

# Béta Lactamases & Inhibiteurs de B lactamase

à usage du clinicien  
18 novembre 2015

JP Bru  
Maladies Infectieuses  
Centre Hospitalier Annecy Genevois

# Beta lactamases des Enterobactéries

## Classification de Ambler

Classe A Sérines Blactamases (penicillinases)	Classe B Metallo Blactamases	Classe C cephalosporinases	Classe D oxacillinas
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chromosomiques

Penicillinases  
*K.Pneumoniae*  
*Citrobacter freundii*

AmpC non inductibles  
*E.coli*

AmpC inductibles  
*Enterobacter sp*  
*Citobacter freundii*  
*Serratia marcescens*  
*Morganella morganii*  
*Hafnia alvei*  
*Providencia stuartii*

AmpC déréprimées

Spectre  
d'hydrolyse

Penicillines  
C1G

C2G C3G  
+/- C4G

Carba  
penemes  
+/- autres  
Blactamines

Éléments mobiles transférables  
(plasmides transposons)

Penicillinases  
TEM SHV

BLSE  
TEM SHV & CTX-M  
(souvent associées  
à d'autres macanismes de R)

Carbapenemases  
*K.Pneumoniae*C

Carbapenemases  
VIM IMP & NDM

AmpC plasmidiques

OXA spectre étroit

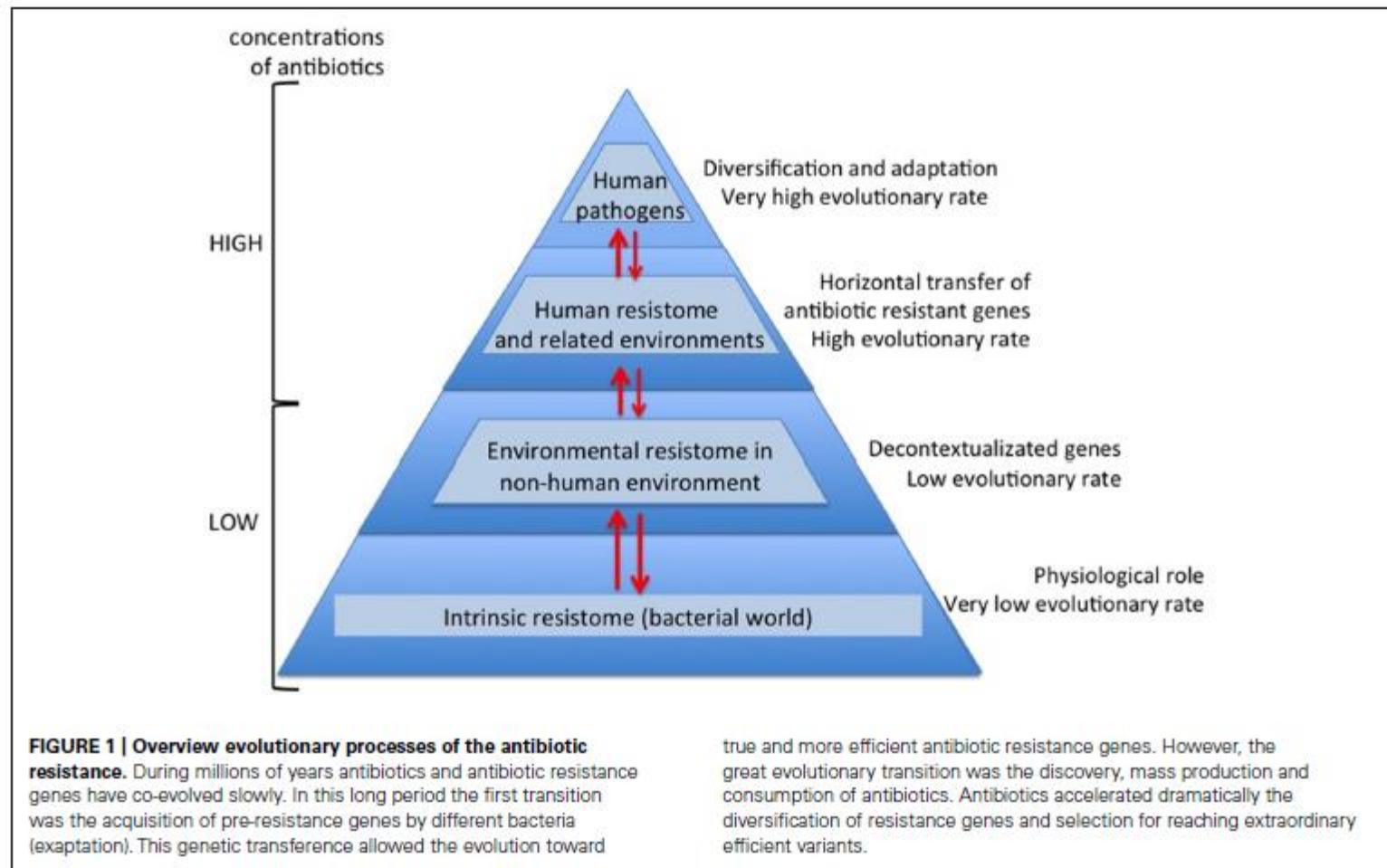
BLSE OXA

Carbapenemases  
OXA 48 variants



# Antibiotics as selectors and accelerators of diversity in the mechanisms of resistance: from the resistome to genetic plasticity in the $\beta$ -lactamases world

Juan-Carlos Galán<sup>1,2,3\*</sup>, Fernando González-Candelas<sup>4,5</sup>, Jean-Marc Rolain<sup>6,7</sup> and Rafael Cantón<sup>1,3</sup>





## Antibiotics as selectors and accelerators of diversity in the mechanisms of resistance: from the resistome to genetic plasticity in the $\beta$ -lactamases world

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**Table 2 | Examples of resistance mechanisms in clinical isolates that evolved from natural functions in environmental bacteria.**

Antimicrobial group	Mechanisms	Related natural protein	Natural reservoirs
Aminoglycosides	AcetylationPhosphorylation	Histone-acetylasesProtein kinases	<i>Streptomyces</i>
Tetracyclines	Efflux (mar)	Major facilitator superfamily EF-Tu, EF-G	<i>Streptomyces</i>
Chloramphenicol	AcetylationEfflux (mar)	AcetylasesMajor facilitatorsuperfamily EF-Tu, EF-G	<i>Streptomyces</i>
Macrolides	Target mutation	50S ribosomal subunit	<i>Streptomyces</i>
$\beta$ -lactams (methicillin)	PBP2a	Homologous PBP2a	<i>Staphylococcus sciuri</i>
$\beta$ -lactams (carbapenems)	OXA-48 inactivating enzyme	Proteins participating in peptidoglycan synthesis	<i>Shewanella xiamenensis</i>
	OXA-23 inactivating enzyme	Proteins participating in peptidoglycan synthesis	<i>Acinetobacter radioresistens</i>
Fluoroquinolones	Topoisomerase protection	Qnr-like protein	<i>Shewanella algae</i>

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(plasmides, R-facons)

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Carbapenemases  
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OXA spectre étroit

BLSE OXA

Carbapenemases  
OXA 48 variants

# épidémiologie des EBLSE

2003

Proportion of 3rd gen. cephalosporins Resistant (R)  
*Escherichia coli* Isolates in Participating Countries in  
2003

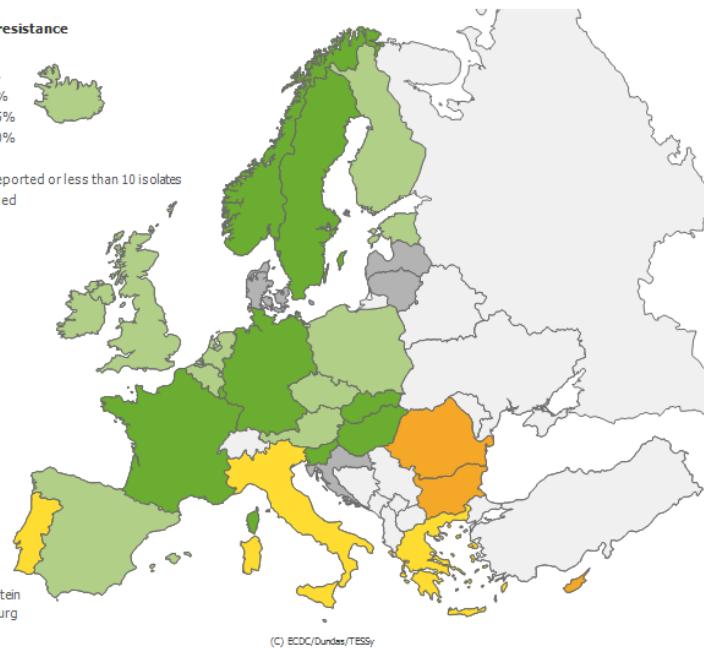


Percentage resistance

- < 1%
- 1 to < 5%
- 5 to < 10%
- 10 to < 25%
- 25 to < 50%
- ≥ 50%

No data reported or less than 10 isolates

Not included



2013

Proportion of 3rd gen. cephalosporins Resistant (R)  
*Escherichia coli* Isolates in Participating Countries in  
2013

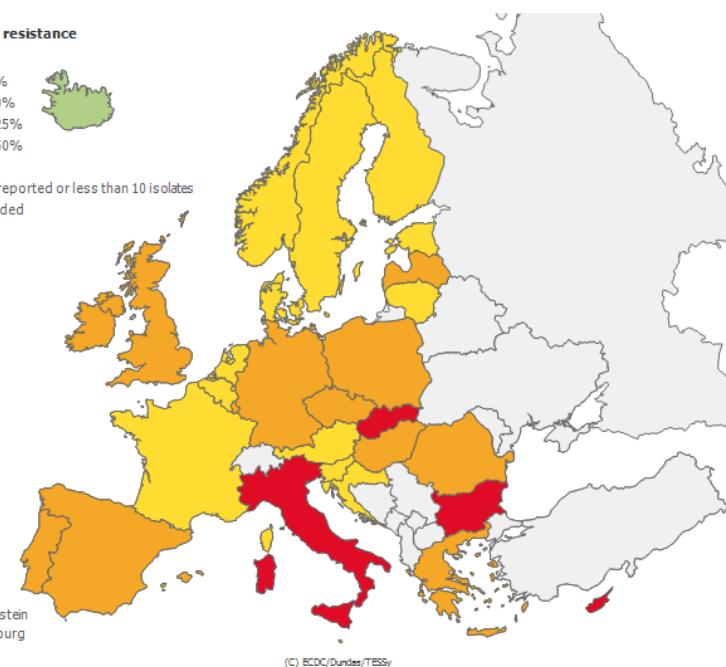


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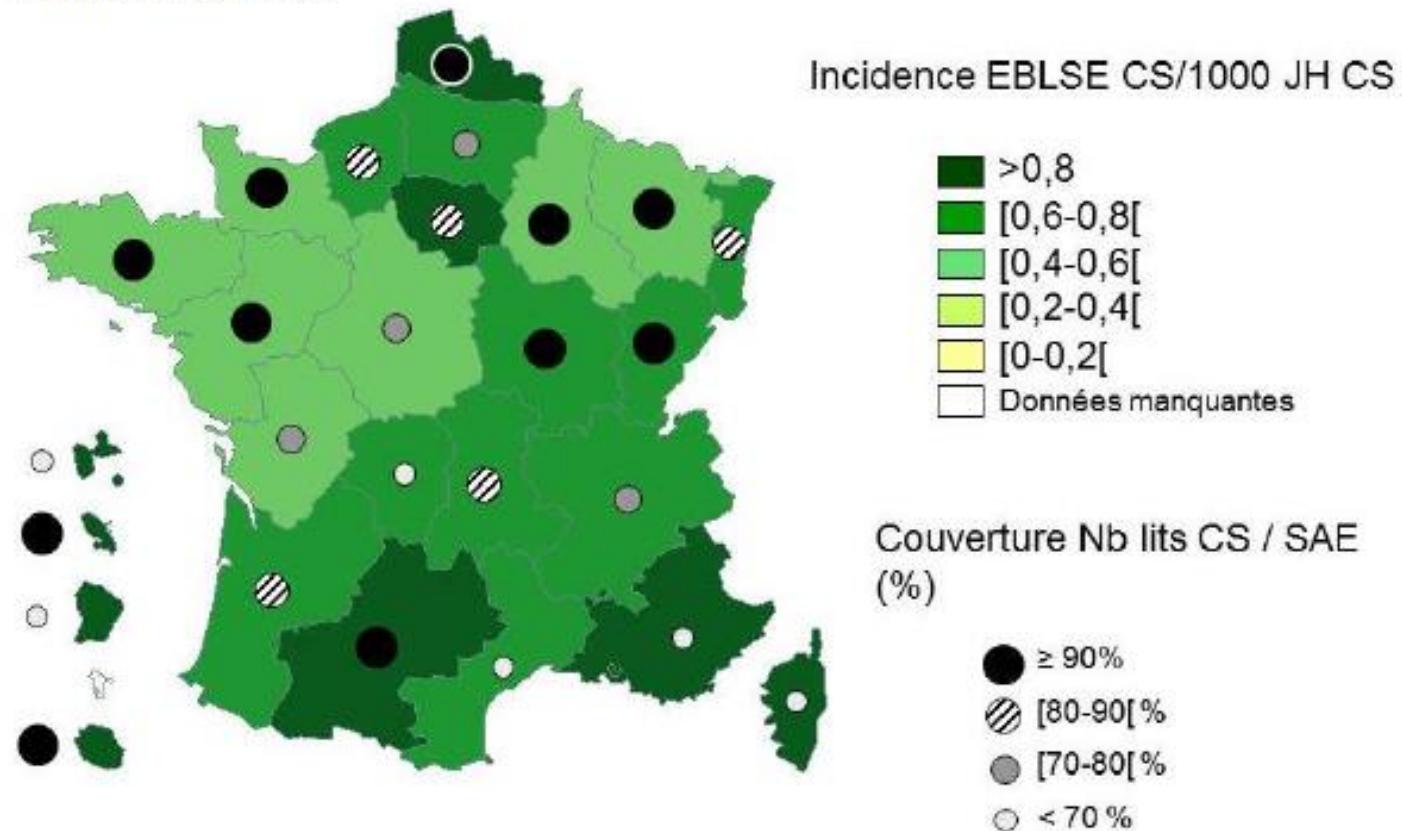


# épidémiologie des EBLSE

Surveillance des bactéries  
multirésistantes dans les établissements  
de santé en France  
Réseau BMR-Raisin – Résultats 2013

2013

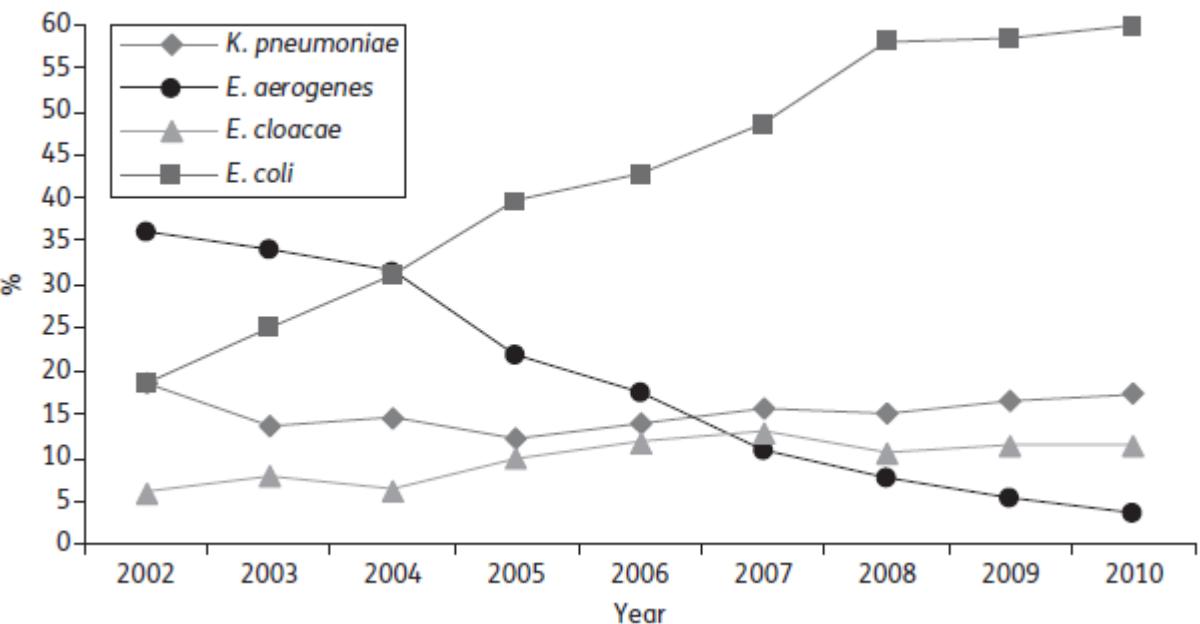
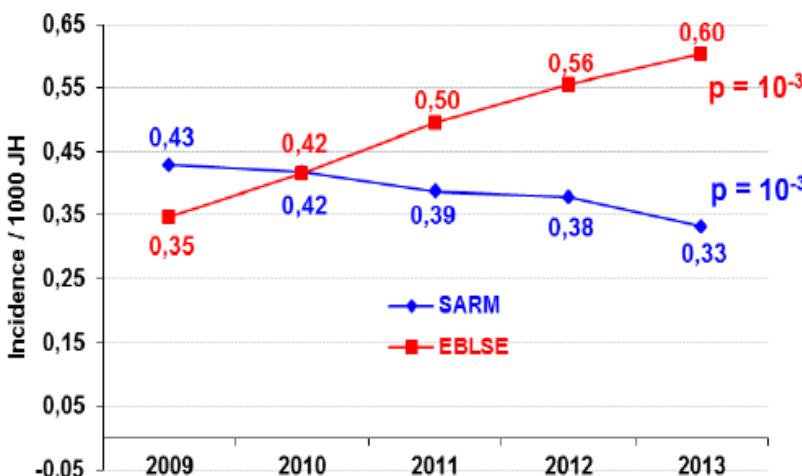
Figure 7 : Incidences globales régionales des EBLSE /1 000 journées d'hospitalisation  
(court séjour, n=935)



**Surveillance des bactéries multirésistantes dans les établissements de santé en France**  
**Réseau BMR-Raisin – Résultats 2013**

# épidémiologie des EBLSE

Figure 11 : Evolution entre 2009 et 2013 de la densité d'incidence des SARM et des EBLSE pour 1 000 journées d'hospitalisation (cohorte de 577 établissements)



A. Carbone J Antimicrob Chemother 2013; 68: 954–959

# Beta lactamases des Enterobactéries

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Sérines  
Blactamases  
(penicillinases)

Classe B  
Metallo  
Blactamases

Classe C  
cephalosporinases

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oxacillinas

chromosomiques

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*Citrobacter freundii*

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aux  
inhibiteurs de Blactamases

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TEM SHV

BLSE  
TEM SHV & CTX-M  
(souvent associées  
à d'autres mécanismes de R)

Carbapenemases  
*K.PneumoniaeC*

Hydrolysent  
**pénicillines**  
**C1G C2G C3G C4G**  
**monobactam**

Blactamines restant actives  
Carbapenem  
Cefoxitine  
Temocilline  
Inhibiteurs de Blactamases

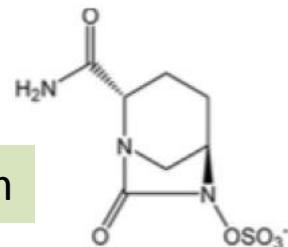
# Inhibiteurs de B-lactamases

Acide clavulanique  
Sulbactam  
tazobactam

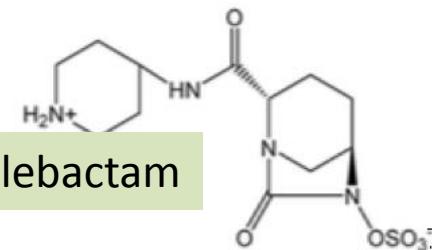
Inhibiteurs  
non B-lactam

K. Bush / International Journal of Antimicrobial Agents xxx (2015) xxx–xxx

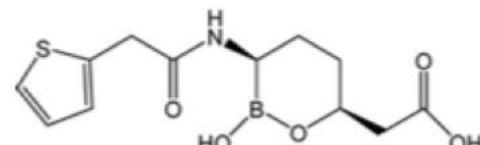
avibactam



relebactam



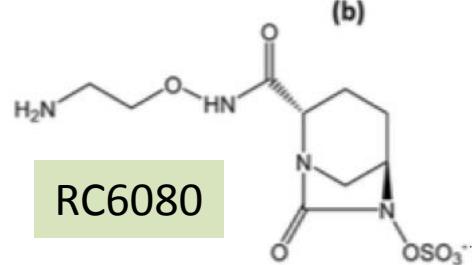
RPX7009



(a)

(c)

RC6080



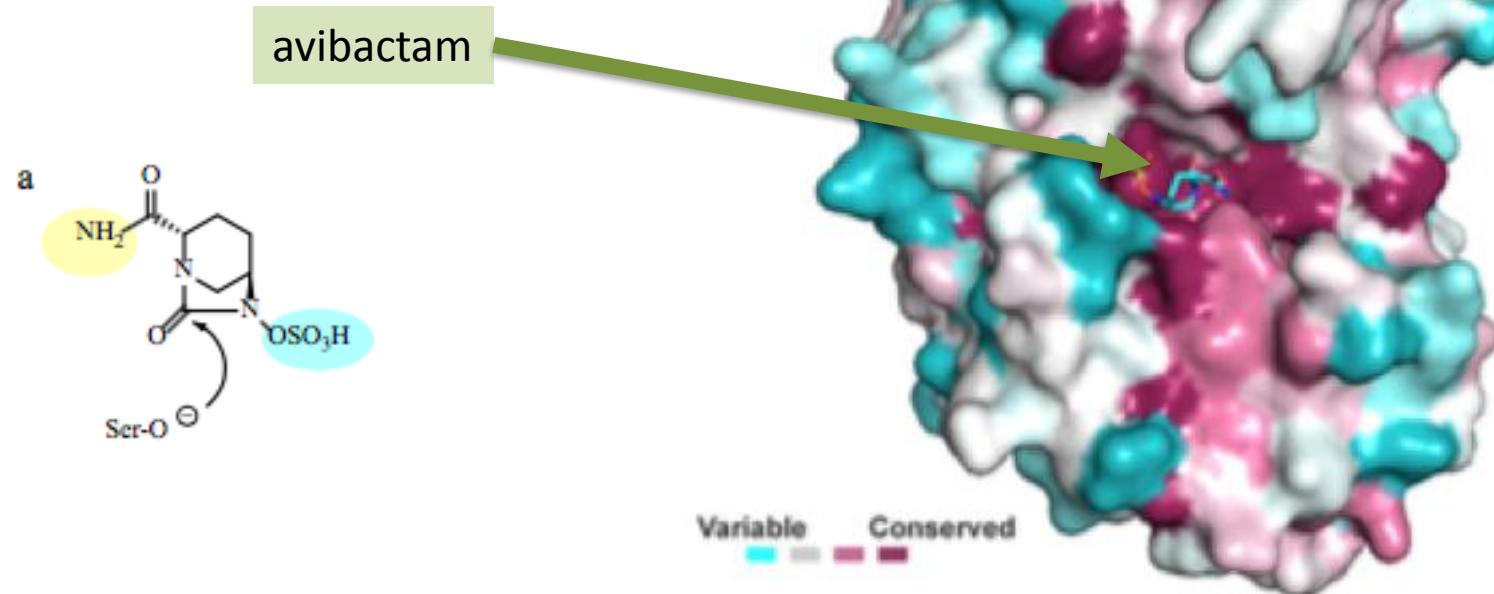
(b)

(d)

Fig. 1. Inhibitors of serine  $\beta$ -lactamases: (a) avibactam [33]; (b) relebactam [31]; (c) RPX7009 [131]; and (d) RG6080 [42].

# Inhibiteurs de B-lactamases

Inhibiteurs  
non B-lactam



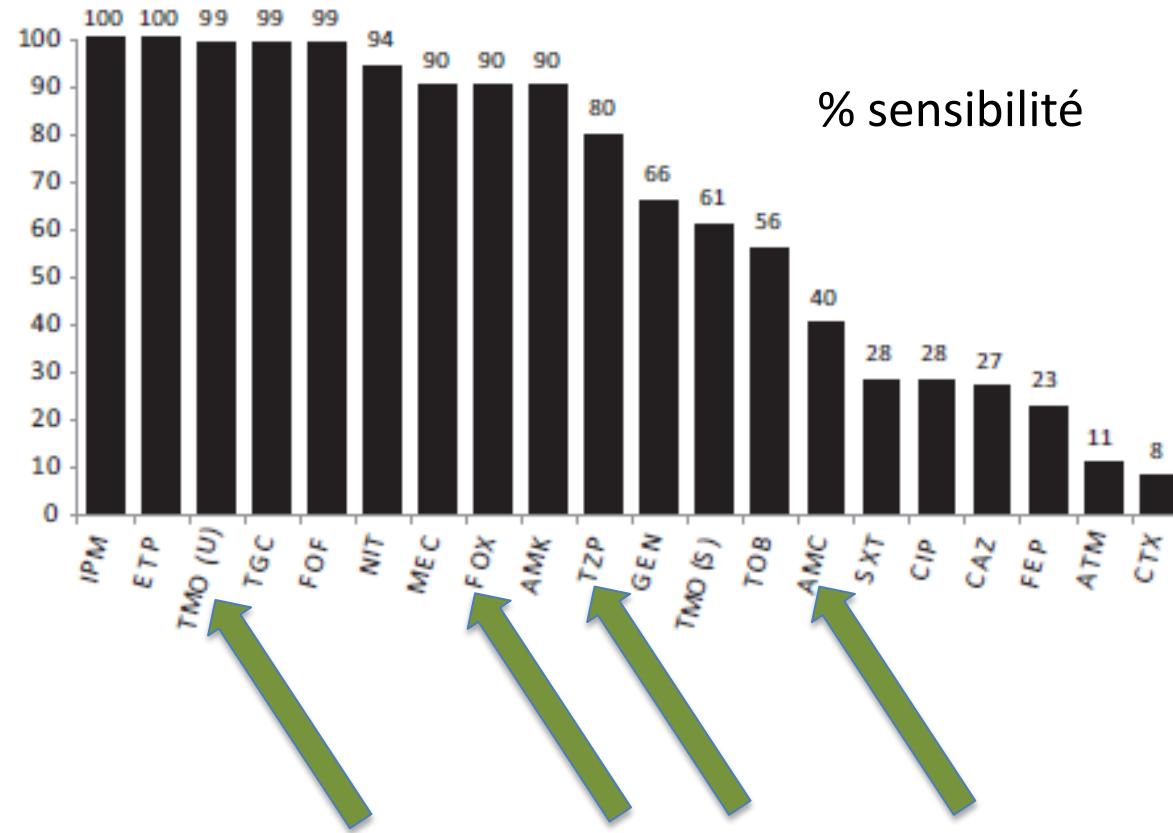
# BL/IBL activité in vitro vis à vis des Entérobactéries sécrétrices de BLSE

# BLSE IBL interprétation de l'antibiogramme

## EUCAST & CA SFM

Penicillins <sup>1</sup>	MIC breakpoint (mg/L)		Disk content (µg)	Zone diameter breakpoint (mm)	
	S ≤	R >		S ≥	R <
Benzylpenicillin	-	-		-	-
Ampicillin	8 <sup>1</sup>	8	10	14 <sup>A,B</sup>	14 <sup>B</sup>
Ampicillin-sulbactam	8 <sup>1,2</sup>	8 <sup>2</sup>	10-10	14 <sup>A,B</sup>	14 <sup>B</sup>
Amoxicillin	8 <sup>1</sup>	8	-	Note <sup>C</sup>	Note <sup>C</sup>
Amoxicillin-clavulanic acid	8 <sup>1,3</sup>	8 <sup>3</sup>	20-10	19 <sup>A,B</sup>	19 <sup>B</sup>
Amoxicillin-clavulanic acid (uncomplicated UTI only)	32 <sup>1,3</sup>	32 <sup>3</sup>	20-10	16 <sup>A,B</sup>	16 <sup>B</sup>
Piperacillin	8	16	30	20	17
Piperacillin-tazobactam	8 <sup>4</sup>	16 <sup>4</sup>	30-6	20	17
Ticarcillin	8	16	75	23	23
Ticarcillin-clavulanic acid	8 <sup>3</sup>	16 <sup>3</sup>	75-10	23	23
Phenoxytmethylpenicillin	-	-		-	-
Oxacillin	-	-		-	-
Cloxacillin	-	-		-	-
Dicloxacillin	-	-		-	-
Flucloxacillin	-	-		-	-
Mecillinam (uncomplicated UTI only)	8 <sup>5</sup>	8 <sup>5</sup>	10	15 <sup>D,E</sup>	15 <sup>D,E</sup>

## Alternatives aux carbapénèmes dans les infections à Escherichia coli producteurs de BLSE



# BL/IBL activité in vitro vis à vis des EBLSE

Journal of  
Antimicrobial  
Chemotherapy

Molecular epidemiology of extended-spectrum b-lactamase-, AmpC b-lactamase- and carbapenemase-producing *Escherichia coli* and *Klebsiella pneumoniae* isolated from Canadian hospitals over a 5 year period:  
**CANWARD 2007–11**

Cohort (n) antibiotic	MIC (mg/L)			
	MIC <sub>50</sub>	MIC <sub>90</sub>	Min.	Max.
ESBL <i>E. coli</i> (231)				
AMC	8	16	1	>32
cefazolin	>128	>128	16	>128
cefoxitin	8	16	0.5	>32
ceftriaxone	>64	>64	≤0.25	>64
ceftazidime	16	>32	≤0.5	>32
cefepime	8	>32	≤1	>32
TZP	4	16	≤1	512
ertapenem	≤0.06	0.25	≤0.06	4
meropenem	≤0.12	≤0.12	≤0.12	1
ciprofloxacin	>16	>16	≤0.06	>16
amikacin	4	16	≤2	>64
gentamicin	4	>32	≤0.5	>32
tigecycline	0.5	1	0.12	4
SXT	>8	>8	≤0.12	>8
colistin	0.5	1	≤0.06	4

# BL/IBL activité in vitro vis à vis des EBLSE



## Sensibilité d'*Escherichia coli* Isolés entre 2010 et 2011 et porteur de BLSE CTX-M (USA)

TABLE 2 Susceptibilities of 245 *E. coli* isolates with *bla* genes encoding either CTX-M-14-type or CTX-M-15-type ESBLs, as determined by broth microdilution testing

Enzyme type (n)	Antibiotic	MIC data ( $\mu\text{g/ml}$ )				% Susceptible	% Resistant
		Range	$\text{MIC}_{50}$	$\text{MIC}_{90}$			
CTX-M-14 (26)	Ceftolozane	$\leq 1$ to 32	4	8	NA <sup>a</sup>	NA	NA
	Ceftolozane-tazobactam <sup>b</sup>	$\leq 0.25$ to 1	$\leq 0.25$	0.5	NA	NA	NA
	Piperacillin	64 to $>256$	$>256$	$>256$	0.0	92.3	
	Piperacillin-tazobactam <sup>b</sup>	0.5 to 8	2	4	100.0	0.0	
	Ceftazidime	$\leq 1$ to 16	4	8	53.8	7.7	
	Cefepime	$\leq 1$ to $>64$	8	32	7.7	53.8	
	Meropenem	$\leq 0.06$ to 0.5	$\leq 0.06$	0.12	100.0	0.0	
	Levofloxacin	$\leq 0.25$ to $>16$	8	$>16$	11.5	80.5	
	Tobramycin	$\leq 1$ to 64	$\leq 1$	32	76.9	19.2	
CTX-M-15 (219)	Ceftolozane	$\leq 1$ to $>64$	64	$>64$	NA	NA	
	Ceftolozane-tazobactam <sup>b</sup>	$\leq 0.25$ to 1	$\leq 0.25$	0.5	NA	NA	
	Piperacillin	32 to $>256$	$>256$	$>256$	0.0	97.3	
	Piperacillin-tazobactam <sup>b</sup>	$\leq 0.25$ to 16	2	8	100.0	0.0	
	Ceftazidime	$\leq 1$ to $>64$	16	64	10.0	78.1	
	Cefepime	$\leq 1$ to $>64$	16	64	8.2	63.9	
	Meropenem	$\leq 0.06$ to 1	$\leq 0.06$	$\leq 0.06$	100.0	0.0	
	Levofloxacin	$\leq 0.25$ to $>16$	8	16	2.7	91.0	
	Tobramycin	$\leq 1$ to $>64$	16	64	27.9	70.0	

# BL/IBL activité in vitro vis à vis des EBLSE

## Klebsiella sécréteur BLSE. Sensibilité aux baté lactamies Espagne 2015

Organism (no. tested)/antimicrobial	MIC (mg/L)		
	MIC <sub>50</sub>	MIC <sub>90</sub>	Range
<b>ESBL phenotype <i>Klebsiella</i> spp.<sup>a</sup> (n = 16)</b>			
Ceftolozane	64	>64	2 to >64
Ceftolozane/tazobactam	4	16	0.5–16
Amoxicillin/clavulanic acid	>16	>16	8 to >16
TZP	32	>32	8 to >32
Cefotaxime	64	>64	0.12 to >64
Ceftazidime	32	>64	2 to >64
Cefepime	16	>64	0.12 to >64
Imipenem	≤0.25	1	≤0.25–2
Meropenem	≤0.12	≤0.12	≤0.12–4
Levofloxacin	0.5	>8	0.06 to >8

# BL/IBL activité in vitro vis à vis des EBLSE

## B-lactam + avibactam

**Table 17.** Broader Spectrum of Avibactam Activity Compared to Available  $\beta$ -lactamase Inhibitors

$\beta$ -Lactamase		Avibactam	Clavulanic Acid	Tazobactam
<b>Class A (Serine)</b>	TEM, SHV and ESBLs	<b>Yes</b>	Yes	Yes
	CTX-M and ESBLs	<b>Yes</b>	Yes	Yes
	PER, VEB, GES	<b>Yes</b>	Yes	Yes
	KPC	<b>Yes</b>	No	No
<b>Class B (Metallo)</b>	IMP, VIM, NDM	<b>No</b>	No	No
<b>Class C (Serine)</b>	Chromosomal <i>Enterobacteriaceae</i> AmpC	<b>Yes</b>	No	No
	Chromosomal <i>Pseudomonas</i> AmpC	<b>Yes</b>	No	No
	Plasmidic ACC, DHA, FOX, LAT, MIX, MIR, ACT	<b>Yes</b>	No	No
<b>Class D (Serine)</b>	Penicillinase-type OXA-1, -31, -10, -13	<b>Variable</b>	Variable	Variable
	Carbapenemase-type OXA-23, -40, -48, -58	<b>Variable</b>	Variable	Variable

# In Vitro Antibacterial Activity of the Ceftazidime-Avibactam Combination against *Enterobacteriaceae*, Including Strains with Well-Characterized $\beta$ -Lactamases

Premavathy Levasseur,\* Anne-Marie Girard,\* Christine Miossec,\* John Pace,\* Ken Coleman\*

Novoxel SA, Romainville, France

**TABLE 2** *In vitro* activities of ceftazidime, ceftazidime-avibactam, and comparators against clinical isolates of *Enterobacteriaceae*

Organism(s) (no. of isolates) and drug(s)	MIC ( $\mu\text{g/ml}$ )			
	Range	$\text{MIC}_{50}$	$\text{MIC}_{90}$	% S <sup>a</sup>
<b>All Enterobacteriaceae (169)</b>				
Ceftazidime	0.25–>128	16	>128	49
Ceftazidime-avibactam <sup>b</sup>	$\leq 0.12$ –128	0.25	2	99
Cefotaxime	$\leq 0.12$ –>128	8	>128	54
Ceftriaxone	$\leq 0.12$ –>128	16	>128	50
Cefepime	$\leq 0.12$ –128	0.5	128	80
Piperacillin-tazobactam <sup>c</sup>	$\leq 0.12$ –>128	8	>128	64
Imipenem	$\leq 0.12$ –128	0.25	2	95

**TABLE 3** Summary of *In vitro* potentiation of ceftazidime by avibactam against different enzyme types in isolates with ceftazidime MICs of >8  $\mu\text{g/ml}$

Enzyme class	Subclass	n	Fold reduction in MIC	
			Range	Median
A <sup>d</sup>	TEM ESBL	9	64– $\geq 512$	$\geq 256$
	SHV ESBL	6	64– $\geq 512$	$\geq 256$
	CTX-M	6	16– $\geq 128$	64
	KPC	9	32– $\geq 512$	$\geq 256$
C <sup>e</sup>		26	4– $\geq 512$	$\geq 128$
Multienzyme producers <sup>f</sup>		18	2– $\geq 512$	$\geq 128$

# BL/IBL activité in vitro vis à vis des EBLSE

## B-lactam + avibactam

Table 19. Activity of CAZ-AVI and Comparators against Characterized  $\beta$ -Lactamase-producing Organisms from 2012 US Surveillance

$\beta$ -Lactamase-producing organism (N)	MIC <sub>90</sub> (% Susceptible by CLSI Interpretive Criteria)			
	CAZ-AVI	Ceftazidime	Meropenem	Piperacillin/tazobactam
KPC (118)	2	>32 (0.0)	>8 (0.0)	>64 (0.0)
CTM-M-15-like (288)	0.5	>32 (14.6)	≤0.06 (99.7)	>64 (67.2)
CTX-M-14-like (70)	0.25	16 (74.3)	≤0.06 (100.0)	8 (92.9)
ESBL-SHV (83)	0.25	>32 (12.0)	0.12 (98.8)	>64 (45.8)
CMY-2-like (54)	0.5	>32 (13.0)	0.12 (100.0)	>64 (81.5)

# BL/IBL activité in vitro vis à vis des EBLSE

## imipeneme + relebactam

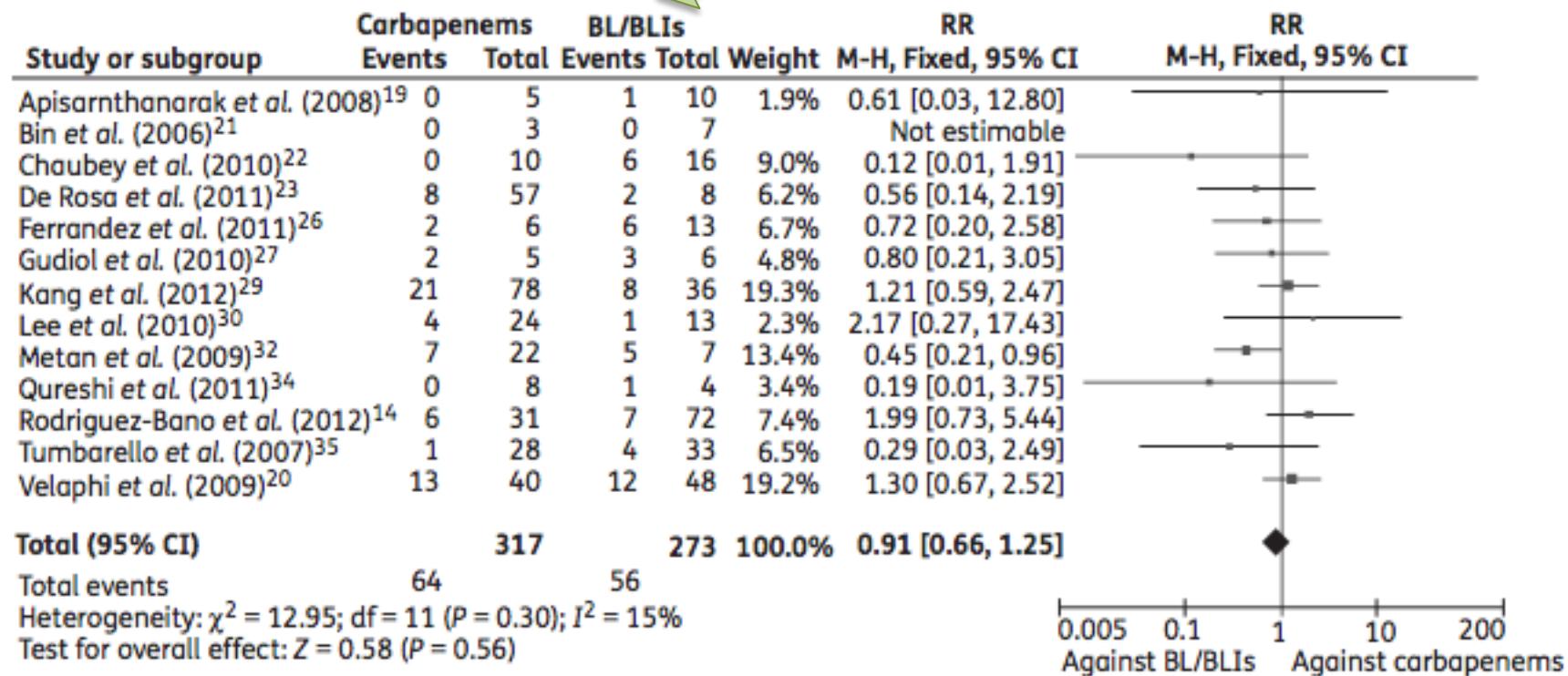
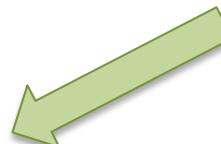
TABLE 1 Susceptibility results for *Enterobacteriaceae*, *P. aeruginosa*, and *A. baumannii* isolates collected in surveillance study

Species and drug(s)	MIC <sub>50</sub> (µg/ml)	MIC <sub>90</sub> (µg/ml)	MIC range (µg/ml)	% susceptible
<i>E. coli</i> (n = 2,778)				
Ertapenem	0.008	0.03	≤0.002 to >32	99.6
Imipenem	0.25	0.25	≤0.03 to >32	99.9
Imipenem + relebactam	0.25/4	0.25/4	≤0.03/4 to 1/4	100
<i>K. pneumoniae</i> (n = 891)				
Ertapenem	≤0.125	8	≤0.125 to >8	86
Imipenem	0.25	4	0.06 to >16	88
Imipenem + relebactam	0.25/4	0.25/4	0.06/4 to 2/4	99.3
<i>bla</i> <sub>KPC</sub> - possessing <i>K. pneumoniae</i> (n = 111)				
Ertapenem	>8	>8	0.5 to >8	2
Imipenem	16	>16	0.5 to >16	9
Imipenem + relebactam	0.25/4	1/4	0.12/4 to 2/4	97

# BL/IBL dans le traitement des infections à EBLSE expérience clinique

# BL/IBL dans le traitement des infections à EBLSE

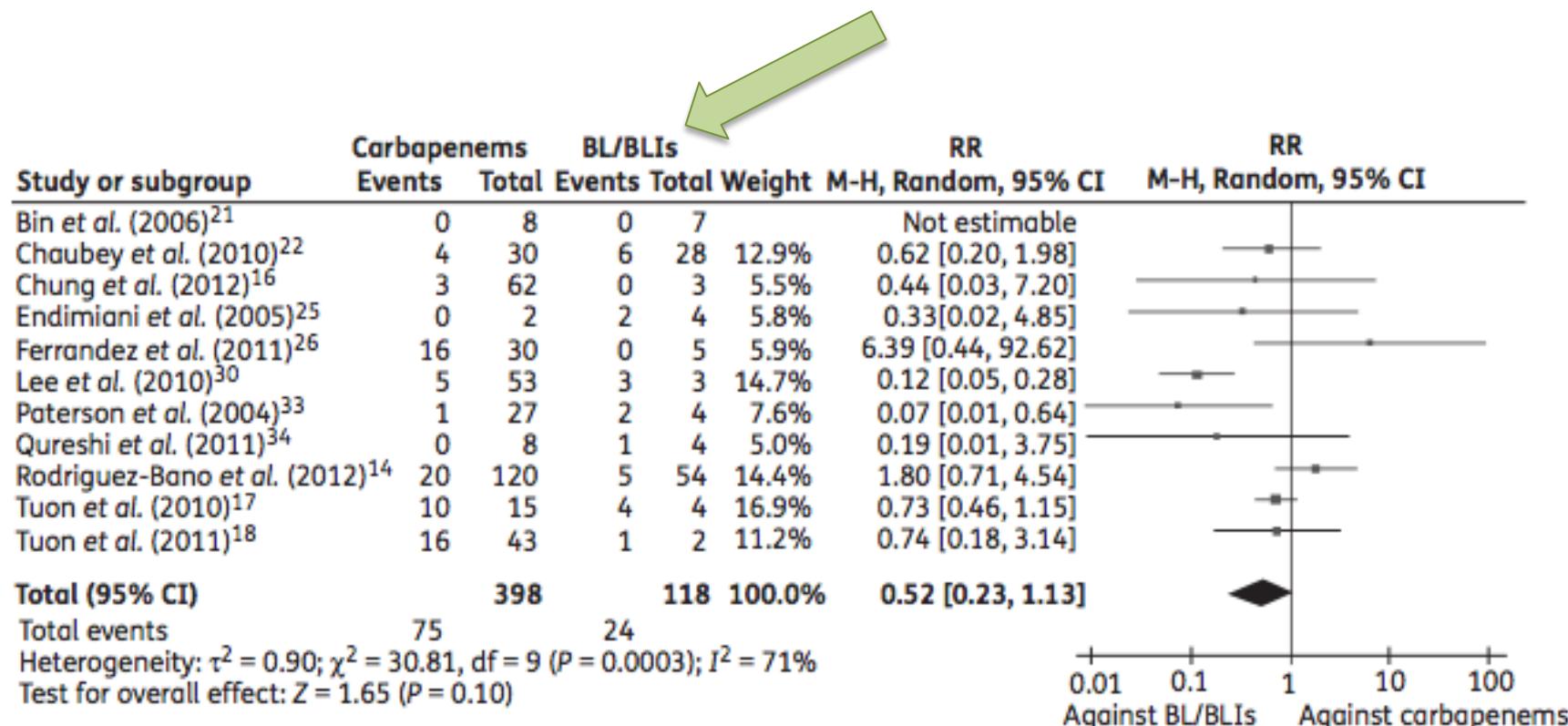
## Carbapenems versus alternative antibiotics for the treatment of bacteraemia due to ESBL: systematic review and meta-analysis



Traitements empiriques

# BL/IBL dans le traitement des infections à EBLSE

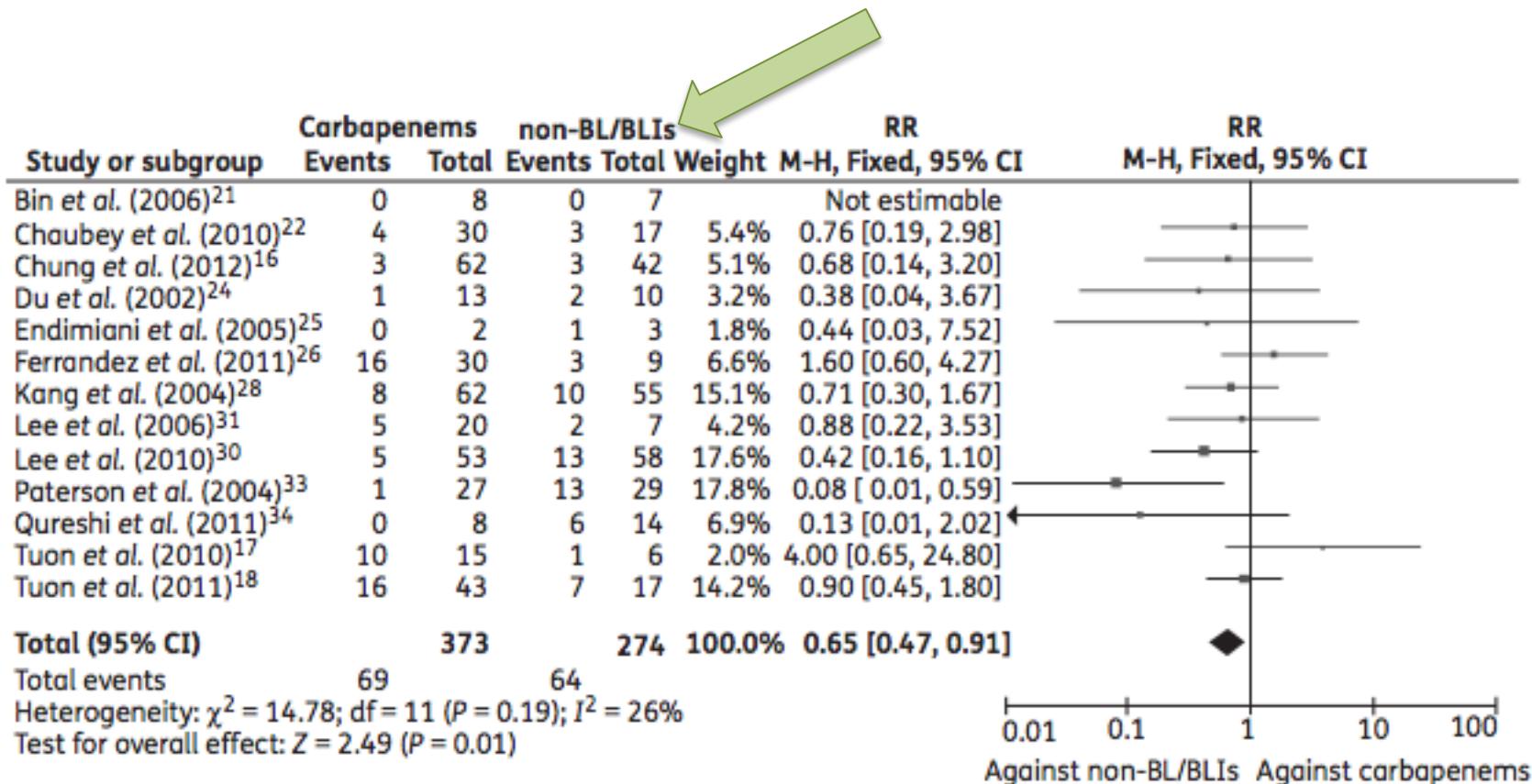
## Carbapenems versus alternative antibiotics for the treatment of bacteraemia due to ESBL: systematic review and meta-analysis



Traitements définitifs

# BL/IBL dans le traitement des infections à EBLSE

## Carbapenems versus alternative antibiotics for the treatment of bacteraemia due to ESBL: systematic review and meta-analysis



Traitements définitifs

# BL/IBL dans le traitement des infections à EBLSE

## Analyse post-hoc de 6 études de mortalité dans les bactériémies à *E.coli* BLSE (192 patients) Carbapénème VS association BL/IBL

CTX – M : 80%

Posologies : pip-taz 4,5g/6H et amox-clav 1,2g/8h

Characteristic	Empirical Therapy Cohort			Definitive Therapy Cohort		
	BLBLI (n = 72)	Carbapenem (n = 31)	P	BLBLI (n = 54)	Carbapenem (n = 120)	P
Urinary or biliary tract as source	52 (72.2)	18 (58.1)	.1	42 (77.8)	79 (65.8)	.1
ICU admission	7 (9.9)	2 (6.7)	.7 <sup>c</sup>	4 (7.4)	18 (15.4)	.1
Severe sepsis or shock at presentation	14 (19.4)	9 (29.0)	.2	8 (14.8)	32 (26.7)	.08
Mortality, no. of deaths						
Day 7	2 (2.8)	3 (9.7)	.1 <sup>c</sup>	1 (1.9)	5 (4.2)	.6 <sup>c</sup>
Day 14	7 (9.7)	5 (16.1)	.3	3 (5.6)	14 (11.7)	.2
Day 30	7 (9.7)	6 (19.4)	.1	5 (9.3)	20 (16.7)	.1
Hospital stay after BSI , median (IQR), d	12 (8–28)	13 (9–25)	.7 <sup>b</sup>	13 (8–22)	13 (10–25)	.04 <sup>b</sup>

# BL/IBL dans le traitement des infections à EBLSE

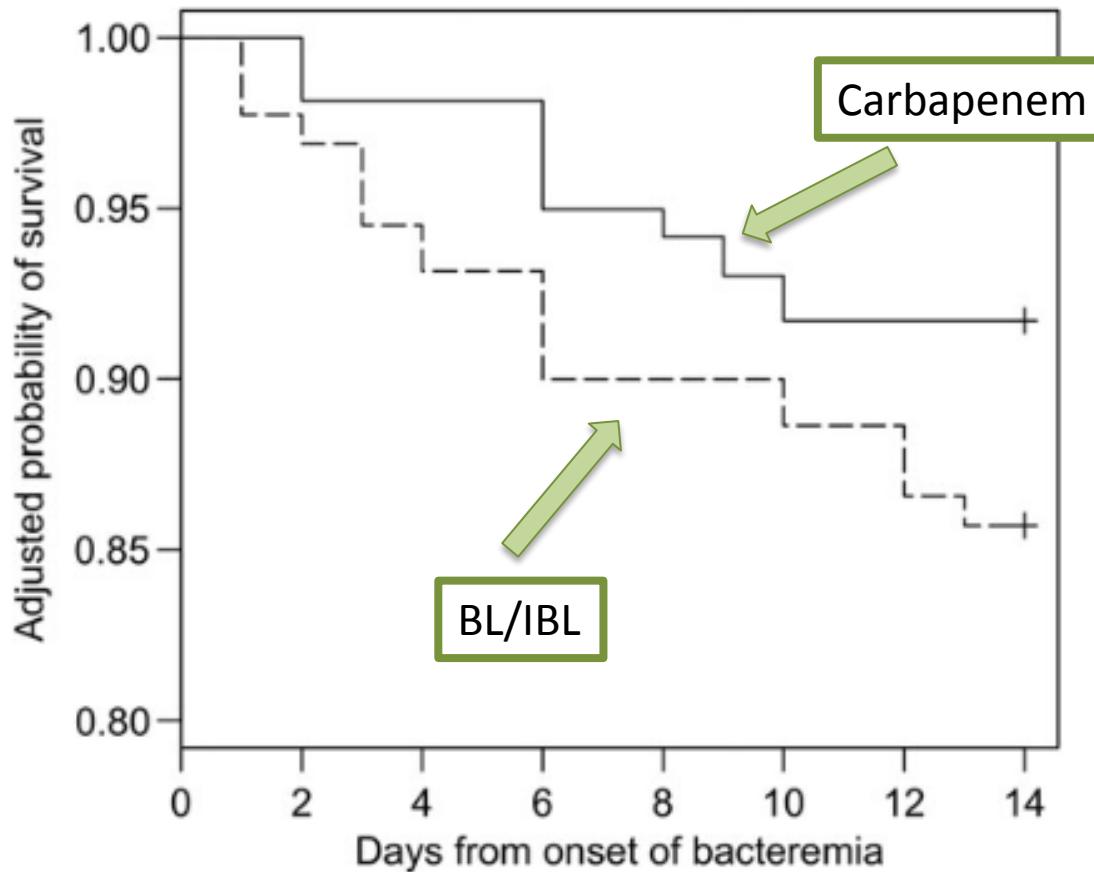
## Impact of the MIC of Piperacillin-Tazobactam on the Outcome of Patients with Bacteremia Due to Extended-Spectrum β-Lactamase-Producing *Escherichia coli*

TABLE 1 Mortality among patients with bacteremia due to ESBL-producing *E. coli* who were treated empirically with piperacillin-tazobactam, according to MIC and other variables of interest

Variable and group	Mortality in patients in each group <sup>a</sup>			
	All patients (n = 39)	Low MIC (≤2 mg/liter) (n = 18)	Intermediate MIC (4 to 8 mg/liter) (n = 10)	High MIC (≥16 mg/liter) (n = 11)
All patients	7/39 (17.9)	0/18 (0) <sup>b</sup>	3/10 (30)	4/7 (57.1)
Age				
≤65 years	4/20 (20)	0/9 (0)	1/5 (20)	3/6 (50)
>65 years	3/19 (15.8)	0/9 (0)	2/5 (40)	1/5 (20)
Onset				
Community	2/21 (9.5)	0/10 (0)	1/5 (20)	1/6 (16.7)
Nosocomial	5/18 (27.8)	0/8 (0)	2/5 (40)	3/5 (60)
Charlson index				
≤2	4/24 (16.7)	0/12 (0)	3/8 (37.5)	1/4 (25)
>2	3/15 (20)	0/6 (0)	0/2 (0)	3/7 (42.9)
Source				
Urinary tract	0/11 (0)	0/7 (0)	0/2 (0)	0/2 (0)
Other	7/28 (25)	0/11 (0) <sup>c</sup>	3/8 (37.5)	4/9 (44.4)
Severe sepsis or shock				
No	4/32 (12.5) <sup>d</sup>	0/16 (0)	2/8 (25)	2/8 (25)
Yes	3/7 (42.8)	0/2 (0)	1/2 (50)	2/3 (66.7)
Definitive therapy <sup>e</sup>				
PTZ	0/10	0/5 (0)	0/4 (0)	0/1 (0)
Carbapenem	5/24 (20.8)	0/10 (0)	1/4 (25)	4/10 (40)
Other	0/3 (0)	0/3 (0)		

# BL/IBL dans le traitement des infections à EBLSE

**Carbapenem Therapy Is Associated With Improved Survival Compared With Piperacillin-Tazobactam for Patients With Extended- Spectrum  $\beta$ -Lactamase Bacteremia**

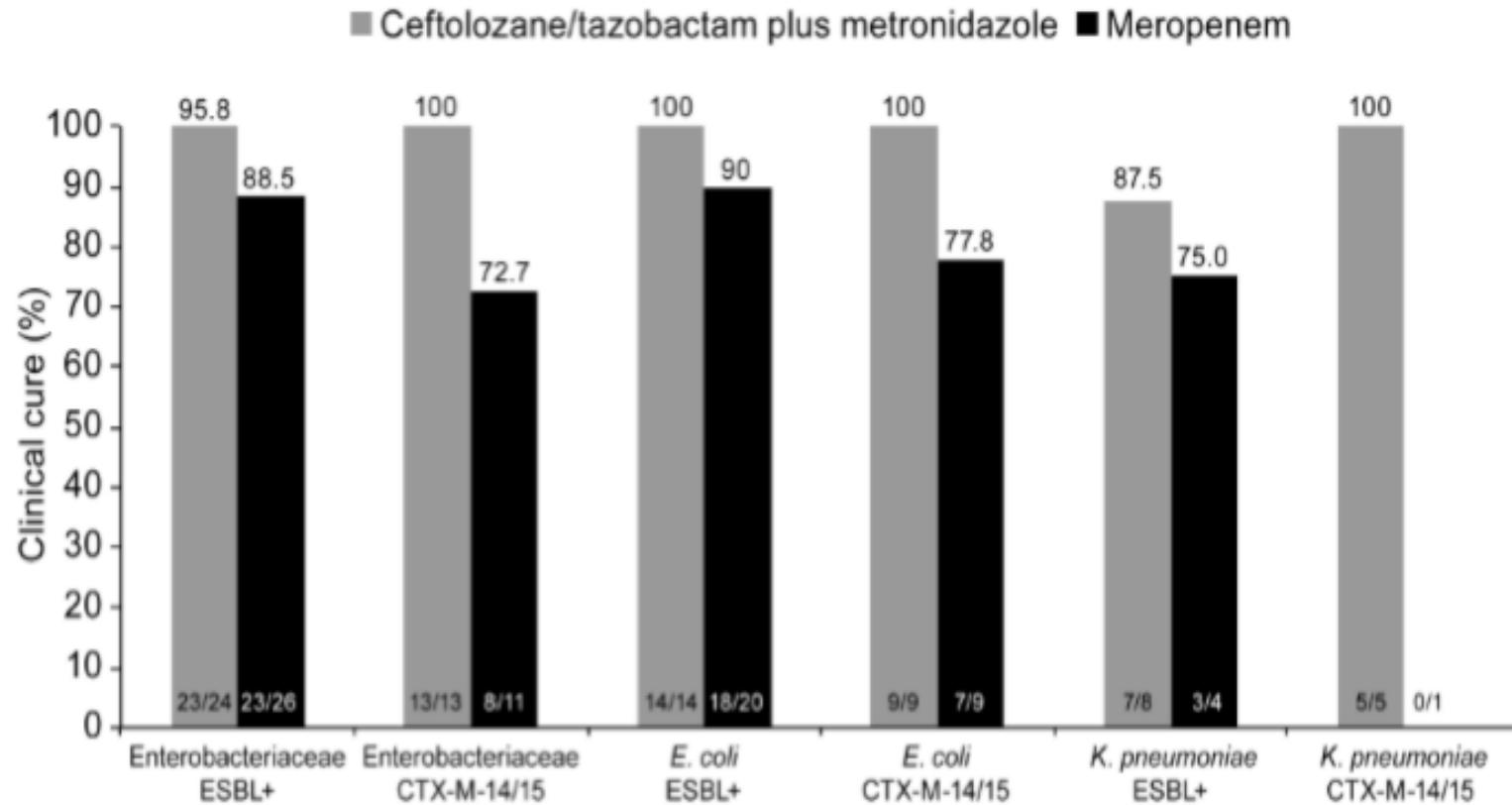


Posologies : piperacilline-tazobactam 4,5g/6H chez 39% des patients

Tamma Clinical Infectious Diseases® 2015;60(9):1319–25

# BL/IBL dans le traitement des infections à EBLSE

**Ceftolozane/Tazobactam Plus Metronidazole for Complicated Intra-abdominal Infections in an Era of Multidrug Resistance: Results From a Randomized, Double-Blind, Phase 3 Trial (ASPECT-clAI)**



# BL/IBL dans le traitement des infections à EBLSE

## Ceftolozane-tazobactam compared with levofloxacin in the treatment of complicated urinary-tract infections, including pyelonephritis: a randomised, double-blind, phase 3 trial (ASPECT-cUTI)

	Number of patients with a specific baseline pathogen/total number with baseline pathogens (%)		Percentage difference (95% CI)
	Ceftolozane-tazobactam	Levofloxacin	
<b>Gram-negative aerobes</b>			
All	287/323 (88.9%)	263/340 (77.4%)	11.5 (5.8 to 17.1)
Enterobacteriaceae spp	281/316 (88.9%)	255/327 (78.0%)	10.9 (5.2 to 16.6)
Escherichia coli	237/262 (90.5%)	226/284 (79.6%)	10.9 (4.9 to 16.8)
ESBL producers	27/36 (75.0%)	18/36 (50.0%)	NA
CTX-M-14/15*	20/27 (74.1%)	13/25 (52.0%)	NA
Klebsiella pneumoniae	21/25 (84.0%)	14/23 (60.9%)	23.1 (-2.1 to 45.4)
ESBL producers	7/10 (70.0%)	2/7 (28.6%)	NA
CTX-M-15*	5/8 (62.5%)	1/4 (25.0%)	NA
Proteus mirabilis	10/10 (100.0%)	8/11 (72.7%)	27.3 (-5.6 to 56.6)
Enterobacter cloacae	2/6 (33.3%)	6/7 (85.7%)	-52.4 (-78.8 to -0.3)
Pseudomonas aeruginosa	6/7 (85.7%)	7/12 (58.3%)	27.4 (-15.9 to 56.3)
<b>Gram-positive aerobes</b>			
All	8/21 (38.1%)	16/20 (80.0%)	-41.9 (-63.0 to -11.8)
Enterococcus faecalis	5/16 (31.3%)	12/16 (75.0%)	-43.8 (-66.4 to -9.2)
Enterococcus faecium	1/2 (50.0%)	3/3 (100.0%)	-50.0 (-90.6 to 19.3)
Staphylococcus aureus	3/4 (75.0%)	1/1 (100.0%)	-25.0 (-69.9 to 56.9)
ESBL=extended-spectrum β-lactamases. NA=not applicable, as CIs were not calculated. *Belong to a subset of extended-spectrum β-lactamase-producing pathogens.			
Table 2: Microbiological eradication at the test-of-cure visit by baseline pathogen in the per-protocol population			

Florian M  
Wagenlehner  
Lancet 2015

# BL/IBL dans le traitement des infections à EBLSE

**Ceftolozane/Tazobactam VS Meropeneme ou Levofloxacine**

**Infections Intra abdominales**

**Infections urinaires**

Mécanisme de résistance	Ceftolozane / tazobactam	Comparateurs
ESBL	57 / 70 (81.5%)	43 / 69 (62.3%)
CTX-M 14-15	38 / 48 (79.2%)	32 / 49 (65.3%)

Succès cliniques selon la microbiologie

Joseph Solomkin Clin Infect Dis 2015;60(10):1462–71  
Florian M Wagenlehner Lancet 2015

# BL/IBL dans le traitement des infections à EBLSE

**Assessment of β-lactam/β-lactam Inhibitor (BL/BLI) combinations for the treatment of Bacteremia due to extended-spectrum β-lactamase (ESBL)-producing *Enterobacteriaceae*: The INCREMENT project**

656 bactériémies

Origine :

urinaire 55%

voies biliaires 57 %

	Nb patients	Succès à J + 14	Mortalité à J + 30
BL / IBL Pipe./tazo 61% Amox/ac clav 38%	129	85 % OR 0.93 (IC 95% : 0.41-2.10 ; p=0.86)	12 % HR 0.97 (IC 95% : 0.48-2.03 ; p=0.98)
Carbapénème Imipénème 23% Ertapénème 45% Autre 33%	527	84 %	14 %

Penicillines  
C1G

## A Sérines Blactamases (penicillinases)

Penicillinases  
*K.Pneumoniae*  
*Citrobacter freundii*

## B Metallo Blactamases

Carbapenemases  
VIM IMP & NDM

## C cephalosporinases

AmpC non inductibles  
*E.coli*

AmpC inductibles  
*Enterobacter sp*  
*Citobacter freundii*  
*Serratia marcescens*  
*Morganella morganii*  
*Hafnia alvei*  
*Providencia stuartii*

AmpC mutants  
déréprimées

Inducteurs:  
**Amoxicilline**  
**Ac.clavulanique**  
**Cefoxitine**  
**C1G**  
Carbapenem

Mutation spontanée  
 $10^{-5} 10^{-7}$

Hydrolysent  
**pénicillines**  
**C1G C2G C3G**  
**Insensible aux IBL**

AmpC plasmidiques

Blactamines restant actives  
Carbapenem  
C4G  
Inhibiteurs Nvelle génération

## D oxacillinases

Carbapene mes  
+/- autres Blactamine s

chromosomiques

Éléments mobiles transférables  
(plasmides transposons)

# AmpC : activité microbiologique

Enterobacteriaceae recovered in Spanish medical centres: Results of the CENIT study

All *Enterobacter* spp.<sup>f</sup> (n=70)

Ceftolozane	0.5	4	0.06 to >64	-	-	-	-	-	-
Ceftolozane/tazobactam	0.5	4	0.06–64	-	-	-	87.2 <sup>b</sup>	5.7 <sup>b</sup>	7.1 <sup>b</sup>
Amoxicillin/clavulanic acid	>16	>16	>16	0	-	100	0	0	100
TZP	4	>32	≤2 to >32	74.3	5.7	20	80	20 <sup>c</sup>	
Cefotaxime	0.25	64	≤0.03 to >64	67.1	2.9	30	67.1	2.9	30
Ceftazidime	0.5	32	≤0.03 to >64	68.6	7.1	24.3	75.7	5.7	18.6
Cefepime	0.12	0.5	≤0.03 to >64	92.9	2.8	4.3	95.7	0	4.3
Imipenem	0.5	1	≤0.25–1	100	0	0	100	0	0
Meropenem	≤0.12	≤0.12	≤0.12–0.5	100	0	0	100	0	0
Levofloxacin	0.06	0.5	≤0.015 to >8	94.3	0	5.7	81.4	12.9	5.7

AmpC-hyperproduction phenotype *Enterobacter* spp.<sup>g</sup> (n=20)

Ceftolozane	2	32	0.5–64	-	-	-	-	-	-
Ceftolozane/tazobactam	1	8	0.25–32	-	-	-	70.0 <sup>b</sup>	15.0 <sup>b</sup>	15.0 <sup>b</sup>
Amoxicillin/clavulanic acid	>16	>16	>16	0	-	100	0	0	100
TZP	32	>32	≤2 to >32	25	15	60	40	60 <sup>c</sup>	
Cefotaxime	16	64	2 to >64	0	10	90	0	10	90
Ceftazidime	16	64	1 to >64	5	25	70	30	15	55
Cefepime	0.25	1	0.06–4	90	10	0	100	0	0
Imipenem	0.5	1	0.5–1	100	0	0	100	0	0
Meropenem	≤0.12	≤0.12	≤0.12–0.25	100	0	0	100	0	0
Levofloxacin	0.06	4	0.03 to >8	85	0	15	70	15	15

# BL IBL avibactam in vitro

TABLE 1 MICs of  $\beta$ -lactam and  $\beta$ -lactam-avibactam combinations against select pathogens<sup>a</sup>

Pathogen	MIC ( $\mu\text{g/ml}$ ) <sup>b</sup>					
	CAZ	CAZ-AVI	CPT	CPT-AVI	ATM	ATM-AVI
<i>K. pneumoniae</i> with OXA-48	256/512	0.25/0.5				
<i>K. pneumoniae</i> with CTX-M-15	8/64	0.06/0.25				
<i>K. pneumoniae</i> with KPC-2	$\geq 512/\geq 512$	0.25/1			$\geq 512/\geq 512$	$\leq 0.06/\leq 0.06$
<i>E. coli</i> with ESBL	16/64	0.12/0.25				
<i>E. coli</i> with AmpC	16/64	0.12/0.5				
<i>E. coli</i> with OXA-48	4	<0.008				
<i>E. coli</i> with IMP-1	256	64				
<i>Enterobacteriaceae</i> with multiple $\beta$ -lactamases, including KPC-2			>64/>64	0.5/2		
<i>Enterobacteriaceae</i> with multiple $\beta$ -lactamases, including AmpC			256/>256	0.5/2		
<i>Enterobacteriaceae</i> with VIM	64–512	64–512			0.25–256	0.12–0.5
<i>P. aeruginosa</i>	8/64	4/8	>64/>64	16/>32	16/32	8/32
<i>P. aeruginosa</i> with ESBL PER-1	128/128	4/16				
<i>A. baumannii</i>			>64/>64	32/>32		
<i>A. baumannii</i> with PER-1, OXA-51, and OXA-58	128/ $\geq 512$	32/256				
<i>S. aureus</i>			1/2	1/2		

<sup>a</sup> Data were adapted from references 15, 16, 19, 20, 21, and 24. Avibactam was added at 4  $\mu\text{g/ml}$ . Abbreviations: CAZ, ceftazidime; AVI, avibactam; CPT, ceftaroline; ATM, aztreonam.

<sup>b</sup> Numbers separated by a forward slash indicate MIC<sub>50</sub>/MIC<sub>90</sub> values. Empty cells indicate that values were not reported.

# BL/IBL activité in vitro vis à vis des EBLSE

## B-lactam + avibactam

**Table 17.** Broader Spectrum of Avibactam Activity Compared to Available  $\beta$ -lactamase Inhibitors

$\beta$ -Lactamase		Avibactam	Clavulanic Acid	Tazobactam
Class A (Serine)	TEM, SHV and ESBLs	Yes	Yes	Yes
	CTX-M and ESBLs	Yes	Yes	Yes
	PER, VEB, GES	Yes	Yes	Yes
	KPC	Yes	No	No
Class B (Metallo)	IMP, VIM, NDM	No	No	No
Class C (Serine)	Chromosomal <i>Enterobacteriaceae</i> AmpC	Yes	No	No
	Chromosomal <i>Pseudomonas</i> AmpC	Yes	No	No
	Plasmidic ACC, DHA, FOX, LAT, MIX, MIR, ACT	Yes	No	No
Class D (Serine)	Penicillinase-type OXA-1, -31, -10, -13	Variable	Variable	Variable
	Carbapenemase-type OXA-23, -40, -48, -58	Variable	Variable	Variable

# Ceftazidime avibactam

**Table 44.**

**Clinical Cure at TOC in Subjects Infected with CAZ-NS Pathogens – mMITT Population, Study NXL104/2002 (cIAI)**

<i>Pathogen Subgroup</i>	<i>CAZ-AVI + MTZ N = 85 n (%) 90% CI<sup>a</sup></i>	<i>Meropenem N = 89 n (%) 90% CI<sup>a</sup></i>	<i>Difference 90% CI<sup>b</sup></i>
CAZ-NS	27/30 (90.0) 76.1, 97.2	19/23 (82.6) 64.5, 93.8	7.4 -8.5, 25.3

**Table 45.**

**Favorable Microbiological Outcome at TOC in Subjects Infected with CAZ-NS Pathogens – mMITT Population, Study NXL104/2001 (cUTI)**

<i>Pathogen Subgroup<sup>a</sup></i>	<i>CAZ-AVI (N = 46) n/N (%) 90% CI<sup>a</sup></i>	<i>Imipenem (N = 49) n/N (%) 90% CI<sup>a</sup></i>	<i>Difference 90% CI<sup>b</sup></i>
CAZ-NS	9/14 (64.3) 39.0, 84.7	10/18 (55.6) 34.1, 75.6	8.7 -20.2, 35.7

# Ceftazidime avibactam

## **CEFTAZIDIME-AVIBACTAM FOR INJECTION**

**for**

**Treatment of Complicated Intra-abdominal Infection  
(used in combination with metronidazole), Complicated  
Urinary Tract Infection including Acute Pyelonephritis,  
and Limited Use Indication: Aerobic Gram-negative  
Infections with Limited Treatment Options**

**NDA 206494**

**Briefing Document**

**Anti-Infective Drugs Advisory Committee**

**05 December 2014**

**FDA**

# Beta lactamases des Enterobactéries

## Classification de Ambler

Classe A Sérines Blactamases (penicillinases)	Classe B Metallo Blactamases	Classe C cephalosporinases	Classe D oxacillinas
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chromosomiques

**Penicillinases**  
*K.Pneumoniae*  
*Citrobacter freundii*

**AmpC non inducibles**  
*E.coli*

**AmpC inductibles**  
*Enterobacter sp*  
*Citobacter freundii*  
*Serratia marcescens*  
*Morganella morganii*  
*Hafnia alvei*  
*Providencia stuartii*

**AmpC déréprimées**

**Spectre d'hydrolyse**

**Penicillines**  
**C1G**

**C2G C3G**  
**+/- C4G**

**Carba**  
**penemes**  
**+/- autres**  
**Blactamines**

Éléments mobiles transférables  
(plasmides transposons)

**Penicillinases**  
TEM SHV

**BLSE**  
TEM SHV & CTX-M  
(souvent associées  
à d'autres mécanismes de R)

**Carbapenemases**  
*K.PneumoniaeC*

**Carbapenemases**  
VIM IMP & NDM

**AmpC plasmidiques**

**OXA spectre étroit**

**BLSE OXA**

**Carbapenemases**  
OXA 48 variants



# BL IBL avibactam in vitro

TABLE 1 MICs of  $\beta$ -lactam and  $\beta$ -lactam-avibactam combinations against select pathogens<sup>a</sup>

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<i>K. pneumoniae</i> with KPC-2	$\geq 512/\geq 512$	0.25/1			$\geq 512/\geq 512$	$\leq 0.06/\leq 0.06$
<i>E. coli</i> with ESBL	16/64	0.12/0.25				
<i>E. coli</i> with AmpC	16/64	0.12/0.5				
<i>E. coli</i> with OXA-48	4	<0.008				
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<i>Enterobacteriaceae</i> with multiple $\beta$ -lactamases, including KPC-2			>64/>64	0.5/2		
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<i>P. aeruginosa</i>	8/64	4/8	>64/>64	16/>32	16/32	8/32
<i>P. aeruginosa</i> with ESBL PER-1	128/128	4/16				
<i>A. baumannii</i>			>64/>64	32/>32		
<i>A. baumannii</i> with PER-1, OXA-51, and OXA-58	128/ $\geq 512$	32/256				
<i>S. aureus</i>			1/2	1/2		

<sup>a</sup> Data were adapted from references 15, 16, 19, 20, 21, and 24. Avibactam was added at 4  $\mu\text{g/ml}$ . Abbreviations: CAZ, ceftazidime; AVI, avibactam; CPT, ceftaroline; ATM, aztreonam.

<sup>b</sup> Numbers separated by a forward slash indicate MIC<sub>50</sub>/MIC<sub>90</sub> values. Empty cells indicate that values were not reported.

# BL/IBL activité in vitro vis à vis des carbapénémases

## B-lactam + avibactam

**Table 17.** Broader Spectrum of Avibactam Activity Compared to Available  $\beta$ -lactamase Inhibitors

$\beta$ -Lactamase		Avibactam	Clavulanic Acid	Tazobactam
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	CTX-M and ESBLs	Yes	Yes	Yes
	PER, VEB, GES	Yes	Yes	Yes
KPC		Yes	No	No
Class B (Metallo)	IMP, VIM, NDM	No	No	No
Class C (Serine)	Chromosomal <i>Enterobacteriaceae</i> AmpC	Yes	No	No
	Chromosomal <i>Pseudomonas</i> AmpC	Yes	No	No
	Plasmidic ACC, DHA, FOX, LAT, MIX, MIR, ACT	Yes	No	No
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	Carbapenemase-type OXA-23, -40, -48, -58	Variable	Variable	Variable