

Point-of-Care diagnostic to guide the use of antibiotics



- A 10 minute test used at the “Point-of-Prescription”
- Phenotypic susceptibility based
- Selecting the right antibiotic for each patient

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Company, Management & Investment

Spin out from University of Manchester, April 2014



Technology Founders:

Roy Goodacre

Mat Upton

Professor of Biological Chemistry, Manchester

Associate Professor in Medical Microbiology, Plymouth

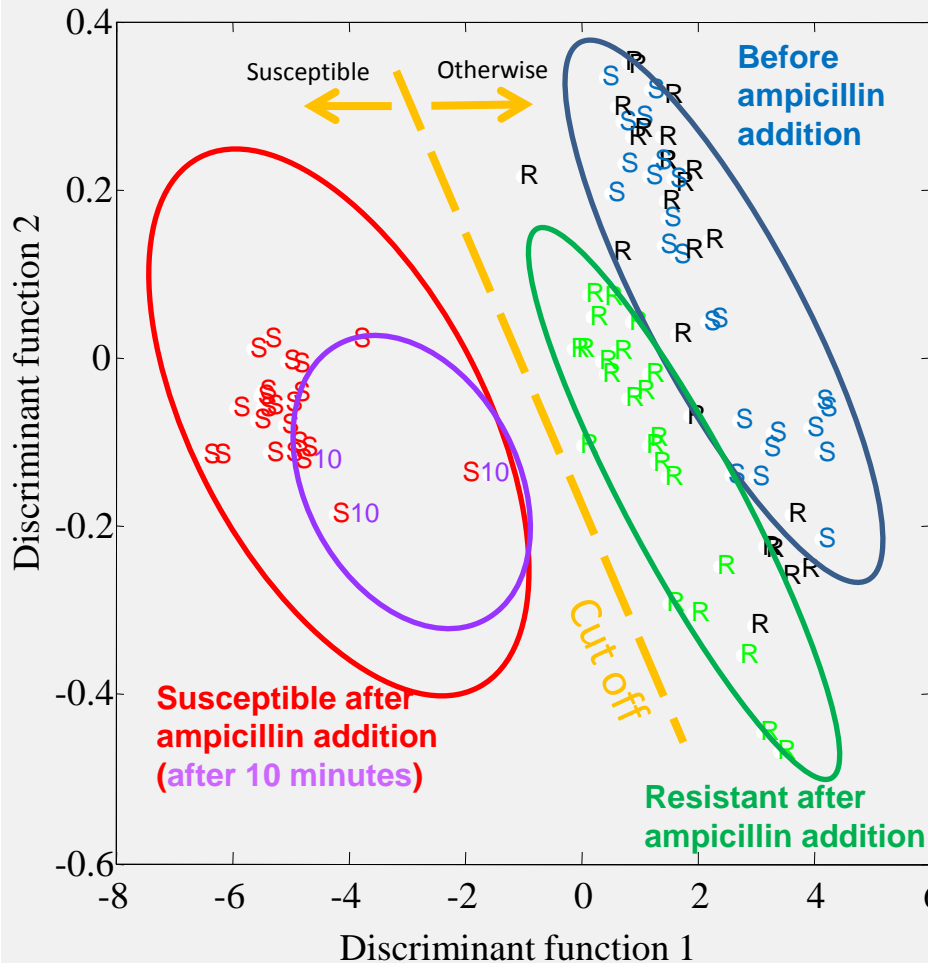
Other Directors:

Neil Butler (Chairman)

Ian George

Atlas Genetics (prev. Vivacta/Novartis)

New Wave Ventures



- Spectroscopy & chemometrics to differentiate susceptible (S) from resistant (R)
- Demonstrated with large collections of *E. coli* & also with other genera

Positive Predictive Values (susceptibility)		
	FT-IR (75 min)	UV-Vis (30min)
Ampicillin	90.6%	88.66%
Trimethoprim	89.4%	92.47%
Ciprofloxacin	98.4%	98.21%

- Method optimisation on-going
- Discussing instrument development

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Product design – System

- Small footprint
- Low power, battery operated



- Carried out within the doctor-patient consultation window – tailored prescription for all UTI cases

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Product design – UTI menu

Improved stewardship – test will bring retired drugs back into play

- Use old (opportunistic) drugs first,
- Take pressure off front line drugs & preserve last line drugs

	Antimicrobial	Relevance	Resistance	Dose	US Cost	
					Per day	Per treatment
Opportunistic	Amoxicillin	Past 1 st line β lactam	Circa 50%	500 3x 10 days	\$1.50	\$15.00
	Tetracyclines	Early	Circa 40%	250 4x 7-10 days	\$1.50	\$10-15.00
Current First line drugs	Trimethoprim-sulfamethoxazole	TMP-SMX is 1 st line	30% in some populations	Oral: 160/800 2x, 5days	\$3.88	\$19.40
	Nitrofurantoin	1st line after TMP-SMX	Low	Oral 100 2x 7-10 days	\$17.13	\$120-171.30
Nationally licensed	Fosfomycin	1 st line US and Spain	Low	Oral 3g single	\$36.49	\$36.49
Second line	Cephalasporin		Growing	500 2x 7-10 days	\$6.50	\$45.50-65.00
	Ciprofloxacin	hospitalised – complicated UTI	11-50%	Oral 250 2x 3days	\$10.15	\$30.45
	Co-amoxiclav	complicated UTI/pyelonephritis	5-10%	3-7 days	\$17.87	\$53.61-125.09

Trend Analysis:

Local epidemiology data for up to 8 antibiotics per test

This data is of value to:

Epidemiologists and anti-infective drug developers

Request resistance data by application:









- Local to instrument
- Local to LAN eg. Oxford, UK, or EU
- Global for all networked instruments

All data has consistency due to common cartridge format, measuring like for like globally



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Competitive technologies

		Turnaround time	Genotype or Phenotype	Consumable COG	Instrument COG	Setting
Lab methods used today						
Culture Disc diffusion		24hrs +	Phenotype	\$1	\$10k	Lab
Closed tube broth dilution		5- 8 hrs	Phenotype	\$1	\$30k	Lab
Mass Spec		<1 hr, in future?	Phenotype	\$1	\$500k	Lab
Mol Dx		Circa 1 hr	Genotype	\$5+	\$30k	Lab / decentralised
Technologies in development/early use		Clear differentiation, allowing use at Point-of-Prescription				
Spectromics		10 mins	Phenotype	\$1	\$1.5k	PoC or Lab
Accelerate Dx		6 hrs	Phenotype	\$6	\$30k	Lab
GeneWeave		4 hrs	Phenotype	\$2	\$30k	Lab
FirstLight Bio		3hrs	Phenotype	\$2	\$30k	Lab

