Public Health Impact:
As bacteria continue to develop resistance, standard treatment can become ineffective and bacterial infections threaten global health. Therefore, there is an urgent need to develop new antibacterial drugs that are active against pathogens associated with antibacterial drug resistance and poor clinical outcomes to improve patient health and well-being worldwide.

FDA’s roles in combatting antibacterial drug resistance are to: (1) facilitate the development of new antibacterial drugs to treat patients and (2) advance the science of clinical trial design.

Background:
In March 2015, The National Action Plan for Combating Antibiotic-Resistant Bacteria (CARB) was developed in response to Executive Order 13676: Combating Antibiotic-Resistant Bacteria, which was issued on September 18, 2014. The National Action Plan outlines steps for implementing the National Strategy for Combating Antibiotic-Resistant Bacteria to address urgent and serious drug-resistant threats that affect people in the U.S. and around the world. Implementation of the National Action Plan will also support World Health Assembly resolution 67.25 (Antimicrobial Resistance), which urges countries to take urgent action at the national, regional, and local levels to combat resistance. FDA/CDER receives funding from Congress on a yearly basis to support CARB related regulatory science research.

To facilitate the development of new antibacterial drugs active against multi-drug resistant bacteria and identify regulatory science research needs, FDA convened the following meetings:

- July 18 - 19, 2016 FDA Public Workshop “Facilitating Antibacterial Drug Development for Patients with Unmet Need and Developing Antibacterial Drugs that Target a Single Species.” Meeting materials can be reviewed at: http://www.fda.gov/Drugs/NewsEvents/ucm497650.htm
- April 13, 2017 FDA Advisory Committee Meeting “Developing Antibacterial Therapies Targeting a Single Bacterial Species.” Meeting materials can be reviewed at: https://www.fda.gov/AdvisoryCommittees/Calendar/ucm551347.htm.
- June 27, 2018 FDA Public Workshop “Development of Inhaled Antibacterial Drugs for Cystic Fibrosis and Non-Cystic Fibrosis Bronchiectasis.” Meeting materials can be viewed at: https://www.fda.gov/Drugs/NewsEvents/ucm602331.htm
August 21, 2018 FDA Public Workshop “Development of Non-Traditional Therapies for Bacterial Infections.” Meeting materials can be viewed at: https://www.fda.gov/Drugs/NewsEvents/ucm606052.htm:


FDA/Office of Infectious Diseases (OID):
To help stimulate development programs for antibacterial drugs where limited resources or a lack of incentives is preventing the development of new antibacterial drugs, FDA is identifying research areas where regulatory science can support new antibacterial drug development in general, by creating new drug development tools or standards for use by industry or other stakeholders, to meet patient needs.

Consistent with the CARB goals in the area of unmet medical need, fiscal years 2016 - 2020 research focused on: (1) development of databases, (2) developing Patient Reported Outcome (PRO)s, (3) evaluating CNS penetration of antibacterial drugs in human neonates, (4) animal model development or animal model refinement for serious infections caused by Acinetobacter baumannii or Pseudomonas aeruginosa, (5) understanding the market size for antibacterial drugs, (6) understanding the human gut microbiome, (7) developing and qualifying a Patient Reported Outcome (PRO) for Non-Cystic Fibrosis Bronchiectasis (NCFB), and (8) conducting a Natural Language Processing (NLP) proof of concept study.

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Timelines for FY16-FY20 OID Research Priorities
**Project Descriptions**

**Development of an Automated and Sustainable Electronic Approach for Data Mining to Evaluate Clinical Outcomes of Patients with Bacterial Infections**

- Awarded to Johns Hopkins University School of Medicine (HHSF223201610070C)
- The objective of this project is to develop the coding needed for the electronic transfer of selected clinical data for patients with gram-negative bacteremia (bloodstream infection) in a commonly used electronic health records (EHR) system. The transferred data will populate a database for the evaluation of clinical outcomes considering patient characteristics and antibacterial drug breakpoints (the standards used by laboratories to report susceptibility of bacteria isolated from a patient to different antibacterial drugs).
- This study addresses an important regulatory science priority. The paucity of clinical outcomes data results in increasing reliance upon pharmacokinetic modeling for breakpoint updating with a trend toward lowering breakpoints primarily based on this modeling. The lowering of breakpoints may have stewardship implications as the use of second and third line agents may increase. The availability of this clinical outcome information is expected to be useful in discussions concerning revising breakpoints.

**Bridging Novel Laboratory Animal and Hollow Fiber Infection Models to Evaluate Central Nervous System Penetration of Drugs in Infants**

- Awarded to Duke University (HHSF223201610082C)
- The overall goal of this project is to develop and evaluate a new paradigm for evaluating CNS penetration of antibacterial drugs in human neonates. The objectives of this project are: (1) develop and validate a rabbit model of CNS infection and define the pharmacodynamics of the antibacterial drugs meropenem and tobramycin for the treatment of meningitis, (2) develop and validate a hollow fiber infection model (HFIM) of neonatal meningitis to characterize the pharmacodynamics of meropenem and tobramycin by evaluating bacterial killing and emergence of antimicrobial resistance, (3) bridge the preclinical results to infants using population PK-PD modeling to guide dosing regimens of meropenem and tobramycin for treatment of meningitis in infants.
- The study may help identify new approaches to study antibacterial drugs in infants, with the goal of obtaining the information needed to label an antibacterial drug for pediatric use more efficiently.
Rabbit Models of *Pseudomonas aeruginosa* Acute Pneumonia, Severe Sepsis, and Ventilator-Associated Pneumonia for Novel Antibacterial Development

- Awarded to University of California, San Francisco (HHSF223201710112C)
- The objectives of this contract are to advance the development of rabbit infection models as a translational approach for testing new drug candidates for the treatment of serious infections caused by *Pseudomonas aeruginosa* in humans.
- This study aligns with section 2.4.2 of the Broad Agency Announcement to advance the science of animal model development to facilitate antibacterial drug development.

A Preclinical Mouse Model of *Acinetobacter baumannii* Infection for Antibacterial Development

- Awarded to University of Southern California (HHSF223201710199C)
- The project is aimed at refinement of an established mouse model of *Acinetobacter baumannii* pneumonia and bacteremia infection.
- This study aligns with section 2.4.2 of the Broad Agency Announcement to advance the science of animal model development to facilitate antibacterial drug development.
- Manuscript link: [https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0219824](https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0219824)

Development of a Mouse Model for Preclinical Screening of Investigational Drugs Against *Pseudomonas aeruginosa*

- Awarded to University of Louisville School of Medicine (HHSF22320180171C)
- The project aim is: (1) to validate this model against multiple *P. aeruginosa* isolates with different drug resistance profiles by establishing the LD$_{50}$ and natural history for each isolate and (2) to establish dosing parameters for two control antibiotics using PK/PD analysis/models so that these antibiotics can be used as controls/comparators to better gauge the efficacy of novel investigational drugs against *P. aeruginosa*.
- This study aligns with section 2.4.2 of the Broad Agency Announcement (to advance the science of animal model development to facilitate antibacterial drug development.

Understanding Markets for Antibacterial Drug Development

- Interagency Agreement between FDA and HHS Office of the Assistant Secretary for Planning and Evaluation (FY18: 224183013S; FY19: 75F40119S30008)
- The goals of the project are to understand the: (1) market for antibacterial drugs, (2) incentives for developing new antibacterial drugs, and (3) social value of developing new bacterial drugs.
- The project aims are to: (1) undertake a comparison of the development and production costs, clinical value, and market performance of a cohort of recent antibacterial approvals with an appropriate control group, (2) analyze potential market failures in the antibacterial drug market, and (3) predict future market failure and how to address them.
A Human Microbiome Disruption Model

- Interagency Agreement between FDA and Centers for Disease Control and Prevention
  - In FY18 (224183015S) the goals of this project are to address the need for a tool that drug developers can use early in drug development to help select agents that are less disruptive, more protective, or better restore the gut microbiome toward a state less likely to promote colonization or infection with multidrug-resistant organisms. This study will advance the science of measuring antibiotic-specific human microbiome disruption and adverse events associated with this disruption.
  - In FY19 (75F40119S30012), CDC will continue to support studies to understand the microbiome disruption potential for antibiotics. Specifically, CDC will fund a study, using both FDA-CDER IAA and CDC AR funds to identify and validate biomarkers of microbiome disruption in a microbiome model to measure antimicrobial disruption of gastrointestinal (GI) microbiome. This project will advance the science of measuring antibiotic-specific human microbiome disruption.
- Data from these studies will be important to develop a standard test that predicts adverse events from antimicrobial use. This knowledge will help identify where preventative or restorative interventions, as well as new narrower-spectrum antibiotic development, can help to mitigate risks for patients taking antibiotics.

Estimating the National Market Size for Novel Gram-negative Active Agents

- Interagency Agreement between FDA and National Institutes of Health (FY18: 224183008S)
- Project aims are to: (1) quantify the opportunities for empiric and targeted antibacterial therapy for patients within the Cerner Healthfacts dataset with infections secondary to Gram-negative isolates displaying resistance to: (a) all first-line treatment options including carbapenems where novel agents with superior efficacy and toxicity profiles would be optimal and (b) extended-spectrum cephalosporins for which new carbapenem-sparing agents could be utilized and (2) work collaboratively with HHS economists to generate national market projections for novel agents that either spare carbapenems or retain activity when existing first-line gram-negative active agents remain inactive.
- This study will provide an understanding of the real-world market size for new agents with activity against resistant GN pathogens with limited treatment options could inform appropriate use, mitigate over-reliance on carbapenems, and ensure balance in aligning both incentives and investments.
MIC Breakpoints

- Interagency Agreement between FDA and National Institutes of Health (FY19: 75F40119S30002)
- The Project aims are to: (1) develop an approach using Cerner Healthfacts dataset to determine whether there is a correlation between patients stratified by existing in vitro MIC breakpoints and those stratified by clustering of risk-adjusted clinical outcome, (2) identify the strengths and limitations of this approach, and (3) compare findings from this approach with any relevant published literature concerning MIC breakpoints for the same drug-bug combination analyzed.
- The expected outcome from this study is an adjusted odds ratio of in-hospital mortality stratified by existing MIC breakpoints. Data from this study will help to further define the relationship between MIC breakpoints and risk-adjusted clinical outcomes.

Natural Language Processing (NLP) of Electronic Health Records (EHRs) to Advance Understanding of Antimicrobial Resistance (AMR)

- Awarded a Task Order to the MITRE Corporation (75F40119F80474).
- This proof of concept study aims to: (1) demonstrate a tightly focused application of Natural Language Processing (NLP) on a set of Electronic Health Records (EHRs) using a database to understand the utility of NLP analysis of EHRs for antimicrobial resistance (AMR) relevant information, (2) conduct NLP that analyzes unstructured notes in EHRs, such as anonymized hospital admission and discharge notes, and assess whether we can train the machine to recognize in notes that certain events took place, such as a patient had an abscess drained or had infected hardware removed from their body.
- The purpose of this study is to conduct a NLP proof of concept study on a single topic (i.e. source control) and a single use case to assess the benefits and limitations of NLP in automating analysis of information relevant to AMR in EHRs. This information will be the basis to build a full NLP annotation study in the future.

Development of a Novel PRO Tool for Use in Clinical Trials to Measure Symptoms in Patients with Non-Cystic Fibrosis Bronchiectasis (NCFB) with and without Non-Tuberculous Mycobacterial (NTM) Lung Infection

- Awarded to INSMED, INC (1U01FD006687-01)
- The specific aims of this project are to: (1) conduct concept elicitation research to identify the unique symptoms and experience of people diagnosed with NCFB with and without NTM, (2) conduct a non-interventional study in order to validate a novel draft Patient Reported Outcome (PRO) instrument for NCFB, and (3) evaluate the PRO developed in aim 1 to be fit-for-purpose in assessing symptoms among patients with NCFB and NTM and by contrasting the performance of the core PRO between patients diagnosed with NCFB with and without NTM.
- Currently, there are no validated endpoints to advance new therapies for populations with NCFB with or without NTM lung infection. The overall goal of this project is to develop a novel PRO instrument that is advanced to the stage of readiness to be included in a clinical trial to allow qualification for drug development and regulatory decision making in the NCFB field. The qualified PRO could then help design and conduct better clinical trials as well as lead to better interpretation of anti-infective drug trials for NCFB.
**Additional Research Areas of Interest**

FDA is also interested in the following research topic areas as part of CARB efforts:

- Evaluate potential innovations in clinical trial design for new antibacterial drugs such as enrollment strategies, data collection streamlining, drug development tools, clinical endpoints, and new statistical analytic approaches
- Advance the science of *in-vitro*, animal model, and/or pharmacokinetic studies to facilitate antibacterial drug development, including studies focused on drug development for special populations such as patients with unmet need, children and patients with renal or hepatic dysfunction.
- Evaluate strategies to enrich enrollment in clinical trials for new antibacterial drugs such as the use of rapid diagnostic tests
- Advance the science of antibacterial drug susceptibility testing.

More information on the research activities and future research opportunities can be found on FDA’s Office of Infectious Diseases Research webpage: [https://www.fda.gov/OAPResearch](https://www.fda.gov/OAPResearch)