Analysis of Outcomes by Geographic Region of Enrollment in STRIVE, the Phase 2 Trial of Rezafungin for the Treatment of Candidemia and Invasive Candidiasis (IC)

P.M. HONORE[1], J. FORTUN[2], A. SKOUTELIS[3], R. VIANI[4], T. SANDISON[4]

[1]CHU Brugmann University Hospital, Brussels, Belgium; [2]University Hospital Ramon y Cajal, Madrid, Spain; [3]General Hospital of Athens Evangelismos; [4]Cidara Therapeutics, Inc., San Diego, CA, USA

INTRODUCTION

Rezafungin is a novel echinocandin in Phase 3 development for treatment of candidemia and invasive candidiasis (IC)[1] and for prophylaxis against invasive fungal disease caused by *Candida*, *Aspergillus*, and *Pneumocystis* in bone and marrow transplantation.[2] STRIVE (NCT02734862) is the global, Phase 2 trial of once-weekly IV rezafungin for treatment of candidemia and/or IC versus standard-of-care (IV caspofungin+optional oral fluconazole).[3]

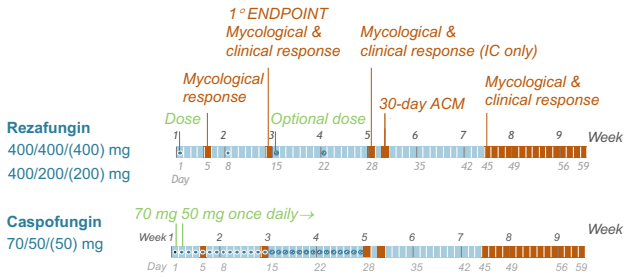
OBJECTIVES

Data from the complete STRIVE trial were evaluated for differences by geographic region.

METHODS

Patients were randomized to 1 of 3 groups (Fig 1).[3] Data were stratified by region of enrollment (Europe [EU] or North America [NA]) and analysed by patient demographics, baseline characteristics, treatment patterns, and efficacy outcomes.[5]

Figure 1. STRIVE Trial Design



RESULTS

Patient Population (ITT Population – all randomized)

- Patients in the EU were on average older, weighed less, and had lower BMI (Table 1)
- EU population was 93.1% white; the NA population comprised 23.7% Black or African-American patients
- Rate of IC was 26.35 in NA vs 17.6% in EU

Table 1. Demographics and baseline characteristics (ITT)

Parameter		Rezafungin 400/400 mg QWk	Rezafungin 400/200 mg QWk	Caspofungin 70/50 mg QD	TOTAL
Male, n/N (%)	EU	32/54 (59.3)	21/34 (61.8)	27/43 (62.8)	**80/131 (61.1)**
	NA	12/27 (44.4)	15/23 (65.2)	11/26 (42.3)	**38/76 (50.0)**
Age, y mean (range)	EU	64 (26-88)	66 (36-91)	63 (24-93)	**64 (24-93)**
	NA	51 (24-87)	51 (24-74)	54 (27-85)	**52 (24-87)**
No. patients ≥65 y (%)	EU	28 (51.9)	20 (58.8)	22 (51.2)	**70 (53.4)**
	NA	4 (14.8)	5 (21.7)	7 (26.9)	**16 (21.1)**
Weight, kg mean ± SD	EU	76.5 ± 17.3	71.6 ± 21.3	72.8 ± 15.4	**74.0 ± 17.8**
	NA	79.8 ± 33.0	81.5 ± 26.3	80.1 ± 20.6	**80.4 ± 26.9**
BMI, kg/m² mean ± SD	EU	26.6 ± 5.31	25.2 ± 6.65	25.7 ± 5.24	**25.9 ± 5.63**
	NA	27.5 ± 10.0	29.0 ± 10.4	28.2 ± 6.0	**28.2 ± 8.9**
APACHE II score mean ± SD	EU	13.5 ± 6.5	13.8 ± 6.2	15.4 ± 7.8	**14.2 ± 6.9**
	NA	13.1 ± 8.3	14.6 ± 7.6	11.6 ± 6.1	**13.1 ±7.4**

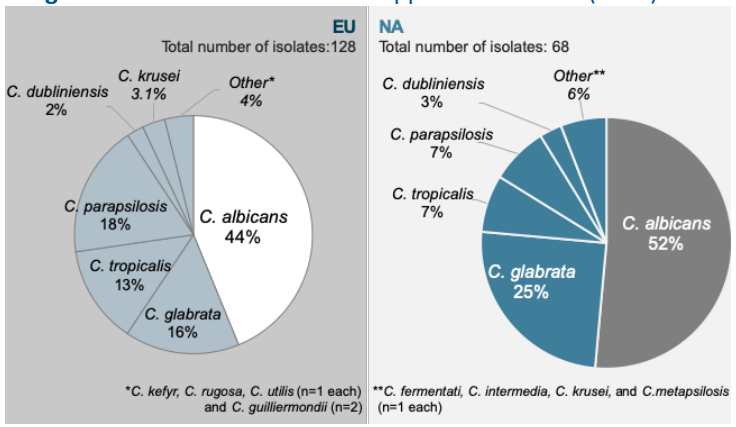
Treatment Patterns (Safety Population)

- 55% of patients received 8–14 days of IV treatment
- The duration of IV treatment exceeded 14 days in 27% of EU patients and 18% of NA patients.
- A smaller proportion of EU patients were switched to oral step-down vs NA (24.4% vs 42.7%, respectively).

Distribution of Candida at Enrollment (mITT Population)

- The leading *Candida* species at baseline showed differing distributions by region (Figure 2)

Figure 2. Distribution of Candida spp. at Enrollment (mITT)



Efficacy – Overall Response at Day 14 (mITT Population)

- Rates were comparable between regions, except for patients in the rezafungin 400 mg/200 mg group (Table 2).

Table 2. Overall response by treatment group and region (mITT)

Overall Response at Day 14	n/N (%)		
	Rezafungin 400/400 mg QWk	Rezfungin 400/200 mg QWk	Caspofungin 70/50 mg QD
EU - Success	32/53 (60.4)	24/29 (82.8)	27/39 (69.2)
Excl. indeterminates*	32/51 (62.7)	24/28 (85.7)	27/39 (69.2)
NA - Success	14/23 (60.9)	11/17 (64.7)	14/22 (63.6)
Excl. indeterminates*	14/15 (93.3)	11/15 (73.3)	14/19 (73.7)

*Excludes patients for whom outcome could not be assessed due to missing data point(s).

CONCLUSIONS

- The Phase 2 STRIVE trial demonstrated few differences by region in demographic and baseline characteristics
- Non-*albicans Candida* species were predominant in the EU
- Efficacy outcomes showed no consistent trends; interpretation of efficacy-related differences are limited by group size
- This analysis by geographic region may inform future evaluation of data from the rezafungin clinical trial program

REFERENCES

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CONTACT

Prof. Patrick M. Honore, MD, PhD, FCCM
patrick.honore@chu-brugmann.be

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Intent-to-treat (ITT) : all randomized | Safety : all who received any amount of study drug | Microbiological ITT (mITT): all in safety population with documented *Candida* infection