

ABDD-QbD HABP/VABP Trial Design Meeting: Summary of Top Challenges

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Biologics

Recommended Design Features of Future Clinical Trials of Antibacterial Agents for Hospital-Acquired Bacterial Pneumonia and Ventilator-Associated Bacterial Pneumonia

**IDSA; ACCP;
ATS; SCCM**

Clinical Infectious Diseases 2010;51(S1):S150–S170

- Result of a 2 day FDA-IDSA-ACCP-ATS-SCCM workshop held in Silver Spring, MD on March 31-April 1 2009
- This was a follow on to a 2 day CAP workshop the previous year
- Industry participation at both meetings

Ongoing Discussions

- Sponsors have continued to try to plan for such studies
- At least one study has been successfully completed in this space, focusing on MRSA (Wunderink et al, '12 Clin Infect Dis 54:621-9)
- November 29, 2012 FDA Anti-Infective Ad Board

Contentious Areas

- Pre-study antibiotics
- Primary efficacy endpoint and NI margin
- How sick must enrolled patients be?
- Can HAP and VAP be studied at the same time?
- What comparator drugs should be used?
- What is the evaluable population?
- How is micro confirmation done?

Group Identified Discussion Points

Patient Enrollment

- Disease severity criteria for inclusion
- Standardizing the definition for HABP/VABP
- Pre-study AB drug use
- Pre-study micro evaluation
- Informed Consent issues

Group Identified Discussion Points

Efficacy and safety outcomes

- Considerations for a hierarchical endpoint with clinical criteria
- Pre-study AB drug use time period (wrt mortality EP)
- NI margin, sample size and mortality rate
- Criteria for comparator drug
- Target severity/ comorbidity criteria for mortality rate, and stratification to balance arms
- Safety outcomes (and safety reporting)

Group Identified Discussion Points

Evaluable population and analysis

- Method of microbiology confirmation
- Microbiological criteria for inclusion in evaluable population (% micro confirmed for micro-ITT and analysis)
- Allowed concomitant AB drugs