Multi-Site Evaluation of Meropenem/Vaborbactam MIC Test Strip (MTS) **Compared To Broth Microdilution MICs**

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Abstract:

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Background: MIC Test Strips (MTS, Liofilchem, Roseto degli Abruzzi, Italy) consists of specialized paper impregnated with a pre-defined concentration gradient of an antimicrobial agent, which is used to determine the minimum inhibitory concentration against bacteria as tested on agar media using overnight incubation and manual reading procedures. Meropenem/vaborbactam (M/V) was recently approved in the US for the treatment of patients 18 years of age and older with complicated urinary tract infections (cUTI) including pyelonephritis caused by the following susceptible microorganisms: Escherichia coli, Klebsiella pneumoniae, and Enterobacter cloacae species complex. This study was performed to evaluate the performance of M/V MTS compared to a broth microdilution method (BMD) for FDA 510(k) submission. Methods: Clinical and challenge isolates were tested by M/V BMD with frozen panels (according to CLSI M7-A10 and M100-S27) and by M/V MTS. Clinical isolates were collected and tested at 3 sites, 10 reproducibility isolates/agent were shared and tested in triplicate on 3 days at 3 sites and challenge isolates were tested at 1 site. Challenge isolates included majority with MIC results near or above the susceptible breakpoint. The total number of clinical isolates tested were: 390 Enterobacteriaceae and 75 Pseudomonas aeruginosa. The total number of challenge isolates tested were: 88 Enterobacteriaceae and 25 *P. aeruginosa*. QC strains (*K. pneumoniae* ATCC) BAA-1705 and P. aeruginosa ATCC 27853) were tested a minimum of 20 times by each site. **Results:** As shown in the table, M/V MTS MIC results for consolidated clinical and challenge organisms were within +/- one doubling dilution (essential agreement) of BMD MIC results for >90% of isolates. For reproducibility strains, 97% of M/VMTS results were within a doubling dilution of BMD results. All MTS and BMD QC results were within CLSI ranges.

Organism	Ν	% Essential Agreement	% Category Agreement
Enterobacteriaceae	478	95.6	97.1
P. aeruginosa	100	96.0	NA

Conclusions: The M/V MTS against clinically indicated Enterobacteriaceae species and *P*. aeruginosa perform similar to the reference broth microdilution method. The M/V MTS received clearance by FDA, Center for Devices and Radiological Health, for testing of relevant Enterobacteriaceae species.

Introduction

- Liofilchem (Roseto degli Abruzzi, Italy) manufactures MIC test strips (MTS) for a variety of antimicrobial agents, including meropenem/vaborbactam. The Liofilchem MIC test strip is a quantitative agar-based diffusion assay for determining the minimum inhibitory concentration (MIC).
- This study was performed as part of a 510(k) study (for "in vitro diagnostic use" label in the U.S.)
- This study compared the meropenem/vaborbactam (M/V) MTS MIC to broth microdilution MIC for the indicated Gram negative organisms (Enterobacter cloacae species complex, Escherichia coli and Klebsiella pneumoniae) and for additional Enterobacteriaceae species included in "in vitro only list" of the M/V label (Citrobacter freundii, Citrobacter koseri, Enterobacter aerogenes, Klebsiella oxytoca, Proteus *mirabilis, Providencia* spp., Serratia marcescens)

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Laboratory testing was performed by Jeanna Fisher (LSI), David Vicino (Univ. of Rochester.) and Sarah Clarke Hanna and Barbara Deburger (Cincinnati Children's Hospital)

References:

- 1. Clinical and Laboratory Standards Institute. 2015. Methods for Dilution Antimicrobial Susceptibility Tests for Bacteria that Grow Aerobically. 10th ed. Approved standard, CLSI M7-10, Wayne, PA.
- 2. Clinical and Laboratory Standards Institute. 2017 Performance Standards for Antimicrobial Susceptibility Testing. Approved Standard – 27th Edition. CLSI document M100-276 Wayne, PA
- 3. http://www.liofilchem.net/en/mov_mic_test_strip.php

Methods

Organism Group	Clinical	Challenge
C. freundii	15	
C. koseri	12	
E. aerogenes	15	
E. cloacae	90	15
E. coli	120	30
K. oxytoca	12	
K. pneumoniae	90	31
Proteus mirabilis	15	11
P. rettgeri	9	
S. marcescens	12	1
Enterobacteriaceae	390	88
P. aeruginosa	75	25
TOTAL	465	113

Reproducibility isolates

Testing sites:

MIC methods:

Results

- minor error rate was 1.5%.

Results by Testing Site

QC Organisr

P. aeruginos ATCC 27853

K. pneumonia ATCC BAA-170

Study Strains (Clinical isolates collected at three sites and challenge isolates)

All clinical isolates were collected within one year of testing and at least 50% were tested within 7 days of collection.

<u>QC strains:</u> P. aeruginosa ATCC 27853 K. pneumoniae ATCC BAA-1705

The number of challenge organisms with molecular characterized resistance mechanisms were: 8 CTX-M, 7 AmpC, 10 NDM, 8 VIM, 4 KPC, 2 OXA-48, 1 OXA-1, OXA-30



E. coli Meropenem/vaborbactam $MIC = 0.023/8 \,\mu g/mL$, reported as 0.03/8 µg/mL

(number of results at each MIC)

INI IS	
Results	≤0.016
≤0.016	1
0.03	34
0.06	10
0.12	
0.25	
0.5	
1	
2	
4	
8	
16	
32	
64	
128	
256	

10 isolates (4 E. coli, 3 K. pneumoniae, 2 E. cloacae and 1 P. aeruginosa) were tested by M/V MTS at each of the 3 testing sites in triplicate on three separate days for a total of 27 results/reproducibility isolate

• Laboratory Specialists, Inc. (LSI), Westlake, OH

University of Rochester Medical Center, Rochester, NY

• Cincinnati Children's Hospital & Medical Center, Cincinnati, OH

Each isolate was tested once by broth microdilution according to CLSI method (1) with frozen panels containing meropenem/vaborbactam concentrations of 0.016/8-256/8 µg/mL and by meropenem/vaborbactam (M/V (3) containing concentrations of 0.016/8-256/8 µg/mL (Liofilchem, Roseto degli Abruzzi, Italy) on 100 mm Mueller Hinton Agar II plates (MHA from Becton Dickinson [Sparks, MD]. Challenge isolate testing was performed by one site (LSI)

Quality control strains were tested each day of testing and a total 20 replicates/site were tested.

• MTS results were rounded up to next doubling dilution for analysis. MIC results were interpreted according to FDA breakpoints.

Quality Control (Table 1): All M/V MTS MIC results for both QC strains were within the CLSI expected ranges. The majority (95.1%) of M/V MTS MIC results for K. pneumoniae ATCC BAA-1705 were 0.06 µg/mL (at the high end of the expected range).

Reproducibility (Figure 1): 97% of consolidated isolate and site M/V MTS MICs were within +/-1 doubling dilution of modal MIC.

Clinical & Challenge MTS (Figures 2-5): MTS MIC results were within +/- 1 doubling dilution for 457/478 Enterobacteriaceae, which included 139/150 E. coli, 104/105 E. cloacae species complex and 115/121 K. pneumoniae. Category agreement for all Enterobacteriaceae was 97.1%, major error rate was 1.1% and minor error rate was 2.5%. MTS MIC results were within +/- one doubling dilution for 96/100 P. aeruginosa. Category agreement for P. aeruginosa was 89.0%, major error rate was 10% and

M/V MTS trended up to 1 dilution higher compared to the BMD MICs, particularly at the very low end of the MIC range (i.e. ≤0.016-0.06 µg/mL) and for *P. aeruginosa* across the concentration range.

Table 1. Meropenem-Vaborbactam BMD and MTS Quality Control

		MIC	R	eferen	ice BMI	D	MTS Frequency						
	Expected			rrequ	лепсу	All	IV	IIJIIE	quenc	y All			
า	Result	µg/mL	Site 1	Site 2	Site 3	Sites	Site 1	Site 2	Site 3	Sites			
		0.06				0				0			
		0.12				0				0			
a	0.12 - 1	0.25	15	15	15	45			11	11			
3		0.5	4	4	5	13	19	20	9	48			
		1	1	1		2	1			1			
		2				0				0			
		0.008				0				0			
	0.015	0.015				0				0			
3e 25	0.015 -	0.03	16	20	16	52	1		2	3			
55	0.00	0.06	4	1	4	9	19	21	18	58			
		0.12				0				0			

Figure 1. Meropenem/vaborbactam MTS MIC results for 10 reproducibility isolates (number of results based dilution difference compared to test mode)

>256

(number of results based unution unterence compared to test mode)											
Difference in the number of doubling dilutions between test result and test mode											
Reproducibility Strain No.,	Off-						Off-	Test MIC			
Species	Scale	-2	-1	0	1	2	Scale	Mode			
		AI	l Sites								
R1, <i>E. coli</i>			1	19	7			0.03			
R2, E. coli				24	3			0.25			
R3, E. coli				21	6			0.12			
R4, K. pneumoniae			3	13	11			64			
R5, K. pneumoniae			1	25	1			4			
R6, E. cloacae			13	14				1			
R7, P. aeruginosa				24	3			0.5			
R10, E. coli				26	1			0.06			
R11, E. cloacae			1	22	4			0.06			
R13, K. pneumoniae		8	3	13	3			8			
Total	0	8	22	201	39	0	0				
Between-site Reproducibility 262/270 = 97%											

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Figure 2. Meropenem/vaborbactam MTS MIC compared to **BMD MIC for 478 Enterobacteriaceae***

Reference BMD Results 0.03 0.06 0.12 0.25 0.5 1 2 4 8 16 32 64 128 256 >256 3 11 14 1 1 3 1 1 1 2 1 1 1 3 7 3 3 2 5 4 1 2 10 3 | 1 | 3 | 1

105 Enterobacter cloacae species complex, 150 Escherichia coli, 121 Klebsiella pneumoniae 15 Citrobacter freundii, 12 Citrobacter koseri, 15 Enterobacter aerogenes, 12 Klebsiella oxytoca, 26 Proteus mirabilis, 9 Providencia spp., and 13 Serratia marcescens

Figure 4. Meropenem/vaborbactam MTS MIC compared to BMD MIC for 121 *K. pneumoniae* (number of results at each MIC)

																	-
	Reference BMD Results																
5	0.03	0.06	0.12	0.25	0.5	1	2	4	8	16	32	64	128	3 2	256	>256	
												[]
	17									Ove	rall EA	(essen	tial				• • •
		12								_ agre	ement)		115	/ 12	1 95.	0%
_	22	12								EA,	evalual	ole resu	ults	115 / 120		0 95.	8%
	1									Cate	egory a	greeme	ent	11/	/ 12	1 96.	7%
										Cat	Cotogony Mino			3	/ 12	1 2.	5%
_											ourcegory			1	/ 9	3 1.	1%
				1						ei	IOIS	Very M	ajor	0	/ 2	6 0.	0%
					1												1
							1										
							1		1								
								1	1	1							
								1		2	3						
										1	7	2					
											1	1					
												1	2		1		
															1		
											1		2				

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Figure 3. Meropenem/vaborbactam MTS MIC compared to BMD MIC for 150 E. coli (number of results at each MIC)

MTS							Refer	ence Bl	MD Re	sults		•					
Results	≤0.016	0.03	0.06	0.12	0.25	0.5	1	2	4	8	16	16 32 64 12				>2	256
≤0.016	1											roll EA	losson	tial			
0.03	20	55									agre	ement))	illai	139 /	150	92.7
0.06	8	41	6								EA,	evalua	, ble res	ults	118 /	121	97.5
0.12		1	2								Cate	egory a	greem	ent	148 /	150	98.7
0.25				1							Cat	Category Minor			2 / 150		1.3
0.5						1					errors Major				0 / 1	142	0.0
1					1							- Very Major		0 /	7	0.0	
2					_		1										
4								1	2	1							
8									1								
16											2						
32												1	1				
64													1				
128														1			
256																	
>256														1			
																-	

Figure 5. Meropenem/vaborbactam MTS MIC compared to BMD MIC for 100 *P. aeruginosa* (number of results at each MIC)



Conclusions

- The meropenem/vaborbactam MTS against Enterobacteriacea performed similar to BMD testing.
- The essential agreement for meropenem/vaborbactam MTS against P. aeruginosa was well above the 90% acceptance criteria (96%), however, overall there was trend for higher MTS results.
- There was also a tendency for one dilution higher meropenem-vaborbactam MIC results compared to BMD MIC results, particularly for Enterobacteriaceae with BMD MIC results of $\leq 0.016-0.06 \ \mu g/mL$ and with the quality control strains.
- The M/V MTS endpoints were easily determined; the testing sites reported no reading issues.
- The meropenem/vaborbactam MTS was cleared for in vitro diagnostic use by the FDA.

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64	128	3	25	6	^	256	
essen	tial						
			96 /	10)0	96.	0%
le res	ults		77 /	8	31	95.	1%
reeme	ent		89 /	10)0	89.	0%
/linor			10 /	10	00	10.	0%
/lajor			1 /	6	65	1.	5%
/ery N	lajor		0 /	2	29	0.	0%
							. /
							ľ
			14			5	
		7					