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ABSTRACT



00393 *In vitro* activity of dalbavancin against glycopeptide-resistant *Enterococcus*

faecium and coagulase-negative staphylococci recovered from patients in Germany

03. Bacterial susceptibility & resistance

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Background

Dalbavancin (DAL) is a lipoglycopeptide antibiotic which is more potent than vancomycin or teicoplanin against Gram-positive pathogens. Plasmid-encoded resistance to DAL in *Staphylococcus aureus* and *Enterococcus* spp. is mediated by the VanA genotype but not the VanB genotype. Isolates harbouring *vanA* are resistant to vancomycin, teicoplanin and dalbavancin, while resistance is limited to vancomycin in isolates harbouring *vanB*. About 80% of the vancomycin-resistant *Enterococcus faecium* (VRE_{fm}) in Germany harbour *vanB*. Teicoplanin-resistant coagulase-negative staphylococci (TRCoNS) have been isolated from patients subjected to prolonged glycopeptide treatment. The purpose of this study was to evaluate the *in vitro* activity of DAL against VRE_{fm} and TRCoNS.

Methods

76 VRE_{fm} and 76 TRCoNS collected at 25 laboratories in Germany (22), Switzerland (2) and Austria (1) during a resistance surveillance study conducted by the Paul Ehrlich Society from January 2016 to April 2017 were tested. Susceptibility testing was performed with the microdilution method according to ISO 20776-1. EUCAST breakpoints (v.11.0) were applied to interpret DAL MICs of TRCoNS (≤ 0.125 mg/L [S] and > 0.125 mg/L [R]), and CLSI breakpoints (M100-S30) were applied to interpret DAL MICs of both VRE_{fm} and TRCoNS (≤ 0.25 mg/L [S]; see footnote of **Table**). EUCAST breakpoints of DAL for *Enterococcus* spp. have not been defined. Genetic testing of VRE_{fm} was performed at the Robert Koch-Institute.

Results

VRE_{fm} isolates harboured *vanA* (n=20), *vanB* (n=55) or both (n=1). The collection of TRCoNS comprised *Staphylococcus epidermidis* (n=54), *Staphylococcus haemolyticus* (n=15), and *Staphylococcus hominis* (n=7). 29/76 (38.2%) VRE_{fm} and 26/76 (34.2%) TRCoNS were obtained from intensive care patients. MIC_{50/90s} of DAL were 8/≥16 mg/L for VanA type isolates and 0.06/0.125 mg/L for VanB type isolates. DAL inhibited all VanB type isolates at 0.25 mg/L, whereas DAL MICs of VanA type isolates were 4-≥16 mg/L (**Table**). MICs of DAL for TRCoNS ranged from 0.03 mg/L to 4 mg/L. Susceptibility and resistance rates are presented in the **Table**.

Conclusions

DAL showed excellent activity against VanB type VRE_{fm}, all of which were DAL-susceptible. Further, DAL inhibited about 70% of the TRCoNS (even 87% of *S. epidermidis*) at the EUCAST breakpoint of 0.125 mg/L, and >96% at the CLSI breakpoint of 0.25 mg/L.

Table: Distribution of dalbavancin MICs and percent susceptible (S) and resistant (R) isolates

Species / group	n	MIC (mg/l)											EUCAST		CLSI	
		≤0.016	0.03	0.06	0.12	0.25	0.5	1	2	4	8	≥16	S	R	S	R [§]
<i>VRE. faecium</i>	76		12	<u>32</u>	9	2				7	10	4			72.4	-
<i>vanA</i>	20									7	<u>10</u>	3	No breakpoint defined	0	-	
<i>vanB</i>	55		12	<u>32</u>	9	2								100	-	
<i>vanA</i> + <i>vanB</i>	1											1		0	-	
TRCoNS	76		1	29	<u>24</u>	19	2		1				71.1	28.9	96.1	-
<i>S. epidermidis</i>	54		1	<u>28</u>	18	6	1						87.0	13.0	98.1	-
<i>S. haemolyticus</i>	15				4	<u>10</u>			1				26.7	73.3	93.3	-
<i>S. hominis</i>	7			1	2	<u>3</u>	1						42.9	57.1	85.7	-

The underlined numbers indicate the median MIC. The solid vertical line indicates the EUCAST breakpoint for *Staphylococcus* spp. and the dashed vertical lines indicate the CLSI breakpoints, that were actually defined for *S. aureus* and *Enterococcus* spp.

[§]No resistance breakpoint defined