



***In vitro* and *In vivo* Activities
of LCB01-0648 & LCB01-0699
against Gram-positive Bacteria**

International Conference on
Medical and Clinical Microbiology 2017

Jin-Hwan Kwak, Ph.D.
School of Life Science

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UNIVERSITY

THE RACE IS ON

Longitude Prize is a challenge with a £10 million prize fund to reward a diagnostic test that helps solve the problem of global antibiotic resistance. It is being run by Nesta and supported by Innovate UK as funding partner.

239
teams

are
competing
from

41
countries

Will you join them?

[Enter Now](#)

18 November 2014

The Prize opens for submissions

31 May 2017

Next assessment deadline
(Then every four months)

2015 - 2019

First team to successfully meet the criteria wins
Prize

30 September 2019

Final submission deadline

The Longitude Prize 2014 is an inducement prize contest offered by Nesta, a British lottery funded charity, in the spirit of the 18th-century Longitude prize. The prize was announced by the Prime Minister of the United Kingdom, David Cameron, in 2012, and a shortlist of six challenges to be put to a public vote was announced at Broadcasting House in May 2014. It was announced on 25 June 2014 that the prize will be awarded for **antibiotics**.

Executive Order - Combating Antibiotic-Resistant Bacteria



NATIONAL STRATEGY FOR COMBATING ANTIBIOTIC- RESISTANT BACTERIA

Vision: The United States will work domestically and internationally to prevent, detect, and control illness and death related to infections caused by antibiotic-resistant bacteria by implementing measures to mitigate the emergence and spread of antibiotic resistance and ensuring the continued availability of therapeutics for the treatment of bacterial infections.

September 2014



REPORT TO THE PRESIDENT ON COMBATING ANTIBIOTIC RESISTANCE

Executive Office of the President
President's Council of Advisors on
Science and Technology

September 2014



Antibiotics Currently in Clinical Development

As of March 2016, an estimated 37 new antibiotics¹ with the potential to treat serious bacterial infections are in clinical development for the U.S. market. The success rate for clinical drug development is low; historical data show that, generally, only 1 in 5 infectious disease products that enter human testing (phase 1 clinical trials) will be approved for patients.* Below is a snapshot of the current antibiotic pipeline, based on publicly available information and informed by an external expert. It will be updated periodically, as products advance or are known to drop out of development. Because this list is updated periodically, footnote numbers may not be sequential. Please contact abxpipeline@pewtrusts.org with additions or updates.

Drug name	Development phase ²	Company	Drug class	Expected activity against resistant Gram-negative ESKAPE pathogens? ³	Expected activity against a CDC urgent threat pathogen? ⁴	Potential indication(s)? ⁵
WCK 4873 ¹⁵	Phase 1	Wockhardt Ltd.	Second-generation ketolide	No	No	Bacterial infections
MGB-BP-3	Phase 1 ¹⁰	MGB Biopharma Ltd.	DNA minor groove binder	No	Yes	<i>C. difficile</i> infections
OP0595 (RG6080)	Phase 1 ¹⁰	Meiji Seika Pharma Co. Ltd./Fedora Pharmaceuticals Inc. (Roche licensee)	Beta-lactamase inhibitor	Possibly	Possibly	Bacterial infections
BAL30072	Phase 1	Basilea Pharmaceutica Ltd.	Monosulfactam	Yes	Yes	Multidrug-resistant Gram-negative bacterial infections ⁶
CRS3123	Phase 1	Crestone Inc.	Methionyl-tRNA synthetase (MetRS) inhibitor	No	Yes	<i>C. difficile</i> infections
LCB01-0371	Phase 1 ¹⁰	LegoChem Biosciences Inc.	Oxazolidinone	No	No	Bacterial infections
TD-1607	Phase 1	Theravance Biopharma Inc.	Glycopeptide-cephalosporin heterodimer	No	No	Acute bacterial skin and skin structure infections, ⁶ hospital-acquired pneumonia/ventilator-associated bacterial pneumonia, ⁶ bacteremia ⁶
WCK 2349 ¹⁵	Phase 1	Wockhardt Ltd.	Fluoroquinolone (WCK 771 pro-drug)	No	No	Bacterial infections
WCK 771 ¹⁵	Phase 1	Wockhardt Ltd.	Fluoroquinolone	No	No	Bacterial infections
Zidebactam+Cefepime (WCK 5222) ¹⁵	Phase 1	Wockhardt Ltd.	Novel beta-lactamase inhibitor+beta-lactam	Possibly	Possibly	Complicated urinary tract infections, ⁶ hospital-acquired bacterial pneumonia/ventilator-associated bacterial pneumonia ⁶

LCB01-0371 is in clinical development

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0066-4804/10/\$12.00 doi:10.1128/AAC.00723-10
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In Vitro and *In Vivo* Activities of LCB01-0371, a New Oxazolidinone[∇]

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LCB01-0371 is a new oxazolidinone with cyclic amidrazone. *In vitro* activity of LCB01-0371 against 624 clinical isolates was evaluated and compared with those of linezolid, vancomycin, and other antibiotics. LCB01-0371 showed good activity against Gram-positive pathogens. *In vivo* activity of LCB01-0371 against systemic infections in mice was also evaluated. LCB01-0371 was more active than linezolid against these systemic infections. LCB01-0371 showed bacteriostatic activity against *Staphylococcus aureus*.

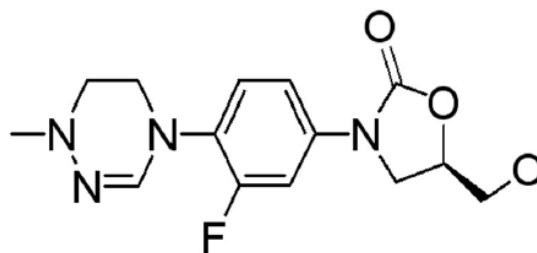


FIG. 1. Chemical structure of LCB01-0371.

Novel Oxazolidinones

■ LCB01-0648

- LCB01-0648 is one of novel antibacterial agents in oxazolidinone class.
- LCB01-0648 has antibacterial activity to drug-susceptible or resistant gram positive cocci in *in vitro* system.

■ LCB01-0699

- Phosphate monoester prodrug of LCB01-0648.

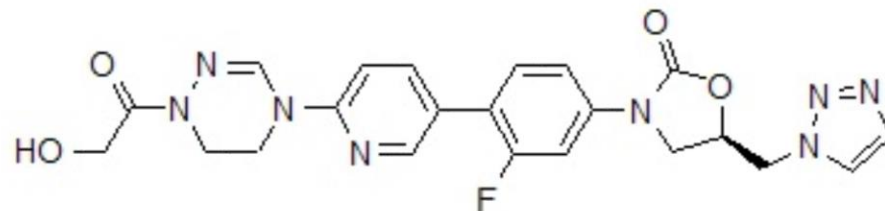


Figure 1. Chemical structure of LCB01-0648

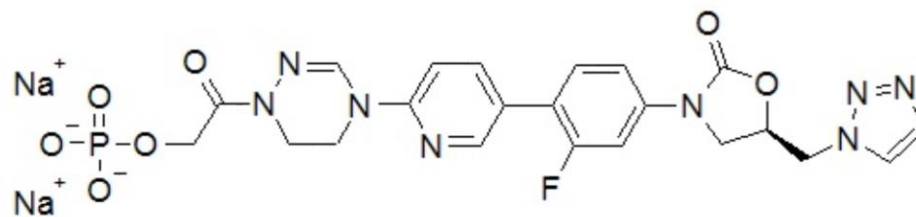


Figure 2. Chemical structure of LCB01-0699

Article

In Vitro Activities of LCB 01-0648, a Novel Oxazolidinone, against Gram-Positive Bacteria

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Abstract: Oxazolidinones are a novel class of synthetic antibacterial agents that inhibit bacterial protein synthesis. Here, we synthesized and tested a series of oxazolidinone compounds containing cyclic amidrazone. Among these compounds, we further investigated the antibacterial activities of LCB01-0648 against drug-susceptible or resistant Gram-positive cocci in comparison with those of six reference compounds. LCB01-0648 showed the most potent antimicrobial activities against clinically isolated Gram-positive bacteria. Against the methicillin-resistant *Staphylococcus aureus* (MRSA) and methicillin-resistant coagulase-negative staphylococci (MRCNS) isolates, LCB01-0648 showed the lowest MIC₉₀s (0.5 mg/L) among the tested compounds. In addition, LCB01-0648 had the lowest minimum inhibitory concentrations (MICs) against the four linezolid-resistant *S. aureus* (LRSA) strains (range 2–4 mg/L). The results of the time–kill studies demonstrated that LCB01-0648 at a concentration 8× the (MIC) showed bactericidal activity against methicillin-susceptible *Staphylococcus aureus* MSSA or MRSA, but showed a bacteriostatic effect against LRSA. These results indicate that LCB01-0648 could be a good antibacterial candidate against multidrug-resistant (MDR) Gram-positive cocci.

Keywords: LCB01-0648; oxazolidinone; MICs; linezolid-resistant *S. aureus*

Comparative *in vitro* activities of LCB01-0648 against clinical isolates

Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)			Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)		
		Range	MIC ₅₀	MIC ₉₀			Range	MIC ₅₀	MIC ₉₀
MSSA (74)	LCB01-0648	0.25~0.5	0.5	0.5	MSCNS (19)	LCB01-0648	0.125~0.5	0.25	0.5
	Linezolid	2~2	2	2		Linezolid	1~2	1	2
	Oxacillin	0.06~4	0.25	0.5		Oxacillin	0.03~1	0.125	1
	Erythromycin	0.125~>64	0.25	>64		Erythromycin	0.06~>64	0.25	>64
	Ciprofloxacin	0.06~>64	0.25	0.5		Ciprofloxacin	0.06~8	0.125	8
	Sparfloxacin	0.015~8	0.06	0.125		Sparfloxacin	0.03~8	0.125	4
	Moxifloxacin	0.015~8	0.06	0.125		Moxifloxacin	0.03~4	0.125	4
	Gemifloxacin	0.008~8	0.015	0.06		Gemifloxacin	0.008~0.5	0.015	0.5
	Vancomycin	0.25~2	1	1		Vancomycin	1~4	2	4
	Quinupristin-dalfopristin	0.125~0.5	0.25	0.5		Quinupristin-dalfopristin	0.125~1	0.25	1

*MSSA, methicillin-susceptible *S. aureus*

*MSCNS, methicillin-susceptible coagulase-negative staphylococci

MICs of LCB01-0648, linezolid, oxacillin, erythromycin, ciprofloxacin, sparfloxacin, Mmoxifloxacin, gemifloxacin, vancomycin, and quinupristin-dalfopristin against clinical isolates of Gram-positive organisms.

Comparative *in vitro* activities of LCB01-0648 against clinical isolates

Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)			Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)		
		Range	MIC ₅₀	MIC ₉₀			Range	MIC ₅₀	MIC ₉₀
<i>S. pneumoniae</i> (79)	LCB01-0648	0.03~1	0.125	0.25	<i>S. pyogenes</i> (21)	LCB01-0648	0.125~0.5	0.25	0.25
	Linezolid	0.5~1	1	1		Linezolid	1~2	2	2
	Oxacillin	0.008~>32	16	16		Oxacillin	0.25~32	0.5	8
	Erythromycin	0.008~>64	>64	>64		Erythromycin	0.008~8	0.06	2
	Ciprofloxacin	0.5~32	2	4		Ciprofloxacin	0.5~4	1	2
	Sparfloxacin	0.06~16	0.25	0.5		Sparfloxacin	0.125~1	0.25	0.5
	Moxifloxacin	0.06~4	0.25	0.5		Moxifloxacin	0.125~0.5	0.125	0.25
	Gemifloxacin	0.008~0.25	0.03	0.06		Gemifloxacin	0.03~0.125	0.03	0.06
	Vancomycin	0.5~2	1	1		Vancomycin	0.5~4	1	1
	Quinupristin-dalfopristin	0.5~4	1	2		Quinupristin-dalfopristin	1~2	1	2

Comparative *in vitro* activities of LCB01-0648 against clinical isolates

Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)		
		Range	MIC ₅₀	MIC ₉₀
<i>E. faecalis</i> (108)	LCB01-0648	0.125~0.5	0.25	0.5
	Linezolid	1~2	2	2
	Oxacillin	8~>64	16	>64
	Erythromycin	0.125~>64	>64	>64
	Ciprofloxacin	0.06~>64	2	64
	Sparfloxacin	0.25~64	1	32
	Moxifloxacin	0.06~64	1	32
	Gemifloxacin	0.008~16	0.125	4
	Vancomycin	0.5~4	2	4
	Quinupristin-dalfopristin	0.25~16	4	16

Organisms (no. of strains)	Antimicrobial agent	MIC ($\mu\text{g/mL}$)		
		Range	MIC ₅₀	MIC ₉₀
<i>E. faecium</i> (29)	LCB01-0648	0.25~0.5	0.25	0.5
	Linezolid	1~2	2	2
	Oxacillin	16~>64	>64	>64
	Erythromycin	0.125~>64 4	>64	>64
	Ciprofloxacin	1~64	4	64
	Sparfloxacin	0.5~32	4	32
	Moxifloxacin	0.25~>64	4	32
	Gemifloxacin	0.03~64	2	16
	Vancomycin	0.5~8	1	2
	Quinupristin-dalfopristin	0.25~32	0.5	4

Comparative *in vitro* activities of LCB01-0648 against drug-resistant strains

Organisms (no. of strains)	Antimicrobial agent	MIC (µg/mL)		
		Range	MIC ₅₀	MIC ₉₀
MRSA (200)	LCB01-0648	0.125~0.5	0.5	0.5
	Linezolid	1~2	2	2
	Oxacillin	8~>64	>64	>64
	Erythromycin	0.25~>64	>64	>64
	Ciprofloxacin	0.125~>64	32	>64
	Sparfloxacin	0.06~>64	16	>64
	Moxifloxacin	0.03~>64	4	64
	Gemifloxacin	0.008~>64	2	64
	Vancomycin	0.5~4	1	2
	Quinupristin-dalfopristin	0.125~1	0.5	1

Organisms (no. of strains)	Antimicrobial agent	MIC (µg/mL)		
		Range	MIC ₅₀	MIC ₉₀
MRCNS (33)	LCB01-0648	0.125~1	0.25	0.5
	Linezolid	1~2	1	2
	Oxacillin	2~>64	>64	>64
	Erythromycin	0.06~>64	>64	>64
	Ciprofloxacin	0.06~64	8	32
	Sparfloxacin	0.03~32	4	16
	Moxifloxacin	0.06~16	2	8
	Gemifloxacin	0.008~8	0.5	4
	Vancomycin	1~4	2	4
	Quinupristin-dalfopristin	0.125~8	0.25	2

Organisms (no. of strains)	Antimicrobial agent	MIC (µg/mL)		
		Range	MIC ₅₀	MIC ₉₀
VRE (47)	LCB01-0648	0.125~0.5	0.25	0.25
	Linezolid	1~2	2	2
	Oxacillin	>64~>64	>64	>64
	Erythromycin	>64~>64	>64	>64
	Ciprofloxacin	0.5~>64	64	>64
	Sparfloxacin	0.25~64	32	64
	Moxifloxacin	0.25~32	16	32
	Gemifloxacin	0.015~32	16	32
	Vancomycin	>64~>64	>64	>64
	Quinupristin-dalfopristin	0.25~4	0.5	2

- ***MRSA**, methicillin-resistant *S. aureus*
- ***MRCNS**, methicillin-resistant coagulase-negative staphylococci
- ***VRE**, vancomycin-resistant enterococci

In vitro activity of LCB01-0648, linezolid, and comparator drugs against linezolid-resistant *S. aureus* strains

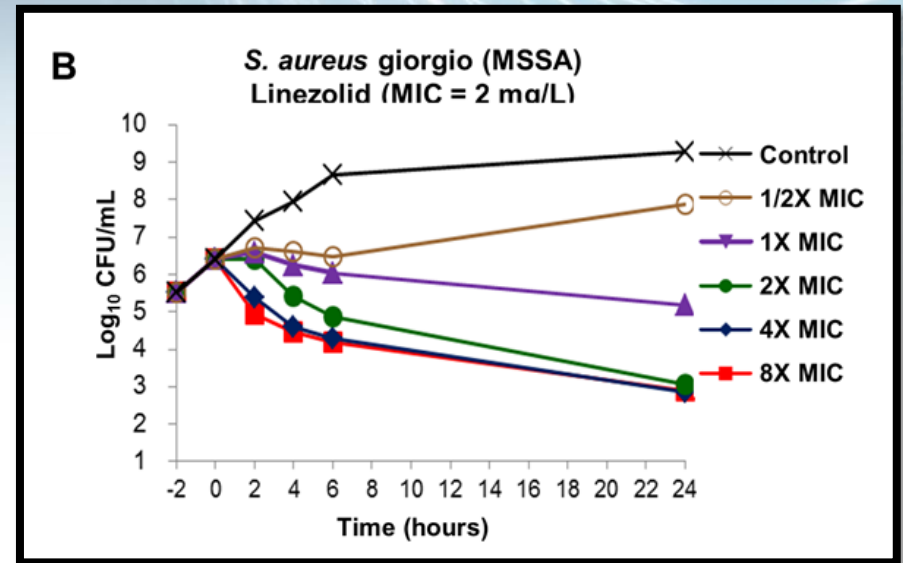
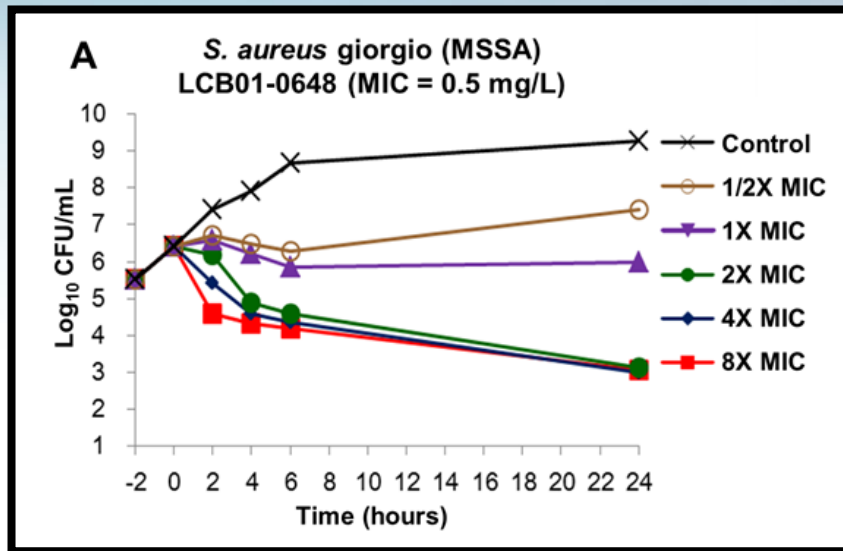
Strain derivation ^a	Mutation	MIC ₉₀ (mg/ml) ^b								
		LCB01-0648	LZD	OXA	ERY	CIP	SPX	MOX	GEM	VAN
NRS119 MRSA	G2576U	4	64	>64	1	>64	16	4	8	1
NRS121 MRSA	G2576U	4	64	>64	1	>64	16	4	8	1
NRS127 MRSA	Non-23S rRNA	2	8	32	64	>64	>64	64	64	2
NRS271 MRSA	G2576U	2	64	>64	1	>64	16	16	16	0.5

^a NRs strains were obtained from Samsung hospital, Seoul, Korea.

^b LZD, linezolid; OXA, oxacillin; ERY, erythromycin; CIP, ciprofloxacin; SPX, sparfloxacin; MOX, moxifloxacin; GEM, gemifloxacin; VAN, vancomycin.

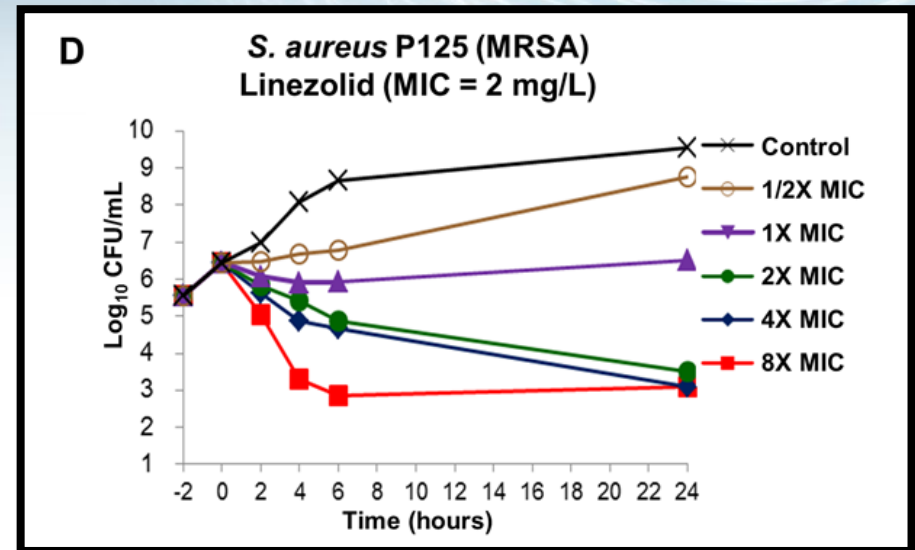
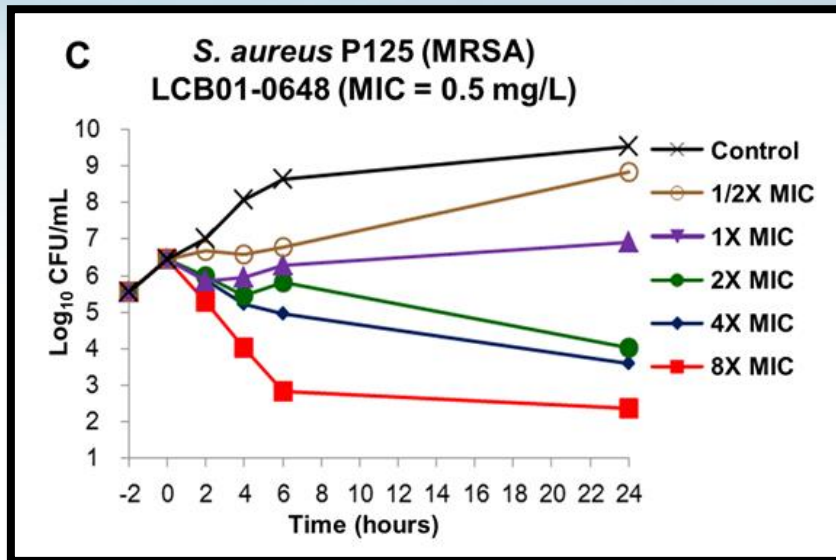
Time-kill curves of LCB01-0648 and linezolid against *S. aureus*

S. aureus giorgio(MSSA) exposed to LCB01-0648(A) or linezolid(B).



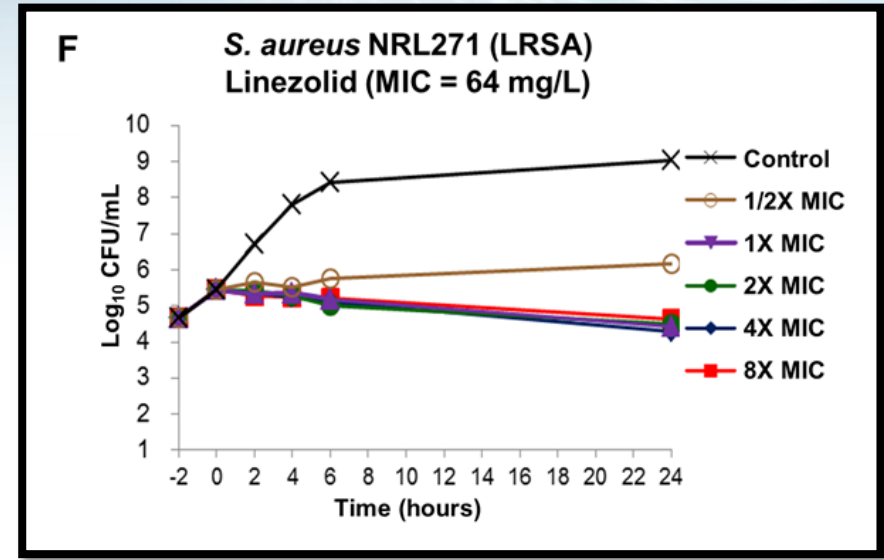
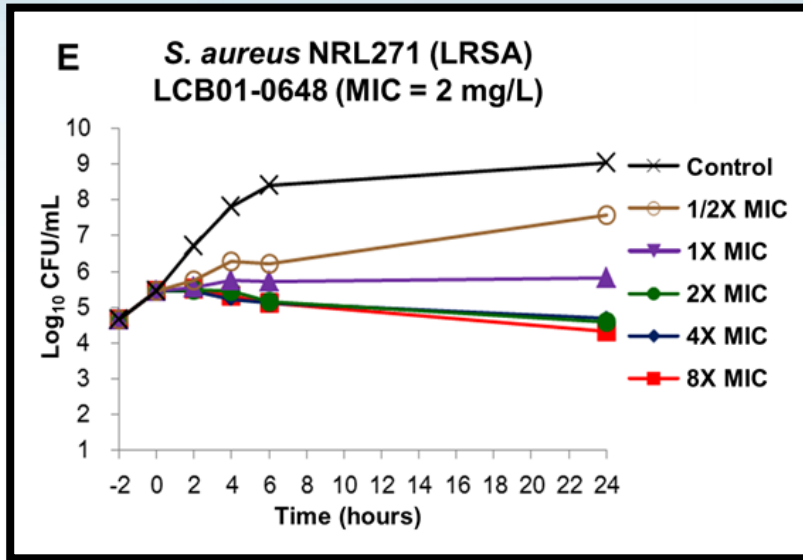
Time-kill curves of LCB01-0648 and linezolid against *S. aureus*

S. aureus P125(MRSA) exposed to LCB01-0648(C) or linezolid(D).



Time-kill curves of LCB01-0648 and linezolid against *S. aureus*

S. aureus NRS271(LRSA) exposed to LCB01-0648(E) or linezolid(F).



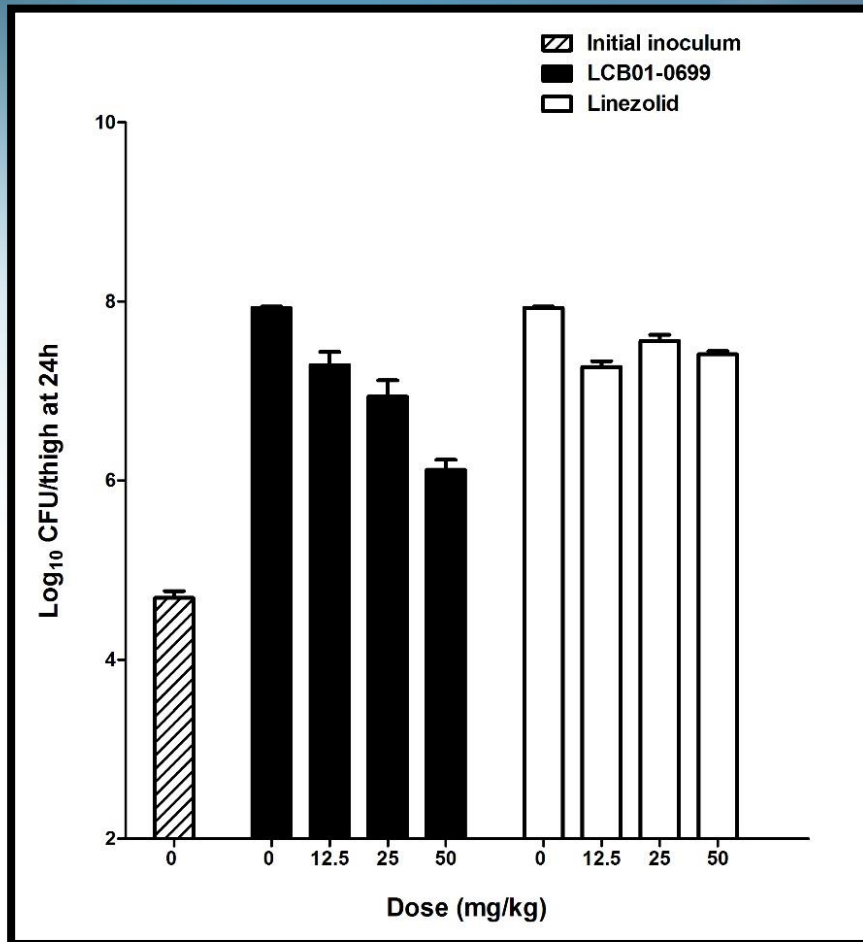
In vivo Efficacy of LCB01-0699 against Systemic Infection Model in Mice

Microorganism Inoculum (CFU/mouse)	Antimicrobial Agent ^{a,b}	MIC (μg/ml)	ED ₅₀ (mg/kg) (95% confidence limits)
			p.o
<i>S. aureus</i> giorgio (5×10 ⁷) (MSSA)	LCB01-0699	0.5	6.20 (3.58~10.65)
	Linezolid	2	7.07 (4.07~12.29)
<i>S. aureus</i> p125 (5×10 ⁸) (MRSA)	LCB01-0699	0.5	2.23 (0.94~5.28)
	Linezolid	2	7.07 (4.07~12.29)
<i>S. aureus</i> NRS271 (5×10 ⁷) (LRSA)	LCB01-0699 ^b	2	2.74 (0.51~14.70)
	Linezolid	64	5.27 (2.14~9.78)

^a Antimicrobial agents were orally administered at 1h and 4h post infection against *S. aureus* giorgio and *S. aureus* p125.

^b Antimicrobial agents were orally administered at 1h, 4h, and 7h post infection against *S. aureus* NRS271.

In vivo efficacy of LCB01-0699 against Thigh Infection Model in Mice





- *In vivo* activity of LCB01-0699 against thigh infection model caused by *S. aureus* **NRS271(LRSA)** in mice was compared with that of linezolid in Figure.
- **LCB01-0699** showed **antibacterial activity in dose-dependent manner**. However, **linezolid** was not active against *S. aureus* NRS271.

New Antibiotics for New Super-bacteria

- New β -lactamase Inhibitor
- New Polymyxins
- Bacteriophages
- Genomic-driven Targets
- Identifying targets for antibiotic development using **omics technologies**
- Integrating **biophysics** with **HTS-driven drug discovery projects**

Antimicrobial activities of LCB10-0200, a novel siderophore cephalosporin, against the clinical isolates of *Pseudomonas aeruginosa* and other pathogens

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<https://doi.org/10.1016/j.ijantimicag.2017.06.001>

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Highlights

- LCB10-0200 is a novel siderophore–cephalosporin conjugate.
- LCB10-0200 shows potent antibacterial activity against *P. aeruginosa*, including β -lactamases-producing strains.
- LCB10-0200 has potent *in vivo* activity and is more effective than ceftazidime against *P. aeruginosa*.
- LCB10-0200 is a promising novel cephalosporin candidate for treating infections caused by *P. aeruginosa*.

Abstract

Infections caused by multidrug-resistant bacteria, including *Pseudomonas aeruginosa*, are threatening public health worldwide. Therefore, a novel antibacterial agent is needed for treating these infections. Here, we investigated the *in vitro* and *in vivo* activities of a novel siderophore-conjugated cephalosporin LCB10-0200 against the clinical isolates of Gram-negative bacteria, including multidrug-resistant *P. aeruginosa*. *In vitro* susceptibility

New Antibiotics under Clinical Development by Korean Companies

- **Factive**[®] (LG Biotech, Approved by FDA in 2003)
 - LB20304 → Gemifloxacin
- **Torezolid** (Dong-A, Approved by FDA in 2014)
 - TR-701 → Tedizolid → Torezolid (developed by Cubist)
- **Zabofloxacin** (DongWha) : DW-224a
- **CG-400549** (CrystalGenomics) : Ph-II
- **LCB01-0371** (LegoChem) : Ph-II
- **LCB10-0200** (LegoChem) : Ph-I
- **LCB01-0699** (LegoChem) : Back-up compound



Acknowledgement

