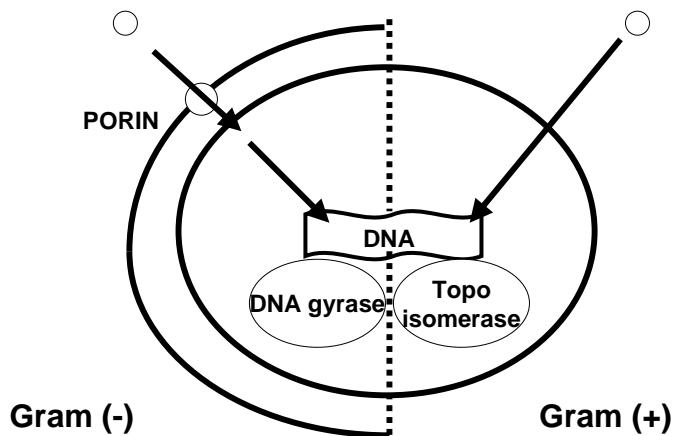


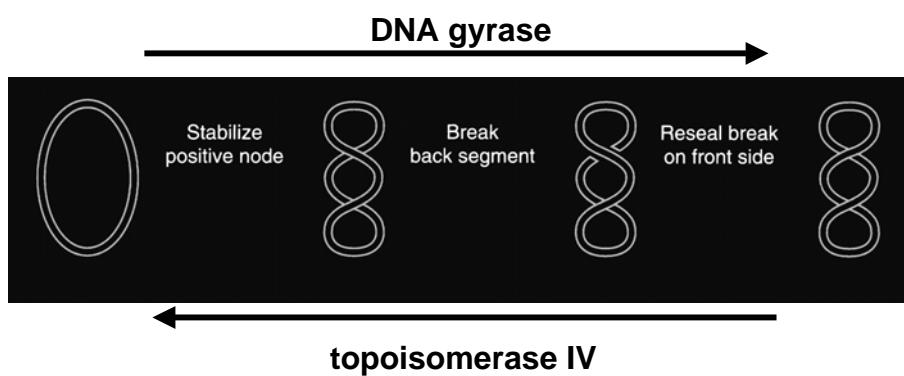
Mechanism of action of fluoroquinolones: the basics...



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1

2 key enzymes in DNA replication:

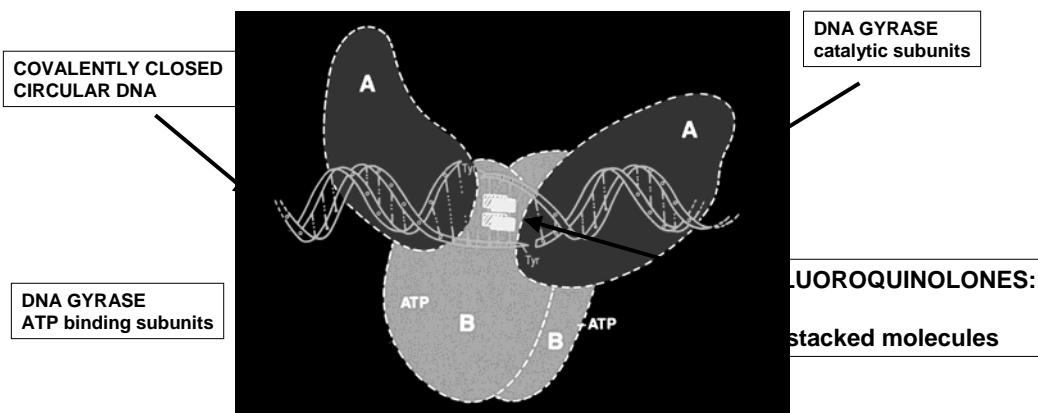


bacterial DNA is supercoiled

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2

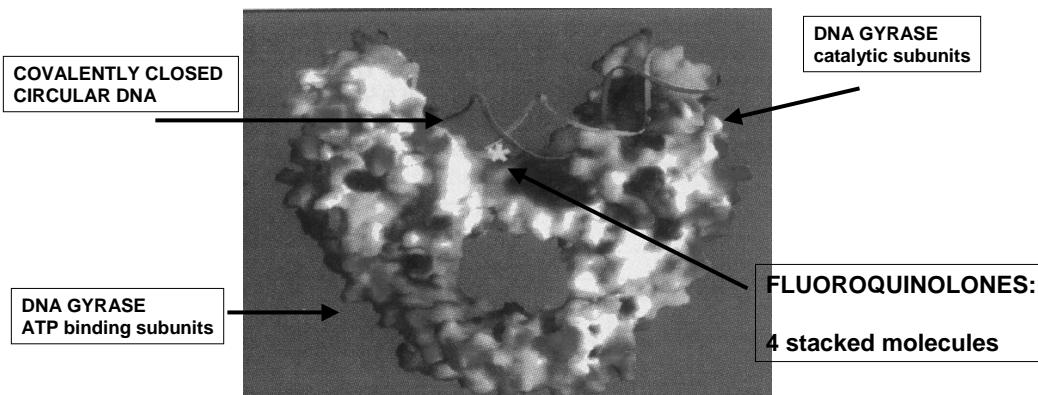
Ternary complex DNA - enzyme - fluoroquinolone



(Shen, *in Quinolone Antimicrobial Agents*, 1993)

3

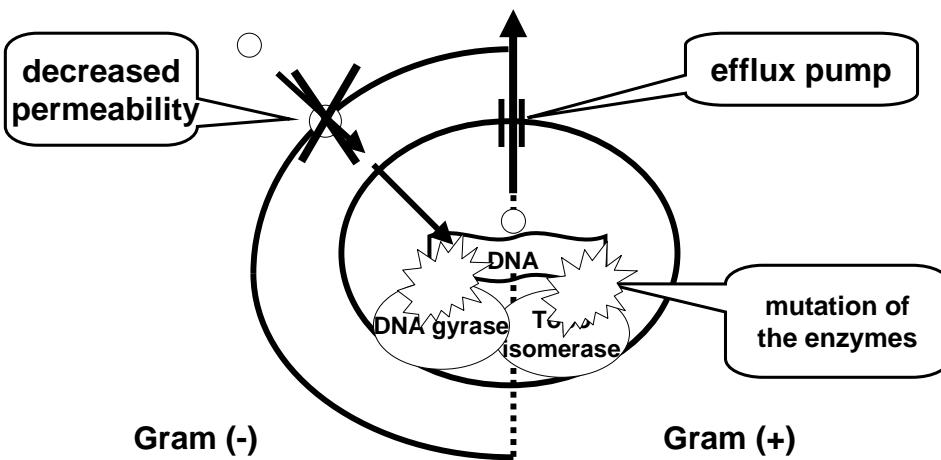
Ternary complex DNA - enzyme - fluoroquinolone



Cabral *et al.*, *Nature*, 1997

4

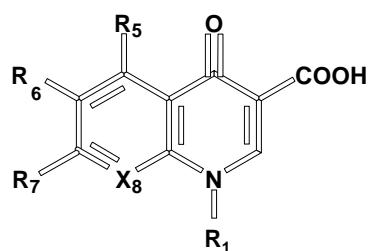
Resistance to fluoroquinolones: the basics



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**Fluoroquinolones are the first entirely
man-made antibiotics:
do we understand our molecule ?**



Don't panic, we will travel together....

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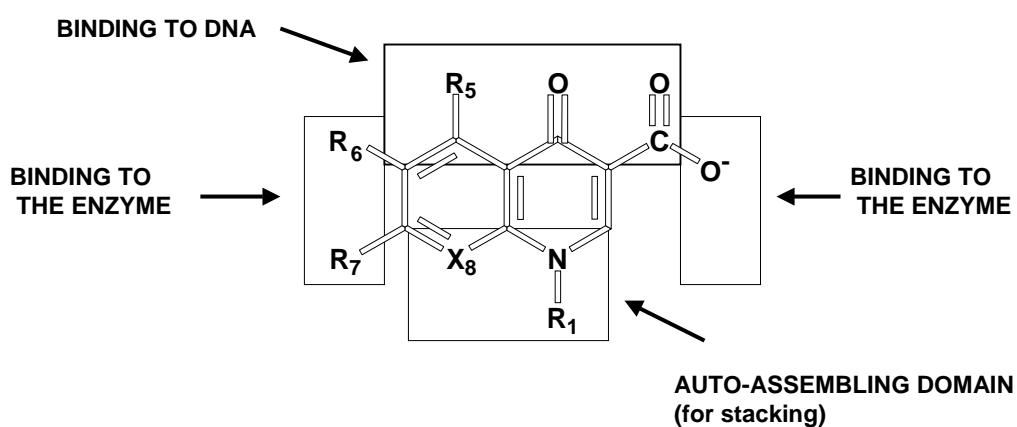
6

Chemistry and Activity

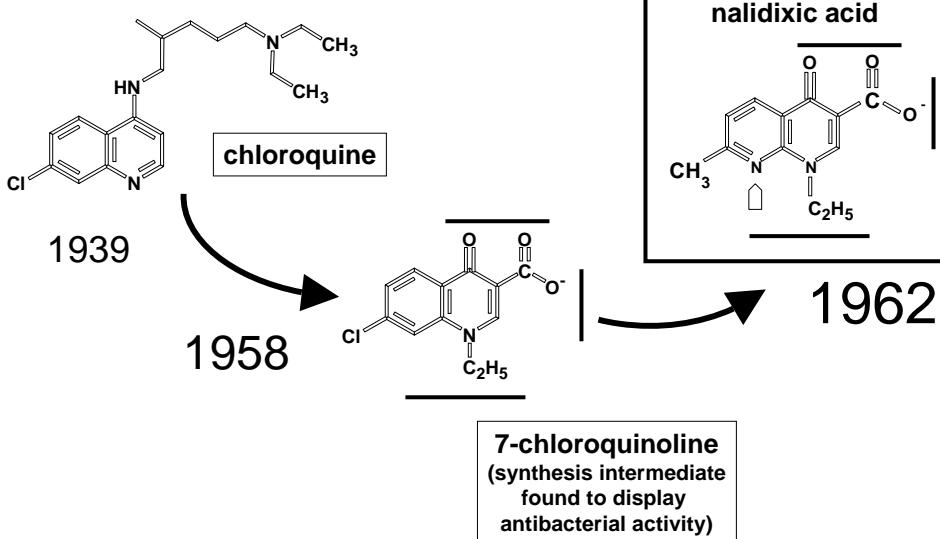


This is where all begins...

The pharmacophore common to all fluoroquinolones



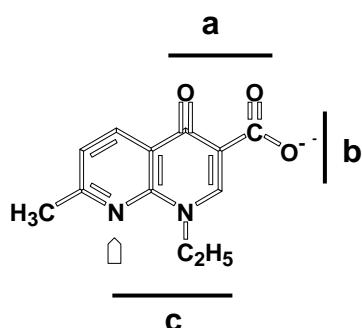
From chloroquine to nalidixic acid...



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Nalidixic acid *



- typical chemical features of fluoroquinolones (a, b, c)
- BUT a naphthridone (N at position 8: □)
- limited usefulness as drug
 - narrow antibacterial spectrum (*Enterobacteriaceae* only)
 - short half-life (1.5h)
 - high protein binding (90%)

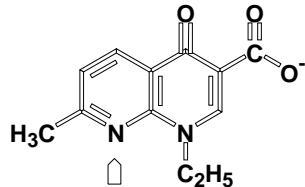
* Belg. pat. 612,258 to Sterling Drugs, 1962

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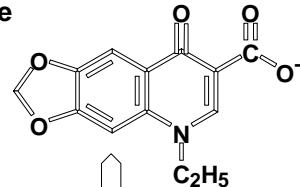
From nalidixic acid to the 1st fluoroquinolone (1 of 4)

nalidixic acid



oxolinic acid *

1. modify naphthyridone
into quinolone



shows reduced protein binding...

* Ger. pat. to Warner Lambert, 1967

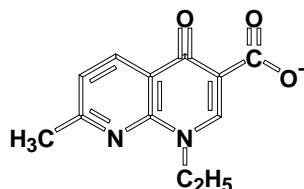
* quinoleine

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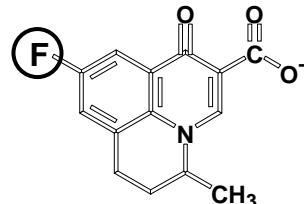
From nalidixic acid to the 1st fluoroquinolone (1 of 4)

nalidixic acid



flumequine *

2. discovery of
flumequine *



shows weak but broad
Gram(-) activity

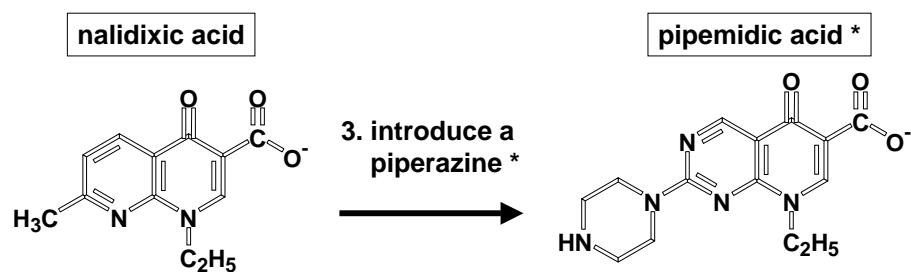
* Ger pat. to Rikker Labs, 1973

* benzo-quinolizine

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From nalidixic acid to the 1st fluoroquinolone (1 of 4)



shows longer half-life...

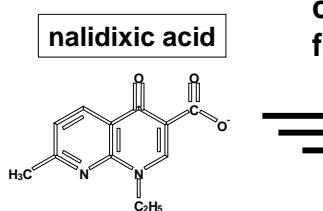
* Ger. Pat. to Roger Bellon, 1974

* pyrido-2-3-pyrimidine

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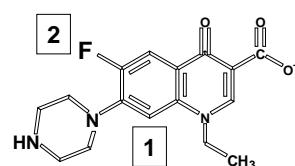
From nalidixic acid to the 1st fluoroquinolone (1 of 4)



combine all 3 features * ...

1978

norfloxacin *



broader Gram(-) activity
less protein binding (50%)
longer half-life (3-4h)

* Belgian patent 863,429, 1978 to Kyorin

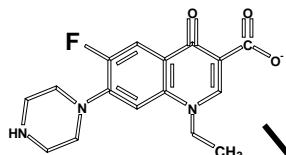
* 6-fluoro-7-pyrimidino-quinoleine

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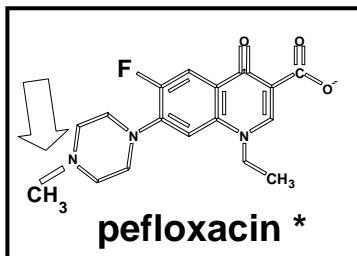
14

From norfloxacin to the other 1st generation fluoroquinolones: pefloxacin

norfloxacin



Add a methyl
to still increase
half-life



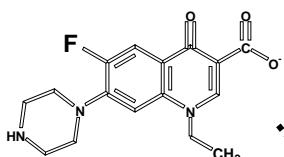
* Ger. pat. 2,840,910 to
Roger Bellon/Dainippon, 1979

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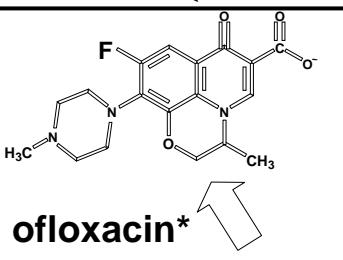
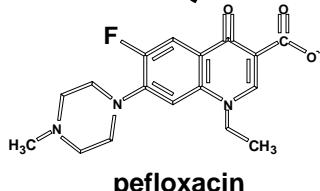
15

From norfloxacin to the other 1st generation fluoroquinolones: ofloxacin

norfloxacin



tricyclic compound
(as in flumequine but
morpholine ring)

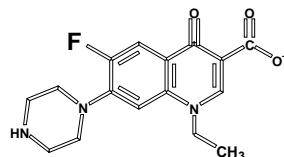


* Eur. pat. Appl. 47,005 to Daiichi, 1982
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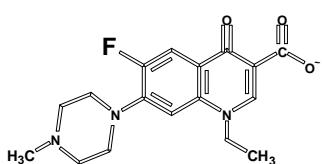
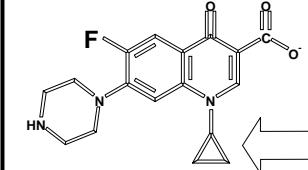
From norfloxacin to the other 1st generation fluoroquinolones: ciprofloxacin

norfloxacin

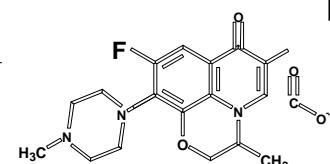


cyclopropyl to increase potency

ciprofloxacin *



pefloxacin



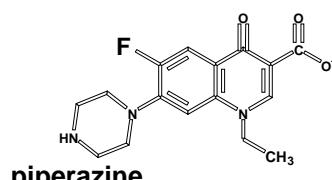
ofloxacin

* Ger. pat. 3,142,854 to Bayer AG, 1983
17

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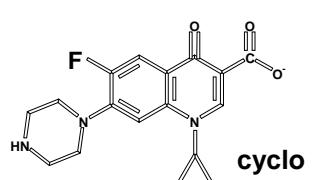
"1st generation" fluoroquinolones

norfloxacin

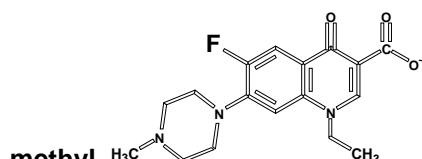


piperazine

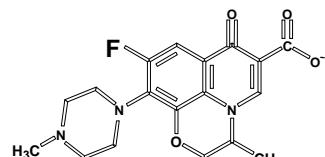
ciprofloxacin



cyclo propyl



pefloxacin



ofloxacin morpholine

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The "first generation" of fluoroquinolones

1960 1970



- Nalidixic acid
- Oxolinic acid
- Cinoxacin
- Pipemidic acid

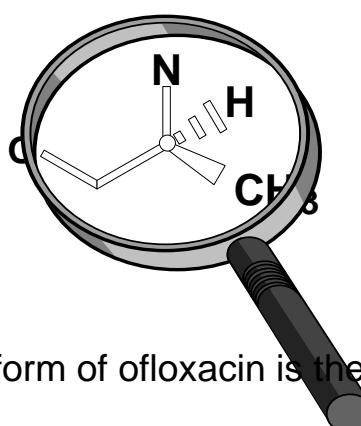
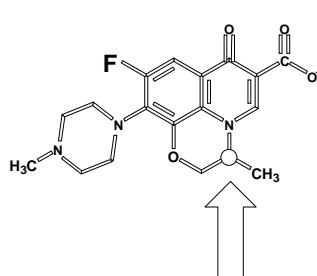
- Norfloxacin
- Pefloxacin
- Ofloxacin
- Ciprofloxacin
- Fleroxacin
- Rufloxacin

improved
anti Gram (-)
activity

$t_{1/2}$	activity
3-4 h	++
11 h	+
6 h	++
3-4 h	+++

From ofloxacin to levofloxacin...

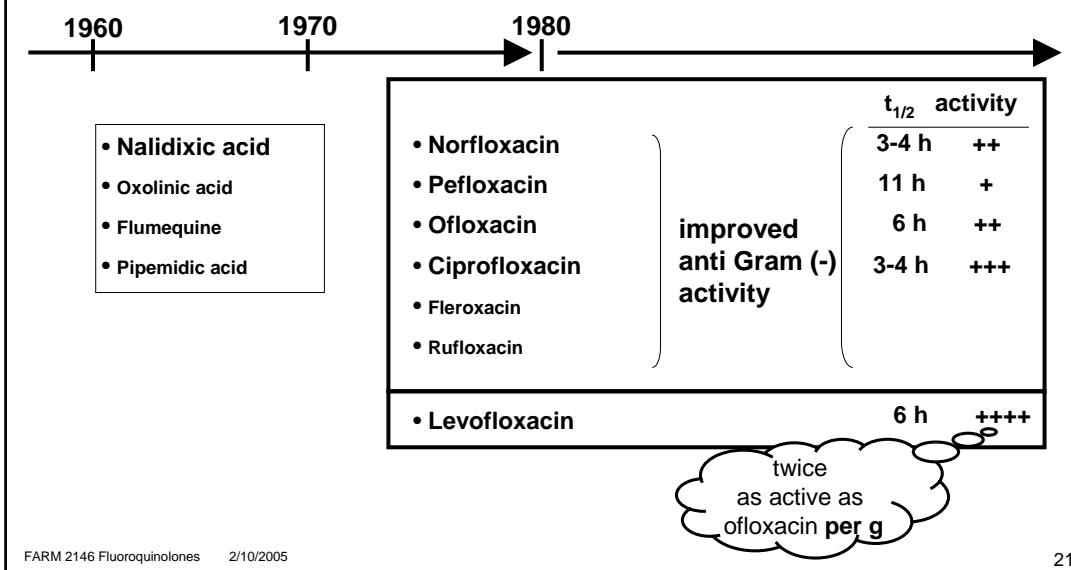
Ofloxacin is a racemic mixture



Levofloxacin is the
pure (-) S isomer *

The active form of ofloxacin is the (-) S isomer

The present "first generation" of fluoroquinolones ...



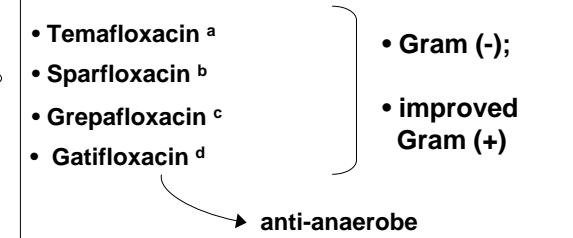
How to improve the chemotherapeutic usefulness of the "first generation" fluoroquinolones

1. Maintain broad Gram(-) activity

2. Improve Gram(+) activity

3. Acquire activity against anaerobes

The “second generation” fluoroquinolones

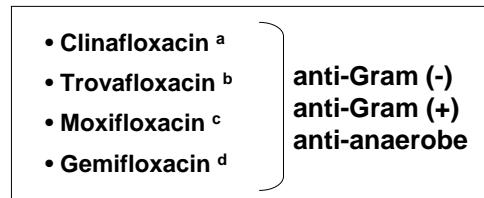
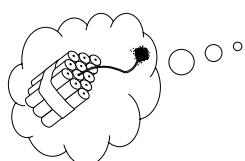


a: Toyama, 1988 (?) ; b: Dainippon, 1985-1987; c: Otskuda, 1989; d: Kyorin, 1988

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The “third generation” fluoroquinolones

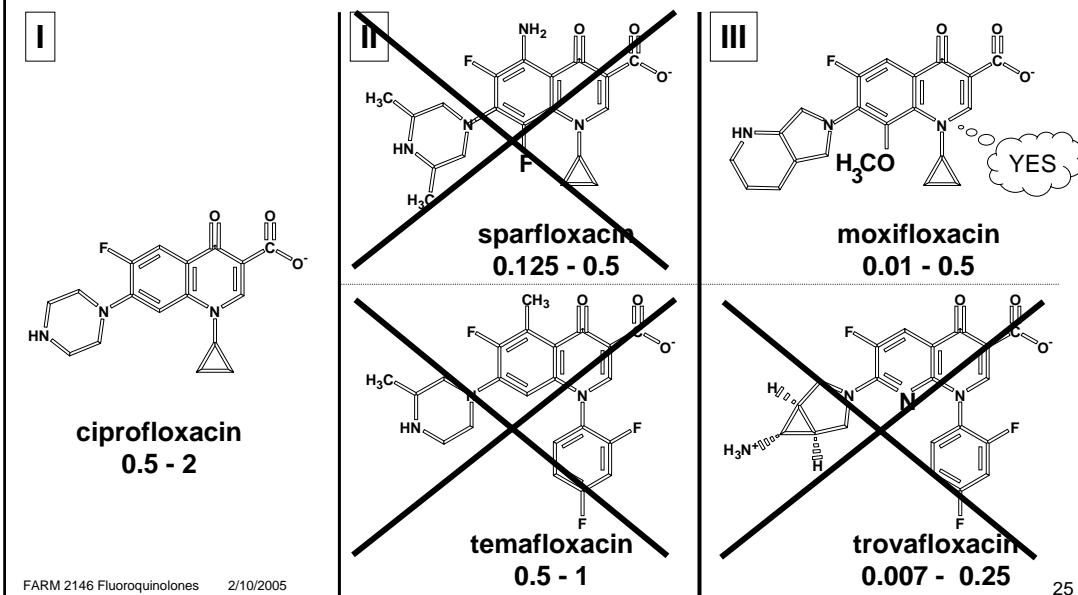


a:Kyorin, 1987; b: Pfizer, 1993; c: Bayer, 1994; d: LG Chemical Ltd., S. Korea, 1994-98

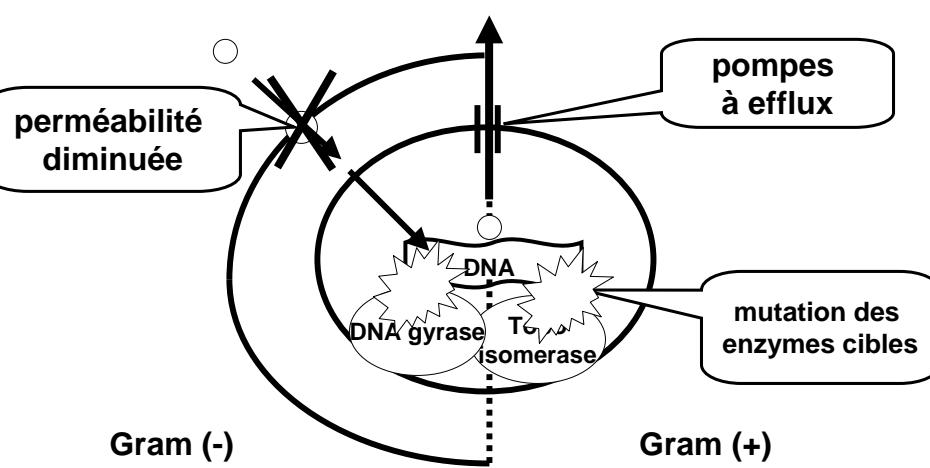
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Activity against *S. pneumoniae*



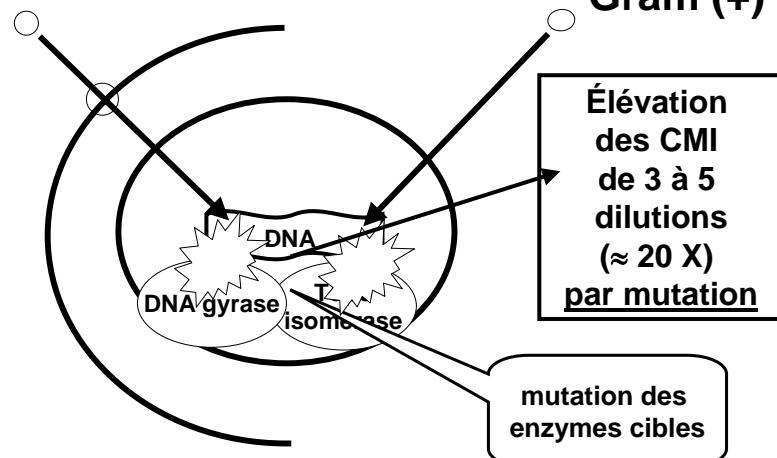
Resistance au fluoroquinolones : les mécanismes de base ...



Resistance au fluoroquinolones : rôle des mutations au niveau de la cible

Gram (-)

Gram (+)



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Is there a SAR for emergence of resistance ?

The "Mutant Prevention Concentration" * ☺

"When *Mycobacterium bovis BCG* and *Staphylococcus aureus* were plated on agar containing increasing concentrations of fluoroquinolone, colony numbers exhibited a sharp drop, followed by a plateau and a second sharp drop."

The plateau region correlated with the presence of first-step resistant mutants. Mutants were not recovered at concentrations above those required for the second sharp drop, thereby defining a mutant prevention concentration (MPC).

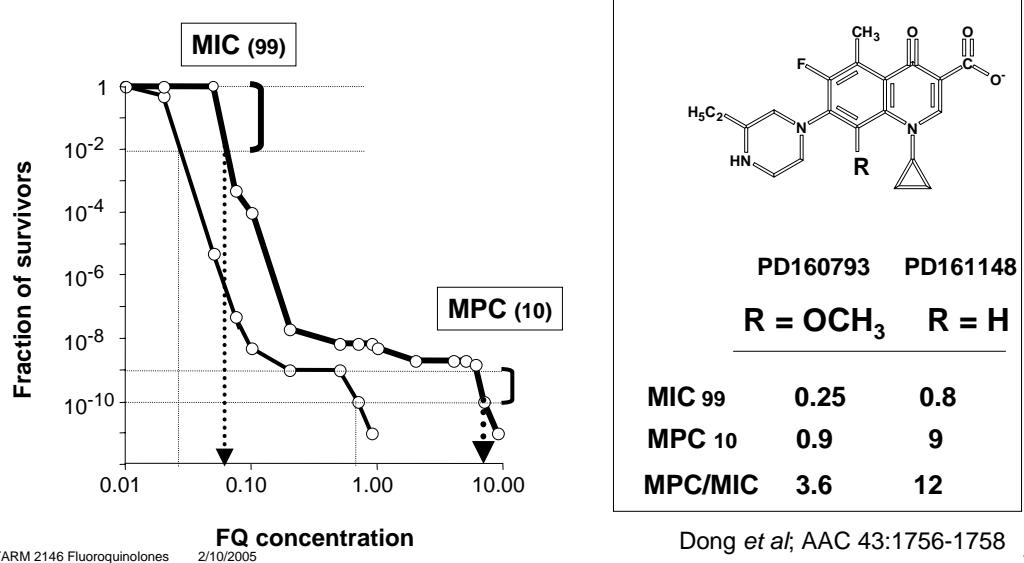
A C8-methoxy group lowered the MPC for an N-1-cyclopropyl fluoroquinolone"

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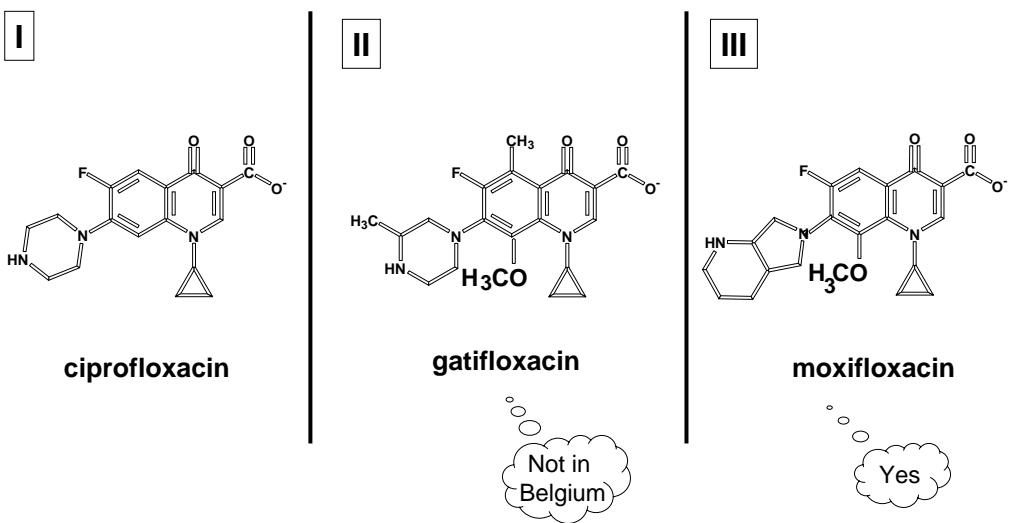
28

Is there a SAR for emergence of resistance ?

Bactericidal activity of FQs against *Mycobacterium bovis*



Fluoroquinolones with a C8-methoxy



Toxicity



Frequent side effects of fluoroquinolones: is there a SAR ?



COMPLEXATION WITH METALLIC IONS (Fe, Al, Mg, Ca)



PHOTOTOXICITY



DRUG INTERACTIONS: INHIBITION OF cyt P450 (1A2)



CNS TOXICITY (BINDING TO GABA RECEPTOR)

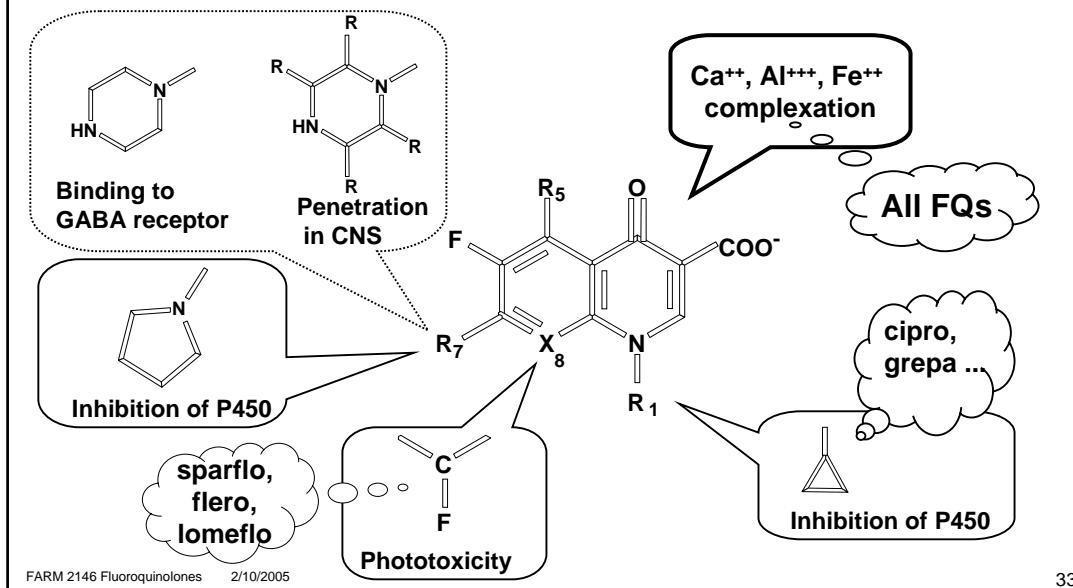


GASTRO-INTESTINAL DISCOMFORT

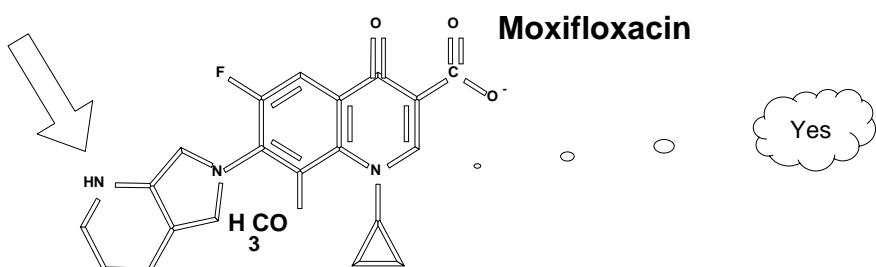


CARTILAGE and MUSCULOSQUELETAL TOXICITY

SAR of frequent side effects



Fluoroquinolone with low or no drug interactions..



Rare side effects of fluoroquinolones:



RENAL TOXICITY

crystalluria, hematuria, interstitial nephritis, acute renal failure



CARDIAC TOXICITY (QT prolongation, *Torsades de pointe*)



HEPATOTOXICITY

temafloxacin syndrome / trovafloxacin syndrome

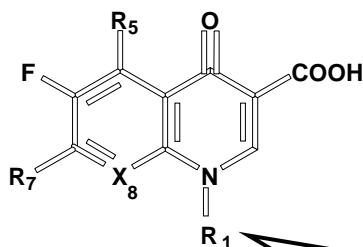
Pharmacokinetics



This is where people start sleeping..

SAR of pharmacokinetic parameters

Bulky substituent
 $t_{1/2} \uparrow$



cipro
gati
moxi

peflo, oflo,
gati,
moxi

$V_d \uparrow$

SAR of main pharmacokinetic parameters: how to get a long half life

	$t_{1/2}$ (h)	no. of daily administrations
	oflo / lévo 5 - 7	2 x*
	10	2 x*
	9 - 13	1 x
	grepa gati 10 - 12	1 x
	13	1 x
	gemi 8	1 x
	trova 10	1 x
	moxi 12	1 x
	other FQ 3 - 6	2 x

* higher MIC... 38

Resistance: do not forget the correct dosing...

"Inadequate dosing of antibiotics is probably an important reason for misuse and subsequent risk of resistance. A recommendation on proper dosing regimens for different infections would be an important part of a comprehensive strategy. The possibility to produce such a dose recommendation based on pharmacokinetic and pharmacodynamic considerations will be further investigated in one of the CPMP working parties..."

European Agency of the Evaluation of Medicinal Products (London)

*EMEA discussion paper
on Antimicrobial resistance
3 January 1999 EMEA/9880/99*



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Pharmacokinetic parameters in relation with efficacy

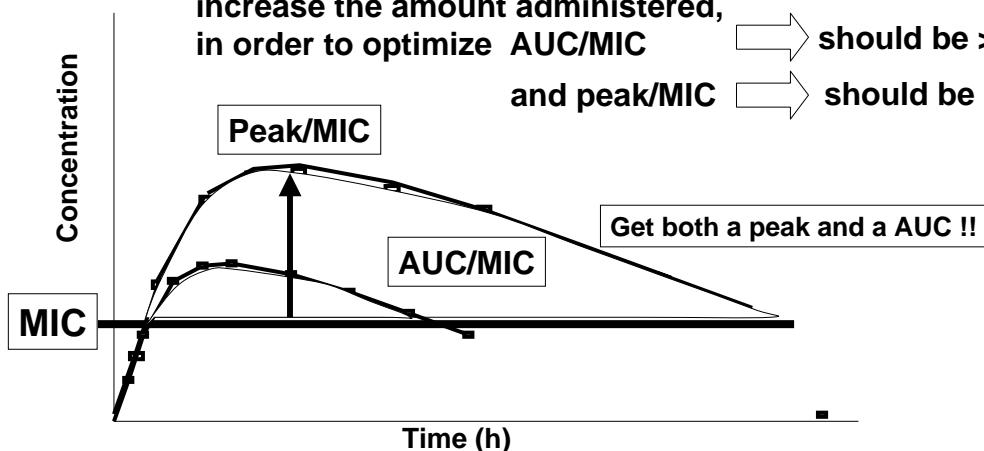
	Dose (mg)	Cmax (mg/l)	MIC for pk/MIC=10	AUC (mg.h/l)	MIC for AUIC=125
norflo	400 (X2)	1.6	0.2	14	0.1
peflo	400 (X2)	4.6	0.4	108	1.0
cipro	500 (X2)	1.5	0.2	17	0.1
oflo	200 (X2)	3.1	0.4	66	0.4
levoflo	500	5.0	0.5	47	0.4
moxi	400	4.5	0.4	48	0.4

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Optimizing dosage for fluoroquinolones

increase the amount administered,
in order to optimize AUC/MIC → should be > 125
and peak/MIC → should be > 10

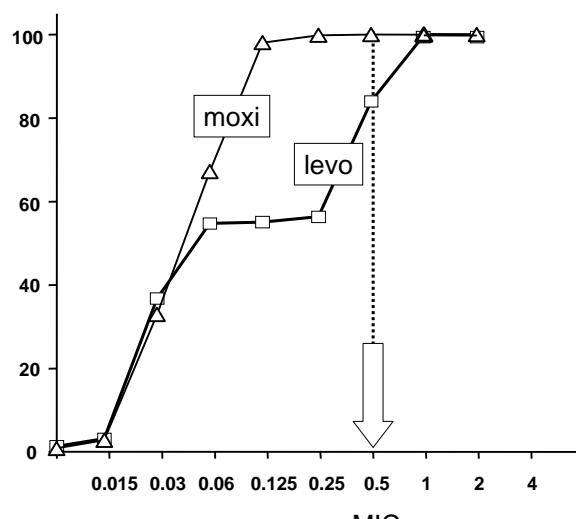


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How to apply this ?

% of sensitive strains



Levofloxacin	500 mg	
	1X /day	2X /day
AUC [(mg/l)xh]	47	94
• peak [mg/l]	5	5
✉ MIC _{max}	< 0.5	< 1

Moxifloxacin	400 mg	
	1X/day	
• AUC [(mg/l)xh]	48	
• peak [mg/l]	4.5	
✉ MIC _{max}	< 0.5	

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MIC data: J. Verhaegen et al., 2001

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Take home” message

- Dosage is key to success
- Dosage should match bacterial sensitivity
- peak, AUC/MIC are keys to success
- use a single, appropriate dose for long-life fluoroquinolones (moxifloxacin), or
- repeat the dose for short-lived fluoroquinolones (all others so far...)
- for fluoroquinolones, the limit is an **MIC of 0.5 µg/ml**