a nuvista pharma initiative

medevista Clinical Resource Center

Faropenem, a stable and orally bioavailable penem with high β-lactamase stability, to counteract resistant infectious diseases

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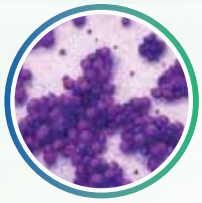
- ESBL-producing bacteria in community-acquired infections challenge clinical treatment protocols.
- The prevalance of ESBL is high (62% in *E. coli* and *Klebsiella*) and MRSA resistance rates are alarming (55.6% co-trimoxazole, 70.8% erythromycin, 79.3% ciprofloxacin).

FAROPENEM: SPECTRUM OF ACTIVITY (IN VITRO DATA)



Gram-positive:

Faropenem is effective against *S. pneumoniae* (MIC: 0.25 mg/L), MSSA and MRSA (MIC: 0.12 and 2 mg/L) compared to cefuroxime and co-amoxiclav.

Gram-negative:

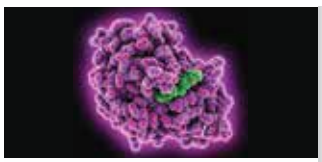
Faropenem is active against ESBL-producing *E. coli, Klebsiella spp., H. influenzae* (MIC: 1 mg/L), and *M. catarrhalis* (MIC: 0.5 mg/L) compared to cefuroxime and co-amoxiclav.

Anaerobes:

Active against *Clostridium perfringens*, *Peptostreptococci*, and *B. fragilis*.

Faropenem is an oral penem, available in Japan, India & Bangladesh

Has a broad spectrum of activity against gram positive, gram negative and anerobic bacterias.



Has a pronounced β-lactamase stability compared to other cephalosporins and imipenem.

Is resistant to hydrolysis by nearly all β-lactamases (classes A,C,D), including ESBLs and AmpC β-lactamases.

Indicated for the treatment of UTIs, RTI, SSTI and gynecological infections.

Ref: Bhalla, A. (2023, May 29). Faropenem, a stable and orally bioavailable β-lactam, to counteract resistant pathogens and infectious diseases: A narrative review. https://doi.org/10.22541/au.168536209.96621731/v1

Clinical evidences of Faropenem

Farobac®
Faropenem 150 mg & 200 mg Tablet

Study 1

Treatment efficacy of 3-day or 7-day administration of faropenem sodium for acute uncomplicated cystitis

Aim
Compared Faropenem efficacy for cystitis treatment (**3-day vs. 7-day regimens**).

Design
Multicenter, randomized, open-label study.

Patients
Women >20 years with cystitis symptoms.

Treatment
Treat with Faropenem sodium (600 mg/day) for 3 days (n=97) or 7 days (n=103).

Results
Similar clinical effectiveness (5-9 days and 4-6 weeks post-treatment). MB non-recurrence rates: 80.6% (3-day), 79.4% (7-day). Mild-to-moderate AEs, common—diarrhea (7.5%).

Conclusion
Faropenem's 7-day regimen demonstrated superior microbiological response, particularly against *E. coli* strains, even those resistant to fluoroquinolones and cephalosporins.

Study 2

Randomized double-blind study comparing 7- & 10-day regimens of faropenem medoxomil with a 10-day cefuroxime axetil regimen for treatment of acute bacterial sinusitis

Aim
Compared **7-day courses** of faropenem medoxomil and cefuroxime axetil for ABS.

Design
Prospective, multinational, multicenter, double-blind, comparative study.

Treatment
Faropenem medoxomil (300 mg twice daily; n=228) and cefuroxime axetil (250 mg twice daily; n=224) in ABS.

Results
7-16 days post-therapy, clinical cure rate:
- 89.0% for faropenem and 88.4% for cefuroxime.

Bacteriological success rate:
- 91.5% for faropenem and 90.8% for cefuroxime.

AEs reported:
16.8% for faropenem and 17.9% cefuroxime.

Conclusion
7 day faropenem regimen was similar (noninferior) to a 7 day cefuroxime axetil regimen based on clinical response and bacteriological success rates in patients with ABS.

Overall data revealed that Faropenem is a stable and orally bioavailable β-lactam that has broad-spectrum in vitro antimicrobial activity against many Gram-positive and Gram-negative aerobes and anaerobes and is resistant to hydrolysis by many β-lactamases (classes A,C,D), including ESBLs and AmpC β-lactamases.

It may be used as an alternative to fluoroquinolones or macrolides/ketolides when there is a concern with resistant pathogens.

Abbreviation:
ABS – Acute bacterial sinusitis AEs – Adverse Events ; ESBL – Extended-spectrum β-lactamase ; MB – Microbiological ; MRSA – Methicillin-resistant Staphylococcus aureus ; MSSA ; Methicillin-sensitive Staphylococcus aureus ; RTI – Respiratory tract infections ; SSTI – Skin and skin structure infections ; UTI – Urinary tract infections

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