# Ciclosporin and azathioprine treatment in severe ulcerative colitis: a double-blind controlled trial to evaluate short and long-term outcome

| <b>Submission date</b> 26/05/2005 | <b>Recruitment status</b><br>Stopped | <ul><li>Prospectively registered</li><li>Protocol</li></ul> |
|-----------------------------------|--------------------------------------|---|
| Registration date                 | Overall study status                 | Statistical analysis plan                                   |
| 20/07/2005                        | Stopped                              | ☐ Results   |
| Last Edited                       | Condition category                   | ☐ Individual participant data                               |
| 30/07/2014                        | Digestive System                     | Record updated in last year                                 |

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

# Secondary identifying numbers

N/A

# Study information

#### Scientific Title

#### Acronym

**UC CAT** 

# Study objectives

Does use of oral microemulsion ciclosporin, followed by azathioprine, in patients admitted to hospital with acute severe ulcerative colitis reduce the need for colectomy in the short term (at six months), and long term (two years)?

# Ethics approval required

Old ethics approval format

# Ethics approval(s)

Not provided at time of registration

## Study design

Randomised double-blind placebo-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

Severe ulcerative colitis

#### Interventions

Oral microemulsion of ciclosporin (5.5 to 6.5 mg/kg/day twice a day [bd]) or matched placebo. All patients continue to receive intravenous hydrocortisone and other standard medical therapy. At discharge, patients will start treatment with azathioprine (50 mg daily, increasing to 2 mg/kg after two weeks) and a tapering dose of prednisolone.

Updated 30/07/2014: the trial was stopped due to poor recruitment.

# Intervention Type

Drug

#### **Phase**

Not Applicable

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

Ciclosporin, azathioprine, hydrocortisone, prednisolone

#### Primary outcome measure

All Patients Treated disease status at six months, defined as:

Treatment success = no colectomy and remission off steroid therapy

Partial treatment success = symptoms of active disease, or treatment with steroids (oral or enema)

Treatment failure = colectomy

#### Secondary outcome measures

- 1. Treatment outcome at two years (All Patients Treated disease status as defined for primary end-point above)
- 2. Treatment outcome at three months (All Patients Treated disease status as defined for primary outcome above)
- 3. Treatment response at 7 days (three or fewer non-bloody stools)
- 4. Time to remission and time to subsequent relapse measured by life table analysis
- 5. Quality of life at 6 months assessed using the McMaster inflammatory bowel disease questionnaire and EQ-5D scores
- 6. Overall incidence of adverse events
- 7. Employment status and amount of sick leave during follow-up
- 8. Patients valuation of outcome expressed in terms of time trade-off

# Overall study start date

01/06/2005

# Completion date

31/05/2011

# Reason abandoned (if study stopped)

Participant recruitment issue

# **Eligibility**

# Key inclusion criteria

Patients admitted to hospital with severe ulcerative colitis, who have been treated with intravenous corticosteroids for between 48 hours and 5 days, and still fulfil Truelove and Witts criteria for severe colitis.

# Participant type(s)

**Patient** 

# Age group

Adult

#### Sex

Both

# Target number of participants

280

## Key exclusion criteria

- 1. Positive stool culture for enteric pathogens or Clostridium difficile
- 2. Cholesterol level below 3 mM
- 3. Greater than 5 days treatment with intravenous corticosteroids
- 4. Crohn's disease
- 5. Bowel perforation, or obstructive symptoms not due substantially to active inflammation
- 6. Pregnancy or lactation, or inability to take contraception during the trial
- 7. Treatment with ciclosporin tacrolimus or infliximab in the three months prior to study entry
- 8. Serious intercurrent infection or other active disease within three months prior to treatment
- 9. History of concurrent malignancy, or evidence of colonic dysplasia
- 10. Known human immunodeficiency virus (HIV) infection
- 11. Toxic dilation of the colon or clinical condition where colectomy is highly likely
- 12. Significant renal impairment (serum creatinine above 130 uM)
- 13. Uncontrolled hypertension

#### Date of first enrolment

01/06/2005

#### Date of final enrolment

31/05/2011

# Locations

#### Countries of recruitment

England

United Kingdom

# Study participating centre Wolfson Digestive Diseases Centre

Nottingham United Kingdom NG7 2UH

# Sponsor information

#### Organisation

University of Nottingham (UK)

# Sponsor details

Research Support & Commercialisation Office University Park Nottingham England United Kingdom NG7 2RD

# Sponsor type

University/education

#### **ROR**

https://ror.org/01ee9ar58

# Funder(s)

# Funder type

Industry

#### Funder Name

Novartis Pharmaceuticals UK Ltd (UK) - unconditional block grant (ref: COLO400A 2423)

# **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