# **ASTIClite EBMT follow-up**

Submission date 03/01/2018	<b>Recruitment status</b> Stopped	[X] Prospectively registered		
		[X] Protocol		
Registration date	Overall study status Stopped	Statistical analysis plan		
19/01/2018		☐ Results		
<b>Last Edited</b> 11/08/2022	<b>Condition category</b> Digestive System	Individual participant data		
		<ul><li>Record updated in last year</li></ul>		

#### **Plain English Summary**

Background and study aims

Crohn's disease is a long-term condition that causes inflammation of the lining of the digestive system. There is no cure at the moment, and current treatments only reduce symptoms, and often have intolerable side effects. In some patients, current treatments only provide temporary benefit, or they fail to respond at all. An alternative therapy is haematopoetic stem cell transplantation (HSCT). This treatment is being assessed in the ASTIClite study, and this study aims to assess the long-term safety and effectiveness of this procedure.

Who can participate?

Patients with Crohn's disease taking part in the ASTIClite study

#### What does the study involve?

Data collected from the point of stem cell transplant (or equivalent day 0 in the control group) are entered into a database, along with annual follow-up data for at least four years after the end of the study. This data collection takes place in standard care for all patients undergoing transplantation, but this study collects the data for all participants, regardless of whether they have had a transplant or continued on usual care.

#### What are the possible benefits and risks of participating?

It is not known whether HSCT offers long term benefits for patients with Crohn's disease, and this is the reason for carrying out this study. If the treatment is found to be more effective than the usual care patients receive, this will inform the treatment of future patients with Crohn's disease. By taking part in the study, participants are directly helping to do this. Participants are contacted for an annual visit with the study nurse, and are provided with their contact details so they have someone to contact with any questions or concerns. Taking part in this study may mean an additional burden of appointments at the recruiting NHS Trust, but it is likely that for most participants this burden is in line with their usual care had they not been part of a study. It is not currently known what the long term effects of HSCT are, and there is therefore the possibility of late side effects of the treatment. Participants are provided with the contact details of their local research team, their GP is informed of their participation in the study, and participants are advised to contact the study team with any questions or concerns.

Where is the study run from? University of Sheffield (UK)

When is the study starting and how long is it expected to run for? August 2017 to May 2021

Who is funding the study? National Institute for Health Research (NIHR) (UK)

Who is the main contact? Lizzie Swaby

## **Contact information**

#### Type(s)

Scientific

#### Contact name

Miss Lizzie Swaby

#### Contact details

University of Sheffield Room 2.11, Innovation Centre c/o Regent Court, 30 Regent Street Sheffield United Kingdom S1 4DA

## Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers 36336

## Study information

#### Scientific Title

Autologous Stem cell Transplantation In refractory Crohn's disease – Low Intensity Therapy Evaluation (ASTIClite) – long-term follow up through the EBMT

### Study hypothesis

Crohn's disease is a long term condition that causes inflammation of the lining of the digestive system. There is no cure at the moment, and current treatments only reduce symptoms, and often have intolerable side effects. In some patients, current treatments only provide temporary benefit, or fail to respond at all. An alternative therapy is haematopoetic stem cell transplantation (HSCT). This treatment is being assessed in the ASTIClite randomised controlled trial, and this study aims to assess the long term safety and efficacy of this procedure.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

North West - Greater Manchester East Research Ethics Committee, 04/12/2017, ref: 17/NW/0669

#### Study design

Observational; Design type: Cohort study

#### Primary study design

Observational

#### Secondary study design

Cohort study

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

#### Participant information sheet

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

#### Condition

Crohn's disease

#### **Interventions**

Participants recruited to the ASTIClite RCT will be invited to take part in the EBMT follow-up study, and will sign a separate consent form. Data collected from the point of stem cell transplant (or equivalent day 0 in the control group) will be entered into the EBMT database, along with annual follow up data for at least four years after the end of the RCT. This data collection takes place in standard care for all patients undergoing transplantation, but this research will collect the data for all participants, regardless of whether they have had a transplant, or continued on usual care.

### Intervention Type

Other

#### Primary outcome measure

Documentation of adverse events; Timepoint(s): At each annual follow up visit (four to seven years)

#### Secondary outcome measures

Participants are followed up annually for between 4 - 7 years, depending on when they are recruited to the ASTIClite RCT. Secondary outcome measures for the follow up study are as follows:

1. Long-term efficacy (for those patients receiving HSCT), measured using documentation of the need for further treatment at each annual follow up visit

- 2. Documentation of disease activity at each annual follow up visit
- 3. Requirement for further medical or surgical intervention at each annual follow up visit
- 4. Disease-specific quality of life measured using the IBD-Q questionnaire at each annual follow up visit
- 5. Disease-specific quality of life measured using the IBD Control questionnaire at each annual follow up visit
- 6. Quality of life measured using the EQ-5D-5L questionnaire at each annual follow up visit
- 7. Health care resource utilisation measured using the healthcare resource use questionnaire at each annual follow up visit

#### Overall study start date

01/08/2017

#### Overall study end date

31/05/2021

#### Reason abandoned (if study stopped)

Objectives no longer viable

# **Eligibility**

#### Participant inclusion criteria

- 1. Participants must have consented to take part in the ASTIClite randomised controlled trial (see http://www.isrctn.com/ISRCTN17160440)
- 2. Participants must be willing and able to provide full informed consent, including sharing their data with the EBMT

## Participant type(s)

**Patient** 

## Age group

Adult

#### Sex

Both

## Target number of participants

Planned Sample Size: 99; UK Sample Size: 99

#### Participant exclusion criteria

Significant language barriers, which are likely to affect the participant's understanding of the study, or ability to complete outcome questionnaires

#### Recruitment start date

01/04/2018

#### Recruitment end date

21/06/2020

## Locations

#### Countries of recruitment

**United Kingdom** 

Study participating centre University of Sheffield United Kingdom

O i ii c

# Sponsor information

#### Organisation

Barts Health NHS Trust

#### Sponsor details

c/o Mays Jawad The Royal London Hospital Whitechapel London England United Kingdom E1 1BB

#### Sponsor type

Hospital/treatment centre

#### **ROR**

https://ror.org/00b31g692

## Funder(s)

#### Funder type

Government

#### **Funder Name**

NIHR Evaluation, Trials and Studies Co-ordinating Centre (NETSCC); Grant Codes: 15/178/09

## **Results and Publications**

Publication and dissemination plan

Current publication and dissemination plan as of 09/03/2021:

As the ASTIClite EBMT follow-up study was closed prior to any patients from the ASTIClite RCT trial rolled onto the follow-up study, there will be no results to publish for this study and participant-level data will not be available.

#### Previous publication and dissemination plan:

The protocol will be made available on the website of the trial funder (NIHR EME) at https://www.journalslibrary.nihr.ac.uk/programmes/eme/1517809/#/. Planned publication of the results in a high-impact peer reviewed journal in late 2026/early 2027.

### Intention to publish date

### Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date.

#### IPD sharing plan summary

Not expected to be made available

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article		31/05/2019	11/08/2022	Yes	No
HRA research summary			26/07/2023	No	No