The Guanidino-Lipoglycopeptides: Novel Glycopeptide Antibiotics with *Best-in-Class* Potential

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Gram-positive pathogens remain a serious threat



 MRSA and VRE account for half of all AMR-associated deaths in USA and Europe

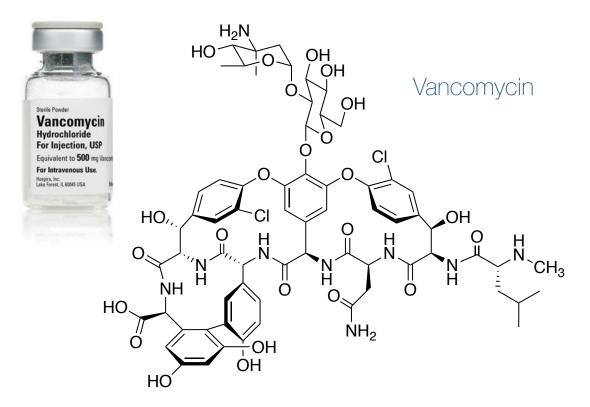


- 2018 global MRSA market worth US\$ 922.2M (by 2026 estimated to grow to US\$ 1,3B)
- Global VRE market estimated between US\$ 280 and 440M

CDC. Antibiotic Resistance Threats in the United States, 2019. Atlanta, GA: U.S. Department of Health and Human Services, CDC; 2019. C. J. L. Murray, et al. Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis, Lancet **2022**, 399, 629-655.

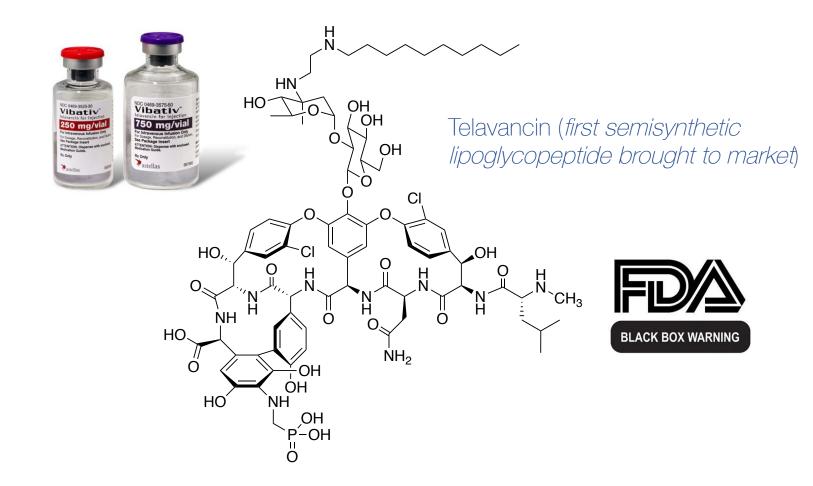
Glycopeptide antibiotics

- Since the 1970's vancomycin used in treatment of serious infections, including acute bacterial skin and skin structure infections (ABSSSI), due to staphylococci and enterococci
- Resistance now a serious problem



Lipoglycopeptide antibiotics

- Vancomycin resistance led to development of the <u>lipoglycopeptides</u> (e.g. teicoplanin, telavancin, dalbavancin, and oritavancin)
- Increased activity but also renal toxicity and unusual PK (t_{1/2} up to 300hr)



Lipoglycopeptide antibiotics

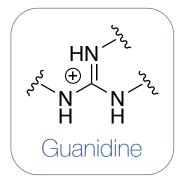
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There is a growing unmet need for novel antibiotic compounds with activity against resistant pathogens and improved safety profiles.

Introducing the guanidino lipoglycopeptides

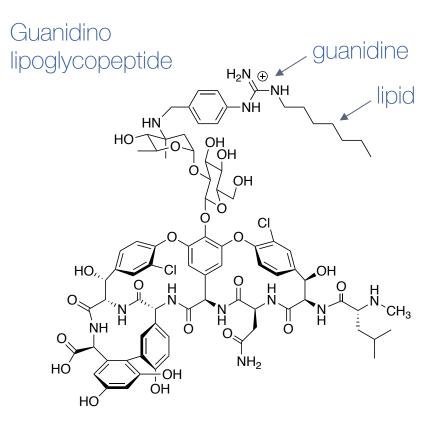
Introducing the guanidino lipoglycopeptides

• The guanidine group carries a <u>strong positive charge</u>



Introducing the guanidino lipoglycopeptides

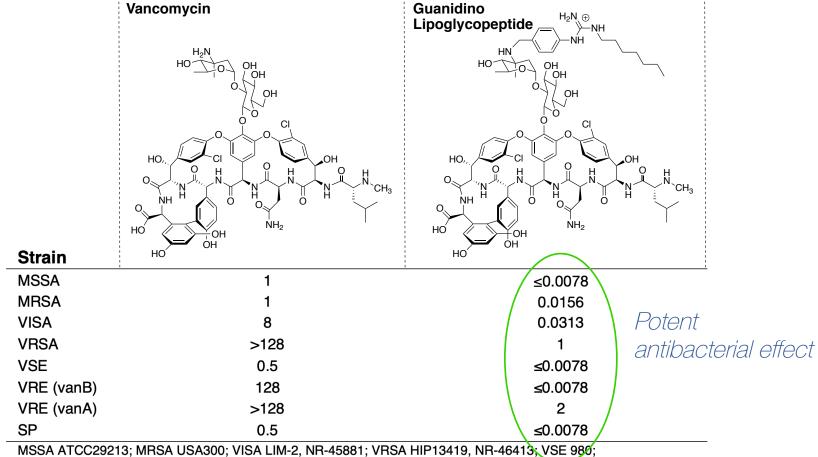
- The guanidine group carries a strong positive charge
- In 2019 the Martin group (Leiden University) discovered the guanidino lipoglycopeptides:





- Readily synthesized from vancomycin (scalable and cost effective)
- Extremely potent antibiotics

• The guanidino lipoglycopeptides exhibit potent antibacterial activity (very low MIC values) superior to vancomycin:



VRE 7314 (vanB); VRE 155 (vanA); S. pneumoniae 153

Cell-based assays

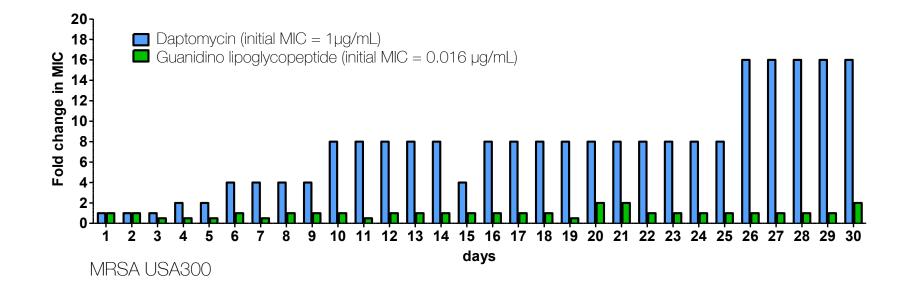
- Guanidino lipoglycopeptide found to be non-haemolytic up to 1000x MIC. Clinically-used oritavancin exhibits significant hemolysis (>40% at 1000x MIC)
- Guanidino lipoglycopeptide not toxic to kidney cells at 100 μM. Clinically-used oritavancin and telavancin both demonstrate toxicity:

Cytotoxicity CC₅₀ (µM)
>100
>100 🗸
24
3.5

MTT assay with HEK293 cells, 24-hour incubation.

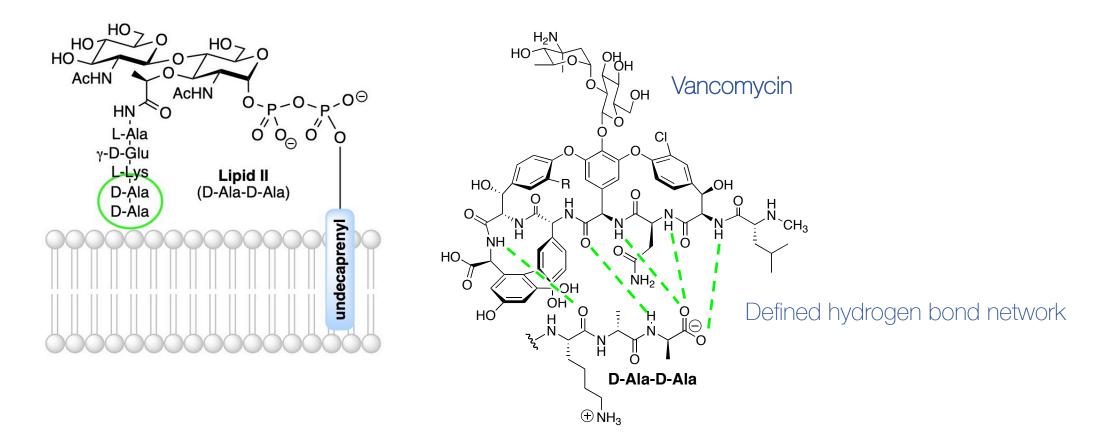
Resistance studies

• Serial passage assays indicate guanidino lipoglycopeptides have low propensity to induce resistance compared with the clinically-used daptomycin:



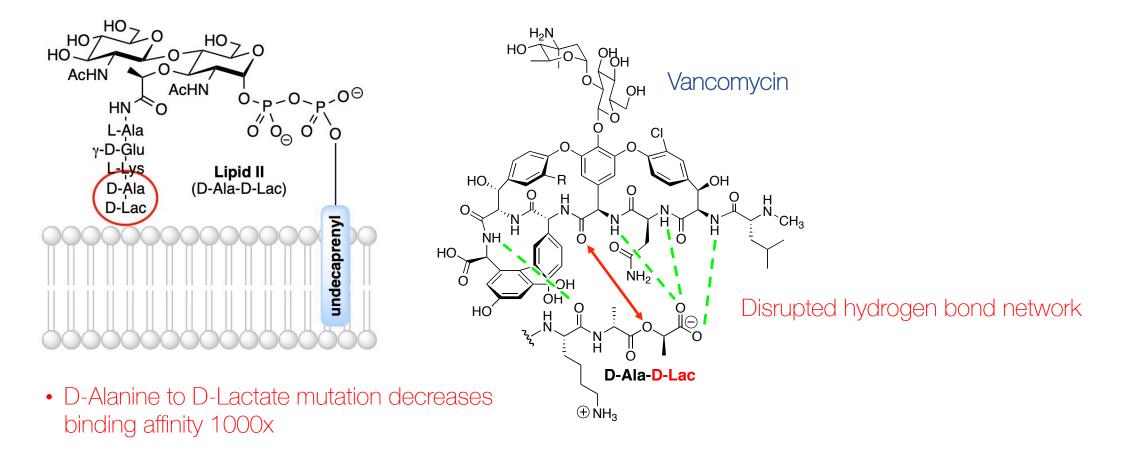
Lipid II and vancomycin resistance

• Vancomycin binds the D-Ala-D-Ala motif of Lipid II with high affinity:



Lipid II and vancomycin resistance

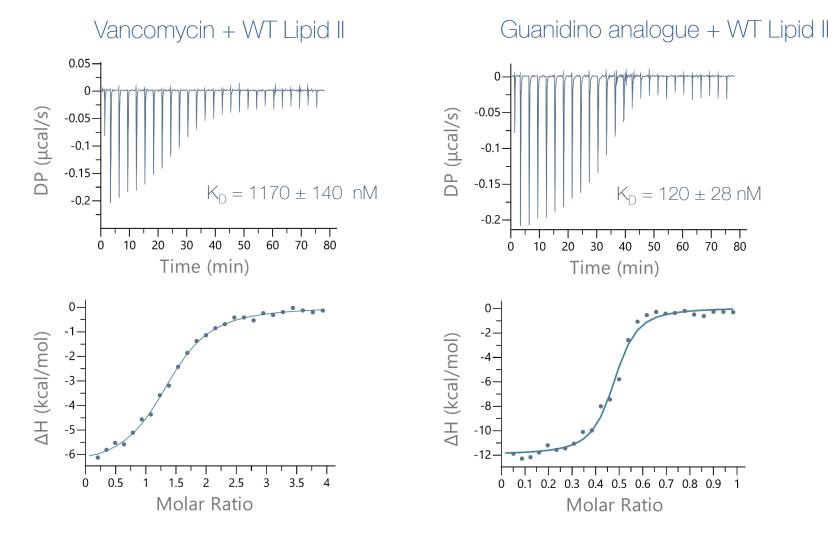
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• One less H-bond = vancomycin resistance

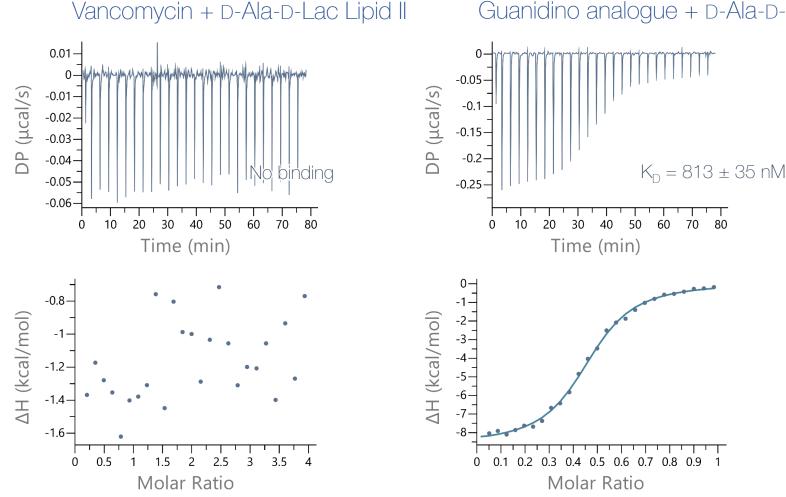
Mechanistic studies: Lipid II binding with ITC

• Guanidino lipoglycopeptides show superior binding to both wild-type and D-Ala-D-Lac forms of lipid Lipid II:



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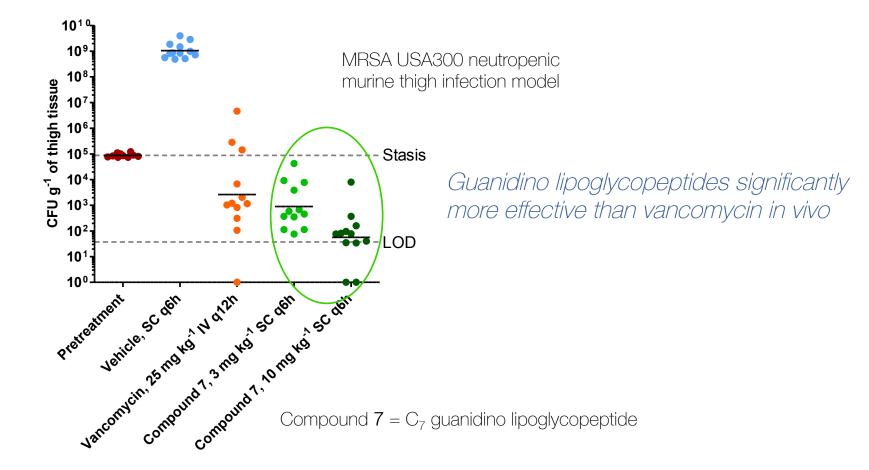
Guanidino analogue + D-Ala-D-Lac Lipid II

In vivo studies: Tolerability, PK & efficacy

- Guanidino lipoglycopeptide well tolerated in mice as high as 100 mg/kg
- Favorable pharmacokinetics ($t_{1/2} = 1.22$ hours) with blood concentrations maintained above MIC >8 hours when dosed at 3 mg/kg

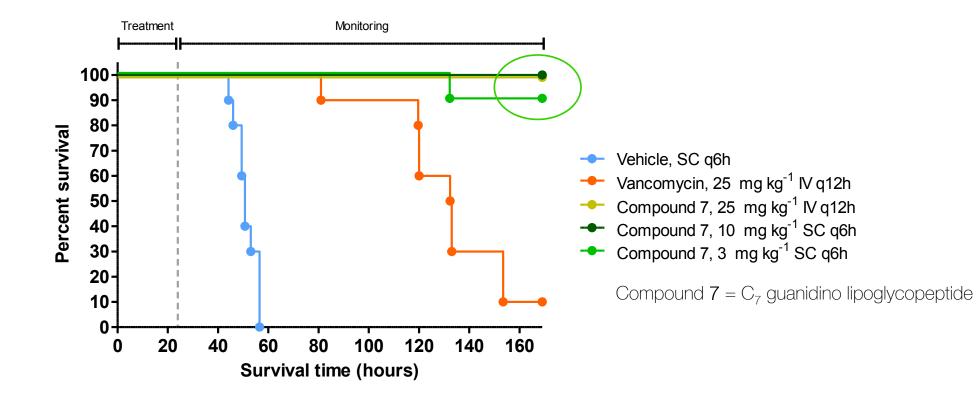
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In vivo studies: Sepsis survival study

 7-day survival study with immunocompetent mice infected with *S. aureus* demonstrates superiority of guanidino lipoglycopeptide vs vancomycin:



Next steps

 Guanidino lipoglycopeptides outperform vancomycin and the other clinically used glycopeptides = best in class potential

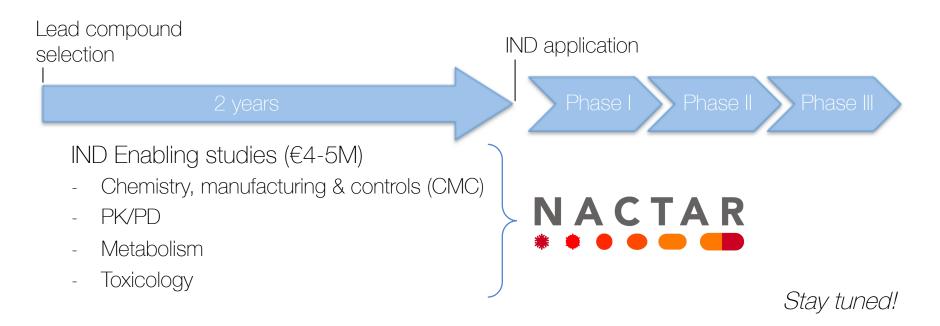
Enhanced Activity + Lower Toxicity = Greater Therapeutic Window

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Enhanced Activity + Lower Toxicity = Greater Therapeutic Window

• Preclinical work required prior to IND application:



Acknowledgements

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