

Emerging and antiviral-resistant influenza infections: new drug development and therapeutic options

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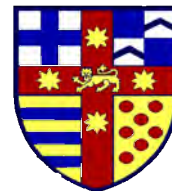
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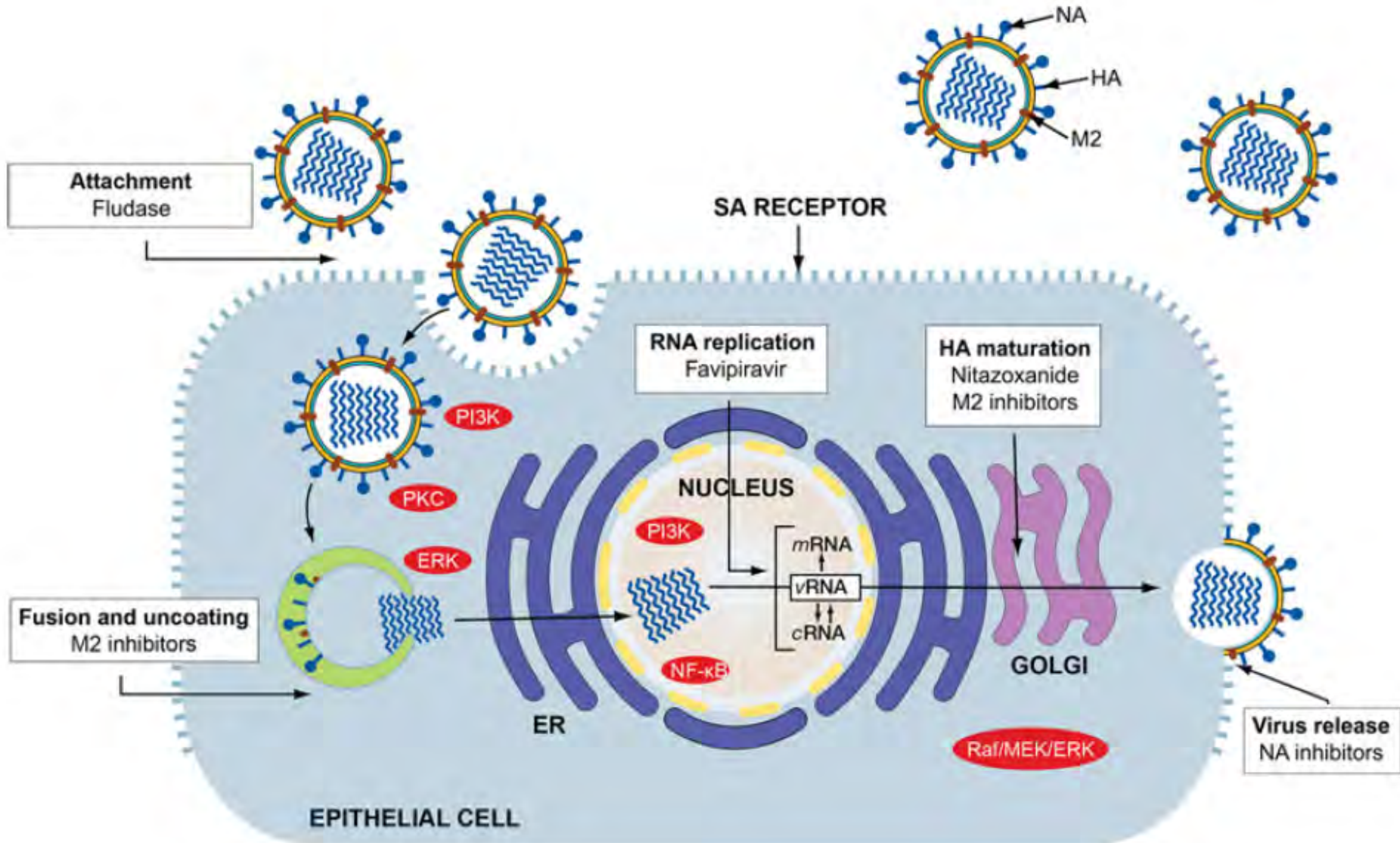
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Influenza virus replication inhibitors



Antivirals for influenza

| Class/agent | Brand name | Route |
|---------------------------------|-------------------|--------------------|
| M2 inhibitors | | |
| Amantadine | <i>Symmetrel</i> | <i>oral</i> |
| Rimantadine | <i>Flumadine</i> | <i>oral</i> |
| Neuraminidase inhibitors | | |
| Zanamivir | <i>Relenza</i> | <i>inhaled, IV</i> |
| Oseltamivir | <i>Tamiflu</i> | <i>oral</i> |
| Peramivir | <i>Rapivab</i> | <i>IV (IM)</i> |
| Laninamivir | <i>Inavir</i> | <i>inhaled</i> |

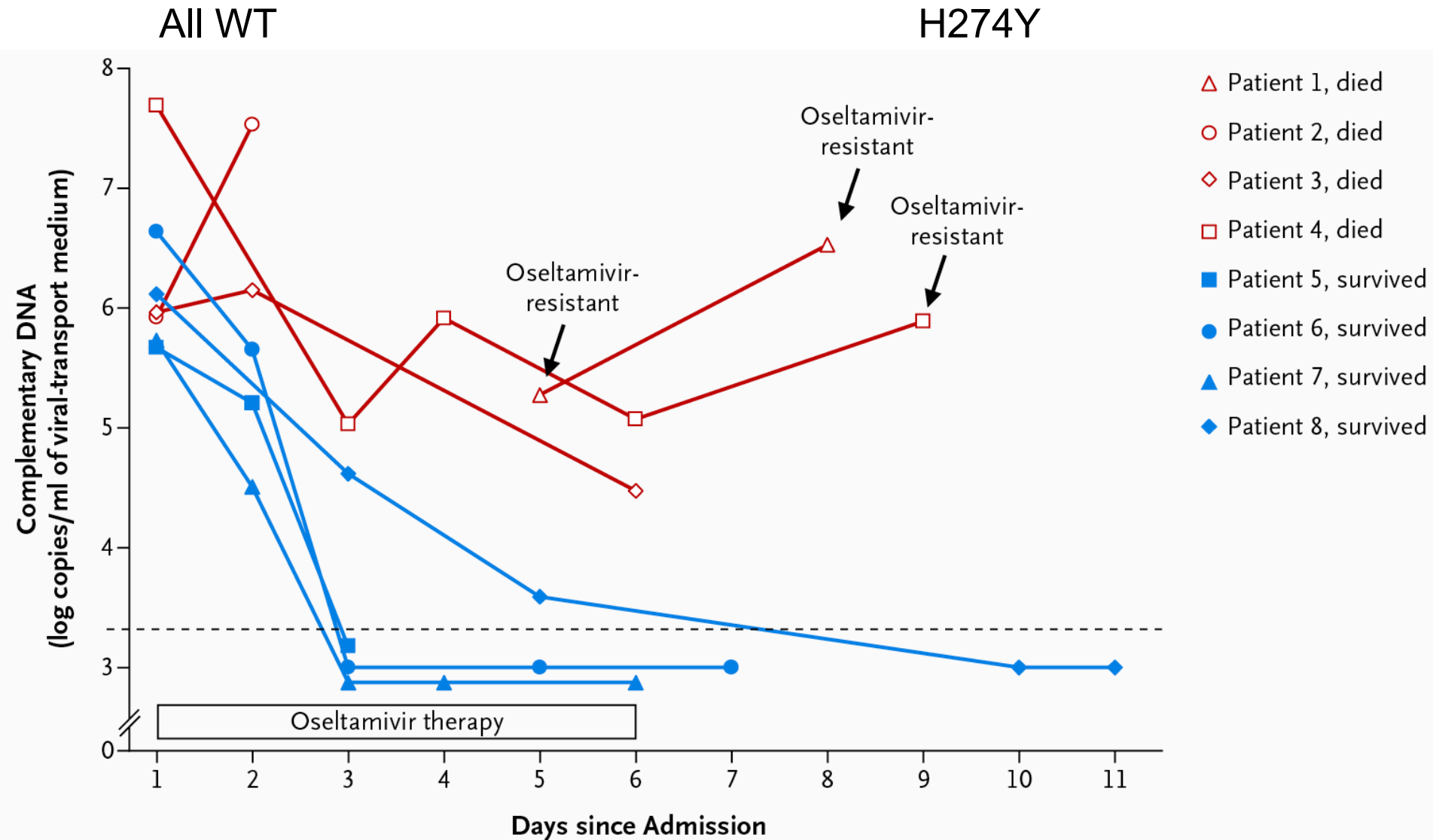
Antivirals for influenza

| Class/agent | Brand name | Route |
|---|-------------------|----------------|
| RNA polymerase inhibitors Favipiravir (T-305) | <i>Avigan</i> | <i>oral</i> |
| HA receptor inhibitors DAS181 | <i>Fludas</i> | <i>inhaled</i> |
| Immunomodulators Nitazoxanide | <i>Alinia</i> | <i>oral</i> |

'Intrinsic' antiviral drug resistance

| | Oseltamivir (Tamiflu) | Zanamivir (Relenza) | Adamantanes (amantadine) |
|--------------------------|---|------------------------|-------------------------------|
| H1N1 09 (‘swine’ flu) | sensitive | sensitive | <i>resistant</i> |
| H1N1 (seasonal) | <i>resistant (2B)</i> sensitive (2C) | sensitive sensitive | sensitive <i>resistant</i> |
| H3N2 (seasonal) | sensitive | sensitive | <i>mostly resistant</i> |
| B | sensitive | sensitive | n/a |

'Acquired' oseltamivir resistance in A/H5N1



How should we use antivirals in influenza treatment?

- Typical influenza-like illness (if <48 hours)
- Severe clinical illness
 - Admitted to hospital
 - Admitted to ICU
- Immunosuppressed patients
- Pregnant women
- After 48 hours of illness?
- As prophylaxis?
- Oral, inhaled, intravenous?

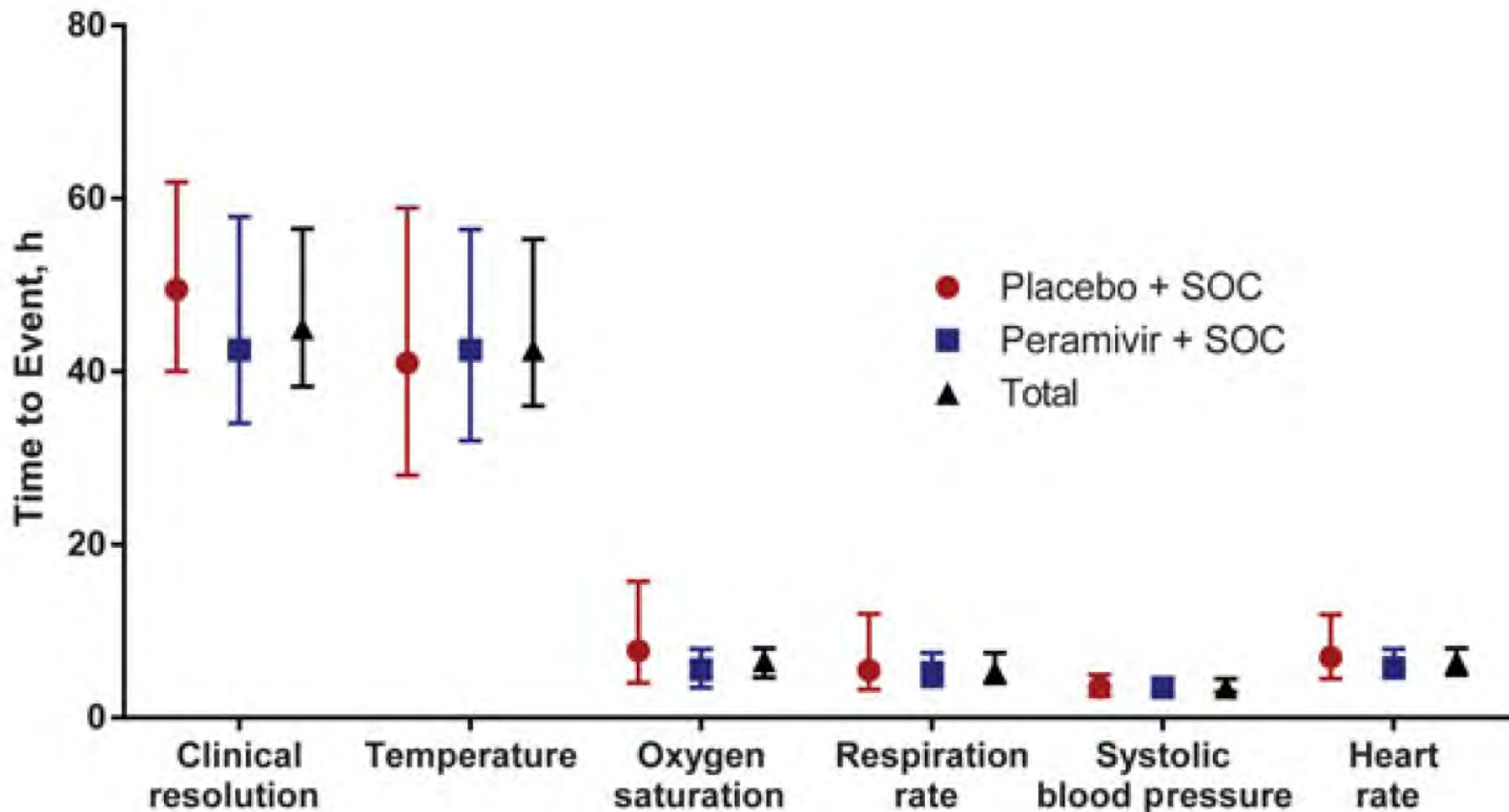
Measuring influenza antiviral efficacy is difficult

- *In vitro* tissue cultures
- Various animal models
- Human studies
 - Healthy adults and children
 - Outpatients and hospitalised patients
 - At-risk groups
- Measures of efficacy
 - Clinical markers
 - Complications
 - Laboratory confirmation and markers

Peramivir

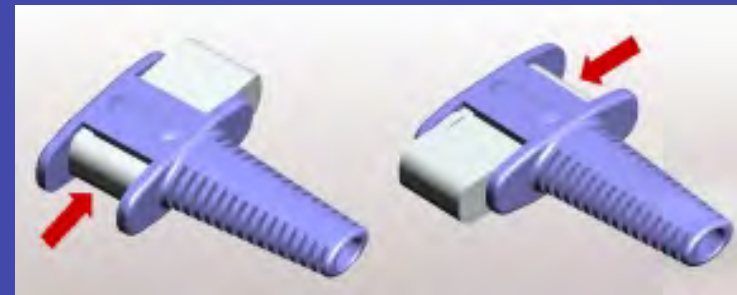
- IV single, or daily dosing for 5 days
- IM dosing unsuccessful
- Tight binding to NA, with slow dissociation
- Resistance profile similar to oseltamivir (H275Y)

Time to clinical resolution in peramivir vs non-NAI treated hospitalised patients

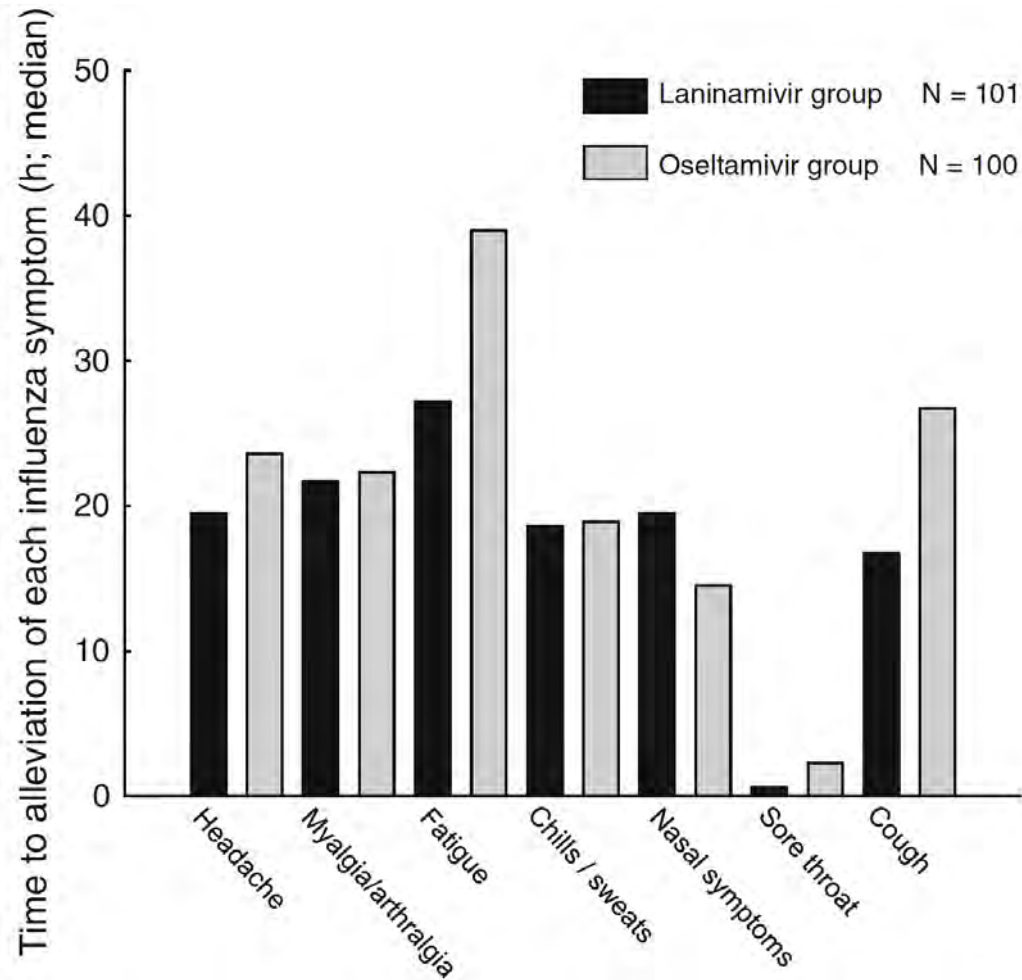


Laninamivir

- Laninamivir octanoate
- Inhaled (20-40mg) with high lung concentrations for 5 days
- Similar to zanamivir
- Use in oseltamivir-resistant seasonal A/H1N1



Time to alleviation of symptoms in patients with chronic respiratory disease (single dose LMV vs OTV for 5 days)



Favipiravir (T-705)

- Purine analogue
 - targets influenza RNA-dependent RNA polymerase
 - tri-ribosephosphorylated (FVP-RTP) via cellular enzymes
- Efficacy against
 - A(H1N1)pdm09, H3N2, H5N1, H7N9, influenza B
 - oseltamivir (H275Y), pan-NI (E119D) and M2 inhibitor resistant strains
- *In vitro*
 - synergy with oseltamivir
 - efficacy against many RNA viruses (arenaviruses, phleboviruses, hantaviruses, flaviviruses, enteroviruses, alphavirus, RSV, noroviruses)
- Limited human data

DAS181 (Fludas)

- Conjugated sialidase that removes human (α 2,6-) and avian (α 2,3-) linked sialic acid from cell receptors
- *In vitro* effectiveness against
 - A(H1N1)pdm09, A(H5N1), A(H7N9), influenza B
 - oseltamivir-resistant (H275Y) strains
- Efficacy against parainfluenzaviruses

Time to ≥ 1 log drop in sustained viral shedding from day 1

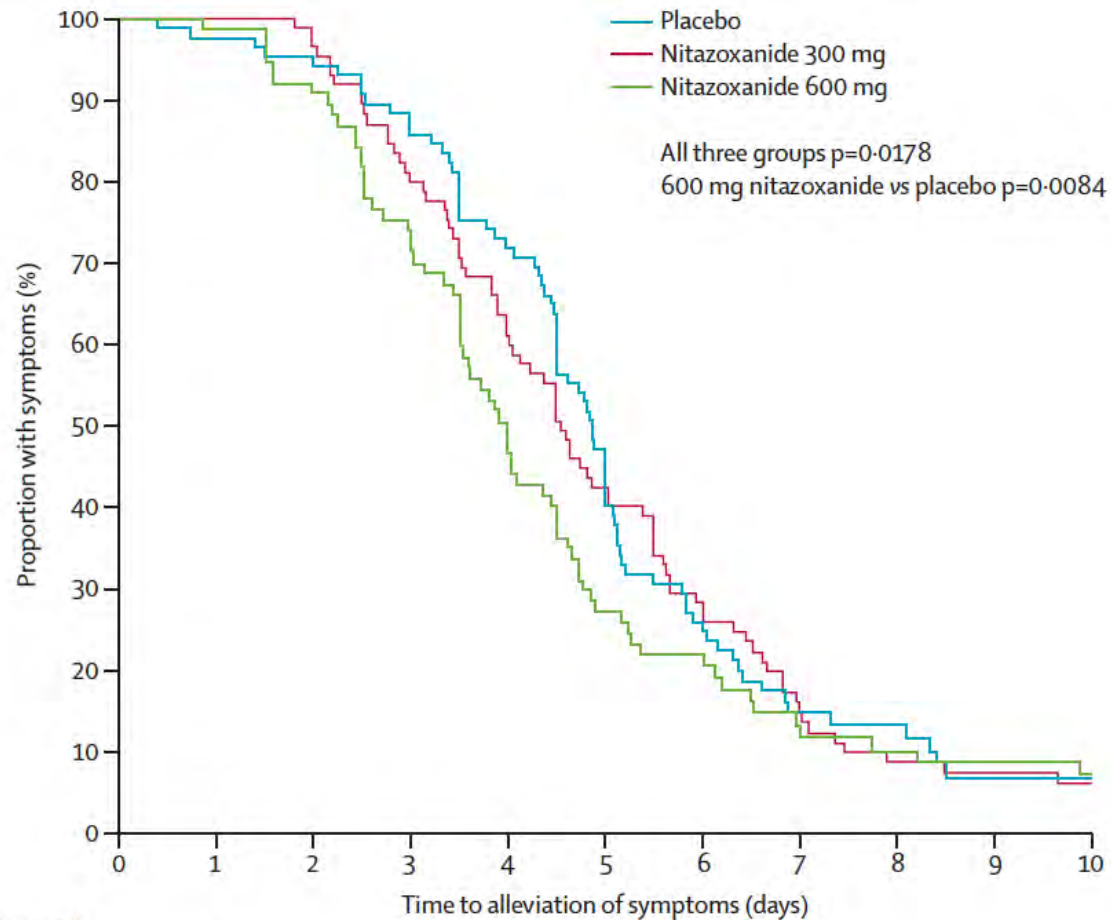
| | Multiple Dose DAS181 (N = 56) | Single Dose DAS181 (N = 69) | Placebo (N = 52) |
|--|----------------------------------|--------------------------------|---------------------|
| Time to ≥ 1 log drop sustained (days) | | | |
| Event ^b /censored ^c | 49/7 | 56/12 | 39/13 |
| Median time | 2 | 4 | 4 |
| 95% confidence interval | (1, 4) | (2, 4) | (4, 5) |
| Log-rank test ^a | | | |
| <i>P</i> value | .007 | .164 | |

(NB: change in ILI symptoms not significant)

Nitazoxanide

- Oral anti-parasitic agent
- Mode of action
 - immunomodulatory effects: upregulates interferon and INF-inducible genes
 - blocks HA maturation
- A(H1N1)pdm09, A/H3N2, influenza B
- *In vitro* synergy with oseltamivir
- *In vitro* activity against parainfluenzaviruses, coronaviruses, RSV

Time from first dose of nitazoxanide to alleviation of symptoms in confirmed influenza infection



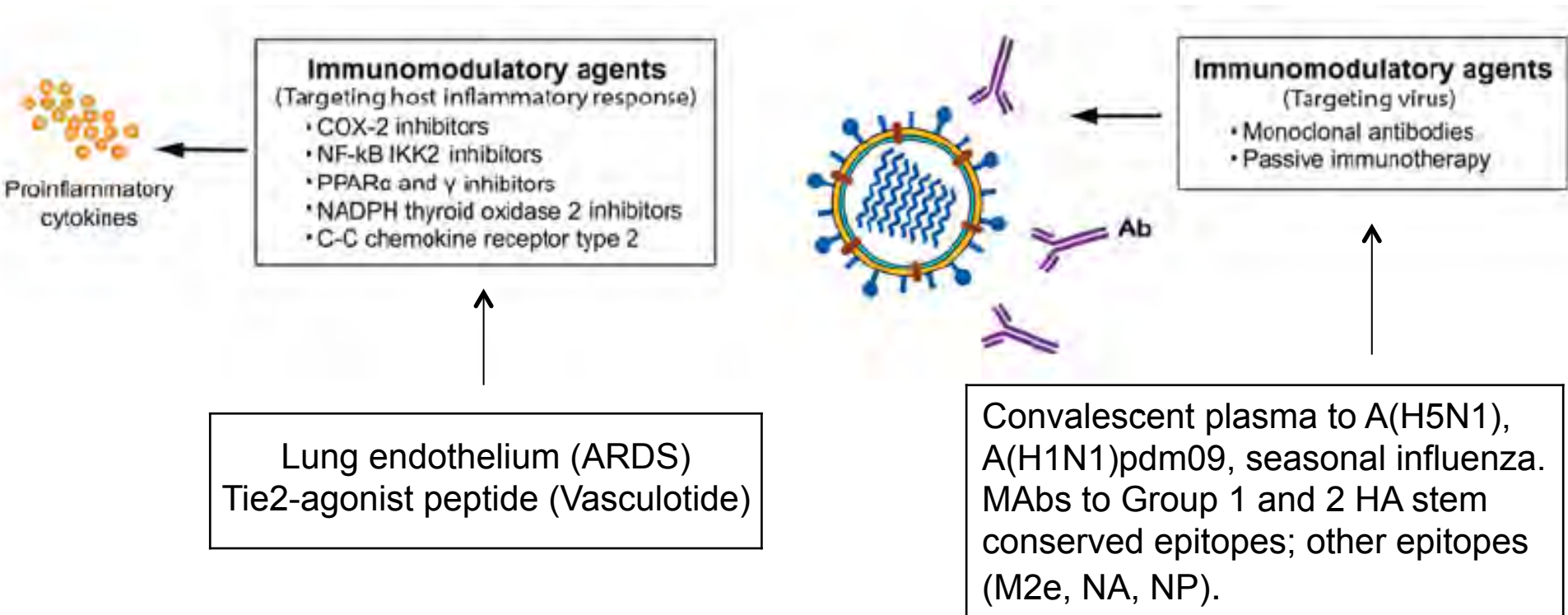
| | Number with symptoms (at risk) at each timepoint | | | | | | | | | | |
|---------------------|--|----|----|----|----|----|----|----|---|---|----|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Placebo | 87 | 83 | 81 | 74 | 61 | 38 | 21 | 11 | 8 | 4 | 4 |
| Nitazoxanide 300 mg | 89 | 87 | 83 | 68 | 52 | 36 | 24 | 12 | 7 | 6 | 5 |
| Nitazoxanide 600 mg | 79 | 76 | 70 | 55 | 36 | 21 | 14 | 8 | 7 | 6 | 5 |

Antiviral combinations in clinical trials

| | Drugs tested | Target population |
|--|---|--|
| Pharmacokinetic interactions | Oral oseltamivir + oral amantadine (NCT00416962) | Healthy volunteers |
| | Oral oseltamivir + oral favipiravir (unpublished) | Healthy volunteers |
| | Intravenous peramivir + oral rimantadine ⁴³ | Healthy volunteers |
| | Intravenous peramivir + oral oseltamivir ⁴³ | Healthy volunteers |
| | Intravenous zanamivir + oral oseltamivir ⁴⁴ | Healthy volunteers |
| | Oral amantadine + oral ribavirin + oral oseltamivir (NCT00867139) | Healthy volunteers |
| Completed controlled trails of clinical efficacy | Oral rimantadine + nebulised zanamivir ⁴ | Hospitalised adults |
| | Oral oseltamivir + inhaled zanamivir ⁴² | Ambulatory adults |
| | Oral oseltamivir + pH1N1 convalescent plasma ⁴⁵ | Critically ill patients |
| | Oral oseltamivir + pH1N1 hyperimmune globulin (NCT01617317) | Critically ill patients |
| | Oral oseltamivir + maxingshigan/yinqiaosan (NCT00935194) | Ambulatory adults |
| | Oral oseltamivir + sirolimus + corticosteroids ⁴⁶ | Critically ill patients |
| Continuing randomised controlled trials of clinical efficacy | Oral amantadine + ribavirin + oseltamivir (TCAD; NCT01617317) | Critically ill patients |
| | Oral oseltamivir + convalescent plasma or hyperimmune globulin (NCT01052480) | Hospitalised adults High-risk outpatients |
| | Oral amantadine + ribavirin + oseltamivir (TCAD; NCT01227967) Oseltamivir + nitazoxanide (NCT01610245) | Ambulatory adults |

TCAD= triple combination antiviral drug.

Modulation of host immune responses



Further *in vitro* approaches

- RNA inhibition with siRNAs (eg. AVI-7100 to M1 and M2 mRNAs)
- Novel M2 inhibitors, NS1, polymerase PB2 (VX-787), nucleoprotein
- Targeting cellular signaling pathways
- Adjunctive treatments eg steroids, aspirin, statins etc

Hayden FG, Inf Other Resp Viruses 2012;7:63

Webster RG et al. Ann NY Acad Sci 2014;1323:115

Byrn RA et al. Antimicrob Agents Chemother 2015;59:1569

Ongoing issues with antivirals

- Careful messaging about clinical use
 - linkage with infection control measures
- Drug resistance monitoring and determining phenotypic significance of mutations
- No clear approach to treating drug-resistant infections
- Multiple causes of treatment failure other than resistance
- How is efficacy measured?
- Adverse effects, availability and cost

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