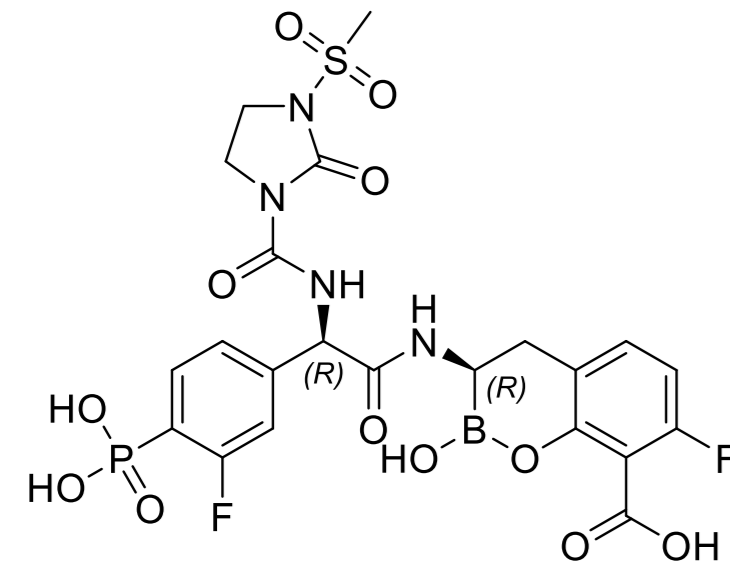


Introduction

Drug-resistant *Neisseria gonorrhoeae* is classified as an “urgent threat” pathogen according to the United States CDC. New treatment options for gonorrhea infections are needed as resistance to the standard of care agent (intramuscular-administered ceftriaxone) is emerging. To address penicillin-binding protein 2 (PBP2)-mediated ceftriaxone resistance in *N. gonorrhoeae*, Venatorx initiated a discovery effort to identify non-beta-lactam boronate-based PBP inhibitors. This initiative led to the discovery of VNRX-14079, a novel cyclic boronate-based inhibitor of PBP2 that shows potent activity against both wild-type and drug-resistant *N. gonorrhoeae*.

VNRX 14079 Structure



Materials/Methods

Agar and broth microdilution MIC assays were conducted and interpreted according to CLSI^{1,2} using GC agar supplemented with 1% IsoVitaleX and an optimized supplementation of 12 μM Fe(NO₃)₃ for robust growth and fastidious broth (FB) prepared according to Cartwright *et. al*³ with an adjustment in final pH to 7.2 +/- 0.2 respectively.

Resistance frequency experiments were conducted using the modified GC agar except for WHO Q. Growth of WHO Q was minimal on GC agar and was instead tested on chocolate agar for optimal growth.

Time kill assays were conducted using FB in a 96-well microtiter plate based on methods described by Forester *et. al*³ with modifications. Inoculum consisted of 90 μL of a 10⁵ CFU/mL bacterial suspension. The plate was incubated at 37°C in a 5% CO₂ humidified environment shaking at 200 RPM for 4 hours to allow the bacteria to reach log phase of growth. After the initial growth phase, 10 μL of appropriate 10^x drug dilutions (4^x and 16^x modal broth microdilution MICs as well as one dilution above the ceftriaxone susceptibility breakpoint of ≤0.25 μg/mL (0.5 μg/mL) were tested when appropriate) were added to each desired well for a total volume of 100 μL. Also, 10 μL of FB was added to the wells serving as the positive controls. At time -4 hour (time of inoculation), 0-hour (time of drug addition), 2-hour, 4-hour, 6-hour, and 24-hour, a limiting dilution method was used to monitor bacterial growth. At each time point, CFU/mL was determined using 16 serial dilutions with mixing 63 μL from each condition/dilution with 137 μL of FB by pipetting. Growth in the first dilution represents 23 CFU/mL (7.3 × 3.17) and growth in each consecutive dilution represents 7.3 × 3.17⁽ⁿ⁾ CFU/mL (n means nth dilution). Bacterial growth at 28-hour was validated prior to time kill assays to ensure appropriate growth could be maintained throughout the duration of the experiment.

Table 1: *Neisseria gonorrhoeae* Agar Dilution MICs in μg/mL in 6 wild-type and 5 mosaic PBP2 producers

Species	Strain ID	PBP2 allele	VNRX-14079	Ceftriaxone	Zoliflodacin	Azithromycin	Penicillin G	Ciprofloxacin
<i>N. gonorrhoeae</i>	ATCC 49226	penA -22	0.03	0.008	0.12	0.25	0.5	0.004
<i>N. gonorrhoeae</i>	FA1090	penA -1	0.016	≤0.002	0.03	0.06	0.06	0.004
<i>N. gonorrhoeae</i>	MS11	penA -22	0.06	0.016	0.12	0.25	1	0.004
<i>N. gonorrhoeae</i>	WHO G	penA -2	0.03	0.008	0.12	0.12	0.5	0.12
<i>N. gonorrhoeae</i>	WHO K	Mosaic penA -10	0.12	0.12	0.12	0.25	2	>16
<i>N. gonorrhoeae</i>	WHO L	penA -7	0.5	0.25	0.12	0.25	2	16
<i>N. gonorrhoeae</i>	WHO M	penA -2	0.06	0.008	0.06	0.25	>64	2
<i>N. gonorrhoeae</i>	CDC-0914	Mosaic penA -64	0.06	0.5	0.12	1	2	>16
<i>N. gonorrhoeae</i>	CDC-0197	Mosaic penA -34	0.06	0.06	0.06	>4	1	16
<i>N. gonorrhoeae</i>	WHO X (H041)	Mosaic penA -37	0.25	2	0.12	0.25	2	>16
<i>N. gonorrhoeae</i>	WHO Q (G7944)	Mosaic penA -60	0.06	0.5	0.06	>4	1	16

Table 2 and Figure 1: Correlation Between Broth and Agar Microdilution Assays for Compound Optimization

Species	Strain ID	PBP2 allele	VNRX-6752		VNRX-6884		VNRX-6958		VNRX-14079		Penicillin G	
			Broth	Agar	Broth	Agar	Broth	Agar	Broth	Agar	Broth	Agar
<i>N. gonorrhoeae</i>	ATCC 49226	penA -22	0.5	0.5	0.06	0.06	0.06	0.06	0.06	0.03	0.5	0.5
<i>N. gonorrhoeae</i>	FA1090	penA -1	0.03	0.06	0.016	0.016	0.016	0.016	0.03	0.016	0.06	0.06
<i>N. gonorrhoeae</i>	MS11	penA -22	0.5	0.5	0.06	0.06	0.06	0.06	0.06	0.06	0.5	1
<i>N. gonorrhoeae</i>	WHO G	penA -2	0.5	0.25	0.06	0.03	0.06	0.06	0.06	0.03	0.25	0.5
<i>N. gonorrhoeae</i>	WHO K	Mosaic penA -10	4	4	0.25	0.25	0.25	0.5	0.12	0.12	2	2
<i>N. gonorrhoeae</i>	WHO L	penA -7	8	8	0.5	1	0.5	1	0.5	0.5	2	2
<i>N. gonorrhoeae</i>	WHO M	penA -2	0.25	0.5	0.06	0.06	0.06	0.06	0.06	0.06	>32	>64
<i>N. gonorrhoeae</i>	WHO Z	Mosaic penA -64	0.5	2	0.12	0.25	0.12	0.25	0.03	0.06	1	2
<i>N. gonorrhoeae</i>	CDC-0197	Mosaic penA -34	0.5	2	0.12	0.25	0.12	0.25	0.06	0.06	0.25	1
<i>N. gonorrhoeae</i>	WHO X (H041)	Mosaic penA -37	4	16	0.5	1	1	1	0.12	0.25	2	2
<i>N. gonorrhoeae</i>	WHO Q (G7944)	Mosaic penA -60	1	4	0.12	0.5	0.12	0.25	0.06	0.06	1	1

Figure 2: Time Kill Data for VNRX-14079 vs. ceftriaxone in wild-type and mosaic PBP2 producing *N. gonorrhoeae*

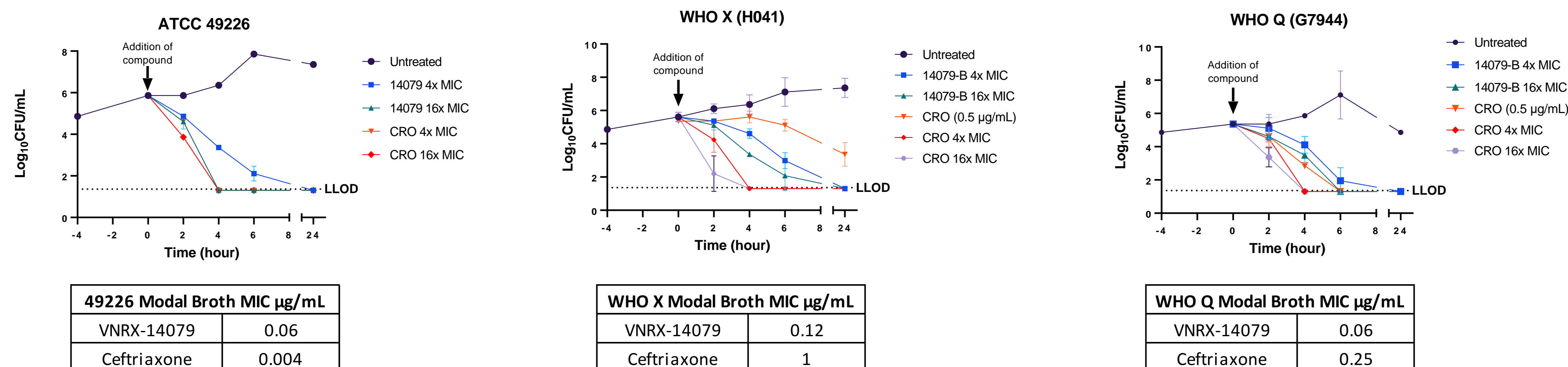


Table 3: Resistance Frequencies

Compound	Concentration	ATCC 49226	WHO X	WHO Q
VNRX-14079	4x MIC	<1.56 × 10 ⁻⁹	<1.79 × 10 ⁻⁹	<4.17 × 10 ⁻⁹
	16x MIC	<1.56 × 10 ⁻⁹	<1.79 × 10 ⁻⁹	<4.17 × 10 ⁻⁹
Ceftriaxone	4x MIC	<1.56 × 10 ⁻⁹	<1.79 × 10 ⁻⁹	<4.17 × 10 ⁻⁹
	16x MIC	<1.56 × 10 ⁻⁹	<1.79 × 10 ⁻⁹	<4.17 × 10 ⁻⁹

Summary of Results

- VNRX-14079 had an MIC₉₀ of 0.25 μg/mL in the panel of 11 *N. gonorrhoeae* isolates tested, while ceftriaxone, zoliflodacin, azithromycin, penicillin G, and ciprofloxacin had MIC_{90s} of 0.5, 0.12, >4, 2, and >16 μg/mL, respectively.
- Broth microdilution MICs were within 2-4 doublings of their respective agar MIC ensuring that the fastidious broth microdilution is a quick and reproducible assay for compound screening.
- Both VNRX-14079 and ceftriaxone exhibited undetectable resistance frequencies of <10⁻⁹ in the CLSI QC strain ATCC 49226 and ceftriaxone-resistant strain WHO Q, and <4 × 10⁻⁹ in WHO X.
- VNRX-14079 and ceftriaxone both exhibited rapid bactericidal activity (3-log₁₀ CFU reduction) and sustained activity through 24 hours in ATCC 49226, WHO Q, and WHO X when tested at 4^x and 16^x the MIC.
- Ceftriaxone at one doubling above the susceptibility breakpoint of ≤0.25 μg/mL (0.5 μg/mL) showed sustained bactericidal activity through 24 hours in WHO Q (2^x MIC). In WHO X, bacteriostasis was observed through 6 hours and a 2-log₁₀ CFU reduction was observed at 24 hour (not bactericidal).

Conclusions

VNRX-14079 showed potent antibacterial activity against representative susceptible and resistant isolates (within a doubling dilution of zoliflodacin and more potent than ceftriaxone), a low frequency of resistance, and was bactericidal in time-kill studies against both wild-type and mosaic PBP2 producing *N. gonorrhoeae*. These results support further development of VNRX-14079 as a promising anti-gonorrhea agent.

References

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