

VINCENT T. ANDRIOLE

THE QUINOLONES

Third Edition

Edited by

VINCENT T. ANDRIOLE

Yale University School of Medicine



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*Ciprofloxacin serum concentrations achieved in humans serve as a surrogate endpoint reasonably likely to predict clinical benefit and provide the information for this indication.



To my family who have supported and encouraged me always and in everything.

To my colleague, Susan Marino, who has assisted me in all professional activities.

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PREFACE

Substantial progress has been made in the development of newer quinolones since the last edition of *The Ouinolones* was published. This progress occurred because the quinolone class of antibacterial agents has captured the interest of chemists, microbiologists, pharmacologists, and clinicians. Recent progress in molecular biology has provided new information and a better understanding of structure-activity relationships of the quinolone nucleus and its radicals. This progress has resulted in the approval of a few new compounds with improved mechanism of action and the potential for delaying the development of resistance by specific bacterial pathogens. A few of the newest quinolones developed recently moxifloxacin, gatifloxacin, and gemifloxacin—provide a more potent spectrum of activity that includes penicillin-resistant pneumococci as well as good activity against anaerobes and decreased susceptibility to the development of resistance by some bacterial species. Trovafloxacin was the first quinolone that demonstrated improved penetration into the central nervous system and cerebrospinal fluid, and early clinical studies demonstrated excellent efficacy in pediatric patients with bacterial meningitis. The newest quinolones—moxifloxacin, gatifloxacin, and gemifloxacin broaden the clinical utility of this class of antimicrobial agents as we enter an era of increasing bacterial resistance to the previously recommended "standard therapy." During this same period, we have learned much about quinolone toxicity as it relates to quinolone chemical structure and pharmacokinetics/pharmacodynamics in treated patients. Hopefully this knowledge will provide safer molecules for use in patients.

The excellent and very recent progress that has occurred warranted an update on the quinolones. This edition is intended to provide the newest and most cogent information on the quinolones—all of it readily available in one volume.

XX Preface

Once again, I am much indebted to my colleagues, each of whom contributed thorough reviews on the history, chemistry, and mechanism of action, *in-vitro* properties, mechanisms of bacterial resistance, pharmacokinetics, clinical overview (described in nine separate chapters, including pediatrics), toxicity, adverse effects and drug interactions, and the future prospects of the newer quinolones.

Clearly, our hope is that this work will serve as a ready resource for new and helpful information, and, in so doing, the efforts of my colleagues most certainly will have been worthwhile.

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CONTENTS

	Contributors	xv
	Preface	xix
1	The Quinolones: History and Overview	
	Peter Ball	
	Introduction	2
	Structure–Activity Relationships (SARs)	3
	Antibacterial Activity	6
	Mode of Action	6
	Spectrum of Activity	6
	Bacterial Resistance to Fluoroquinolones	8
	Clinical Pharmacology	9
	Penetration into Respiratory Tissues	10
	Elimination Pathways	11
	Pharmacodynamics of Quinolones	12
	Clinical Uses	12
	Urinary Tract Infections	12
	Sexually Transmitted Diseases	13
	Respiratory Infections	13
	Gastrointestinal Infections	14
	Skin and Soft Tissue Infections	15
	Bone Infections	15
	Neutropenic Cancer Patients	16
	Prophylaxis	16
	Pharmacoeconomic Aspects of Fluoroquinolone Usage	16
	Use of Fluoroquinolones in Pediatrics	17
	Adverse Drug Reactions	19

Contents

	Interactions with Other Drugs Interactions Reducing Absorption Metabolic and Inhibitory Interactions Conclusion References	22 22 23 23 24
2	Chemistry and Mechanism of Action of the Quinolone Antibacterials	
	Katherine E. Brighty and Thomas D. Gootz	
	Introduction Structural and Historical Background General Structural Features of the Quinolones First-Generation Quinolones Second-Generation Quinolones Third- and Fourth-Generation Quinolones In Vitro Potency In Vivo Activity Selectivity: Activity against Mammalian Topoisomerase II and Genetic Toxicity Chemical Properties Future Directions Compounds Lacking the C-6 Fluorine 2-Pyridones Alteration of Primary Enzymatic Target Mechanism of Action Replication of DNA Bacterial Topoisomerases Topoisomerase Sensitivity to Fluoroquinolones Killing of Bacterial Cells by Fluoroquinolones Conclusion References	34 34 35 36 38 42 43 51 55 57 57 59 60 61 61 63 71 75 81 82
3	Comparative In-Vitro Properties of the Quinolones	
	Introduction Gram-Negative Aerobes Enterobacteriaceae Other Gram-Negative Aerobes Gram-Positive Aerobes Anaerobes Miscellaneous Organisms	99 102 102 107 117 125 130

Contents		vii
	Conclusion References	132 132
4	Bacterial Resistance to Quinolones: Mechanisms and Clinical Implications	
	Thilo Köhler and Jean-Claude Pechère	
	Introduction Mechanisms of Quinolone Resistance Gram-Negative Bacteria Escherichia coli Salmonella spp. Klebsiella spp. Pseudomonas aeruginosa Neisseria gonorrhoeae Campylobacter spp. Helicobacter pylori Miscellaneous Gram-Positive Bacteria Staphylococcus aureus Streptococcus faecalis Mycobacteria Clinical Impact of Bacterial Resistance to Quinolones Prevalence of Quinolone Resistance Fluoroquinolone Resistance in Hospital Practice Fluoroquinolone Resistance in Community-Acquired Infections Quinolone Use and Emergence of Resistance	140 140 140 140 142 143 143 145 145 145 146 146 146 147 148 149 149 149 151 155
5	Pharmacokinetics and Pharmacodynamics of the Fluoroquinolones Myo-Kyoung Kim and Charles H. Nightingale	
	Introduction Basic Concepts of Pharmacokinetics and Pharmacodynamics Pharmacokinetics Absorption Distribution Elimination Special Population Drug Interactions	170 170 171 172 174 179 181 182

2 597	
viii	Contents
to-man	Contents

	Contents
Pharmacodynamics Bactericidal Activity: Time–Kill Curves Pharmacodynamic Surrogate Markers and Clinical Outcome Post-Antibiotic Effects Conclusion References	185 185 186 188 191
Use of Quinolones in Urinary Tract Infection and Prostatiti	is
Lindsay E. Nicolle	
Introduction Urinary Tract Infection Pharmacology Microbiology Clinical Studies Limitations of Available Studies Acute Uncomplicated Urinary Infection Acute Nonobstructive Pyelonephritis Complicated Urinary Infection Bacterial Prostatitis Conclusion References	203 204 207 207 209 209 213 214 215 218
Use of the Quinolones in Sexually Transmitted Diseases Richard P. DiCarlo and David H. Martin	
Introduction Gonococcal Infections Background In-Vitro Activity of Quinolones against Neisseria gonorrhoeae Clinical Studies Resistance of N. gonorrhoeae to the Quinolones Chlamydia trachomatis Background In-Vitro Activity of Quinolones against C. trachomatis Clinical Studies Pelvic Inflammatory Disease Chancroid Background In-Vitro Activity of Quinolones against Haemophilus ducreyi Clinical Studies Donovanosis Bacterial Vaginosis	228 229 230 230 233 235 235 235 235 239 239 240 241
	Bactericidal Activity: Time–Kill Curves Pharmacodynamic Surrogate Markers and Clinical Outcome Post-Antibiotic Effects Conclusion References Use of Quinolones in Urinary Tract Infection and Prostatit Lindsay E. Nicolle Introduction Urinary Tract Infection Pharmacology Microbiology Clinical Studies Limitations of Available Studies Acute Uncomplicated Urinary Infection Acute Nonobstructive Pyelonephritis Complicated Urinary Infection Bacterial Prostatitis Conclusion References Use of the Quinolones in Sexually Transmitted Diseases Richard P. DiCarlo and David H. Martin Introduction Gonococcal Infections Background In-Vitro Activity of Quinolones against Neisseria gonorrhoeae Clinical Studies Resistance of N. gonorrhoeae to the Quinolones Chlamydia trachomatis Background In-Vitro Activity of Quinolones against C. trachomatis Clinical Studies Pelvic Inflammatory Disease Chancroid Background In-Vitro Activity of Quinolones against Haemophilus ducreyi Clinical Studies

Contents	ix

	Special Toxicity Considerations When Quinolones Are	
	Used for Treating Sexually Transmitted Diseases	242
	Conclusion	243
	References	243
8	Treatment of Respiratory Infections with Quinolones	
	Paul B. Iannini, Michael S. Niederman, and Vincent T. Andriole	
	Introduction	255
	Clinical Issues in the Therapy of Respiratory Infection	257
	Community-Acquired Pneumonia	257
	Hospital-Acquired Pneumonia	260
	Acute Exacerbations of Chronic Bronchitis	261
	Pharmacological Advantages for the Use of Quinolones	
	in Respiratory Infection	262
	Penetration into Lung Tissue	262
	Mechanism of Killing	265
	Microbiologic Advantages of Quinolones for	
	Respiratory Infection	267
	Activity against Common Respiratory Pathogens	268
	Clinical Efficacy of Quinolones for the Therapy of	
	Respiratory Tract Infections	271
	Community-Acquired Pneumonia	271
	Hospital-Acquired Pneumonia	274
	Acute Exacerbations of Chronic Bronchitis	275
	Conclusion	276
	References	277
9	Use of Quinolones in Surgery and Obstetrics and Gynecolo	gy
	John Weigelt, Karen Brasel, and Sebastian Faro	
	Introduction	285
	Surgical Wound Prophylaxis	286
	Soft Tissue Infection	288
	Intraabdominal Infection	289
	Gynecologic Infections	291
	Postoperative Pelvic Infections	293
	Pelvic Inflammatory Disease	294
	Upper Genital Tract Infection	295
	Pregnancy	296
	Conclusion	297
	References	297
	References	291

X Contents

10	Use of the Quinolones for Treatment and Prophylaxis
	of Bacterial Gastrointestinal Infections

	of patternal Gastronitestinal Infections	
	Davidson H. Hamer and Sherwood L. Gorbach	
	Introduction	304
	Pharmacology	304
	Microbiology	304
	Effects on Human Intestinal Microflora	305
	Clinical Studies	305
	Empirical Therapy of Acute Diarrhea	305
	Traveler's Diarrhea	308
	Nontyphoidal Salmonellosis	309
	Typhoid Fever	310
	Shigellosis	312
	Cholera and Other Vibrios	314
	Campylobacter	315
	Antimicrobial Resistance to Quinolones	316
	Conclusion	317
	References	318
11	Use of the Quinolones in Treatment of Bacterial Meningitis	
	Rodrigo Hasbun and Vincent J. Quagliarello	
	Introduction	325
	Pharmacology	326
	In-Vitro Activity of Quinolones against Meningeal Pathogens	326
	CSF Penetration of the Quinolones in Vivo	328
	Microbiology	335
	Studies of Clinical Efficacy	336
	Case Reports	330
	Chemoprophylaxis of Meningococcal Meningitis	336
	Clinical Trial of Troyafloxacin	338

12 Use of the Quinolones in Immunocompromised Patients

Conclusion

References

Kenneth V. I. Rolston		
Introduction	343	
Risk Factors and Associated Infections	344	

339

339

Con	tents	xi
	Rationale for Fluoroquinolone Use Effect of Fluoroquinolones on Endogenous Microflora Infection Prevention in Afebrile Neutropenic Patients Empiric Therapy in Febrile Neutropenic Patients Risk-Based Therapy for Febrile Neutropenia Treatment of Specific Infections Legionellosis Mycobacterial Infections Miscellaneous Infections Conclusion References	346 347 348 350 352 354 356 358 359 360
13	Use of the Quinolones in Skin and Skin Structure (Osteomyelitis) and Other Infections	
	Adolf W. Karchmer	
	Introduction Skin and Soft Tissue Infection Pharmacology Microbiology Clinical Studies Bone and Joint Infection Osteomyelitis Pharmacology Microbiology Clinical Studies Septic Arthritis Conclusion References	371 372 373 374 378 379 380 382 388 389 390
14	Safety Overview: Toxicity, Adverse Effects, and Drug Interactions	
	Ralf Stahlmann and Hartmut Lode	• • • • • • • • • • • • • • • • • • • •
	Introduction Toxicity of Quinolones (Studies in Animals) General Remarks Effects on Connective Tissue Structures (Cartilage, Tendon) Neurotoxicity Phototoxicity, Photomutagenicity, and Photocarcinogenicity	398 399 399 400 404 403