

STOPAH: Steroids or pentoxifyline for alcoholic hepatitis

Submission date 23/06/2009	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 26/06/2009	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 17/12/2020	Condition category Digestive System	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

In the UK the number of deaths caused by liver disease is increasing dramatically, and the leading cause of liver disease is excess alcohol consumption. Alcohol misuse over a long period leads to alcoholic hepatitis, where there is marked inflammation in the liver. The death rate amongst patients with severe alcoholic hepatitis is over 30% within the first month after admission to hospital. Several studies have shown an improvement in survival rates with the use of prednisolone, a corticosteroid drug which suppresses inflammation. However, other studies, many of which have been criticised for their small size or poor quality, found no benefit to steroid use. In many units around the UK prednisolone is now accepted as standard treatment for severe alcoholic hepatitis but this practice is not consistent and a definitive study is therefore required to determine the best treatment option. A second drug, pentoxifylline, has been shown to be effective in patients with severe alcoholic hepatitis. Pentoxifylline has also been shown to reduce resistance to corticosteroids and might therefore act together with prednisolone to reduce death rates in patients with severe alcoholic hepatitis. Unfortunately only one study of pentoxifylline alone and one study of pentoxifylline in combination with prednisolone have been reported and conclusions about the effectiveness of the drug are therefore hard to draw. The aim of this study is to evaluate the effectiveness of prednisolone and pentoxifylline in patients with severe alcoholic hepatitis.

Who can participate?

Patients aged 18 or over with alcoholic hepatitis

What does the study involve?

Participants are randomly allocated into four groups: a group treated with a placebo (dummy drug), a group treated with prednisolone alone, a group on pentoxifylline alone, and a group on both prednisolone and pentoxifylline. We then measure patient survival after 28 days, 3 months and 12 months, and the development of any disease/treatment complications.

What are the possible benefits and risks of participating?

Not provided at time of registration

Where is the study run from?
Imperial College London (UK)

When is the study starting and how long is it expected to run for?
December 2009 to November 2013

Who is funding the study?
NIHR Health Technology Assessment Programme - HTA (UK)

Who is the main contact?
Prof Mark Thursz

Contact information

Type(s)
Scientific

Contact name
Prof Mark Thursz

Contact details
Department of Hepatology
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W2 1PG

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
HTA 08/14/44

Study information

Scientific Title
STOPAH: STeroids Or Pentoxifyline for Alcoholic Hepatitis

Acronym
STOPAH

Study objectives

The primary objective of this study is to determine whether pentoxifylline (PTX) or corticosteroids reduce the mortality associated with severe alcoholic hepatitis.

More details can be found at: <http://www.nets.nihr.ac.uk/projects/hta/081444>

Protocol can be found at: http://www.nets.nihr.ac.uk/__data/assets/pdf_file/0004/81373/PRO-08-14-44.pdf

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Multicentre randomised double-blind factorial (2 x 2) design trial

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 the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Alcoholic hepatitis

Interventions

The planned interventions will be prednisolone (40 mg for 4 weeks) or pentoxifylline (400 mg 3 times a day for 4 weeks):

1. Group A: placebo/placebo
2. Group B: placebo/prednisolone
3. Group C: pentoxifylline/placebo
4. Group D: pentoxifylline/prednisolone

Intervention Type

Drug

Phase

Phase III

Drug/device/biological/vaccine name(s)

Pentoxifylline, prednisolone

Primary outcome measure

Mortality at 28 days

Secondary outcome measures

1. Mortality at 3 and 12 months
2. Outcome relative to Glasgow Alcoholic Hepatitis Score
3. Assessment of biochemical response to treatment
4. Duration of hospitalisation
5. The development of new or recurrent renal failure
6. Development of gastro-intestinal haemorrhage and sepsis
7. Incremental NHS costs and quality of life at 3 and 12 months

Overall study start date

01/12/2009

Completion date

30/11/2013

Eligibility**Key inclusion criteria**

1. Clinical alcoholic hepatitis:
 - 1.1. Serum bilirubin greater than 80 $\mu\text{mol/L}$
 - 1.2. History of excess alcohol (greater than 80 g/day male, greater than 60 g/day female)
2. Less than 4 weeks from admission to hospital
3. Discriminant Function (DF) greater than or equal to 32
4. Informed consent
5. Minimum 18 years old, no upper limit, either sex

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

1200

Total final enrolment

1068

Key exclusion criteria

1. Abstinence of more than 6 weeks prior to randomisation
2. Duration of jaundice greater than 3 months
3. Other causes of liver disease
4. Evidence of current malignancy (except non-melanotic skin cancer)
5. Previous entry into the study, or use of either prednisolone or PTX within 6 months
6. Aspartate aminotransferase (AST) greater than 500 or alanine aminotransferase (ALT) greater than 300
7. Patients with a serum creatinine greater than 500 $\mu\text{mol/L}$ or requiring renal support
8. Patients dependent upon inotropic support
9. Active gastro-intestinal haemorrhage and untreated sepsis

Date of first enrolment

01/12/2009

Date of final enrolment

30/11/2013

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Imperial College London

London

United Kingdom

W2 1PG

Sponsor information

Organisation

Southampton University Hospitals NHS Trust (UK)

Sponsor details

Joint R&D Office, Mail Point 138

Southampton General Hospital

Tremona Road

Southampton

England

United Kingdom

SO16 6YD

Sponsor type

Hospital/treatment centre

Website

<http://www.suht.nhs.uk/home.aspx>

ROR

<https://ror.org/0485axj58>

Funder(s)

Funder type

Government

Funder Name

NIHR Health Technology Assessment Programme - HTA (UK)

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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	19/08/2013		Yes	No
Results article	results	23/04/2015		Yes	No
Results article	results	01/12/2015		Yes	No
Results article	results	01/02/2021	17/12/2020	Yes	No