

## Antimicrobial Spectrum of Ro 15-8074/001, a New Oral Cephalosporin

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The activity of Ro 15-8074/001 was compared with that of cefaclor, amoxicillin-clavulanic acid, trimethoprim-sulfamethoxazole, norfloxacin, and ceftriaxone against 225 clinical isolates. It was more active than cefaclor, amoxicillin-clavulanic acid, and trimethoprim-sulfamethoxazole against members of the family *Enterobacteriaceae* and *Haemophilus influenzae* and had activity similar to that of cefaclor against nonenterococcal streptococci. It was not usefully active against *Pseudomonas aeruginosa*, *Streptococcus faecalis*, or most isolates of staphylococci.

Ro 15-8075 (Fig. 1A) is the pivaloyloxymethoxyester of an aminothiazolyl cephalosporin. After oral administration and absorption the ester group is enzymatically split to produce the free acid Ro 15-8074 (Fig. 1B). Peak levels in serum of 5 µg of Ro 15-8074 per ml are achieved following oral administration of 1 g of Ro 15-8075, and 80 to 100% of the free acid is excreted in the urine over the first 24 h. When administered to mice with experimental infections due to a range of gram-positive or -negative organisms, curative doses for 50% (of mice) of Ro 15-8075 were 5 to 100 times lower than those of cephalexin (data on file, F. Hoffmann-La Roche and Co. Ltd., Basel, Switzerland). We used the sodium salt (Ro 15-8074/001) of the free acid to compare the activity of this compound with that of four other oral antibiotics and ceftriaxone against a variety of bacteria.

Ro 15-8074/001 was a gift from F. Hoffman-La Roche. All other antibiotics were donated by their respective manufacturers. Antimicrobial activity was determined by an agar dilution method with fresh serial dilutions of compounds prepared according to the instructions of the manufacturer. The inoculum was prepared from a fresh overnight broth culture adjusted to a McFarland 0.5 standard and then diluted to deliver 10<sup>5</sup> CFU with a replicating spot device. *Haemophilus influenzae* and nonenterococcal streptococci were tested on Mueller-Hinton agar supplemented with 5% chocolate horse blood and 1% IsoVitalex (BBL Microbiology Systems, Cockeysville, Md.) incubated in 8% CO<sub>2</sub> at 37°C for 18 h. All other isolates were tested on Mueller-Hinton agar incubated in air at 37°C for 18 h. Serial dilutions of trimethoprim-sulfamethoxazole (TMP-SMX) were supplemented with 5% lysed horse blood. Susceptibility to amoxicillin-clavulanic acid was determined by using a constant ratio of amoxicillin to clavulanic acid of 2:1.

The MIC was defined as the lowest concentration of antibiotic that resulted in inhibition of visible growth or growth of ≤3 colonies. The strains tested were 225 isolates from specimens recently submitted to the Middlemore Hospital microbiology laboratory. All isolates were identified by standard laboratory procedures, and to avoid duplication only a single isolate per patient was tested. Control organisms were *Escherichia coli* NCTC 11560, *E. coli* ATCC 35218, *E. coli* ATCC 25922, *Staphylococcus aureus* NCTC

11561, *S. aureus* ATCC 25923, and *Pseudomonas aeruginosa* ATCC 27853.

The comparative activity of the six antimicrobial agents tested are summarized in Table 1. Ro 15-8074/001 inhibited 98 isolates (79%) of members of the family *Enterobacteriaceae* at concentrations ≤1.0 µg/ml and 119 isolates (96%) at concentrations ≤8.0 µg/ml. In contrast cefaclor inhibited 35 isolates (28%) of *Enterobacteriaceae* at concentrations ≤1.0 µg/ml and 85 isolates (69%) at concentrations ≤8.0 µg/ml. Of the 39 cefaclor-resistant (MIC, ≥16 µg/ml) *Enterobacteriaceae* isolates, 34 (87%) were inhibited by ≤8.0 µg of Ro 15-8074/001 per ml. In general, Ro 15-8074/001 was more active than amoxicillin-clavulanic acid and TMP-SMX but less active than norfloxacin against the *Enterobacteriaceae*. It had a similar spectrum of activity to ceftriaxone, but MICs of ceftriaxone were usually two to three log<sub>2</sub> dilutions lower.

Ro 15-8074/001 was not active against *P. aeruginosa* (11 isolates; MIC, ≥256). It was more active than cefaclor against *Acinetobacter* sp. and was more active than cefaclor,

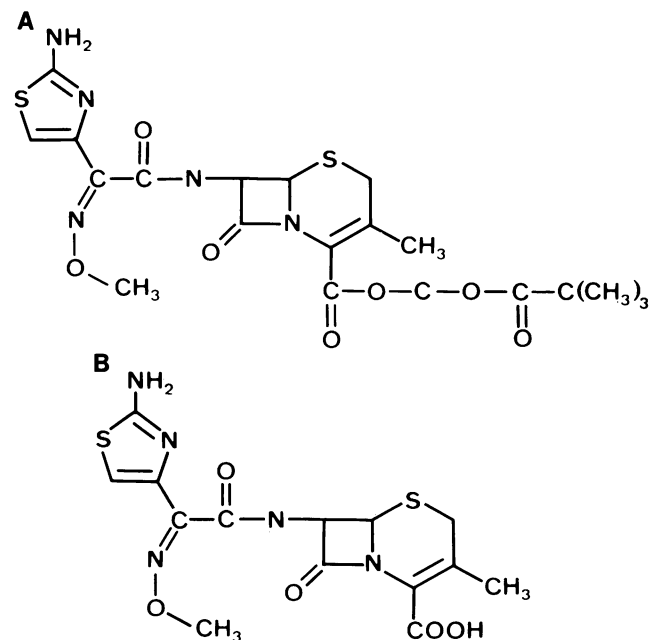


FIG. 1. Structures of Ro 15-8075 (A) and Ro 15-8074 (B).

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TABLE 1. Susceptibility of bacterial isolates to Ro 15-8074/001 and five other antibiotics

Organism (no. of isolates)	Compound	MIC ( $\mu\text{g/ml}$ )		
		Range	50% <sup>a</sup>	90% <sup>b</sup>
<i>Escherichia coli</i> (41)	Ro 15-8074/001	0.03–4.0	1.0	1.0
	Cefaclor	0.25–32	4.0	8.0
	Amoxicillin-clavulanic acid <sup>c</sup>	0.5–16	4.0	8.0
	TMP-SMX <sup>d</sup>	0.5–16	2.0	8.0
	Norfloxacin	0.03–1.0	0.125	0.25
	Ceftriaxone	$\leq 0.015$ –0.125	0.06	0.125
<i>Klebsiella</i> spp. (27)	Ro 15-8074/001	0.125– $\geq 256$	0.25	1.0
	Cefaclor	0.5– $\geq 256$	1.0	$\geq 256$
	Amoxicillin-clavulanic acid	1.0–32	4.0	32
	TMP-SMX	1.0– $\geq 256$	2.0	$\geq 256$
	Norfloxacin	0.6–16	0.25	2.0
	Ceftriaxone	0.03–8.0	0.125	0.25
<i>Proteus mirabilis</i> (16)	Ro 15-8074/001	0.06–0.125	0.06	0.125
	Cefaclor	0.5–32	1.0	2.0
	Amoxicillin-clavulanic acid	0.5–64	1.0	4.0
	TMP-SMX	2.0– $\geq 256$	2.0	32
	Norfloxacin	0.125–1.0	0.125	0.5
	Ceftriaxone	$\leq 0.015$ –0.03	$\leq 0.015$	0.03
<i>Proteus</i> spp. (indole positive) (8)	Ro 15-8074/001	0.06– $\geq 256$		$\geq 256$
	Cefaclor	128– $\geq 256$		$\geq 256$
	Amoxicillin-clavulanic acid	4.0– $\geq 256$		$\geq 256$
	TMP-SMX	2.0–4.0		4.0
	Norfloxacin	0.06–4.0		4.0
	Ceftriaxone	$\leq 0.015$ –2.0		1.0
<i>Enterobacter</i> spp. (20)	Ro 15-8074/001	0.06– $\geq 256$	2.0	8.0
	Cefaclor	2.0– $\geq 256$	$\geq 256$	$\geq 256$
	Amoxicillin-clavulanic acid	4.0–128	64	128
	TMP-SMX	0.5– $\geq 256$	2.0	4.0
	Norfloxacin	0.06–2.0	0.125	1.0
	Ceftriaxone	0.03–32	0.25	8.0
<i>Citrobacter</i> spp. (12)	Ro 15-8074/001	0.25–2.0	1.0	2.0
	Cefaclor	0.5–128	4.0	128
	Cefaclor	0.5–128	4.0	128
	Amoxicillin-clavulanic acid	1.0–64	4.0	16
	TMP-SMX	2.0– $\geq 256$	4.0	$\geq 256$
	Norfloxacin	0.06–0.25	0.125	0.25
<i>Acinetobacter</i> spp. (6)	Ceftriaxone	0.06–0.25	0.06	0.25
	Ro 15-8074/001	1.0–32		32
	Cefaclor	16– $\geq 256$		128
	Amoxicillin-clavulanic acid	1.0–32		16
	TMP-SMX	1.0– $\geq 256$		8.0
	Norfloxacin	1.0– $\geq 256$		16
<i>Haemophilus influenzae</i> (12) <sup>e</sup>	Ceftriaxone	1.0–32		32
	Ro 15-8074/001	0.125–4.0	0.25	0.25
	Cefaclor	2.0–32	4.0	8.0
	Amoxicillin-clavulanic acid	0.5–4.0	0.5	1.0
	TMP-SMX	1.0–16	2.0	16
	Norfloxacin	0.06–0.25	0.06	0.125
<i>Staphylococcus aureus</i> (methicillin sensitive) (17)	Ceftriaxone	$\leq 0.015$ –0.125	$\leq 0.015$	$\leq 0.015$
	Ro 15-8074/001	1.0–64	32	64
	Cefaclor	2.0–8.0	4.0	8.0
	Amoxicillin-clavulanic acid	$\leq 0.015$ –0.25	0.125	0.25
	TMP-SMX	1.0–4.0	2.0	2.0
	Norfloxacin	0.5–2.0	1.0	2.0
Coagulase-negative staphylococci (three methicillin sensitive) (9)	Ceftriaxone	1.0–4.0	4.0	4.0
	Ro 15-8074/001	8.0– $\geq 256$		$\geq 256$
	Cefaclor	0.5–64		64
	Amoxicillin-clavulanic acid	$\leq 0.015$ –32		16
	TMP-SMX	1.0–8.0		8.0
	Norfloxacin	0.5–2.0		1.0
<i>Streptococcus pyogenes</i> (12)	Ceftriaxone	1.0– $\geq 256$		$\geq 256$
	Ro 15-8074/001	0.03–0.125	0.06	0.06
	Cefaclor	0.03–0.06	0.06	0.06
	Amoxicillin-clavulanic acid	0.03	0.03	0.03
	TMP-SMX	2.0–8.0	8.0	8.0
	Norfloxacin	4.0–8.0	8.0	8.0
Ceftriaxone	$\leq 0.015$ –0.06	0.03	0.06	

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TABLE 1—Continued

Organism (no. of isolates)	Compound	MIC ( $\mu\text{g/ml}$ )		
		Range	50% <sup>a</sup>	90% <sup>b</sup>
<i>Streptococcus agalactiae</i> (10)	Ro 15-8074/001	1.0	1.0	1.0
	Cefaclor	0.25–0.5	0.25	0.5
	Amoxicillin-clavulanic acid	0.06–0.125	0.06	0.125
	TMP-SMX	4.0–8.0	4.0	8.0
	Norfloracin	4.0–8.0	4.0	8.0
	Ceftriaxone	0.03–0.06	0.03	0.06
<i>Streptococcus pneumoniae</i> (14)	Ro 15-8074/001	0.125–0.5	0.5	0.5
	Cefaclor	0.125–0.25	0.25	0.25
	Amoxicillin-clavulanic acid	$\leq 0.015$	$\leq 0.015$	$\leq 0.015$
	TMP-SMX	4.0–32	8.0	16
	Norfloracin	4.0–16	8.0	16
	Ceftriaxone	$\leq 0.015$ –0.03	$\leq 0.015$	0.03

<sup>a</sup> Concentration required to inhibit 50% of isolates.

<sup>b</sup> Concentration required to inhibit 90% of isolates.

<sup>c</sup> MICs of amoxicillin-clavulanic acid expressed as the concentration of amoxicillin present (amoxicillin/clavulanic acid ratio = 2:1).

<sup>d</sup> MICs of TMP-SMX expressed as the concentration of SMX present (TMP/SMX ratio = 1:20).

<sup>e</sup> All isolates beta-lactamase negative.

amoxicillin-clavulanic acid, and TMP-SMX against *H. influenzae*.

Ro 15-8074/001 had poor activity against staphylococci and *Streptococcus faecalis* (10 isolates; MIC, 16 to  $\geq 256$ ). Its activity against *Streptococcus pneumoniae*, *Streptococcus pyogenes*, and *Streptococcus agalactiae* was similar to that of cefaclor and greater than that of TMP-SMX and norfloracin. In general amoxicillin-clavulanic acid was the most active agent against staphylococci and streptococci.

MICs of Ro 15-8074/001 for control organisms were 0.5  $\mu\text{g/ml}$  for *E. coli* ATCC 35218 and *E. coli* NCTC 11560; 0.5 to 1.0  $\mu\text{g/ml}$  for *E. coli* ATCC 25922; 16  $\mu\text{g/ml}$  for *S. aureus* ATCC 25923; 32  $\mu\text{g/ml}$  for *S. aureus* NCTC 11561; and  $\geq 256$   $\mu\text{g/ml}$  for *P. aeruginosa* ATCC 27853.

The results of this study indicate that Ro 15-8074/001 is an effective antimicrobial agent against routine isolates of members of the family *Enterobacteriaceae*, *H. influenzae*, and

nonenterococcal streptococci. Other workers have found that Ro 15-8074/001 is more active than cefaclor, cefadroxil, ampicillin, and TMP-SMX against the *Enterobacteriaceae* (2) and more active than amoxicillin-clavulanic acid and cefaclor against penicillinase-producing and nonpenicillinase-producing *Neisseria gonorrhoeae* (1). Further studies are indicated to determine the clinical efficacy of this new oral cephalosporin.

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