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Investigating the effectiveness and safety of gelatin tannate and tyndallized acid lactic bacteria in adult patients with chronic diarrhoea with dysbiosis

Submission date
19/10/2020

Recruitment status
No longer recruiting

Registration date
23/10/2020

Overall study status
Completed

Last Edited
20/10/2020

Condition category
Digestive System

[X] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[_] Results
[_] Individual participant data
[_] Record updated in last year

Plain English summary of protocol

Background and study aims
Chronic diarrhoea is a common presenting symptom in both primary care medicine and in specialized gastroenterology clinics. It is estimated that over 5% of the population has chronic diarrhoea and nearly 40% of these patients are older than 60 years. Clinicians often need to select the best diagnostic approach to these patients and choose between the multiple diagnostic tests available. Recently, in many countries, gelatine tannate is being marketed for the treatment of acute gastroenteritis. The combination of gelatine tannate with tyndallized probiotics seems to offer an advantage over live probiotics for the treatment of chronic diarrhoea as it is intended to restore the physiological function of the intestinal wall as well as to prevent and alleviate dysbiosis (microbial imbalance) including digestive disorders as diarrhoea and other related symptoms such as bloating and abdominal tension, being effective within the first 12 hours. This study aims to assess the effectiveness and safety of gelatin tannate and tyndallized acid lactic bacteria in the treatment of adults with chronic diarrhoea with dysbiosis.

Who can participate?
Adults with chronic diarrhoea

What does the study involve?
Participants will be randomly allocated to group A or group B. One group will receive gelatin tannate and tyndallized acid lactic bacteria and the other placebo (dummy) tablets twice per day for 28 days.

What are the possible benefits and risks of participating?
This treatment could be very useful for the treatment of chronic diarrhoea caused by dysbiosis by reducing the symptoms associated with this diagnosis. To date, no adverse reactions to the study product have been reported.

Where is the study run from?
The study is conducted from Noventure S.L. (Spain), through the local Romanian representative

When is the study starting and how long is it expected to run for?
September 2020 to February 2022

Who is funding the study?
Noventure S.L. (Spain)

Who is the main contact?
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Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number
Nil known

IRAS number

ClinicalTrials.gov number
Nil known

Secondary identifying numbers
CBSNOV26022020

Study information

Scientific Title

A randomized, double-blinded, placebo-controlled, clinical trial investigating the efficacy and safety of gelatin tannate and tyndallized acid lactic bacteria vs placebo administered to adult patients with chronic diarrhoea with dysbiosis

Acronym
RESTATE

Study objectives
Gelatin tannate and tyndallized acid lactic bacteria are safe and improve the major symptoms of chronic diarrhoea vs placebo.

Ethics approval required
Old ethics approval format

Ethics approval(s)
1. Approved 20/07/2020, Bulgarian Drug Agency (8, Damyan Gruev Str., 1303, Sofia, Bulgaria, + 359 (0)2 8903555; bda@bda.bg), ref: ИАЛ-29402/20.07.2020
2. Approved 04/09/2020, Republic of Bulgaria, Ministry of Health, Ethics Committee for Clinical Trials (8, Damyan Gruev Str., 1303, Sofia, Bulgaria; +359 (0)2 8903435; bda@bda.bg), ref: ЕКК*И* /CT-0783
3. Approved 01/10/2020, Romanian Committee for the Bioethics of Medicines and Medical Devices (19-21 Stefan cel Mare Str., District 2, Bucharest, Romania; +40 (0)21/2102880; comisie@bioetica-medicala.ro), ref: 3DM / 16.07.2020

Study design
Double-blind placebo-controlled randomized multicenter study

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Hospital

Study type(s)
Treatment

Participant information sheet
Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied
Chronic diarrhoea

Interventions
Visit 1 – Baseline visit
Visit 2 (Day 8) – Randomization visit
Visit 3 (Day 36) – End of treatment/end of study

Patients fulfilling the inclusion criteria will be recruited by gastroenterologists, internal medicine, and/or family doctors during ambulatory visits and/or during the hospitalized period. The screening period will start after obtaining the signed Informed Consent Form for each subject. Subjects who meet the eligibility criteria will be randomly assigned to group A or group B, in a 1:1 ratio, at Visit 2 (Day 8). One group will receive gelatin tannate and tyndallized acid lactic bacteria and the other placebo tablets. The dosage schedule for the study products will be two tablets twice per day for 28 consecutive days.

Intervention Type
Mixed

Primary outcome measure
1. Pain relief assessed using an 11-point scale from 0-10 in the subject diary on each day of the treatment period
2. Major symptoms of chronic diarrhoea (abdominal pain and distension) assessed on a 7-point Likert scale in the subject diary on each week of the treatment period
3. Proportion of subjects who tested negative for dysbiosis using PCR at baseline and day 36
4. Relief of symptoms assessed through the subject diary on each week of the treatment period. Additionally, the timing for the beginning of the clinical response will be also evaluated.
5. Stool consistency assessed on the Bristol scale through the subject diary on each week of the treatment period
6. BMI, abdominal girth and weight measured using physician evaluation at baseline and day 36
7. Bowel movement frequency assessed using an 11-point scale from 0-10 in the subject diary on each day of the treatment period

Secondary outcome measures
Safety assessed by:
1. No. of subjects that discontinued treatment due to adverse events at day 36
2. No. of subjects that experienced an adverse event and severity at day 36
3. Proportion of subjects who presented no improvement in clinical condition at day 36

Overall study start date
04/09/2020

Completion date
28/02/2022

Eligibility

Key inclusion criteria
1. Chronic diarrhoea defined as a morbid process of at least 4 weeks of duration and a change in stool consistency to loose or liquid form (types 5-7, according to the Bristol Stool Chart) and/or an increase in the frequency of evacuations (≥3 in 24 h)
2. Patients diagnosed with irritable bowel syndrome or functional diarrhoea (according to the Rome IV criteria) or biliary acid malabsorption
3. Patients will be included if they record, during the week before randomization, an average score for stool consistency of ≥5.5 or a score of ≥5 on the Bristol Stool Chart for at least 5 days and an average score of ≥3.5 or a score of ≥3 for at least 5 days in the number of bowel movements

4. Participants will be tested at baseline for functional intestinal dysbiosis (Aliment Pharmacol Ther 2012;35(7):828-38), as demonstrated by real-time PCR analysis of faecal samples
5. Ability to sign the informed consent form

Participant type(s)
Patient

Age group
Adult

Sex
Both

Target number of participants
190

Key exclusion criteria
1. Use of antibiotics, gelatin tannate, diosmectite, probiotics, racecadotril, zinc, opioids, or any other drugs or medical devices know to alter gastrointestinal motility or secretion within 4 weeks prior to enrolment
2. Chronic diarrhoea caused by cystic fibrosis, coeliac disease, food allergy, diabetes
3. Chronic diarrhoea caused by lactose, fructose, or sorbitol intolerance
4. Immunodeficiencies
5. Abnormal thyroid function, a history of alcohol abuse or binge drinking, pancreatitis, sphincter of Oddi dysfunction, cholecystitis within the past 6 months, or known allergy to any of the components of the product or placebo
6. Pregnant or breastfeeding women
7. Patients receiving antidepressant medications will be eligible to participate in the study, provided that dosing has been stable for 12 weeks or longer before enrollment
8. If needed, discontinuation or modification of the treatment may be considered at the discretion of the physician

Date of first enrolment
23/11/2020

Date of final enrolment
31/12/2021

Locations

Countries of recruitment
Bulgaria

Romania

Study participating centre
Cluj-Napoca County Emergency Clinical Hospital - Internal Medicine, Section III
4-6 Clinicilor Street, Cluj-Napoca
Cluj-Napoca

Romania
400 000

Study participating centre
Algomed Polyclinic
4 Lucian Blaga Str.
Timisoara
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Medical office "Dr. Cristian Gainaru SRL"
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137135

Study participating centre
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Study participating centre
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Study participating centre
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Study participating centre

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Study participating centre
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Sponsor information

Organisation
Noventure S.L.

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Sponsor type

Industry

Website
https://www.noventure.com/

Funder(s)

Funder type
Industry

Funder Name
Noventure S.L.

Results and Publications

Publication and dissemination plan
Planned publication in a high-impact peer-reviewed journal. Additional documents will be provided at a later date.

Intention to publish date
01/09/2022

Individual participant data (IPD) sharing plan
The data will be collected under the study confidentiality and for the study purpose only, according to the approved informed consent form. The study data will be archived according to the sponsor requirements and local regulatory requirements.

IPD sharing plan summary
Not expected to be made available