

Introduction

Candida spp. are a major cause of invasive mycoses with the majority of infections caused by *C. albicans* (CA). As treatment options are limited in the setting of resistance to available agents, we compared the *in vitro* activity of the fungal Cyp51 inhibitors VT-1161 and VT-1129 to fluconazole (FLC), caspofungin (CAS), and voriconazole (VRC) against a panel of clinical CA isolates, including those with reduced antifungal susceptibility.

Reports of antifungal resistance are prevalent in the published literature. While some mechanisms of resistance have the ability to cause cross-resistance within the class, this is not always the case. Therefore, it is important to evaluate the relevance of known resistance mechanisms in relation to investigational compounds.

Material and Methods

A total of 20 CA isolates from patients with candidemia or oropharyngeal candidiasis were tested including 8 that were susceptible dose-dependent (SDD) or resistant to FLC.

Stock solutions were prepared by dissolving drug (10mg) in 1 ml of DMSO. Further dilutions were made in DMSO and RPMI for a final DMSO concentration of 1%.

Methods for testing were those outlined in the CLSI document M27-A3. All drugs were tested in a microdilution format using RPMI-1640 with L-glutamine but without bicarbonate, an inoculum of 0.5-2.5 x 10³, incubation at 35°C, and were read manually with an inverted mirror. Testing range for VT compounds and VRC was 0.03-16 µg/ml while the range for CAS was 0.015-8 µg/ml and for FLC was 0.125-64 µg/ml respectively. Endpoints were determined at 50% inhibition of fungal growth as compared to the drug-free growth control

Results

Fluconazole SDD / Resistant Isolates (MIC >16 µg/ml)

| Agent | VT-1161 | VT-1161 | VT-1129 | VT-1129 | CAS | FLC | VRC |
|-----------|-------------|-----------|-------------|-----------|-----------|----------|------------|
| Time Pt. | 24 hrs | 48 hrs | 24 hrs | 48 hrs | 24 hrs | 24 hrs | 48 hrs |
| MIC Range | ≤0.03 – 0.5 | ≤0.03 – 1 | ≤0.03 – 0.5 | ≤0.03 – 1 | 0.25 – 2 | 32 – >64 | 0.06 – >16 |
| GM | 0.11 | 0.34 | 0.12 | 0.36 | 0.50 | 58.7 | 1.88 |
| MIC | p < 0.001 | p < 0.001 | p < 0.001 | p < 0.001 | p < 0.001 | | p < 0.01 |

p-value vs. FLC

Results

| Antifungal Time Point (hr) | | VT-1161 24 | VT-1161 48 | VT-1129 24 | VT-1129 48 | CAS 24 | FLC 24 | VRC 48 |
|--|----|------------|------------|------------|------------|--------|--------|--------|
| Control | CP | <0.03 | <0.03 | <0.03 | <0.03 | 0.5 | 1 | 0.06 |
| Control | CK | 0.06 | 0.25 | 0.06 | 0.125 | 0.5 | 16 | 0.25 |
| Fluconazole & Caspofungin Susceptible Isolates | | | | | | | | |
| 1649 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.5 | 0.25 | <0.03 |
| 2307 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.015 | 0.5 | <0.03 |
| 412 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.125 | <0.125 | <0.03 |
| 1002 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.25 | <0.125 | <0.03 |
| 3034 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.5 | 1 | <0.03 |
| 4018 | CA | <0.03 | >16 | <0.03 | >16 | 0.25 | 2 | >16 |
| SC5314 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.25 | <0.125 | <0.03 |
| Isolates with Reduced Susceptibility to Fluconazole and Caspofungin | | | | | | | | |
| 6482 | CA | 0.25 | 0.25 | 0.5 | 0.5 | 0.25 | >64 | 8 |
| CLY719 | CA | 0.5 | 1 | 0.5 | 1 | 1 | >64 | 16 |
| 43001 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 2 | 32 | 2 |
| 42379 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 2 | 32 | 0.06 |
| 53264 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 2 | <0.125 | <0.03 |
| 4254 | CA | 0.06 | <0.03 | <0.03 | <0.03 | 1 | <0.125 | 0.06 |
| 2274 | CA | 0.125 | 0.25 | 0.125 | 0.25 | 0.25 | 32 | 0.25 |
| 6431 | CA | 0.5 | 0.5 | 0.5 | 0.5 | 0.25 | 64 | 8 |
| 2440 | CA | 0.06 | 0.06 | 0.06 | 0.125 | 0.5 | 8 | 0.125 |
| 3795 | CA | <0.03 | <0.03 | <0.03 | <0.03 | 0.25 | 8 | <0.03 |
| 2257 | CA | 0.25 | 0.5 | 0.5 | 0.5 | 0.25 | >64 | 0.5 |
| 4380 | CA | 0.06 | 0.125 | <0.03 | 0.125 | 0.5 | 32 | 0.5 |

| Isolate | Mechanisms of Resistance |
|---------|--|
| 1649 | Wild-type |
| 2307 | ERG11 point mutation & over-expression CDR1, CDR2, & ERG11 |
| 412 | Wild Type – Control for 2307 |
| 1002 | Wild-type – Control for 3034 |
| 3034 | Over-expression of CDR1, CDR2, & MDR1 |
| 4018 | Wild-type |
| SC5314 | Wild-type (genome available) |
| 6482 | FKS1 point mutation; unknown mechanism of azole resistance |
| CLY719 | FKS1 point mutation; unknown mechanism of azole resistance |
| 43001 | FKS1 point mutation; unknown mechanism of azole resistance |
| 42379 | FKS1 point mutation; unknown mechanism of azole resistance |
| 53264 | FKS1 point mutation |
| 4254 | FKS1 point mutation |
| 2274 | ERG11 point mutation |
| 6431 | Unknown mechanism of azole resistance |
| 2440 | ERG11 Point mutation & over-expression of MDR1 |
| 3795 | ERG11 point mutation |
| 2257 | ERG11 point mutation |
| 4380 | ERG11 point mutation & over-expression CDR1, CDR2, & ERG11 |

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| WT |
| Fluconazole SDD / Resistance & Echinocandin Resistance |
| Echinocandin Resistance |
| Fluconazole SDD / Resistance |

Results

1. VT-1161 and VT-1129 exhibited greater potency and significantly lower GM MICs than FLC including isolates SDD and resistant isolates with point mutations in *ERG11* and those that overexpress *CDR1*, *CDR2* and *MDR1*.
2. VT-1161 and VT-1129 had similar or superior potency to CAS and VRC against all isolates tested.
3. VT-1161 and VT-1129 maintained good activity against isolates with resistance to both azoles and CAS.

Conclusions

In maintaining activity despite the presence of resistance mechanisms, the activity of VT-1161 and VT-1129 against *Candida* spp. compared favorably with both caspofungin and voriconazole and was more potent than fluconazole.

The results for these compounds are very promising and suggest that further development of these agents is warranted in an effort to improve the treatment options for patients with fungal infections.

References

1. CLSI, *Reference Method for Broth Dilution Antifungal Susceptibility Testing of Yeasts; Approved Standard-Third Edition; CLSI document M27-A3*. Wayne, PA: Clinical and Laboratory Standards Institute; 2008.
2. Espinel-Ingroff A. Canton E. Peman J. Rinaldi MG. Fothergill AW. Comparison of 24-hour and 48-hour voriconazole MICs as determined by the Clinical and Laboratory Standards Institute broth microdilution method (M27-A3 document) in three laboratories: results obtained with 2,162 clinical isolates of *Candida* spp. and other yeasts. *JCM*. 47(9):2766-71, 2009 Sep.
3. Brzankalski GE. Najvar LK. Wiederhold NP. Bocanegra R. Fothergill AW. Rinaldi MG. Patterson TF. Graybill JR. Evaluation of aminocandin and caspofungin against *Candida glabrata* including isolates with reduced caspofungin susceptibility. *Journal of Antimicrobial Chemotherapy*. 62(5):1094-100, 2008 Nov.