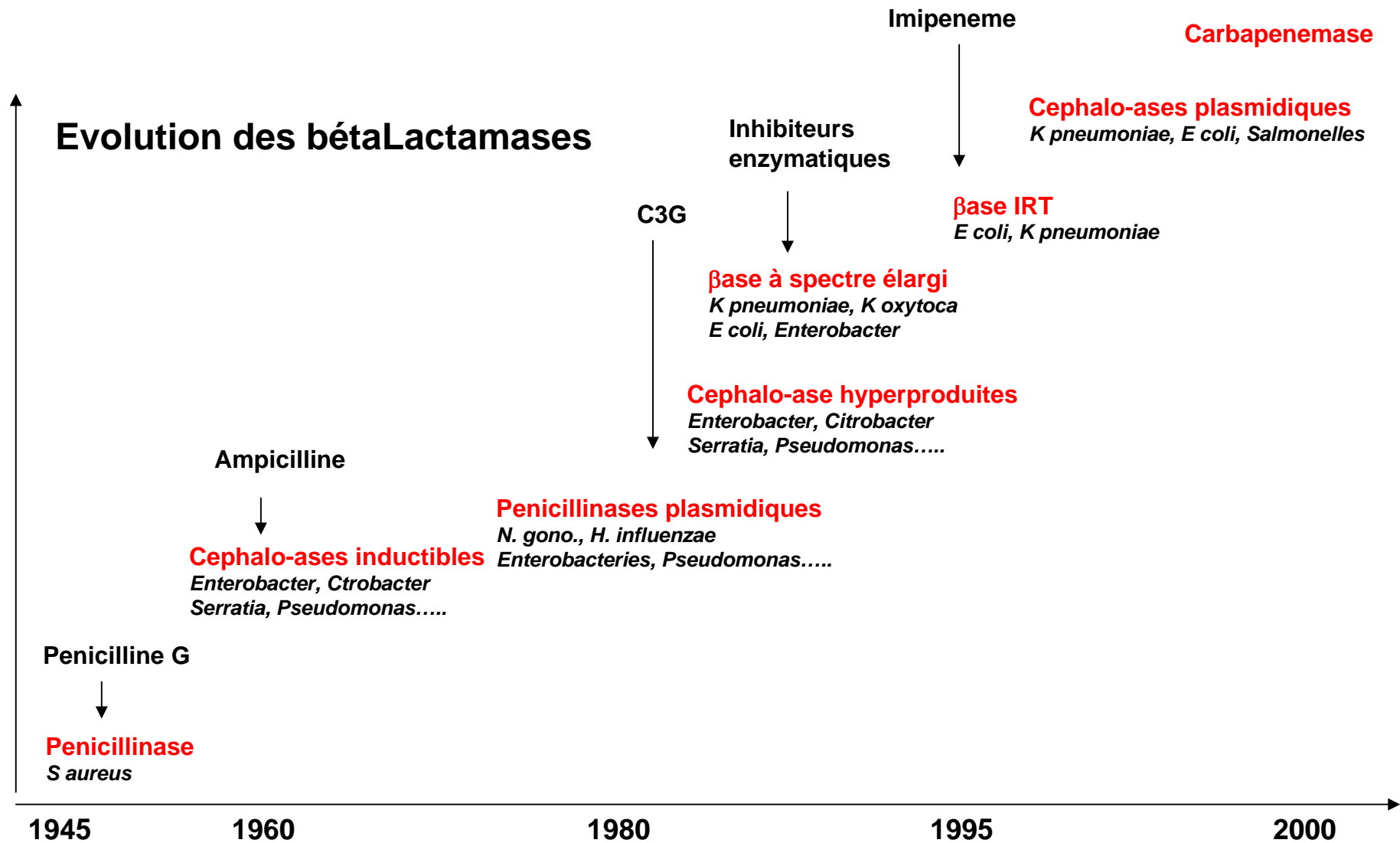
Tigecycline

- Bacteriostatique
 - => prudence (a priori)
 - Immunodéprimés:
 - Neutropéniques
 - Septicémie
 - Mais bonne efficacité sur pneumococcémies
- « intracellulaire »
 - Pkpd intracellulaire

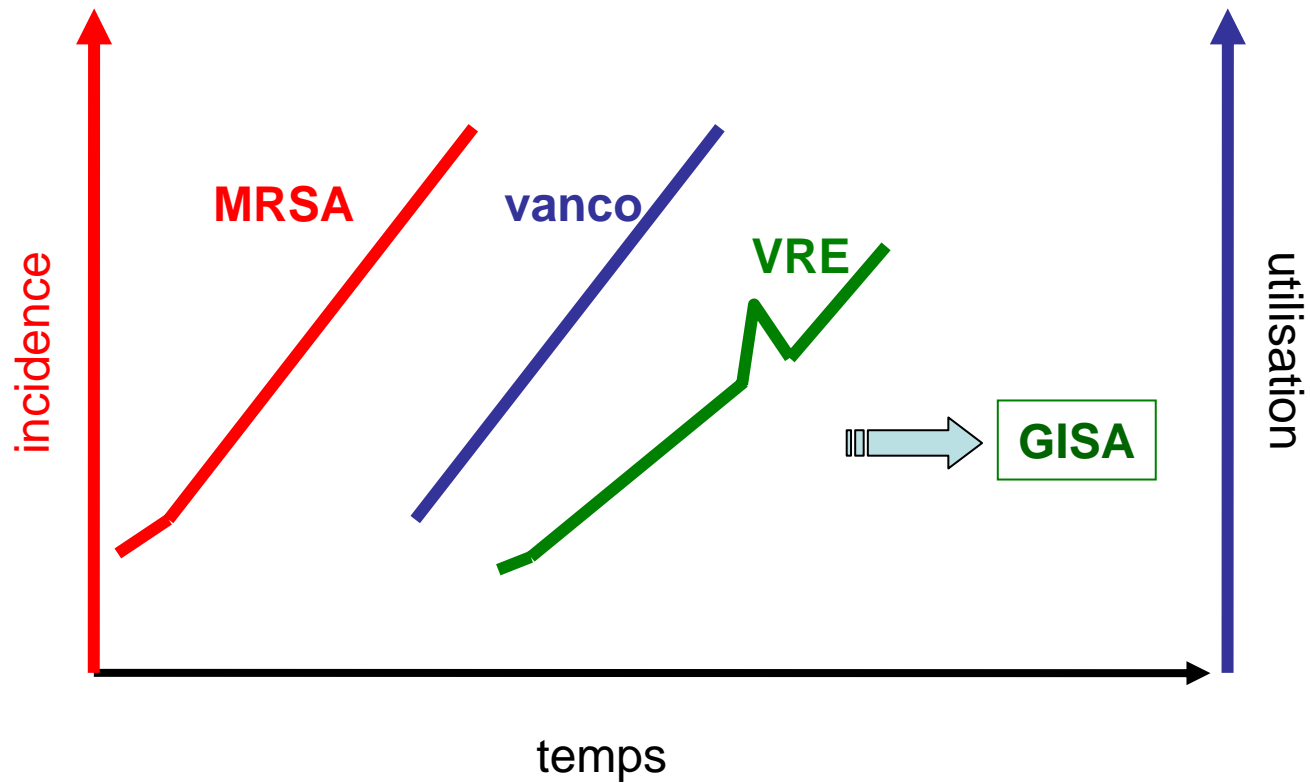
Tigecycline

- Large spectre
 - Aero + anaérobie
- => **infection mixte:**
 - Pied du diabétique
 - Pneumopathie du « vieillard »
 - Infections « muqueuses »
 - gynécologiques
 - abdominales
 - stomato – ORL
 -

Succession ineluctable et dangereuse rompre le cercle Gram -



Succession ineluctable et dangereuse rompre le cercle Gram +



Tigecycline: in vitro

pan-R (souches cliniques)

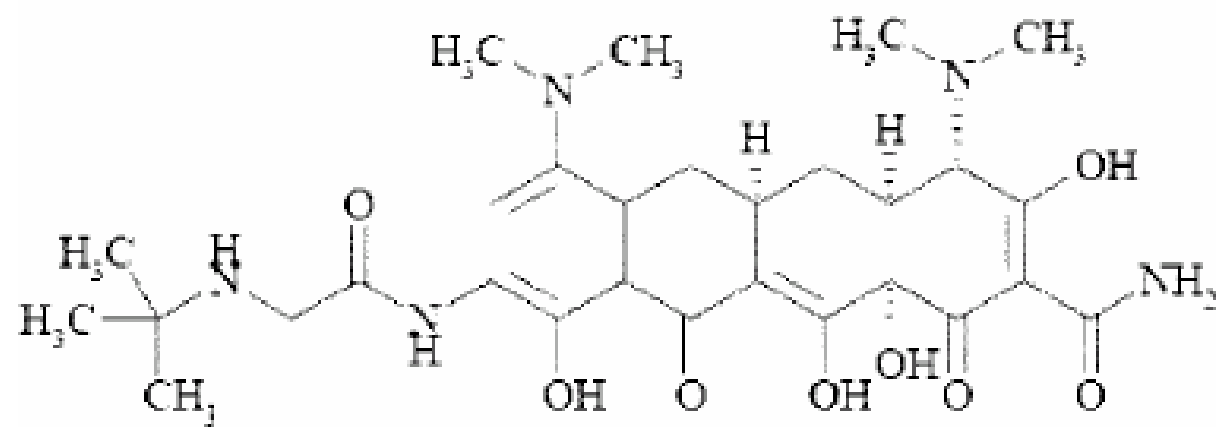
TABLE 1. In vitro activity of tigecycline against 392 multiple-drug-resistant strains

Organism (no. of isolates)	MIC ₅₀ (μ g/ml)	MIC ₉₀ (μ g/ml)	% Susceptible ^a	No. of isolates with MIC (μ g/ml) of:								
				≤ 0.03	0.06	0.12	0.25	0.5	1	2	4	≥ 8
<i>K. pneumoniae</i> (98)	0.5	2	96.9	0	1	4	26	37	11	16	3	0
<i>K. pneumoniae</i> , ESBL positive (27)	1	2	92.6	0	0	0	5	8	4	8	2	0
<i>K. pneumoniae</i> , MBL positive (26)	0.5	2	100	0	0	3	9	9	2	3	0	0
<i>K. pneumoniae</i> , ESBL and MBL positive (28)	0.5	2	100	0	0	1	7	13	2	5	0	0
<i>K. pneumoniae</i> , colistin resistant (15)	0.5	0.5	100	0	1	1	3	9	0	1	0	0
<i>K. pneumoniae</i> , minocycline resistant (28)	2	4	89.3	0	0	0	0	2	8	15	3	0
<i>E. coli</i> (43)	0.12	0.5	100	0	8	18	11	5	1	0	0	0
<i>E. coli</i> , ESBL positive (33)	0.12	0.5	100	0	8	13	8	3	1	0	0	0
<i>E. coli</i> , MBL positive (6)	NA ^c	NA	100	0	0	3	2	1	0	0	0	0
<i>E. coli</i> , minocycline resistant (10)	0.12	0.5	100	0	1	4	3	1	1	0	0	0
<i>A. baumannii</i> (100)	0.5	1	99	0	0	1	5	46	44	3	1	0
<i>A. baumannii</i> , colistin resistant (3)	NA	NA	100	0	0	0	0	2	1	0	0	0
MRSA (91)	0.25	0.25	98.9	0	0	27	58	5	0	1	0	0
<i>E. faecium</i> , VR ^b (60)	0.03	0.06	100	46	12	2	0	0	0	0	0	0
<i>E. faecium</i> , VR, linezolid resistant (5)	NA	NA	100	2	3	0	0	0	0	0	0	0

Tigecycline

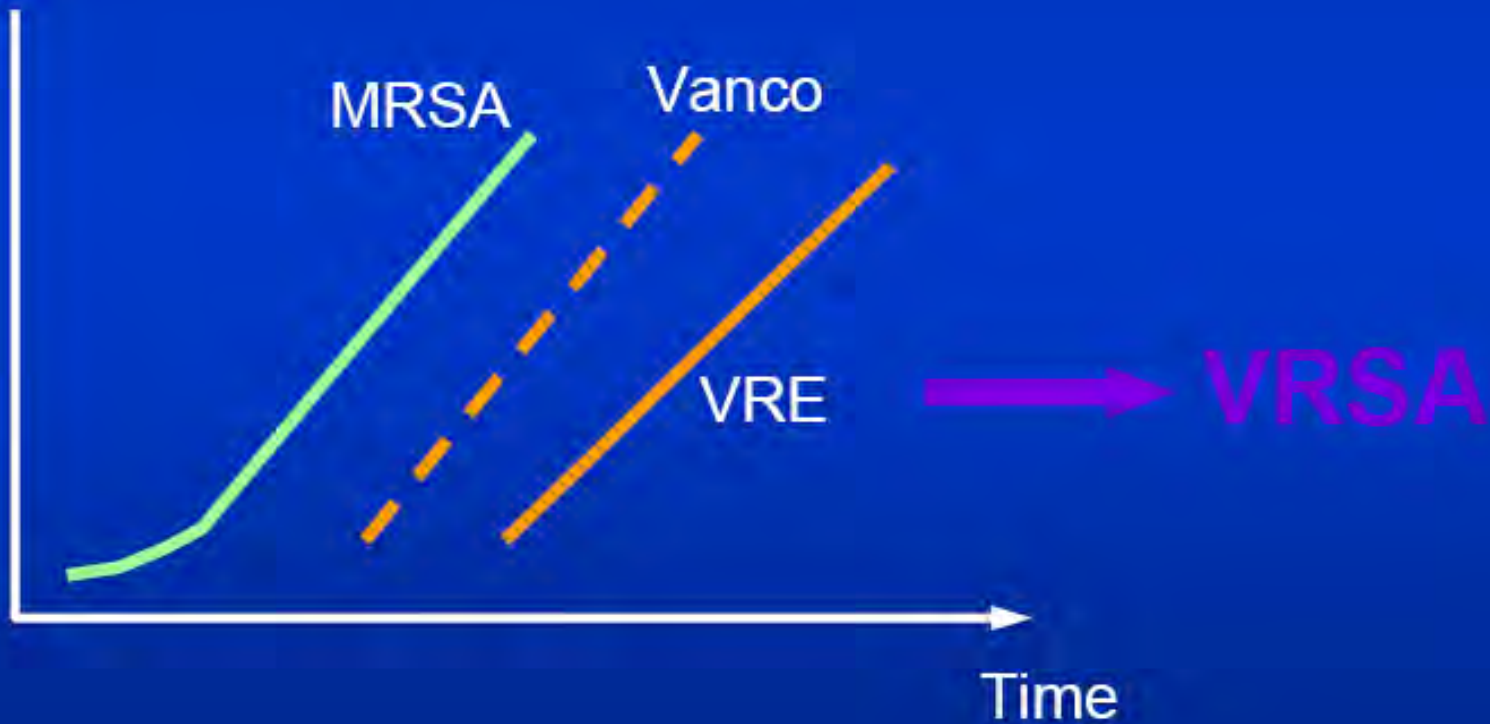
- Large spectre
- => alternative (ou stratégie)
- BGN-R:
 - Beta-lactamines
 - Fluoroquinolone
 - Colimycin
- Gram + (MRSA)
 - Glycopeptide
 - Lipopeptide
 - Linezolide
 - Ceftobibrole, ceftaroline

Merci de votre attention



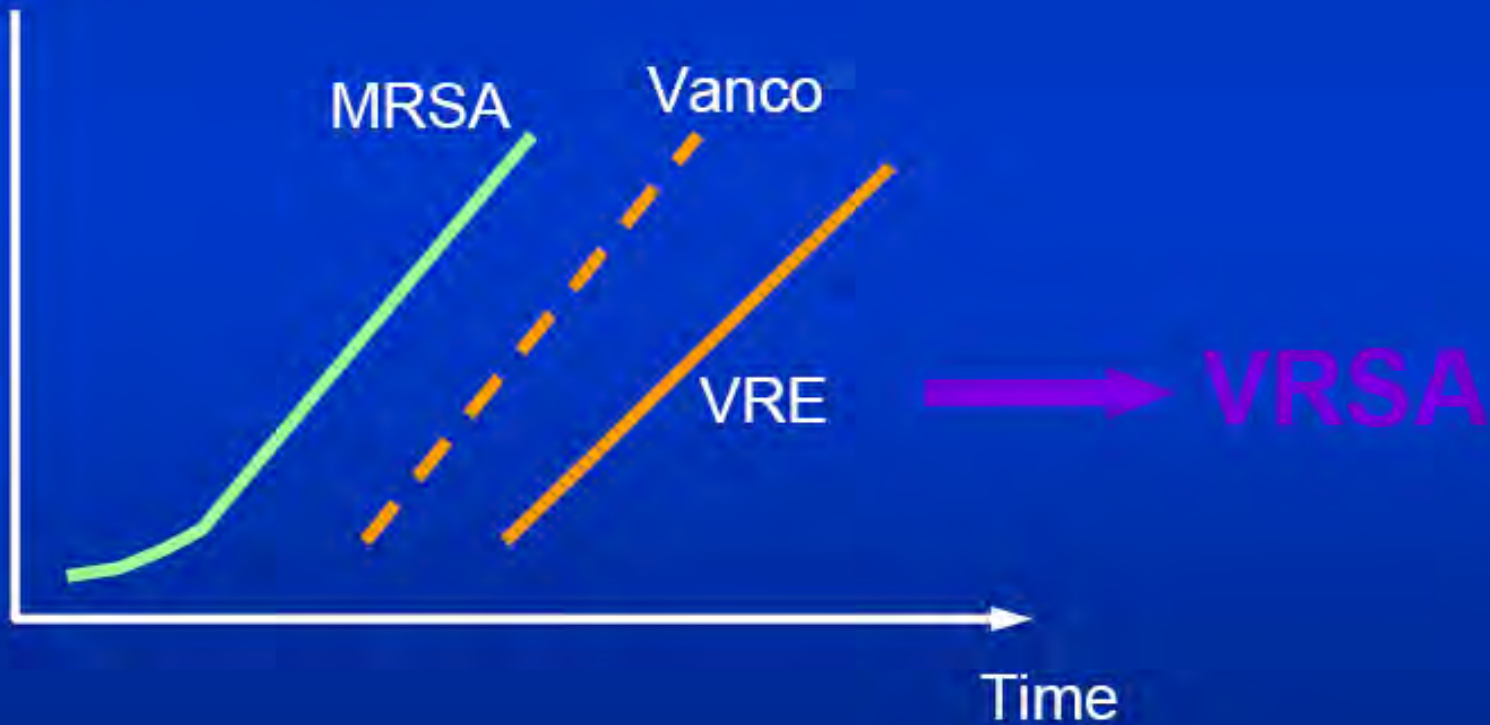
A Bad Mixture... *A Terrible Fear*

Incidence



A Bad Mixture... *A Terrible Fear*

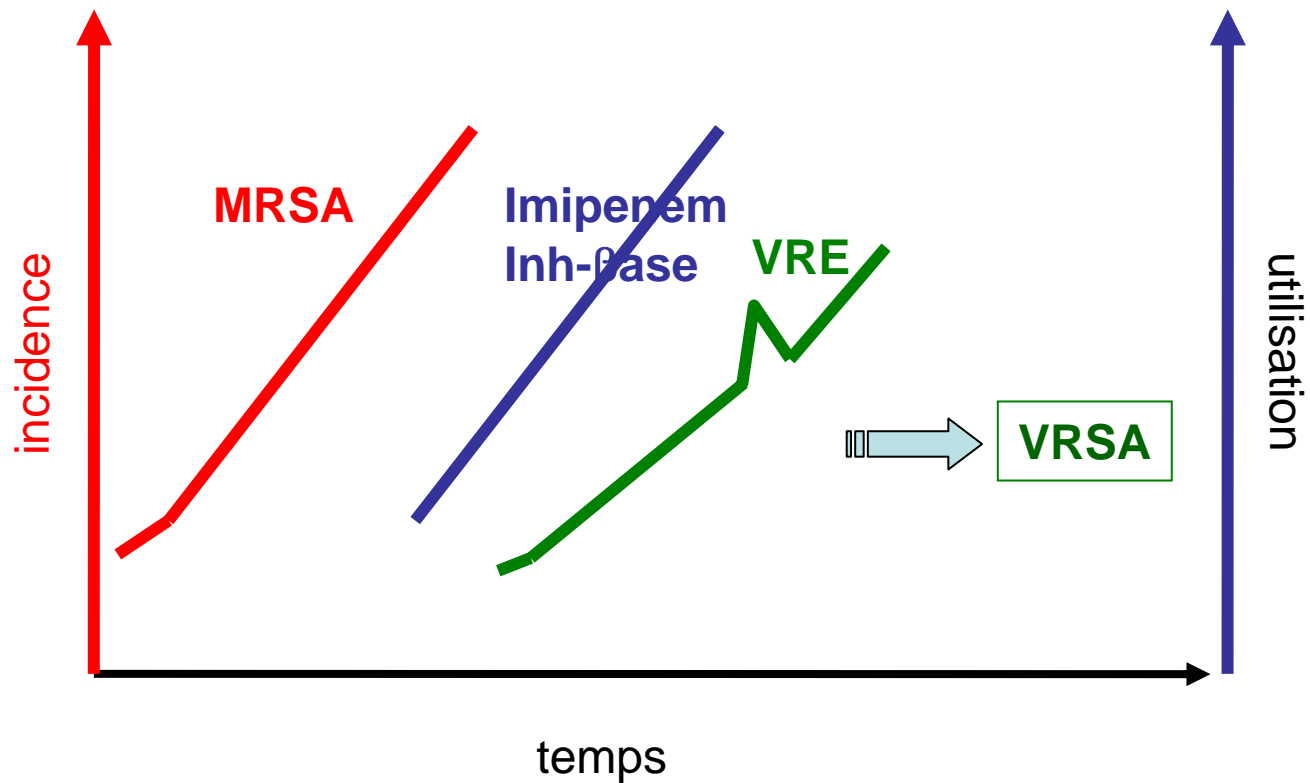
Incidence



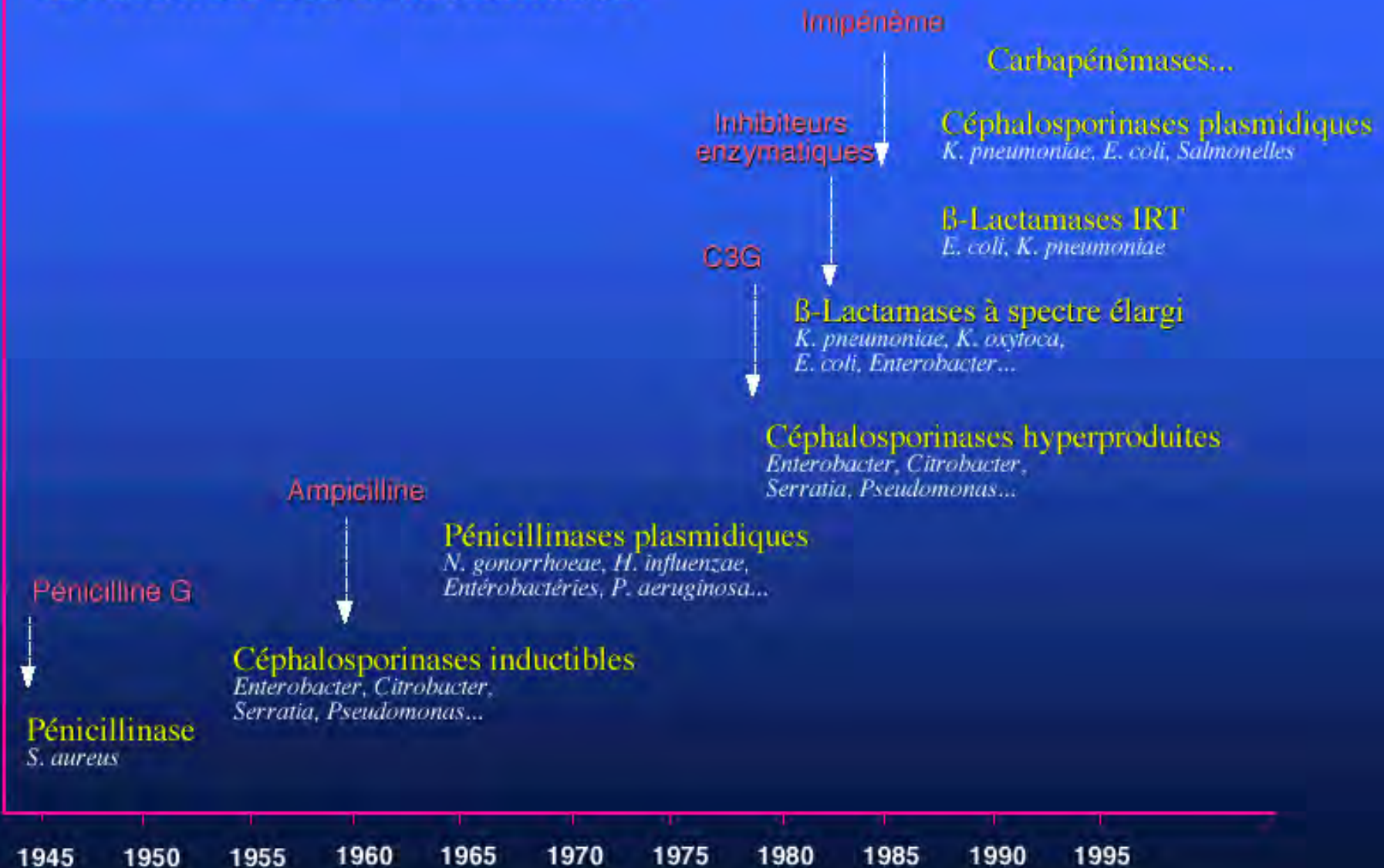
MRSA: New therapeutic Options

- Daptomycin
- Other Novel lipopeptides
- Linezolid
- Quinu/dalfo
- Novel anti-MRSA cephalosporin

Succession ineluctable et dangereuse rompre le cercle Gram -



Evolution des β -lactamases





MRSA: New therapeutic Options

- Daptomycin
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In vitro break point

P. Hawkey, R. Finch
 Clin Microbiol Infect 2007; 13: 354–362

Organism	FDA breakpoint (mg/L)	% Susceptible	EUCAST breakpoint (mg/L)	% Susceptible
<i>Escherichia coli</i> (n = 721)	≤2	100	≤1	100
<i>Serratia</i> spp. (n = 168)	≤2	94	≤1	80
<i>Enterobacter</i> spp. (n = 405)	≤2	96	≤1	90
<i>Klebsiella</i> spp. (n = 582)	≤2	98	≤1	92

Modified from [36]. EUCAST breakpoints for tigecycline were published during 2006 [56].

EFFETS INDESIRABLES


- Troubles gastro-intestinaux, vomissements+++
- Allongement TCA et TP
- Vertiges, céphalées
- Prurit, rash
- Affections vasculaires: phlébites
- Photosensibilité
- Hyperpigmentation, hyperplasie dentaire
- Effet anti-métabolite: augmentation de l'urée sanguine, hypophosphatémie

CI / IM

1) CI:

- Déconseillé chez adolescents de -18 ans
- Absolue chez enfant de -8 ans
- Grossesse, allaitement (passage dans le lait maternel?)

2) IM:

- Warfarine  []° augmente
- Utilisation concomitante d'ATB et de contraceptifs oraux peut diminuer leur efficacité
- Sels de fer ,pansements gastriques

PRECAUTIONS D'EMPLOI

- **Surveillance** des tests de coagulation des patients sous anticoagulants: *TCA, TP*
- **Modalité d'administration:**
 - Rincer la tubulure de perfusion (NaCl 0,9% ou dextrose) si elle est utilisée pour l'administration de plusieurs substances actives
 - Ampho B, chlorpromazine, méthylprednisolone et voriconazole ne peuvent être administrées en même temps

tet

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Table 1. Distribution of *tet* resistance genes among selected Gram-negative bacteria

Efflux	Ribosomal protection and/or efflux
Single genes	
<i>Chlamydia</i> : tet(C)	<i>Eikenella</i> : tet(M)
<i>Stenotrophomonas</i> : tet(35)	<i>Campylobacter</i> : tet(O)
Two or more genes	
<i>Providencia</i> : tet(B), (E), (G)	<i>Haemophilus</i> : tet(B), (K), (M), (A)
<i>Enterobacter</i> : tet(B), (C), (D), (M)	<i>Bacteroides</i> : tet(M), (Q), (X), (36)
<i>Citrobacter</i> : tet(A), (B), (C), (D)	<i>Acinetobacter</i> : tet(A), (B), (H), (M), (39)
<i>Proteus</i> : tet(A), (B), (C), (J)	<i>Neisseria</i> : tet(M), (O), (Q), (W), (B)
<i>Klebsiella</i> : tet(A), (B), (C), (D), (M)	
<i>Escherichia</i> : tet (A), (B), (C), (D), (E), (G), (M), (Y)	
<i>Pseudomonas</i> : tet (A), (B), (C), (E), (G), (M), (34)	