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A Multi-Site Evaluation of Isavuconazole on the Sensititre YeastOne Test Plate with the Frozen Reference CLSI M27-A3 and ISO 16256 Micro Broth Dilution Methods for Antifungal Susceptibility Testing



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Abstract

Background: Isavuconazole (Astellas Pharmaceuticals, Northbrook, IL) is a triazole antifungal that is currently approved for use in the treatment of invasive mucormycosis and aspergillosis. A multisite evaluation was undertaken to determine the performance of the Thermo Scientific™ Sensititre® YeastOne® susceptibility system (Thermo Fisher Scientific, Cleveland, OH) with Isavuconazole (ISA) compared to the CLSI M27 and ISO16256 (2012)(E) Broth Microdilution Methods (BMD). Materials and Methods: 400 clinical (100 per site) and 100 challenge strains along with 10 reproducibility isolates of Candida spp. were tested at 4 sites comparing the performance of ISA on the Sensititre YeastOne plate with CLSI and ISO BMD. The range tested for ISA was 0.004-8ug/ml. CLSI quality control (QC) organisms were tested daily and were within the CLSI expected QC ranges. Results: Clinical isolate comparisons of the Sensititre YeastOne plate to the CLSI and ISO BMD resulted in 99% and 92% essential agreement (EA) +/- 2 log₂ dilutions. Challenge isolates resulted in 99% and 89% EA +/- 2 log₂ dilutions. YeastOne modal reproducibility MICs +/- 2 fold dilutions between sites for ISA resulted in 98.6% agreement at 24 hours. Conclusions: This evaluation indicates that the Sensititre YeastOne plate with ISA is equivalent to the CLSI and ISO BMD and is a potential method for susceptibility testing of ISA.

Introduction and Objective

Isavuconazole (Astellas Pharma, Inc.) is a new broad spectrum triazole that has activity against yeasts, molds and dimorphic fungi. It is currently approved for use in treatment of invasive mucormycosis and aspergillosis.

This in vitro multi-site comparison study was done to validate the performance of isavuconazole with Candida spp. on the commercially manufactured Thermo Scientific Sensititre YeastOne Susceptibility plate. To establish equivalency performance, studies were conducted at 4 sites. MIC results obtained on the YeastOne plate were compared to the MIC results obtained from the reference CLSI M27 and ISO 16256 (2012) (E) broth microdilution method (BMD).

Methods

- •Indications for use: Thermo Fisher Sensititre YeastOne susceptibility plates are designed for use in determining quantitative antifungal susceptibilities (MICs) of non fastidious yeasts.
- Each isolate was tested using a Sensititre YeastOne susceptibility plate containing Isavuconazole (0.004-8µg/ml).
- •The dried colorimetric plates were set-up, tested and read according to the manufacturers' instructions.
- •The reference BMD plates were prepared and tested on each isolate according to the Clinical Laboratory Standards Institute Method (CLSI M27-A3) and the ISO 16256 (2012) (E).
- Testing consisted of 400 fresh clinical isolates (combined 4 sites); 100 challenge isolates (one site) consisted of Candida spp. (Tables 1 and 2).
- Reproducibility consisted of 10 isolates tested in triplicate over 3 consecutive days at all 4 sites on the Sensititre YeastOne susceptibility plate only (Table 1).

Methods Cont.

- Quality control (QC) was assured by testing 20 replicates of each ATCC strain including Candida parapsilosis ATCC 22019 and Candida krusei ATCC 6258, at each site (Tables 1 and 3).
- Colony counts were performed on the inoculums of all strains on each day of testing.

Table 1. Organisms Tested	Number Tested			
Clinical Isolates (4 sites)	400			
CDC Challenge Isolates (one site)	100			
Reproducibility Isolates (4 sites)	40			
CLSI Quality Control Strains (20 replicates of each strain at 4 sites)	160			
TOTAL	700			

Table 2. Clinical and Challenge Isolates Tested	Number Tested
Candida albicans	119
Candida krusei	87
Candida lusitaniae	72
Candida parapsilosis	92
Candida tropicalis	56
Candida glabrata	74
TOTAL	500

Table 3. Quality Control Strains	CLSI M27-A3 and ISO 16256 MIC Ranges (µg/ml)
Candida parapsilosis ATCC 22019	0.015-0.06
Candida krusei ATCC 6258	0.06-0.5



Results

Essential agreement for isavuconazole on the Sensititre YeastOne susceptibility plate compared to the CLSI and ISO BMD plates were calculated for each method using the +/- two log₂ dilution standard. Essential agreement rates are shown for Candida spp. in tables 4 and 5.

Table 4. Summary Data and % Essential Agreement of Candida spp. Clinical and Challenge Isolates (CLSI Reference BMD vs. YeastOne)

Combined Total Isolates										
	Number of Isolates		Essentia	al Agreement	% Essential Agreement					
Organism Group	All	¹ Evaluable	Total	¹ Evaluable	Total	¹ Evaluable				
Candida albicans	119	34	117	34	98.3%	100%				
Candida krusei	87	86	86	85	98.9%	98.8%				
Candida lusitaniae	72	56	72	56	100%	100%				
Candida parapsilosis	92	58	92	58	100%	100%				
Candida tropicalis	56	54	54	52	96.4%	96.3%				
Candida glabrata	74	74	74	74	100%	100%				
Total	500	362	495	359	99.0%	99.2%				

Table 5. Summary Data and % Essential Agreement of Candida spp. Clinical and Challenge Isolates (ISO BMD vs. YeastOne)

	Numb	er of Isolates	Essenti	al Agreement	% Essential Agreement		
Organism Group	All	¹ Evaluable	Total	¹ Evaluable	Total	¹ Evaluable	
Candida albicans	98	23	96	23	98.0%	100%	
Candida krusei	67	66	66	65	98.5%	98.5%	
Candida lusitaniae	52	36	50	36	96.2%	100%	
Candida parapsilosis	72	47	71	46	98.6%	97.9%	
Candida tropicalis**	46	35	20	18	43.5%	51.4%	
Candida glabrata	64	64	61	61	95.3%	95.3%	
Total	399	271	364	249	91.2%	91.9%	

' Candida tropicalis results for the spectrophotometer had significant essential errors for both clinical and challenge organisms for all 3 trial sites that tested on the spec. Low colony counts with the spec plate were observed for this organism against isavuconazole and indicated poor growth resulting in lower MICs. This may be an indication that the MICs for Candida tropicalis are affected by the 2X RPMI with 2% Dextrose.

Combined Total Isolates

¹When the reference method result is on-scale and the new device result is also on scale.

Results

Table 6. Interlaboratory Reproducibility % Essential Agreement +/- two log₂ dilution from the Modal Value

	<u>Isavuconazole</u>		Difference in the number of wells between new test result and test mode											
			OFF-Scale	-4	-3	-2	-1	0	+1	+2	+3	+4	OFF-Scale	Test Mode
								All Sites						
	*1	Candida parapsilosis			2	7	10	15	2					0.06
	*2	Candida parapsilosis						19	17					<=0.004
	*3	Candida krusei				2	5	29						0.25
	*4	Candida tropicalis					4	21	11					0.06
	*5	Candida glabrata				1	17	18						1
	*6	Candida glabrata			2	3	14	17						0.12
	*7	Candida lusitaniae				7	14	15						0.03
	*8	Candida albicans					1	22	13					0.5
	*9	Candida parapsilosis					10	11	10	4	1			0.015
	*10	Candida krusei				3	11	22						0.25
		Total	0	0	4	23	86	189	53	4	1	0	0	
	Between-Site Reproducibility		355/360=98.6%											

Conclusions

This study validated that the Sensititre YeastOne susceptibility plates demonstrates an equivalent level of performance compared to the CLSI M27-A3 reference BMD when testing isavuconazole with Candida spp. clinical and challenge isolates.

This study also validated that the Sensititre YeastOne susceptibility plates demonstrates an equivalent level of performance compared to the ISO 16256 (2012) (E) reference BMD plate when testing isavuconazole with Candida spp. clinical and challenge isolates. As shown in table 5, Candida tropicalis results for the spectrophotometer had significant essential errors. This may be an indication that isavuconazole MICs for Candida tropicalis are affected by the 2X RPMI with 2% dextrose and would suggest that it is not an acceptable method for susceptibility testing of isavuconazole against this species.

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