and CC 25.5 kg/m² (22.1 - 28.2); p=.029. A BMI cutpoint was not identified in CART analysis.

Conclusion. There is a relationship between increased BMI and 90-day CF in patients treated with dalbavancin. A higher BMI was found among those with with CF. Future studies are necessary to determine if a BMI based weight adjustment is necessary.

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1075. In vitro Activity of Gepotidacin against Escherichia coli Causing Urinary Tract Infections in the United States, Including Molecularly Characterized Fluoroquinolone Resistant Subsets

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Background. Gepotidacin (GEP) is a novel bacterial type II topoisomerase inhibitor in Phase 3 clinical trials for the treatment of gonorrhea and uncomplicated urinary tract infections (UTI). This study characterized fluoroquinolone (FQ)-not susceptible (not S) E. coli causing UTI in U.S. patients and evaluated the in vitro activity of GEP and comparators against various drug resistance (R) subsets.

Methods. 1,035 E. coli collected from 38 U.S. sites were included as part of the GEP Global UTI Surveillance Program (2019). Isolates were tested for susceptibility by broth microdilution. E. coli with MICs ≥0.5 mg/L for ciprofloxacin (not S) and/ or ≥1 mg/L for levofloxacin (not S) were selected for screening of FQ-R mechanisms, and subjected to genome sequencing, followed by screening of FQ-R genes and QRDR mutations in GyrA, GyrB, ParC and ParE.

Results. A total of 26.8% (277/1,035) E. coli met the screening criteria for FQ-not S (Table). Overall, GEP had MIC values of 2 mg/L and 4 mg/L against FQ-S and FQ-not S isolates, respectively. Nitrofurantoin had activity against the FQ-S and FQ-not S subsets (98.8% and 94.2%S, respectively), whereas amoxicillin-clavulanate (86.5% and 59.6%S) and trimethoprim-sulfamethoxazole (75.8% and 37.0%S) had limited activity. Most FQ-not S isolates (52.7%; 146/277) had double mutations in GyrA and ParC, followed by those isolates (20.6%; 57/277) with double mutations in GyrA and single mutations in ParC and ParE. The third most common genotype was represented by isolates (14.8%;41/277) with double mutations in GyrA and a single mutation in ParC. GEP had MIC₅₀ values of 1 mg/L or 2 mg/L and MIC₉₀ values of 2 mg/L or 4 mg/L when tested against isolates with various combinations of QRDR mutations. 4.3% (12/277) of FQ-not S E. coli carried qnrB (6) or qnrS (6), and GEP (MIC_{50/90}) 8/16 mg/L) had MICs of 0.5-32 mg/L against this subset.

Conclusion. GEP demonstrated potent activity against FQ-S and FQ-not S E. coli causing UTI in the U.S. In addition, GEP MIC did not seem to be affected by any combinations of FQ-R genes and QRDR mutations tested, except against the rare presence of qnrB/S genes. These data support the clinical development of GEP as a treatment option for UTI caused by FQ-S and FQ-not S E. coli isolates.

Table

Phenotype/genotype FQ-S FQ-not susceptible			No 758 277	MIC ₅₀ /MIC ₅₀ in mg/L (% susceptible by CLSI M100 criteria)													
				Gepotidacin 2/2 (-) 2/4 (-)	A/C 4/16 (86.5) 8/16 (59.6)	CIP 0.008/0.12 (100.0) >4/>4 (0.4)	NIT 16/32 (98.8) 16/32 (94.2)	TMP/SMX ≤0.12/>16 (75.8) >16/>16 (37.0)									
									GyrA	ParC	ParE						
									Single	WT	WT	8	2/- (-)	8/- (62.5)	0.5/- (12.5)	16/- (87.5)	>16/- (25.0)
Single	Single ^b	WT	18	1/2 (-)	8/16 (72.2)	0.5/>4 (0.0)	16/32 (100.0)	>16/>16 (22.2)									
Double	Single	WT	41	1/4 (-)	8/32 (63.4)	>4/>4 (0.0)	16/32 (90.2)	>16/>16 (19.5)									
Double ^d	Singled	Single ^d	57	1/2 (-)	8/16 (75.4)	>4/>4 (0.0)	16/32 (100.0)	>16/>16 (35.7)									
Double	Double	WT	146	2/4 (-)	8/16 (51.4)	>4/>4 (0.0)	16/32 (93.8)	>16/>16 (45.2)									
Qnrf			12	8/16 (-)	8/32 (58.3)	>4/>4 (0.0)	16/16 (91.7)	>16/>16 (25.0)									

Onf | 1876 (O.S.) | 1876 (O.S.) | 1872 (S.8.3) | 340-4 (0.0) | 1876 (91.7) | 146-16 (25.0) |
WT, wildtype, A/C, amoxicillin-clavulanate (2.1 ratio); CIP, ciprofloxacin, NIT, nitrofurantoin; TMP/SIMX, trimethoprimsulfamethoxazole; "-* CLSI breakpoint not available; Cyrk, DNA gyrase subunit A, Cyrb, DNA gyrase subunit B, ParC, DNA
topoisomerase IV subunit A, ParE, DNA topoisomerase IV subunit B, Mutations in Gyrb were not detected. Most prevalent
combinations of GORP mutations are shown; often genotypes were as follows: 4 isolates with wildtype sequences for all four genes.

1 isolate with double mutations in GyrA, and 2 isolates with double mutations in GyrA and ParC, plus a single alteration in ParE.

- 1 Isolate with oduble mutations in Cyrc, and a Section 28, 2011, 2012, 2014, 2

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