OUTCOMES BY AGE AND GENDER FROM A GLOBAL PHASE 3 STUDY OF DELAFLOXACIN (DLX) IN COMMUNITY ACQUIRED BACTERIAL PNEUMONIA (CABP)

Andrzej Mądel1, John Pullman2, Monica Popescu3, Megan Quintas4, Laura Lawrence1, Yang Li2, Sue Cammarata4

1Andrzej Frycz Modrzewski Krakow University, Cracow, Poland, 2Courage Street Medical, Butte, MT, US, 3Saint Pantelimon Emergency Clinical Hospital, Bucharest, Romania, 4Melinta Therapeutics, Lincolnshire, IL, US. *Meditar Therapeutics, Hunt Valley, MD, US.

INTRODUCTION

Delafloxacin, a novel 4-quinolone, demonstrated efficacy in respiratory infections in Europe, and is currently under development in the US.

METHODS

The phase 3 study randomized 1,042 adults with community-acquired pneumonia (CAP) to receive 420 mg delafloxacin once daily (BD) for 10 to 14 days, or 1,042 adults with community-acquired bronchitis (CAB) to receive 420 mg delafloxacin as monotherapy for 5 days. The study followed the Infectious Diseases Society of America/American Thoracic Society Guidelines.

RESULTS

DLX showed non-inferiority to moxifloxacin in CAP and share efficacy (ECR rate) and clinical outcome (success rate) with moxifloxacin in CAB.

CONCLUSIONS

DLX was non-inferior to moxifloxacin in the primary efficacy analysis of CAB (improvement at 98% [2.24 hours after first dose of study drug) and clinical success at TOC in the ITT population.

REFERENCES


