

Developing new tests to monitor patients with eosinophilic oesophagitis using capsule sponge instead of endoscopy

Submission date 08/02/2024	Recruitment status Recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 23/02/2024	Overall study status Ongoing	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 23/01/2026	Condition category Digestive System	<input type="checkbox"/> Individual participant data <input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Eosinophilic oesophagitis (EoE) is a disease of the oesophagus ("food pipe") affecting tens of thousands of adults and children across the UK. Related to asthma, allergies and other chronic inflammatory conditions, this disease has been on the rise in recent years. However, it can often take years and even several trips to A&E due to food getting stuck in the oesophagus before a diagnosis is made. Treatments are available, but not all patients respond to treatment and the only way to check response is an invasive endoscopy. Finding the right treatment can take multiple endoscopies in a single year, and even after one is found a patient may need endoscopies throughout their life. This study aims to improve patient care in EoE in two ways: by decreasing the need for endoscopy through the use of minimally-invasive capsule sponge testing to collect cells from the oesophagus, and by providing a personalised predictive test for therapy response.

Who can participate?

Patients over 18 years old with EoE

What does the study involve?

Participants are offered both an endoscopy and a capsule sponge test. The resulting information will be clinically validated diagnoses alongside biomarker measurements, providing a clear readout for personalised EoE management.

What are the possible benefits and risks of participating?

This study is to assess if a simpler test, known as capsule sponge, can be used to regularly manage EoE instead of endoscopy. The capsule sponge test is:

1. Quick, the procedure only lasts for 10 minutes
2. Less invasive and does not require any sedation
3. A more comfortable experience (as stated by other patients)
4. Well-tested, more than 17,000 tests have been given to patients with no serious side effects

Disadvantages of taking part:

1. Participants may experience a mild sore throat for up to 24 hours and in some people, this

may last for a few days. Paracetamol and throat lozenges can be taken to help.

2. There is a very small risk (less than 1 in 2,000) of the sponge becoming detached from the thread, or the nurse is unable to remove it. If this happens, it will be easily removed during your endoscopy.

3. There is a very small risk that you may have some bleeding. If this happens, you will be assessed by your consultant and clinical nurse. This is unlikely to need any intervention but if required an endoscopy could be performed to find and stop the bleeding. This has never been needed in 10+ years of tests.

Where is the study run from?

Cyted Ltd (UK)

When is the study starting and how long is it expected to run for?

June 2023 to March 2026

Who is funding the study?

Innovate UK

Who is the main contact?

Samantha Roberts, samantha.roberts@cyted.ai

Contact information

Type(s)

Public

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

Integrated Research Application System (IRAS)
334862

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
IRAS 334862, CPMS 59420

Study information

Scientific Title
Quantitative biomarker identification for eosinophilic oesophagitis in non-endoscopic capsule sponge cell samples for monitoring treatment efficacy

Acronym
QuBIE

Study objectives
It is hypothesised that non-endoscopic capsule-based sponge cell collection will enable the identification of quantitative biomarkers for accurately monitoring the activity of disease in treated eosinophilic oesophagitis (EoE) patients.

Ethics approval required
Ethics approval required

Ethics approval(s)
approved 01/02/2024, North West - Greater Manchester East Research Ethics Committee (3rd Floor, Barlow House, 4 Minshull Street, Manchester, M1 3DZ, United Kingdom; +44 (0)207 104 8290; gmeast.rec@hra.nhs.uk), ref: 23/NW/0384

Study design
Open-label parallel-arm cohort study

Primary study design
Interventional

Study type(s)
Diagnostic

Health condition(s) or problem(s) studied
Eosinophilic oesophagitis (EoE)

Interventions

Patients will be asked to undergo a capsule sponge test prior to a standard endoscopy with biopsy

Intervention Type

Procedure/Surgery

Primary outcome(s)

1. Eosinophil count in biopsy vs sponge pathology (number of eosinophils per high power field - standard measures in diagnosis) at time of procedure and for the sub-group at follow-up 8-12 weeks later
2. Biomarker quantification using ELISA assays for selected biomarkers at time of procedure and for the sub-group at follow-up 8-12 weeks later
3. Severity of symptoms measured using the Dysphagia Symptom Questionnaire (DSQ) at time of procedure and for the sub-group at follow-up 8-12 weeks later

Key secondary outcome(s)

Patient satisfaction measured using survey at time of procedure and for the sub-group at follow-up 8-12 weeks later

Completion date

31/03/2026

Eligibility

Key inclusion criteria

1. Over 18 years old with a histologically confirmed diagnosis of EoE
2. Male or Female
3. Newly diagnosed patients with EoE or known existing non-stenotic EoE patients who are on maintenance treatments (i.e., orodispersible budesonide, PPI, biologics, or dietary therapy) and monitoring
4. Patients currently enrolled in the CoSIE study (IRAS 314770) may be retrospectively included with consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

18 years

Upper age limit

100 years

Sex

All

Total final enrolment

0

Key exclusion criteria

1. Age <18 years
2. Strictures or severe rings at most recent endoscopy that prevent passage of adult 9.8 mm gastroscope
3. Oesophageal dilatation within 24 months of clinic visit
4. Previous oesophageal perforation or surgical resection
5. Oesophagogastric malignancy
6. Oesophageal varices
7. Bolus obstruction since last endoscopy requiring hospital visit
8. Previous fundoplication or complicated hiatus hernia
9. Patient on warfarin with INR>=3

Date of first enrolment

01/02/2024

Date of final enrolment

31/03/2026

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

East and North Hertfordshire NHS Trust

Lister Hospital

Coreys Mill Lane

Stevenage

England

SG1 4AB

Study participating centre

Nottingham University Hospitals NHS Trust - Queen's Medical Centre Campus

Nottingham University Hospital

Derby Road

Nottingham

England

NG7 2UH

Sponsor information

Organisation

Cyted Ltd

Funder(s)

Funder type

Government

Funder Name

Innovate UK

Alternative Name(s)

UK Research and Innovation Innovate UK, innovateuk

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes