Dalbavancin was well tolerated when administered IV as a loading dose of 1000 mg followed by 500 mg weekly doses for a total of up to 8 weeks. All subjects received dalbavancin 1000 mg on Days 1, 8, 15, and 22; Cohort 2 received additional 500 mg IV doses on Days 29 and 36; and Cohort 3 received additional 500 mg IV doses on Days 43 and 50. Drug was administered intravenously over 30 minutes. Standard safety parameters were monitored throughout the study.

Results: For the dalbavancin 500 mg IV dose given on the last day of dosing, the Cmax (μg/mL) was 10202.82, 12992.79 and 12173.30 and the Cmax was 160.00, 187.00 and 179.67 in Cohorts I, II and III respectively. The calculated elimination curve reflected the beta (t1/2) of dalbavancin of 99 to 109 hours. Steady state was achieved by Day 8 with no observable accumulation. No serious AEs were reported over the course of this study. The most common treatment emergent AE reported was mild pain in the extremity, reported by 2 subjects, without evidence of thrombophlebitis. No subject withdrew or was discontinued from the study. No laboratory abnormality was attributed to dalbavancin.

Conclusions: Dalbavancin was well tolerated when administered IV as a loading dose of 1000 mg followed by 500 mg weekly doses for a total of up to 8 weeks.

SUMMARY OF OBSERVATIONS

Safety and Tolerability:
Dalbavancin, administered to healthy subjects as an IV infusion weekly for a total of four, six or eight weeks, was well tolerated. No SAEs were reported over the course of this study.

No subject was discontinued or withdrew from the study due to an AE.

Pharmacokinetics:
The findings on Day 1 are consistent with prior Phase 1 studies of dalbavancin.

The systemic exposure of dalbavancin on the last day of dosing was similar after 4 weeks to 8 weeks of dosing.

The calculated (beta phase) Ti1/2 after a single loading dose of 1000 mg on Day 1 is approximately 100 hours and reflective of a long half-life drug.

With a loading dose of 1000 mg on Day 1, the 500 mg weekly dose achieves steady-state by Day 8 with no observable accumulation after a total of eight weeks of dosing.

CONCLUSIONS

Dalbavancin was well tolerated when administered IV as a loading dose of 1000 mg followed by 500 mg weekly doses for a total of up to 8 weeks.

With a loading dose of 1000 mg on Day 1, the 500 mg weekly dose achieves steady-state by Day 8 with no observable accumulation.

This dosing regimen of dalbavancin should be considered for further study in clinical indications which require a longer duration of therapy, such as osteomyelitis.