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Iterum Therapeutics reveals new US maps highlighting antibiotic resistance ‘hotspots’

***Data show increasing rates of resistant gram-negative bacteria
The prevalence of quinolone-resistant infections tops 30 per cent
Results underscore the need for more effective, oral medicines***

DUBLIN, IRELAND –October 4, 2017 – Research presented this week by Iterum Therapeutics provides, for the first time, detailed maps by zip code showing the prevalence of bacteria in the US that are resistant to many newer antibiotics.

These heat-maps document the prevalence of common gram-negative bacteria that cause urinary tract infections in the community as well as more serious hospital onset infections. These are increasingly resistant to quinolones as well as to penicillins and cephalosporins, as a consequence of the production of extended spectrum beta-lactamases (ESBLs).

The findings were released today at the Infectious Disease Week conference in San Diego CA. Data collected from 571 hospitals and other health facilities across the United States show regional differences in resistance rates, with quinolone resistance exceeding 30 per cent and ESBL prevalence over nine per cent (Poster #400). Hotspots of resistance include southern California, Louisiana, Texas and New Jersey. [The maps and more details are at www.iterumtx.com](http://www.iterumtx.com).

The Infectious Disease Week poster also compared prevalence within hospitals. Rates were highest for in-patients (more than three days after admission or soon after discharge), compared to new admissions (fewer than three days after admission) and out-patients.

“Wherever possible, avoidance of hospitalization for infections caused by these organisms is much better for patients and the healthcare system,” said Dr. Michael Dunne, one of the research authors. “Outpatient care is much less expensive and protects against the dissemination of resistant pathogens within the hospital. But such care requires new antibiotics that are safe and effective and can be taken orally, rather than intravenously.”

“These results show high levels of resistance and just how urgent is the need for new antibiotics with good activity against ESBL-producing and quinolone-resistant pathogens.”

Dr. Dunne is Chief Scientific Officer at Iterum Therapeutics, which is developing sulopenem – a novel oral and intravenous antibiotic to treat gram-negative multi-drug resistant infections. Phase 3 clinical trials are expected to begin in 2018.

A second Infectious Disease Week poster from Iterum supports sulopenem’s use as a therapy against urinary tract and other infections (Poster #1839). The Phase 1 pharmacokinetics study documents that oral prodrug absorption is sufficient to exceed the

mean inhibitory concentrations (MICs) of the target resistant pathogens. Data also indicate that serum levels of the antibiotic can be significantly raised with co-administration of probenecid, and that patients are free to take their dose with food with the additional benefit of further increasing serum exposures.

Note to Editors:

About Iterum Therapeutics Limited

Iterum Therapeutics Limited is an Irish clinical-stage pharmaceutical company dedicated to developing differentiated anti-infectives aimed at combatting the global crisis of multi-drug resistant pathogens to significantly improve the lives of people affected by serious and life-threatening diseases around the world. Iterum is advancing its first compound, sulopenem, a novel penem anti-infective compound with oral and IV formulations in an IV only class of antibiotics that has demonstrated potent in vitro activity against a wide variety of gram-negative, gram-positive and anaerobic bacteria resistant to other antibiotics. Iterum has received QIDP designations for its oral and IV formulations for the treatment of uUTI, cUTI and cIAI. Iterum is led by a highly experienced team and backed by a blue-chip venture capital syndicate. For more information, please visit <http://www.iterumtx.com>.

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