

Bile Acid Concentrations in Healthy Volunteers Receiving Oral Omadacycline or Vancomycin

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BACKGROUND

- Antibiotic exposure has significant and long-lasting impacts on gut microbiota resulting in a loss of colonization resistance against pathogens such as Clostridioides difficile¹
- Antibiotic-induced gut microbiota changes lead to reduced conversion of primary to secondary bile acids²
- Reduced levels of secondary bile acids increase the likelihood of *C. difficile* spore germination and *C. difficile* infection (CDI) recurrence²
- Omadacycline, a tetracycline analog, has potent *in vitro* activity against *C. diffcile* but its effect on the host microbiome has not been studied in-depth in humans^{3,4}
- This study was designed to assess changes in bile acid concentrations in healthy volunteers given oral omadacycline compared to vancomycin, the most common antibiotic used to treat CDI

OBJECTIVE

 To compare primary and secondary bile acid concentrations in healthy volunteers receiving oral omadacycline or vancomycin

METHODS

Inclusion criteria

- Healthy subjects aged 18 to 45 years
- No significant past medical history
- No antibiotic use in the 28 days prior to enrollment

Study design

 Subjects were randomized to receive 10 days of oral omadacycline (450 mg daily on days 1 and 2 followed by 300 mg daily) or oral vancomycin (125 mg four times daily)

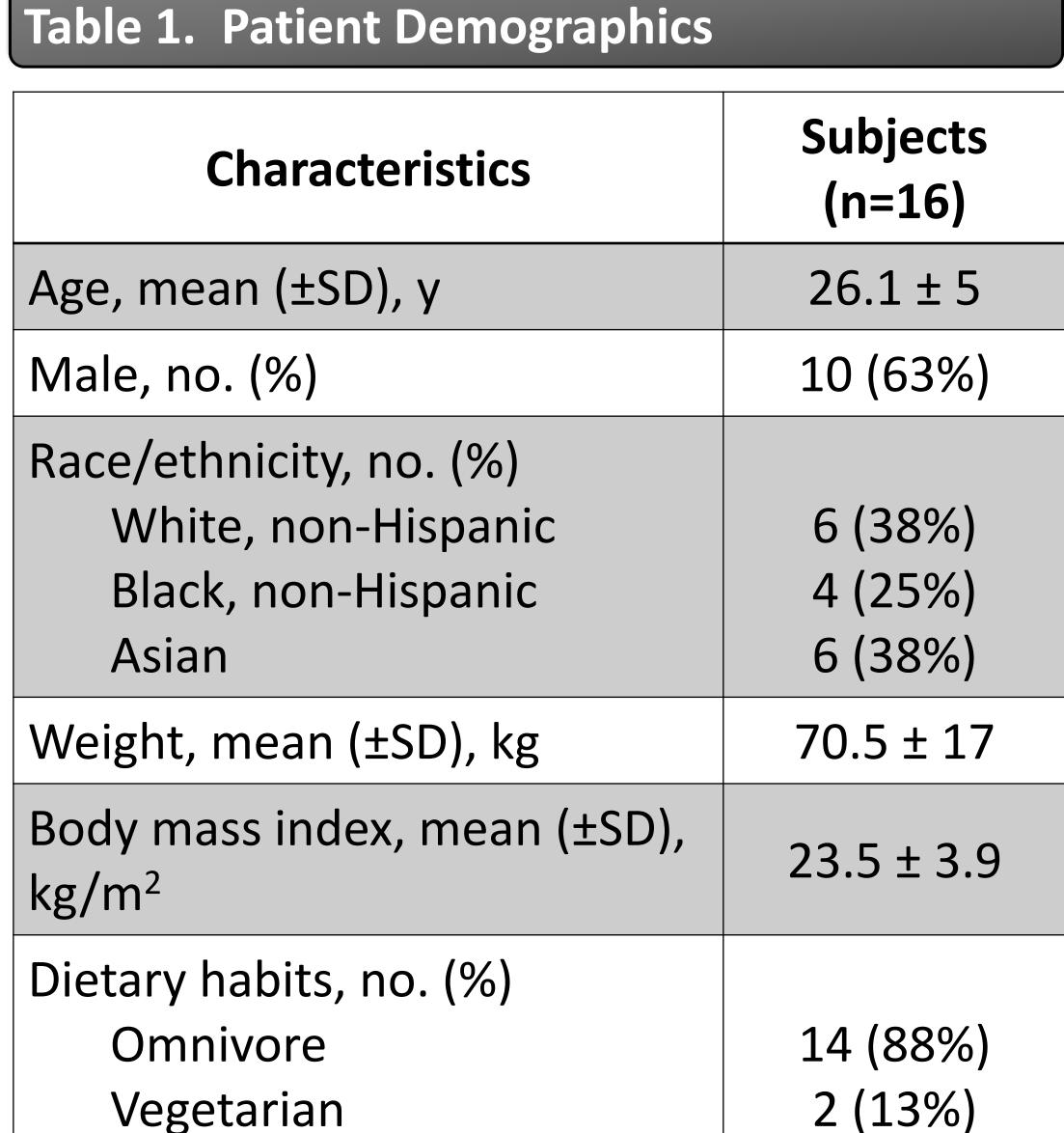
Sample collection

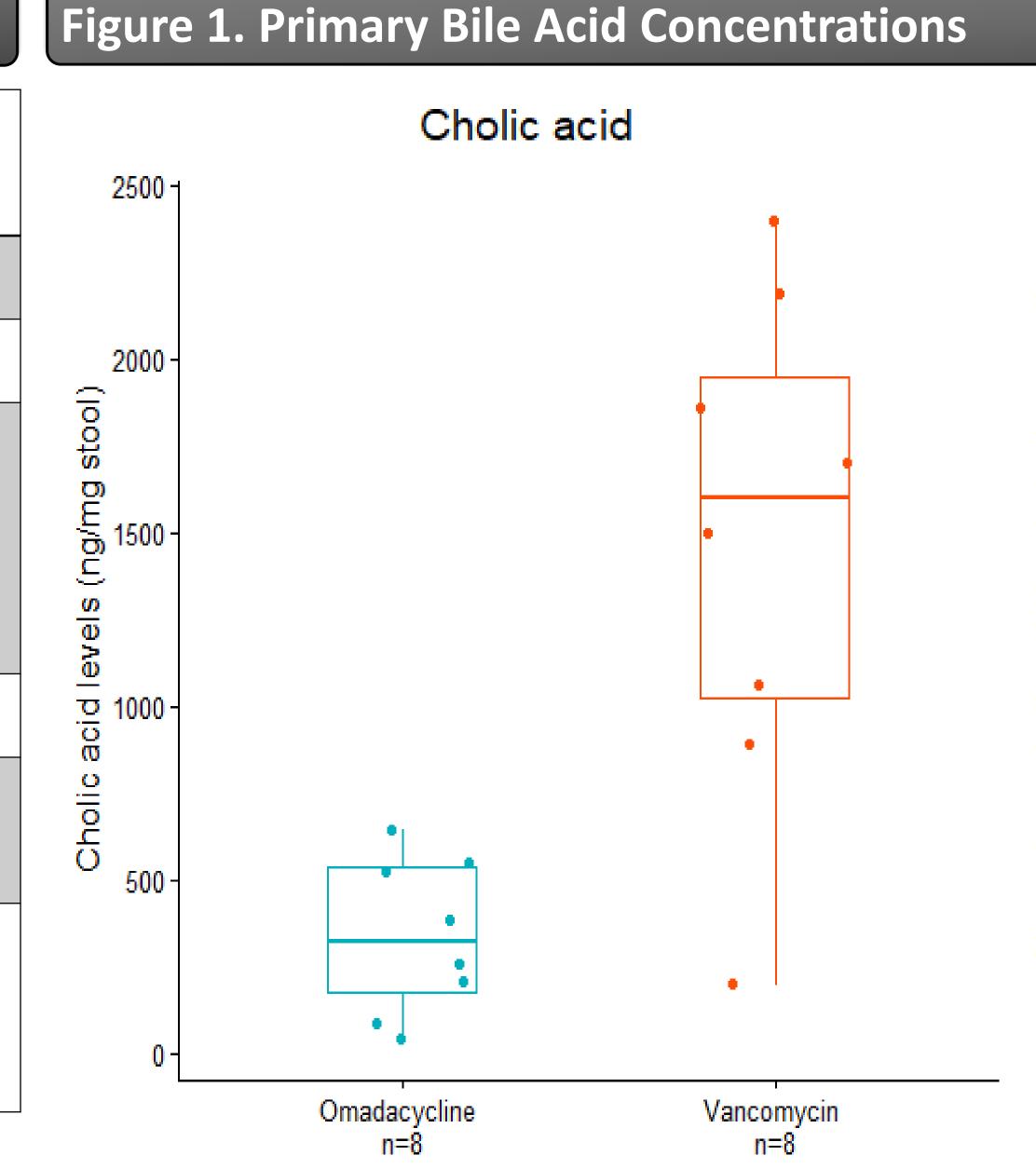
 Stool samples were collected at baseline, during antibiotic days, at end of therapy, and at follow-up visits

Bile acid analysis

- Targeted bile acids were extracted and quantified via liquid chromatography-mass spectrometry (LC-MS)
- For this analysis, stool samples collected at the end of therapy were analyzed for primary and secondary bile acids

RESULTS





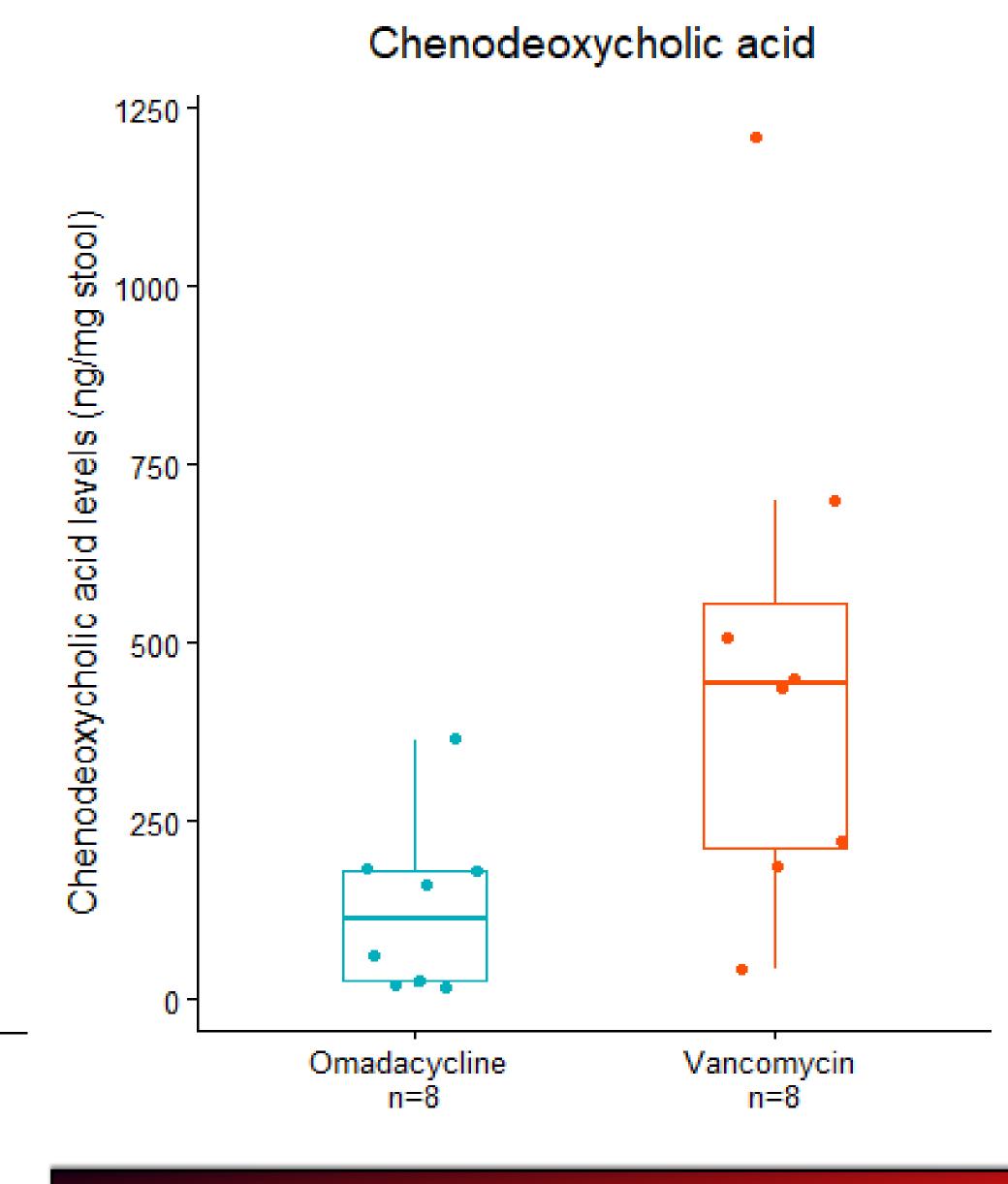
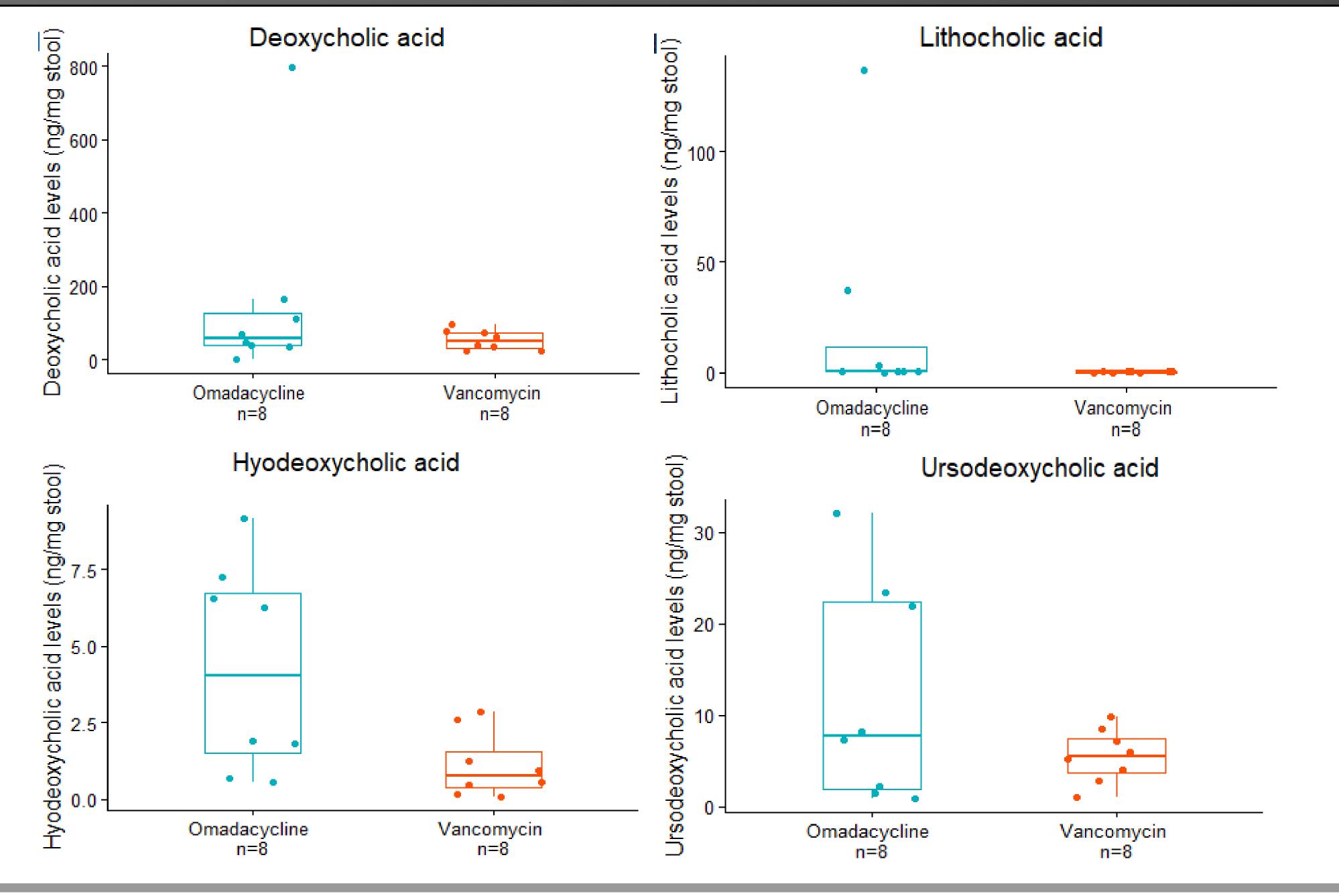


Figure 2. Secondary Bile Acid Concentrations



CONCLUSIONS

- Omadacycline preserved bile acid homeostasis in the gut to a higher extent than vancomycin, suggesting reduced microbiome dysbiosis
- The results of this study along with omadacycline's potent *in vitro C. difficile* activity and availability as an oral and IV formulation support future research for the treatment of CDI

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