Outcomes by Baseline Pathogens and Susceptibility in the STRIVE Phase 2 Trial of Once-Weekly Rezafungin for Treatment of Candidemia and Invasive Candidiasis Compared with Caspofungin

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INTRODUCTION
- Rezafungin is a novel echinocandin in Phase 3 development for treatment of candidemia and invasive candidiasis (IC) [ReSTORE; NCT03667690] and for prevention of invasive fungal disease caused by Candida, Aspergillus, and Pneumocystis in blood and marrow transplant recipients [ReSPECT; NCT04368559]
- Rezafungin demonstrates a long half-life, extensive tissue distribution, and front-loaded drug exposure, which for rezafungin’s once-weekly (QWk) dosing and are determinants of antifungal efficacy [1,2]
- In this analysis of the Phase 2 STRIVE trial (NCT02734862) of rezafungin treatment of candidemia and IC, outcomes based on baseline pathogen species and susceptibility were evaluated

METHODS
- In STRIVE, adults (≥18 y) with systemic signs and mycological evidence of candidemia and/or IC were randomized to either rezafungin once weekly or caspofungin once daily for 14 days (Figure 1)
- The primary efficacy endpoint was Overall Response (resolution of clinical signs of infection + mycological eradication) at Day 14 in the microbiological intent-to-treat (mITT) population
- For this analysis, outcomes by treatment group were stratified by Candida species and in vitro susceptibility (CLS) broth microdilution MIC values; M27-E44

RESULTS
- Of 196 Candida isolates recovered from 183 patients across all treatment groups, C. albicans was the most common species; non-albicans Candida comprised 54% of all baseline isolates (Figure 2)

RESULTS (cont’d)
- Rezafungin MIC distribution and ranges were generally lower than or comparable to those for CAS (Table 1)
- Based on MICs, all isolates exhibited a wild-type in vitro susceptibility profile
- Outcomes by species did not appear to be affected by MIC distribution for either treatment (Table 1)

RESULTS (cont’d)
- Outcomes by study group showed no clear correlations with MIC values (Table 2)

CONCLUSIONS
- In this Phase 2 study, outcomes in rezafungin Group 2 were similar to or better than outcomes with caspofungin
- Rezafungin Group 2 received the dose regimen being studied in Phase 3
- Group 1 results were confounded by high number of indeterminate outcomes
- These Phase 2 findings and results from the ongoing Phase 3 treatment trial (ReSTORE) will further understanding of the relationships between MIC values and clinical outcomes in patients with candidemia or IC

REFERENCES

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