

# The effect of nasal mupirocin, prior to percutaneous endoscopic gastrostomy (PEG), upon peristomal colonisation and infection

<b>Submission date</b> 30/09/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 30/09/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 06/11/2014	<b>Condition category</b> Injury, Occupational Diseases, Poisoning	<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

### Contact name

Mrs Judith McGovern

### Contact details

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N0547127258

# Study information

## Scientific Title

## Study objectives

Does the treatment, nasal mupirocin, have an effect on peristomal infection rate following percutaneous endoscopic gastrostomy (PEG) placement?

## 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

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

Post-percutaneous endoscopic gastrostomy sepsis

## Interventions

Nasal mupirocin versus standard care (no prophylactic antibiotics).

Mupirocin was administered for 5 days before PEG insertion. Nasopharyngeal swabs, PEG site appearance and bacteriology were recorded up to 10 days post-PEG.

## Intervention Type

Drug

## Phase

Not Applicable

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

Mupirocin

**Primary outcome measure**

Pilot:

Will assess the practicalities of the study design, the consistency of the scoring tool and also give an indication of the bacteriology of nasal colonisation, peristomal colonisation and infection within the proposed research setting.

Main:

The primary outcome measure is that of peristomal infection.

**Secondary outcome measures**

Secondary outcomes of peristomal colonisation and risk factors for methicillin resistant staphylococcus aureus (MRSA) colonisation will also be measured.

**Overall study start date**

01/06/2003

**Completion date**

01/12/2003

**Eligibility****Key inclusion criteria**

Pilot study of 20 patients recruited, pilot study of 10 controls

**Participant type(s)**

Patient

**Age group**

Not Specified

**Sex**

Not Specified

**Target number of participants**

30

**Key exclusion criteria**

Not provided at time of registration

**Date of first enrolment**

01/06/2003

**Date of final enrolment**

01/12/2003

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

England

United Kingdom

**Study participating centre**  
**Department of Gastroenterology**  
Norwich  
United Kingdom  
NR4 7UY

## Sponsor information

**Organisation**  
Department of Health

**Sponsor details**  
Richmond House  
79 Whitehall  
London  
United Kingdom  
SW1A 2NL

**Sponsor type**  
Government

**Website**  
<http://www.dh.gov.uk/Home/fs/en>

## Funder(s)

**Funder type**  
Government

**Funder Name**  
East Norfolk and Waveney Research Consortium (UK) - Norfolk and Norwich University Hospital  
/Norwich PCT

## 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