Disclosures. C. Ford, Seres Therapeutics, Inc: Employee and Shareholder, Salary. M. Henn, Seres Therapeutics, Inc: Employee and Shareholder, Salary. T. Brust, Seres Therapeutics, Inc: Employee and Shareholder, Salary. L. Dia, Seres Therapeutics, Inc: Employee and Shareholder, Salary. J. Wortman, Seres Therapeutics, Inc: Employee and Shareholder, Salary. A. Tomlinson, Seres Therapeutics, Inc: Employee and Shareholder, Salary. K. Liton, Seres Therapeutics, Inc: Employee and Shareholder, Salary. P. Bernardo, Seres Therapeutics, Inc: Employee and Shareholder, Salary. B. McGovern, Seres Therapeutics, Inc: Employee and Shareholder, Salary. J. G. Aunins, Seres Therapeutics, Inc: Employee and Shareholder, Salary. D. N. Cook, Seres Therapeutics, Inc: Employee and Shareholder, Salary. M. Truchais, Seres Therapeutics, Inc: Employee and Shareholder, Salary.

1642. Safety and Efficacy of Bacteriophage Therapy: Analysis of Clinical Case Series Data
Saima Aslam, MD, MS; Timothy Gilber, MD; Susan Maddocks, MD; Sandra Morales, PhD; Susan Lehman, PhD; Steven Branson, PhD; Aleksandra Petkovic-Fahrian, PhD; Carrie-Lynn Langlais, PhD; Francisco Rosas, MS/RAC; Igor Bilinsky, PhD; Paul Grind, MD; Robert T. Schooley, MD, FIDSA and Jonathan Iredell, Professor,

Division of Infectious Diseases, University of California San Diego Health Centers, San Diego, California. 

Critical Infectious Diseases, Westmead Hospital, Sydney, Australia. 

Infectious Diseases, Westmead Hospital, Sydney, Australia, 

Research, AmpliPhi Biosciences, Sydney, Australia, 

Research, AmpliPhi Biosciences, Richmond, Virginia, 

Center for Infectious Diseases and Microbiology, Westmead Institute for Medical Research, Sydney, Australia. 

Regulatory Affairs, AmpliPhi Biosciences, San Diego, California, 

AmpliPhi Biosciences, San Diego, California, 

Medicine Infectious Diseases, University of California San Diego, La Jolla, California and 

Critical Infection, Westmead Institute for Medical Research, Sydney, Australia.

Session: 168. Novel Therapies for Superbugs
Friday, October 5, 2018: 2:00 PM

Background. Bacteriophage therapy (BT) is a re-emerging strategy to treat antibiotic-resistant infections. Here, we describe our initial experience with intravenous (IV) and inhaled BT to treat life-threatening Staphylococcus aureus and Pseudomonas aeruginosa infections not responding to antibiotic therapy. Emergency Investigational New Drug application approvals (United States) or Special Access Scheme Category A notifications (Australia) and informed consent from the patients were obtained.

Methods. Patients were treated with AB-SA01 (3-phrase product targeting S. aureus) and AB-PA01 (4-phrase product targeting P. aeruginosa) produced in a Good Manufacturing Practice-certified facility. Pre- and posttreatment bacterial isolates were obtained and susceptibility testing was performed. Combinant bacteriophages were obtained. Safety was assessed clinically and using laboratory parameters with up to 90 days of follow-up. Samples to assess bacterial loads, bacteriophage kinetics in blood, and immune responses to phage were collected.

Results. As of April 2018, 8 patients were treated with BT, 5 with AB-SA01 (bacteremia, n = 4; endocarditis, n = 1) and 3 with AB-PA01 (lung infection, n = 3). Median duration of BT was 14 days and treated patients received over 90 IV doses of AB-SA01 (3 × 10⁹ PFU/dose) and over 490 IV and nebulized doses of AB-PA01 (4 × 10⁷ PFU/dose). BT was well tolerated, with no treatment-related adverse events. Clinical treatment success was documented in 75% of patients. Isolates collected during therapy showed ongoing susceptibility to the BT products with changes in sensitivity to the individual phage components observed in some cases. Bacteriophage kinetics revealed bloodstream clearance within a few hours after IV infection of an infected initial bacteria/bacteriophage ratio of ~ 200 for the bacteremia patients.

Conclusion. BT was well tolerated as an adjunct to antibiotics, with several exam.

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1643. Pharmacodynamics (PD) of Daptomycin (DAP) in Combination Therapy for Entercoccal Bloodstream Infection (BSI)
Lindsay Avery, PharmD; Joseph L. Kuti, PharmD; Maja Weisser, MD; Adrian Egli, MD; Michael J. Rybak, PharmD, MPH, PhD; Ewan J. Zasowski, PharmD, MPH, BCPS; Cesar Arias, MD, PhD, FIDSA; German Contreras, MD; Pearlie C. Chang, MD, FIDSA; Martin Tomlinson, MD, FIDSA; Adam J. DiPippo, PharmD; Jann-Tay Wang, MD, PhD; Nicholas S. Britt, PharmD, MS; and David P. Nicolaou, PharmD, FCCP, FIDSA. 

"Citr for Anti-Infect. Res. and Dev., Hartford Hospital, Hartford, Connecticut, "Division of Infectious Diseases and Hospital Epidemiology, University Hospital Basel, Basel, Switzerland, "Department of Clinical Microbiology, University Hospital Basel, Basel, Switzerland, "Applied Microbiology Research, Department of Biomedicine, University of Basel, Basel, Switzerland, "Anti-Infective Research Laboratory, College of Pharmacy, School of Medicine, Division of Infectious Diseases, Wayne State University, Detroit, Michigan Practice, Department of Pathology, Division of Infectious Diseases, University of Houston College of Pharmacy, Houston, Texas, "Division of Infectious Diseases, University of Texas McGovern Medical School at Houston, Houston, Texas, "Division of Infectious Diseases, University of Texas Southwestern Medical Center, Dallas, Texas, "Division of Infection, Westmead Hospital, Sydney, Australia, "Center for Anti-Infective Research and Development, Hartford Hospital, Hartford, Connecticut and 

Session: 169. Respiratory and Gastroenteritis Viruses
Friday, October 5, 2018: 2:00 PM

Background. Respiratory syncytial virus (RSV) infection is a major public health burden for infants and the elderly worldwide. Currently, there are