Randomised controlled trial of 6-Mercaptopurine (6MP) versus placebo to prevent recurrence of Crohn's disease following surgical resection

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
22/02/2007		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
15/06/2007	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
18/04/2017	Digestive System			

Plain English summary of protocol

http://www.clinicaltrials.ed.ac.uk/TrialsPortfolio.aspx

Study website

http://www.clinicaltrials.ed.ac.uk/TrialsPortfolio.aspx

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

G0600329

Study information

Scientific Title

Randomised controlled trial of 6-Mercaptopurine (6MP) versus placebo to prevent recurrence of Crohn's disease following surgical resection

Acronym

TOPPIC (Trial Of Prevention of Post-operative Crohn's disease)

Study objectives

Therapy with 6 MP prevents or delays post-operative recurrence of Crohn's disease.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Scotland A Research Ethics Committee, NHS Scotland, 14/08/2007, ref: 07/MRE00/74

Study design

Multi-centre double-blind randomised placebo-controlled 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 to request a patient information sheet

Health condition(s) or problem(s) studied

Crohn's disease

Interventions

Patients randomised to treatment with 6MP or matching placebo. 6MP will be given at a dose of 1 mg per kg body weight per day, rounded to the nearest 25 mg, for 3 years or until study drug is permanently discontinued. Safety monitoring of 6MP will be performed continuously throughout the trial, involving full blood count and liver function tests at appropriate intervals

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Mercaptopurine

Primary outcome measure

Post-operative recurrence of Crohns disease requiring anti-inflammatory rescue therapy and time of recurrence

Secondary outcome measures

- 1. The need for a second operation to remove recurrent Crohns disease from the anastomotic site
- 2. Changes in quality of life scores (assessed at 4 weeks [baseline/randomisation], 17 weeks, 1 year, 2 and 3 years using Inflammatory Bowel Disease Questionnaire [IBDQ], Medical Outcome Survey Short Form 36 [SF-36] and EQ-5D)
- 3. Endoscopic recurrence of Crohns disease (assessed at 1 year and 3 years)
- 4. Relation of faecal calprotectin to time of disease recurrence
- 5. Relation of drug metabolite levels to time of disease recurrence
- 6. Exploratory analyses of clinical, genetic and serological markers for predicting disease recurrence

Overall study start date

01/10/2007

Completion date

30/09/2015

Eligibility

Key inclusion criteria

Current inclusion criteria as of 15/03/2011:

- 1. At least 16 years of age in Scotland and 18 years of age in England and Wales
- 2. Established diagnosis of Crohn's disease confirmed at recent resection
- 3. Ileocolonic or small bowel resection within 3 months before screening
- 4. No more than 100 cm of fixed small bowel resected in total. Previous ileocolonic resection is acceptable
- 5. Able to start oral nutrition within the first 2 postoperative weeks
- 6. Normal or heterozygous TPMT (activity present or reduced consistent with carrier status)

- 7. Able to provide written informed consent prior to screening and to comply with the requirements of the study protocol
- 8. Off antibiotics 2 weeks prior to randomisation

Previous inclusion criteria:

- 1. Male or female, at least 16 years of age in Scotland and 18 years of age in England and Wales
- 2. Established diagnosis of Crohns disease
- 3. Ileocolonic resection within 3 months
- 4. Able to start oral nutrition and medication within the first 2 postoperative weeks
- 5. Normal or heterozygous Thio Purine Methyl-Transferase (TPMT) genotype
- 6. No more than 100 cm of fixed small bowel resected in total. Previous ileocolonic resection is acceptable
- 7. Able to provide written informed consent prior to screening and to comply with the requirements of the study protocol

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

234, recruited over 3 years.

Key exclusion criteria

Current exclusion criteria as of 15/03/2011:

- 1. Pregnancy at baseline or breastfeeding
- 2. A known hypersensitivity or intolerance to 6MP
- 3. Pancreatitis associated with azathioprine
- 4. Receiving an experimental treatment for Crohn's disease in the 4 weeks prior to study entry
- 5. Known to require further surgery at study entry i.e. for the removal of an abscess developing from the primary surgery
- 6. Stricture plasty procedure alone

(Please note that strictureplasty and resection procedure together will not be considered an exclusion)

- 7. Presence of stoma
- 8. Significant haematological, renal or hepatic dysfunction or clinically important lung disease (i.
- e. liver function tests [except GGT] >x2 upper limit of normal, haemoglobin ;Ü10, total white blood cell count <3.5, neutrophils <1.5, platelets <100x106/l)
- 9. Systemic infection including hepatitis B, hepatitis C, HIV and active TB
- 10. A diagnosis of indeterminate colitis or ulcerative colitis
- 11. A history of illicit drug or alcohol abuse in the 1 year prior to study entry
- 12. Active or untreated malignancy (excluding basal cell carcinoma and in situ tumours). (Patients who have had successful treatment for malignancy and have been in remission for more than 5 years may be considered for inclusion only after detailed discussion with, and

written approval, from the patient's medical oncologist)

- 13. Presence of a medical or psychiatric condition, disease or laboratory abnormality that in the opinion of the PI may place the subject at unacceptable risk during the study
- 14. Homozygous deficient for TPMT (absent activity)
- 15. Evidence of untreated post-operative infection e.g. clostridium difficile, urinary tract infection or chest infection. If these have been appropriately treated in the opinion of the PI, and inclusion criteria 8 is met, this will not be considered an exclusion
- 16. Taking any medication for Crohn's disease

Previous exclusion criteria:

- 1. Pregnancy or breastfeeding
- 2. Hypersensitivity or intolerance to 6MP or pancreatitis associated with azathioprine
- 3. Receiving an experimental treatment for Crohns disease in the 4 weeks prior to study entry
- 4. Known to require further surgery at study entry
- 5. Presence of stoma
- 6. Significant renal or hepatic dysfunction, clinically important lung disease
- 7. Systemic infection including hepatitis C, HIV and active tuberculosis (TB)
- 8. A diagnosis of indeterminate colitis or ulcerative colitis
- 9. A history of illicit drug or alcohol abuse in the 1 year prior to study entry
- 10. History of cancer excluding basal cell carcinoma treated more than 5 years previously and in situ tumours
- 11. Presence of a medical or psychiatric condition, disease or laboratory abnormality that in the opinion of the PI may place the subject at unacceptable risk during the study
- 12. Homozygous deficient for TPMT
- 13. Initiation of the following drugs during the study is not allowed: corticosteroids (it is expected that patients may be on corticosteroids at entry. Doses will be tapered according to local protocols), anti-tumour necrosis factor, azathioprine, methotrexate, antibiotics (for a duration of >10 days), non-steroidal anti-inflammatory drugs

Date of first enrolment

01/10/2007

Date of final enrolment

31/03/2015

Locations

Countries of recruitment

Scotland

United Kingdom

Study participating centre Western General Hospital Edinburgh United Kingdom EH4 2XU

Sponsor information

Organisation

University of Edinburgh, Lothian Health Board, University Hospitals Division (UK)

Sponsor details

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Sponsor type

University/education

ROR

https://ror.org/01nrxwf90

Funder(s)

Funder type

Government

Funder Name

Medical Research Council (UK) (Grant No: G0600329)

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

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?
Results article	results	01/12/2016		Yes	No