

# The Colitis Once Daily Asacol® study: efficacy and safety of dosing mesalazine in the maintenance of remission of ulcerative colitis

<b>Submission date</b> 23/03/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 10/05/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 12/08/2016	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr Barney Hawthorne

**Contact details**  
C7  
University Hospital of Wales  
Heath Park  
Cardiff  
United Kingdom  
CF14 4XW

## Additional identifiers

**ClinicalTrials.gov (NCT)**  
NCT00708656

**Protocol serial number**  
HAW0105

## Study information

**Scientific Title**

A randomised, multicentre, parallel group single-blind study to assess the efficacy and safety of dosing mesalazine 800 mg tablets (Asacol®) at 2.4 g once daily versus divided doses three times daily for 12 months in the maintenance of remission of ulcerative colitis

**Acronym**

CODA

**Study objectives**

Does Asacol® 2.4 g taken daily as a single morning dose prevent relapses of ulcerative colitis as effectively and safely as 800 mg taken three times a day, over a one year period?

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Leicestershire, Northamptonshire & Rutland Research Ethics Committee 2, 31/01/2006, ref: 05/Q2502/156

**Study design**

Randomised single-blind multi-centre study

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Ulcerative colitis

**Interventions**

This is a randomised, single-blind, multicentre study in patients with ulcerative colitis who have been in remission for more than four weeks, but no longer than two years, and who are already taking 5-ASA therapy. It will involve approximately 40 to 50 study sites in the UK.

Asacol® 2.4 g daily, taken orally as a single morning dose versus 800 mg taken three times a day, over one-year period.

**Intervention Type**

Drug

**Phase**

Not Applicable

**Drug/device/biological/vaccine name(s)**

Asacol®

**Primary outcome(s)**

Proportion in each treatment group who have relapsed by one year, based on an intention to treat. All available follow-up data will be utilised. A per protocol analysis will also be performed restricted to those complying fully with the protocol (who complete the study regardless of treatment outcome, meet inclusion and exclusion criteria, and who take study medication as prescribed, with compliance more than 75%).

Non-inferiority will be concluded if the upper limit of the 95% confidence interval (one sided) for the difference in the proportion of patients relapsing at one year between intervention and control is less than 10%, based on an intention to treat analysis.

Secondary analyses with the primary outcome will repeat the primary analysis, but on a per protocol basis. Where non-inferiority has been shown, a superiority analysis will be conducted. Additional exploratory analysis will assess whether other factors such as time since last relapse prior to study entry, concomitant therapies, extent of disease, disease duration, smoking status, age at diagnosis, and baseline measures act as effect modifiers using logistic regression.

### **Key secondary outcome(s)**

Secondary analysis will be conducted on both an intention to treat and per protocol basis. The two groups will be compared in terms of the proportion of patients experiencing adverse reactions in each group. It is estimated that this rate will be 2 - 4%. This low rate is likely because all patients entering the study will have already been using mesalazine-containing products. Non-inferiority in terms of safety will be concluded if the limit of 95% one-sided confidence interval for the difference in rate of adverse reactions is less than 4% (with 80% power, assuming an event rate of 4%) . Time until relapse will be compared between the two groups using Kaplan Meier curves.

Mayo scores will be analysed by comparing changes at relapse or 12 months, in comparison to baseline. Individual components of the Mayo score, particularly sigmoidoscopy score, but also rectal bleeding and diarrhoea will be analysed independently.

For each participant, tablet counts will be carried out to estimate a daily dosage in order to check his/her compliance throughout the period of study. The mean daily dosage will be compared between the two groups using a t-test.

### **Completion date**

14/07/2011

## **Eligibility**

### **Key inclusion criteria**

1. Male and female patients aged over 18 with ulcerative colitis confirmed by histology who are in remission (no symptoms of active disease, and modified Baron sigmoidoscopic score of 0 or 1)
2. If female, must be (as documented in patient notes) one of the following:
  - 2.1. Post-menopausal (at least 1 year without spontaneous menses)
  - 2.2. Surgically sterile (tubal ligation or hysterectomy at least 6 months prior to enrolment)
  - 2.3. Using acceptable contraception (e.g. oral, intramuscular, or implanted hormonal contraception) at least 3 months prior to enrolment
  - 2.4. Have a sexual partner with non-reversed vasectomy (with confirmed azoospermia)
  - 2.5. Using 1 barrier method (e.g. condom, diaphragm, spermicide, or intra-uterine device)
3. Patients whose ulcerative colitis has been in clinical remission for 4 weeks or longer, and who have had a symptomatic relapse within the past two years

4. Patients taking mesalazine, sulfasalazine or other drug containing 5-aminosalicylic acid (5-ASA) for 4 weeks or longer
5. Patients capable of giving written informed consent

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Key exclusion criteria**

1. Patients with Crohns disease
2. Patients with symptoms of active colitis
3. Modified Baron sigmoidoscopy score of 2 or 3
4. Patients who have used oral, enema, intravenous or suppository preparations of corticosteroids, oral or intravenous ciclosporin, mesalazine enemas or suppositories within the past four weeks
5. Patients taking azathioprine or 6-mercaptopurine who have altered the dose or started treatment within the past three months (these drugs are permitted in stable dose during the study)
6. Patients with intolerance to Asacol® 400 mg or mesalazine
7. Women who are pregnant or lactating
8. Patients with known human immunodeficiency virus (HIV) infection
9. Patients with hepatic disease
10. Patients with renal impairment (creatinine above local reference range), or with positive urine dipstick test to blood or protein
11. Other serious medical or psychiatric illness that in the opinion of the investigator would possibly comprise the study
12. Patients with problem alcohol excess or drug abuse

**Date of first enrolment**

16/10/2006

**Date of final enrolment**

30/06/2009

**Locations****Countries of recruitment**

United Kingdom

England

Scotland

Wales

**Study participating centre**

**Good Hope Hospital**

Rectory Road  
Sutton Coldfield  
United Kingdom  
B75 7RR

**Study participating centre**

**Rotherham District General Hospital**

Morrigate Road  
Rotherham  
United Kingdom  
S60 2UD

**Study participating centre**

**Hull Royal Infirmary**

Anlaby Road  
Hull  
United Kingdom  
HU3 2JZ

**Study participating centre**

**Derby City General Hospital**

Uttoxeter Road  
Derby  
United Kingdom  
DE22 3NE

**Study participating centre**

**Yeovil District Hospital**

Higher Kingston  
Yeovil  
United Kingdom  
BA21 4AT

**Study participating centre**  
**Russells Hall Hospital**  
Pensnett Road  
Dudley  
United Kingdom  
DY1 2HQ

**Study participating centre**  
**Barnsley District General Hospital**  
Pogmoor Road  
Barnsley  
United Kingdom  
S75 2EP

**Study participating centre**  
**York District Hospital**  
Wigginton Road  
York  
United Kingdom  
YO31 8HE

**Study participating centre**  
**St Luke's Hospital**  
Little Horton Lane  
Bradford  
United Kingdom  
BD5 0NA

**Study participating centre**  
**Queen Elizabeth II Hospital**  
Howlands  
Welwyn Garden City  
United Kingdom  
AL7 4HQ

**Study participating centre**  
**Royal Berkshire Hospital**  
London Road

Reading  
United Kingdom  
RG1 5AN

**Study participating centre**  
**Royal Cornwall Hospital**  
2 Penventinnie Lane  
Treliske  
Truro  
United Kingdom  
TR1 3LQ

**Study participating centre**  
**University Hospital Birmingham**  
Selly Oak Hospital  
Birmingham  
United Kingdom  
B29 6JD

**Study participating centre**  
**Glan Clwyd Hospital**  
Rhuddlan Road  
Bodelwyddan  
Rhyl  
United Kingdom  
LL18 5UJ

**Study participating centre**  
**New Cross Hospital**  
Wednesfield Road  
Wolverhampton  
United Kingdom  
WV10 0QP

**Study participating centre**  
**Queen Alexandra Hospital**  
Cosham  
Portsmouth  
United Kingdom  
PO6 3LY

**Study participating centre**  
**University Hospital of Hartlepool**  
Holdforth Road  
Hartlepool  
United Kingdom  
TS24 9AH

**Study participating centre**  
**Glasgow Royal Infirmary**  
84 Castle Street  
Glasgow  
United Kingdom  
G4 0SF

**Study participating centre**  
**Darlington Memorial Hospital**  
Hollyhurst Road  
Darlington  
United Kingdom  
DL3 6HX

**Study participating centre**  
**Walsgrave General Hospital**  
Clifford Bridge Road  
Walsgrave  
Coventry  
CV2 2DX

**Study participating centre**  
**Macclesfield District General Hospital**  
Victoria Road  
Macclesfield  
United Kingdom  
SK10 3BL

**Study participating centre**  
**Birmingham Heartlands**  
Bordesley Green  
Birmingham



United Kingdom  
B9 5ST

**Study participating centre**

**Llandough Hospital**

Longcross Street  
Cardiff  
United Kingdom  
CF24 0SZ

**Study participating centre**

**University Hospital of Wales**

Heath Park  
Cardiff  
United Kingdom  
CF14 4XW

**Study participating centre**

**Worcester Royal Hospital**

Charles Hastings Way  
Worcester  
United Kingdom  
WR5 1DD

**Study participating centre**

**Royal Sussex County Hospital**

Eastern Road  
Brighton  
United Kingdom  
BN2 5BE

**Study participating centre**

**Worthing Hospital**

Lyndhurst Road  
Worthing  
United Kingdom  
BN11 2DH

**Study participating centre**

**Bristol Royal Infirmary**  
Upper Maudlin Street  
Bristol  
United Kingdom  
BS2 8HW

**Study participating centre**  
**University Hospital of North Tees**  
Hardwick Road  
Hardwick  
Stockton-on-Tees  
United Kingdom  
TS19 8PE

**Study participating centre**  
**Louth County Hospital**  
High Holme Road  
Louth  
United Kingdom  
LN11 0EU

**Study participating centre**  
**The L&D Hospital NHS Foundation Trust**  
Lowsey Road  
Luton  
United Kingdom  
LU4 0DZ

## **Sponsor information**

**Organisation**  
Cardiff and Vale NHS Trust (UK)

**ROR**  
<https://ror.org/0489f6q08>

## **Funder(s)**

**Funder type**

Industry

### Funder Name

Procter and Gamble Pharmaceuticals (USA) - provided a donation, managed by the study  
Sponsor (Cardiff and Vale NHS Trust) (UK)

## Results and Publications

### Individual participant data (IPD) sharing plan

#### IPD sharing plan summary

Not expected to be made available

#### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/10/2012		Yes	No
<a href="#">Participant information sheet</a>		01/07/2005	12/08/2016	No	Yes
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes