

HEALTH-RELATED QUALITY-OF-LIFE
OUTCOMES IN OPTIC-2: A RANDOMIZED,
CONTROLLED, PHASE 3B TRIAL OF
OMADACYCLINE VS MOXIFLOXACIN IN
COMMUNITY-ACQUIRED BACTERIAL
PNEUMONIA





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Disclosure: Employee and shareholder of

Paratek Pharmaceuticals, Inc.



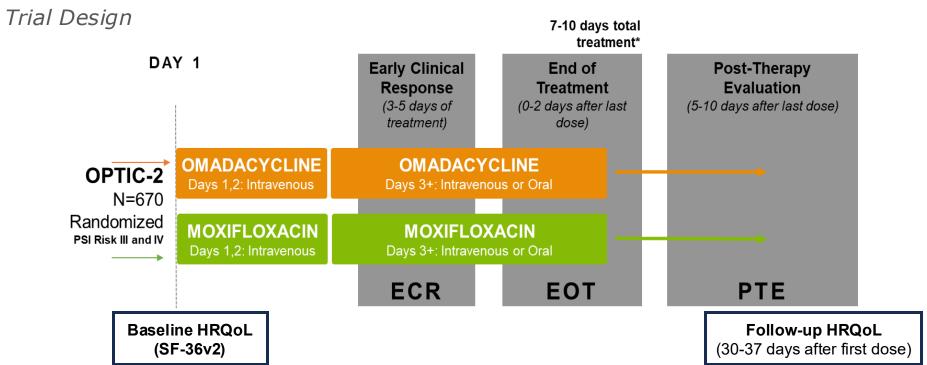
Financial Disclosure

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Background & Objective

- Omadacycline is a once-daily oral and IV aminomethylcycline antibiotic approved for the treatment of community-acquired bacterial pneumonia (CABP) and acute bacterial skin and skin structure infections in adults
- OPTIC-2 was a phase 3b, double-blind study that compared omadacycline and moxifloxacin for the treatment of CABP in adults, and included a comparison of health-related quality-of-life (HRQoL) outcomes between the treatment groups



ClinicalTrials.gov Registration: NCT04779242

CABP, community-acquired bacterial pneumonia; ECR, early clinical response; EOT, end of treatment; HRQoL, health-related quality-of-life; ITT, intent-to-treat; PSI, Pneumonia Severity Index; PTE, post-therapy evaluation; SF-36v2, 36-ltem Short Form Survey version 2

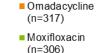
^{*}If participants had bacteremia at baseline, total treatment duration was up to 14 days

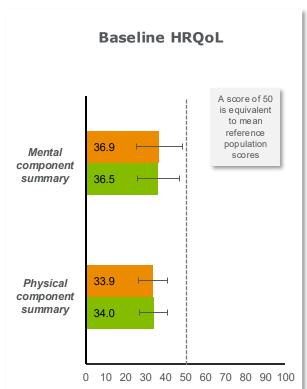
Methods

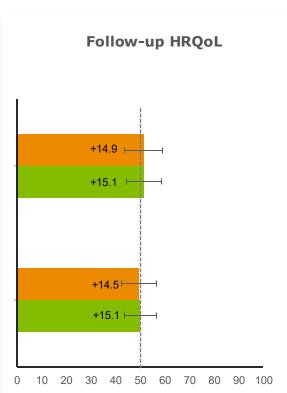
- Patients completed the 36-Item Short Form Survey (SF-36v2) at baseline and 30–37 days after the first dose
- Scores were normalized to a scale of 0–100
 - Higher scores indicate better health
- Change from baseline was analyzed using an ANCOVA model with treatment group as a fixed effect and baseline scaled score as a covariate

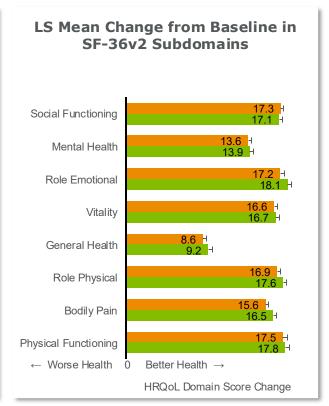
HRQoL Components

- Physical component summary
- Mental component summary
- General health
- Mental health
- Physical functioning
- Role emotional
- Role physical
- Social functioning
- Vitality
- Bodily pain









All within-group changes were statistically significant (P<.0001); between-group differences were not statistically significant. Error bars show standard deviation for baseline and follow-up HRQoL and standard error LS mean change from baseline.

HRQoL, health-related quality of life; SF-36v2, 36-Item Short Form Survey version 2

Omadacycline In CABP: Conclusions from OPTIC-2

- Patients with CABP in OPTIC-2 who received omadacycline or moxifloxacin had similar changes from baseline, including improvements, in HRQoL domains
- Effective treatment of CABP is associated with better HRQoL



Thank You!

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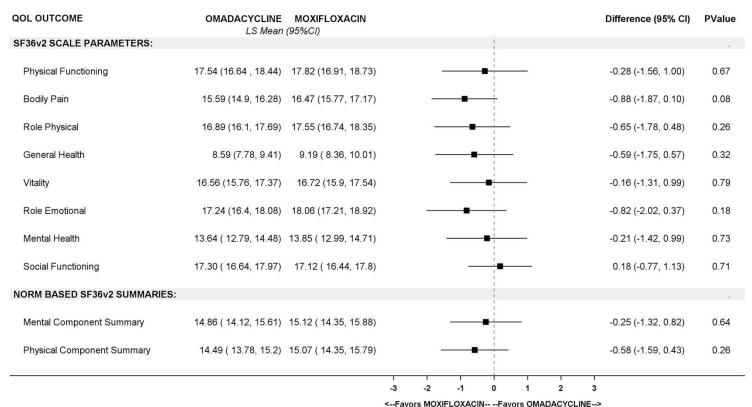
Backup Slides

Baseline Characteristics

OPTIC-2 Demographics and Baseline Characteristics, ITT Population (unless otherwise stated)	Omadacycline (n=336)	Moxifloxacin (n=334)	All Patients (N=670)
Male, n (%)	178 (53.0)	168 (50.3)	346 (51.6)
Race, n (%)			
White	335 (99.7)	333 (99.7)	668 (99.7)
Asian	1 (0.3)	1 (0.3)	2 (0.3)
Geographic region, Eastern Europe, n (%)	336 (100)	334 (100)	670 (100)
Age, years; mean (SD)	63.3 (14.4)	62.2 (15.4)	62.8 (14.9)
>65 years; n (%)	160 (47.6)	163 (48.8)	323 (48.2)
Body mass index, kg/m ² ; mean (SD)	27.0 (5.2)	27.0 (4.7)	27.0 (4.9)
Past medical history, n (%)	` ,	` ,	` '
Heart disease	58 (17.3)	43 (12.9)	101 (15.1)
Diabetes mellitus	66 (19.6)	63 (18.9)	129 (19.3)
Mild/moderate asthma or COPD	40 (11.9)	40 (12.0)	80 (11.9)
Renal impairment	166 (49.4)	146 (43.7)	312 (46.6)
Mild	123 (36.6)	103 (30.8)	226 (33.7)
Moderate	43 (12.8)	43 (12.9)	86 (12.8)
PSI classification, n (%)	,	Ì	ì
Class III	257 (76.5)	256 (76.6)	513 (76.6)
Class IV	79 (23.5)	78 (23.4)	157 (23.4)
Bacteremia, n (%)	12 (3.6)	14 (4.2)	27 (4.0)
Baseline pathogen identified, microITT, n (%)	202 (60.1)	174 (52.1)	376 (56.1)

COPD, chronic obstructive pulmonary disease; ITT, intent-to-treat; microITT, microbiological ITT; PSI, Pneumonia Severity Index; SD, standard deviation

Treatment effect at the end of the treatment period in the ITT population



CI, confidence interval; ITT, intent-to-treat; LS mean, least square mean; QOL, quality of life; SF-36v2, 36-Item Short Form Survey version 2