

Does peri-operative enteral nutrition and immunonutrition alter immunological response to surgery, improve blood supply to the gut and improve clinical outcome of patients undergoing restorative proctocolectomy?

Submission date 12/09/2003	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 12/09/2003	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 19/09/2016	Condition category Surgery	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N0515088426

Study information

Scientific Title

Does peri-operative enteral nutrition and immunonutrition alter immunological response to surgery, improve blood supply to the gut and improve clinical outcome of patients undergoing restorative proctocolectomy?

Study objectives

Improved peri-operative enteral nutrition and immunonutrition beneficially alter the patient's immunological response to the insult of major pelvic surgery. Restorative proctocolectomy for ulcerative colitis is undertaken for two reasons, either because of the failure of medical management to control symptoms and dependence on immune suppressants or the risk of developing adenocarcinoma following many years of ulcerative colitis. Patients electing to undergo restorative proctocolectomy have therefore been suffering from a chronic disease that affects their nutritional and immune state, leading to higher rates of post operative complications including sepsis, leading to a significant increase in morbidity and hospital stay. Unfortunately, around 10% of ileoanal pouches fail and require excision the majority of these in the first 2 years due to pelvic sepsis. This trial will compare surrogate markers of immune modulation and clinical complications in fed and unfed groups to assess the benefit of peri-operative enteral nutrition.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Surgery: Restorative proctocolectomy

Interventions

Patients will be assigned to one of three groups:

Group 1 will receive normal pre-operative and post-operative care with no supplemental nutrition.

Group 2 will receive one week pre-operative supplemental enteral nutrition isocaloric and isonitrogenous to IMPACT to provide 25 Kcal/kg/day.

Group 3 will receive one week pre-operative supplemental enteral nutrition with IMPACT to provide 25 Kcal/kg/day.

Intervention Type

Procedure/Surgery

Phase

Not Specified

Primary outcome measure

Peripheral blood leukocyte subsets will be tested for intracellular pro-inflammatory cytokines InterLeukin-6 (IL-6), InterLeukin-2 (IL-2) and anti-inflammatory cytokine InterLeukin-10 (IL-10) using the technique of Carrock Sewell et al 1997. Phagocyte activity of both granulocytes and monocytes will be tested directly using fluorescein labeled opsonised bacteria. Blood will be taken prior to feeding, preoperatively, intraoperatively and on postoperative days three and seven. At laparotomy a biopsy of small bowel mucosa will be taken to assess leukocyte subsets for intracellular pro-inflammatory cytokines IL-6, IL-2 and anti-inflammatory cytokine IL-10. Phagocyte activity of both granulocytes will be tested directly using fluorescein labeled opsonised bacteria. Two further biopsies will be taken on days three and seven postoperatively for correlation with the peripheral blood immunology.

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/11/2000

Completion date

31/03/2006

Eligibility

Key inclusion criteria

30 patients aged between 18-65 years old

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Upper age limit

65 Years

Sex

Both

Target number of participants

30

Key exclusion criteria

Does not meet inclusion criteria

Date of first enrolment

01/11/2000

Date of final enrolment

31/03/2006

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

North West London Hospitals NHS Trust

Harrow, Middlesex

United Kingdom

HA1 3UJ

Sponsor information

Organisation

Department of Health (UK)

Sponsor details

Richmond House

79 Whitehall

London

United Kingdom

SW1A 2NL

Sponsor type

Government

Website

<http://www.doh.gov.uk>

Funder(s)**Funder type**

Hospital/treatment centre

Funder Name

North West London Hospitals NHS Trust (UK)

Results and Publications**Publication and dissemination plan**

Not provided at time of registration

Intention to publish date**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration