

Fosfomycin not noninferior to comparators for bacteremic UTI

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(HealthDay)—For patients with bacteremic urinary tract infections

(bUTIs) due to multidrug-resistant (MDR) *Escherichia coli*, fosfomycin is not noninferior to comparators, with an increased rate of adverse event-related discontinuations, according to a study published online Jan. 13 in *JAMA Network Open*.

Jesús Sojo-Dorado, M.D., Ph.D., from the Universidad de Sevilla in Spain, and colleagues conducted a [randomized trial](#) at 22 hospitals from June 2014 to December 2018 involving 161 adults with bUTI due to MDR *E. coli*. Participants were randomly assigned to receive intravenous [fosfomycin](#) disodium (70 participants) or a comparator (ceftriaxone or meropenem if resistant; 73 participants).

The researchers found that 68.6 and 78.1 percent of the patients treated with fosfomycin and comparators, respectively, reached clinical and microbial cure (risk difference, -9.4 percentage points). Clinical or microbiological failure occurred among 14.3 and 19.7 percent of fosfomycin- and comparator-treated patients, respectively (risk difference, -5.4 percentage points). The rate of adverse event-related discontinuations was increased with fosfomycin versus comparators (8.5 versus 0 percent).

"Fosfomycin did not demonstrate noninferiority in the treatment of bUTI caused by MDR *E. coli*," the authors write. "However, the data suggest that the drug is effective and may be considered among selected [patients](#), particularly those without previous heart disease and with low risk of sodium overload-related problems."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

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