problems, bodily pain, general health, vitality, social function, role limitations due to emotional problems, and mental health).

**Methods.** An exploratory analysis evaluated HRQoL in patients who received LEF or MOX in LEAP 1 (IV-PO treatment) and LEAP 2 (PO-only treatment). SF-12 was measured at baseline (BL) and test-of-cure (TOC; 5–10 days after last study drug dose). SF-12 outcomes assessed included the 8 domains, physical component summary (PCS), and mental component summary (MCS) scores. SF-12 scores were normalized to the 2009 US population reference mean (SD) of 50 (10). A 3-point change on any scale represents a clinically meaningful difference.

**Results.** Analysis included 1,215 patients (LEF n = 607; MOX n = 608). At BL, all mean SF-12 scores in both treatment groups were well below the US reference mean, indicating a low HRQoL level, consistent with the acute illness of the study population (see figure). Over time, meaningful and significant improvements from BL to TOC were observed in all domain, PCS, and MCS scores in both groups. Mean scores were close to the reference mean, indicating an average HRQoL level. No significant differences in mean score improvements from BL to TOC were seen for LEF vs. MOX. SF-12 score improvements at TOC across predefined subgroups (age, sex, number of comorbidities, study, and PORT risk class) were comparable between treatment groups.

**Conclusion.** Our data indicate that adults with CABP experienced HRQoL improvements with LEF that were comparable with MOX, and treatment with either agent resulted in return to normal HRQoL. When combined with overall study results, these data suggest LEF as a potential alternative to MOX for treatment of adults with CABP.

**Disclosures. All authors: No reported disclosures.**

678. Galactomannan Is a Biomarker of APX001 (Fosmanogepix) Efficacy in Treating Experimental Invasive Pulmonary Aspergillosis

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**Session:** 68. Novel Antimicrobials and Approaches Against Resistant Bugs

**Thursday, October 3, 2019: 12:15 PM**

**Background.** Invasive pulmonary aspergillosis (IPA) is a serious fungal infection afflicting immunocompromised patients. Galactomannan (GM) detection in biological samples using the Platelia ELISA has been shown to predict therapy response by azoles, and polyenes. We previously reported on the activity of APX001 (fosmanogepix) in treating murine IPA. Here, we investigated the potential use of GM as a biomarker of APX001 efficacy in an immunosuppressed murine model of IPA.

**Methods.** ICR mice (n = 8/group) were immunosuppressed with cyclophosphamide and cortisone acetate on days –2, and +3, relative to infection with Aspergillus fumigatus via inhalation. Treatment with placebo (diluent control), APX001 (104 mg/kg, PO, a human equivalent dose), or posaconazole (POSA, 30 mg/kg, BID [equivalent to 60–120 mg/kg in human]) began 16-hour post-infection and continued daily. To extend the half-life of APX001, mice were administered 50 mg/kg of the cytochrome P450 inhibitor 1-aminobenzotriazole (ABT) 2 hours prior to APX001 administration. Mice were sacrificed 48, 72, or 96-hour post-infection and their lungs, bronchoalveolar lavage (BAL) and sera were collected. Lung fungal burden was determined by colony equivalent (CE) using qPCR, while GM was determined using the Platelia ELISA.

**Results.** Compared with placebo, APX001 or POSA treatment resulted in a gradual decrease in tissue fungal burden over time with APX001 or POSA showing significant reduction as early as 96 and 72 hours, respectively (P < 0.005). Although the super-therapeutic dose of POSA resulted in faster reduction in lung fungal burden after 72 hours, both drugs resulted in similar reduction (~6–7 log) in lung CE vs. placebo (P < 0.02) (figure).

**Conclusion.** A human equivalent dose of APX001 and a super-humanized dose of POSA resulted in a time-dependent reduction of lung fungal burden and GM levels when compared with placebo. These results show that GM can be used as a biomarker of APX001 efficacy in immunosuppressed mice.

**Disclosures. All authors: No reported disclosures.**

679. In vitro Activity of Cefiderocol (CDEF), a Novel Siderophore Cephalosporin, Against Difficult-to-Treat-Resistant (DTR) Gram-Negative Bacterial Pathogens

From the Multi-National Sentinel Surveillance Study, SIDERO-WT (2014–2017)

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**Thursday, October 3, 2019: 12:15 PM**

**Background.** Cefiderocol (S309, Amplyx Pharmaceuticals, San Diego, California) is a novel siderophore cephalosporin in treating murine IPA. Here, we investigated the potential use of GM as a biomarker of APX001 efficacy in an immunosuppressed murine model of IPA.