

CARB-X 2019 Funding Round 1

- Scope: Non-traditional approaches
 - Indirect acting small molecules (virulence, potentiators, BLI combinations etc.)
 - Direct- and indirect-acting large molecules (peptides, etc.)
 - Phage
 - Microbiome
 - Nucleic acid/anti-sense
 - Drug conjugates (ADC, other dual acting drug conjugates)
 - See next slide for scope in detail
- Expressions of Interest (EOI) accepted online only <https://carb-x.org/apply>
- EOI must be submitted June 3 - June 10, 2019, 5 PM ET

Applying for Round 1?
Mark your calendar
June 3 – 10, 2019, 5 PM ET

Round

1



CARB-X 2019 Funding Round 1 – Non-traditional approaches

Examples: indirect-acting small molecules (anti-virulence approaches, potentiators, BLI combinations etc.), direct acting or indirect-acting large molecules (peptides etc.), microbiome, phage, nucleic acid/antisense, drug conjugates (ADC, other dual acting drug conjugates) etc. as per the pathogens below. Host-directed therapies are not in scope. Biocides/antiseptics/disinfectants are not in scope. EOI must be submitted online June 3 - June 10, 2019, 5 PM ET. <https://carb-x.org/apply>

| Pathogen Scope | Area Scope | | |
|---|------------|-------------|------------|
| | Prevention | Indirect Tx | Direct Tx* |
| <i>Acinetobacter baumannii</i> , carbapenem-R | YES | YES | YES |
| <i>Pseudomonas aeruginosa</i> , carbapenem-R | YES | YES | YES |
| Enterobacteriaceae, carbapenem-R, 3 rd -gen ceph-R (ESBL+) | YES | YES | YES |
| <i>Enterococcus faecium</i> , vancomycin-R | YES | YES | NO |
| <i>Staphylococcus aureus</i> , methicillin-R, vancomycin-I/R | YES | YES | NO |
| <i>Campylobacter</i> spp., fluoroquinolone-R | YES | YES | NO |
| <i>Salmonellae</i> spp., fluoroquinolone-R | YES | YES | YES |
| <i>Neisseria gonorrhoeae</i> , 3 rd -gen ceph-R, fluoroquinolone-R | YES | YES | YES |
| <i>Streptococcus pneumoniae</i> , penicillin-NS | YES | YES | NO |
| <i>Shigella</i> spp., fluoroquinolone-R | YES | YES | YES |
| Group A <i>Streptococcus</i> | YES | YES | NO |
| Group B <i>Streptococcus</i> | YES | YES | NO |

Tx = therapeutic

NB: For BLI products – scope is restricted to products that are both 1) broad spectrum (product needs to address both serine and metallo-beta-lactamases) and 2) have oral delivery

*the spectrum of direct acting products can include Gram-positive pathogens however the program must prioritize the Gram-negative pathogens included in the product's spectrum, as evidenced by the data developed at time of application and the workplan/TPP presented to CARB-X

Mode of administration preference guidance:

For Enterobacteriaceae offerings: If Tx is only for ESBL (e.g. lacks CRE), PO options are higher priority than IV only

For *Salmonellae* spp., *Shigella* spp. and *Neisseria gonorrhoeae* offerings – if Tx (direct or indirect), oral delivery is strongly preferred

The only topical delivery in scope is inhalation (e.g. dermal, nasal, intra-wound/surgical site, ocular etc. are not in scope)