

P788 Efficacy and safety of Uro-vaxom treatment for patients with recurrent cystitis: open multicentre study

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Objectives: To investigate the efficacy and safety of the immunotherapeutic Uro-vaxom in uncomplicated recurrent cystitis in female patients only.

Methods: Adult female patients could enroll in this multicentre, open-label study if they had acute cystitis at the enrollment visit and positive results of urine culture ($\geq 10^3$ CFU/mL). Patients were treated for 3 months with one capsule daily of Uro-vaxom after antibiotic therapy and observed for further 3 months. Primary efficacy criteria were cystitis recurrence rates over 6 months, distribution of cystitis and proportion of patients of cystitis.

Results: A total of 50 patients were evaluated. During the 6-month trial the number of recurrences from cystitis was significantly reduced in comparison with the 6-month pretrial period (on the average 0.64 as compared to 3.0 recurrences, $p < 0.001$). The case for the incidence of frequency, urgency and dysuria was remained low until the end of the trial. Uro-vaxom was well tolerated: side-effects were mentioned in 8% of the 50 patients, in the absence of case leading to treatment withdrawal.

Conclusions: Uro-vaxom significantly reduced the incidence of cystitis during the 6 months of the study including 3 months of treatment. These results demonstrate that Uro-vaxom is a valuable product for the prophylaxis of recurrent cystitis.

P789 A comparison of the CLSI (formerly NCCLS), EUCAST and various EU country standard methods for the susceptibility testing of retapamulin, a novel pleuromutilin

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Objective and Methods: Retapamulin[RE] is the first semi-synthetic pleuromutilin formulated as a topical antibacterial for treating skin infections. In this study, minimum inhibitory concentrations (MIC) and inhibition zone diameters of RE were determined for selected populations of *Staphylococcus aureus* [SA] (1000 isolates) and *Streptococcus pyogenes* [SP] (503) using CLSI standard methods and compared with various methods used in EU countries including those defined by EUCAST, DIN, SRGA, BSAC and the CA-SFM.

Results: For isolates of SA, there was very good correlation between MICs of RE determined by broth microdilution using CLSI, with those by EUCAST, DIN and SRGA methods (median MIC 0.06 mg/L for all methods; >90% of results within ± 1 doubling dilution of each other). Similar results were observed when MICs of RE determined by agar dilution using CLSI, were compared to those determined by EUCAST, DIN, SRGA, BSAC and CA-SFM methods. Close agreement was observed between inhibition zone diameters (median diameters within 1 mm) using CLSI compared to DIN, SRGA, BSAC and CA-SFM methods. For isolates of SP, MICs of RE determined using the broth microdilution methods of the CLSI, EUCAST, DIN and SRGA were all in close agreement (median MIC 0.015–0.03 mg/L; >95% of results within ± 2 doubling dilutions). For agar dilution, there was also good correlation between MICs determined using CLSI compared to EUCAST, SRGA, BSAC and CA-SFM (median MIC 0.06 mg/L for all methods; >95% of results within ± 1 doubling dilution). However, there was poor agreement between MICs obtained by the CLSI and DIN agar dilution methods. It is possible that the difference in the recommended amount of lysed horse blood (2% for DIN and 5% for CLSI) had an impact, because the median MIC by the DIN method (0.015 mg/L) was four-fold lower than by CLSI and only 44.73% of results within ± 2 doubling dilutions of each other. Consistent with these results, inhibition zone diameters obtained using CLSI, SRGA, BSAC and CA-SFM correlated well (median values 20–22 mm) but those produced using the DIN method were appreciably larger (median 29 mm).

Conclusion: Minor differences were seen for both SA and SP, in MICs and inhibition zone diameters determined by the various methods examined in this study and such differences are unlikely to affect qualitative interpretation of MICs. The differences noted between CLSI and DIN methods warrant further investigation.

P790 In vitro activity of retapamulin, a novel pleuromutilin, against *Staphylococcus* spp. (n=1413) and *Streptococcus pyogenes* (n=503) from 26 European centres

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Background and Objectives: Retapamulin (RE) is the first agent of the novel pleuromutilin class, formulated as a semi-synthetic topical antibacterial for treating skin infections. It has a unique mode of action, a low potential for the development of resistance and no target specific cross-resistance to other antibacterial classes. The in vitro activity of RE against *Staphylococcus* spp. (n=1413) and *Streptococcus pyogenes* (SP) (n=503) collected from 26 centres in 14 European countries (January 2003 – March 2005) was compared with that of erythromycin (ERY), fusidic acid (FUS), gentamicin (GEN) and mupirocin (MUP).

Methods: All testing was conducted using CLSI methods.

Results: MIC₉₀ of RE, ERY, FUS, GEN and MUP for isolates of *S. aureus* (SA), *S. epidermidis* (SE), other coagulase-negative staphylococci (CNS) and SP are shown in the table. 99.9% of the isolates of *Staphylococcus* spp. were inhibited by ≤ 2 mg/L RE this activity being unaffected by resistance to methicillin, ERY, FUS or MUP (MIC₉₀ range 0.06–0.5 mg/L). All isolates of SP were inhibited by ≤ 0.06 mg/L (MIC₉₀ 0.03 mg/L).

Species	Phenotype (n)	MIC ₉₀ (mg/L)				
		RE	ERY	FUS	GEN	MUP
SA	All isolates (1048)	0.12	≥ 128	4	≥ 64	0.5
	MRSA (318)	0.12	≥ 128	≥ 64	≥ 64	16
	ERY ^R (369)	0.12	≥ 128	8	≥ 64	16
	FUS ^R (144)	0.12	≥ 128	≥ 64	≥ 64	0.25
	MUP ^R (76)	0.12	≥ 128	0.25	≥ 65	≥ 0.25
SE	All isolates (256)	0.06	≥ 128	16	≥ 64	≥ 128
	MRSE (178)	0.12	≥ 128	16	≥ 64	≥ 128
	ERY ^R (159)	0.06	≥ 128	16	≥ 64	≥ 128
	FUS ^R (89)	0.12	≥ 128	32	≥ 64	≥ 128
	MUP ^R (73)	0.06	≥ 128	16	≥ 64	≥ 128
Other CNS	All isolates (109)	0.25	≥ 128	8	4	≥ 128
	MRCNS (75)	0.25	≥ 128	8	4	≥ 128
	ERY ^R (49)	0.12	≥ 128	8	16	≥ 128
	FUS ^R (56)	0.5	≥ 128	16	2	4
	MUP ^R (12)	0.25	≥ 128	16	4	≥ 128
SP	All isolates (503)	0.03	16	8	8	0.12
	ERY ^R (94)	0.03	≥ 128	8	8	0.25

Conclusions: RE was the most potent agent tested in vitro and has excellent activity against *Staphylococcus* spp. (including those isolates resistant to either MET, ERY, FUS or MUP) and *Streptococcus pyogenes* (including ERY-resistant strains). It has potential for the topical therapy of uncomplicated skin infections involving these organisms.

P791 Novel small-molecule inhibitors of gyrase B: antibacterial activity in vitro and in murine models of infection

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Objectives: The bacterial type II topoisomerases, DNA gyrase and topoisomerase IV, are well-validated targets for antibacterial therapy. A series of novel compounds have been synthesized that inhibit the