

# Alternative treatments of adult female urinary tract infection

<b>Submission date</b> 11/02/2015	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 11/02/2015	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 29/01/2019	<b>Condition category</b> Infections and Infestations	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Antibiotic resistance is rising and linked to prescribing in primary care (for example, by GPs). It is a national priority to try to reduce antibiotic prescribing where possible and resistance to antibiotics is a particular problem with cystitis (urinary tract infection). Cystitis in adult women is one of the most common conditions treated with antibiotics in primary care. Although the symptoms are distressing, symptoms usually settle without complications within a few days. Antibiotics do shorten the duration of symptoms and treatment is currently the norm. An alternative strategy to delay the prescription of antibiotics for a few days has been successful in respiratory (lung) infections. In cystitis this results in a modest reduction in antibiotic prescribing but slightly prolonged symptoms. It is unlikely however that the delayed prescribing strategy will be widely adopted unless an alternative approach for symptom relief is available. Two candidates for symptom relief have been identified: anti-inflammatory drugs (ibuprofen) and a herbal product (Arctostaphylos Uva ursi). This study aims to find out whether Uva ursi and/or advice to take ibuprofen would relieve the symptoms of cystitis during the period of delayed treatment. If so, the results would have the potential to change practice and to promote a delay in antibiotic prescribing in primary care, resulting in a reduction of antibiotics being prescribed.

### Who can participate?

Women aged between 18 and 70, presenting to their GP with suspected cystitis

### What does the study involve?

Participants are asked to accept a delayed prescription for antibiotics and then are randomly allocated into one of four groups: Group 1: Uva Ursi + advice to take ibuprofen; Group 2: Uva Ursi placebo (dummy drug) + advice to take ibuprofen; Group 3: Uva Ursi + no advice to take ibuprofen; or Group 4: Uva Ursi placebo + no advice to take ibuprofen. If their symptoms get worse or have not improved after 3-5 days participants start taking antibiotics. Severity of symptoms is recorded using a diary and the proportion of women using antibiotics in each group is measured.

### What are the possible benefits and risks of participating?

It is not known whether the patients will have any personal benefit from taking part in this study. However, their participation may help to give important information about how best to

treat people with cystitis in the future. Patients would, if required, normally start taking an antibiotic prescription immediately to relieve their symptoms. In this study participants have a 1 in 4 chance of receiving no symptom relief treatment. It is possible that the uncomfortable symptoms of urinary tract infection may last longer. A prescription for antibiotics will be available should the participant wish to start taking them. Very rarely untreated urinary infection can spread to the kidneys. If this happens the participant would become more unwell and develop back pain, high fever and vomiting. A kidney infection needs urgent treatment and participants will be advise to contact their doctor if any of these symptoms develop. Also it is not known to which group participants will be allocated so it will be necessary for them to avoid taking any additional anti-inflammatories, such as Nurofen, whilst they are taking the study medication.

Where is the study run from?

University of Southampton, Southampton Clinical Trials Unit (UK)

When is the study starting and how long is it expected to run for?

July 2012 to May 2017

Who is funding the study?

National Institute for Health Research (UK), School of Primary Care

Who is the main contact?

Mrs Catherine Simpson

## Contact information

**Type(s)**

Scientific

**Contact name**

Mrs Catherine Simpson

**Contact details**

University of Southampton  
Southampton Clinical Trials Unit  
MailPoint 131  
Tremona Road  
Southampton  
United Kingdom  
SO16 6YD

## Additional identifiers

**Clinical Trials Information System (CTIS)**

2013-003327-11

**Protocol serial number**

3623

## Study information

**Scientific Title**

Alternative Treatments of Adult Female Urinary Tract Infection: a double-blind, placebo-controlled, factorial randomised trial of Uva ursi and open pragmatic trial of ibuprofen

**Acronym**

ATAFUTI

**Study objectives**

Current hypothesis as of 13/09/2016:

Does Uva ursi (a herbal product) or advice to take a NSAID provide relief from urinary symptoms and reduce antibiotic use in adult women with suspected cystitis who accept the delayed prescription strategy.

Previous hypothesis:

ATAFUTI is a Phase III double blind, placebo controlled, factorial randomised trial investigating alternative treatments for adult female urinary tract infections (UTI).

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

14/SC/1143; First MREC approval date 22/09/2014

**Study design**

Randomised; Interventional and Observational; Design type: Treatment, Qualitative

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Topic: Primary Care; Subtopic: Infectious diseases and microbiology, Primary care; Disease: All Diseases

**Interventions**

Current interventions as of 13/09/2016:

Participants are asked to accept a delayed prescription for antibiotics and then are randomly allocated into one of four groups:

Group 1 – Uva Ursi 1200mg tds + advice to take ibuprofen

Group 2 – placebo tds + advice to take ibuprofen

Group 3 – Uva Ursi 1200mg tds + no advice to take ibuprofen

Group 4 - placebo tds + no advice to take ibuprofen.

If their symptoms get worse or have not improved after 3-5 days participants will start taking their antibiotics. Severity of symptoms is recorded using a diary and the proportion of women using antibiotics in each group measured.

Follow Up Length: 3 month(s); Study Entry : Single Randomisation only

Previous interventions:

1. Ibuprofen, 400mg tds
2. Placebo, tds
3. Uva ursi, 1200mg tds

Follow Up Length: 3 month(s); Study Entry : Single Randomisation only

## **Intervention Type**

Drug

## **Phase**

Phase III

## **Primary outcome(s)**

Symptom severity day 2-4 using validated diary data

## **Key secondary outcome(s)**

Current secondary outcome measures as of 19/09/2016:

1. Use of antibiotics - participant records in their diary if they took the antibiotics prescribed at the time of their initial consultation.
2. Duration of moderately bad symptoms – patients record the severity of a range of urinary symptoms on a daily basis using a validated scoring system from the day of randomisation until all symptoms have resolved.

The symptoms are: fever, pain in the side, blood in urine, smelly urine, burning (burning or pain when passing urine), urgency (having to go in a hurry), day time frequency (having to go more often than usual during the day), night time frequency (having to go more often than usual during the night), tummy pain (when not passing urine), restricted activities, unwell. The scoring system is: 0 = Normal/not affected, 1 = Very little problem, 2 = Slight problem, 3 = Moderately bad, 4 = Bad, 5 = Very bad, 6 = As bad as it could be

3. Total symptom burden derived from diary data
4. Re-consultation in 1 month with UTI from notes review
5. Re-consultation in 3 months with UTI from notes review

Previous secondary outcome measures:

1. The use of antibiotics – whether the participant had to use the delayed prescription given to them by the GP at the time of their initial consultation when they were randomised to the trial. This will be recorded in their participant diary
2. Duration of moderately bad symptoms – patients record the severity of a range of urinary symptoms on a daily basis using a validated scoring system from the day of randomisation until all symptoms have resolved. The symptoms are: fever, pain in the side, blood in urine, smelly urine, burning (burning or pain when passing urine), urgency (having to go in a hurry), day time frequency (having to go more often than usual during the day), night time frequency (having to go more often than usual during the night), tummy pain (when not passing urine), restricted activities, unwell. The scoring system is: 0 = Normal/not affected, 1 = Very little problem, 2 = Slight problem, 3 = Moderately bad, 4 = Bad, 5 = Very bad, 6 = As bad as it could be
3. Re-consultation with UTI within the 3-month period following randomisation. This will be determined at the 3 months note review carried out by the GP
4. Exploratory Analysis: Differential effects on primary outcome depending on urinary culture results

## **Completion date**

31/05/2017

## Eligibility

### Key inclusion criteria

1. Adult women (18-70) presenting to primary care with suspected lower urinary tract infection i. e. with at least one of dysuria, urgency or frequency
2. Patient able to provide informed written consent
3. Women willing to accept a delayed prescription for antibiotics

### Participant type(s)

Patient

### Healthy volunteers allowed

No

### Age group

Adult

### Lower age limit

18 years

### Upper age limit

70 years

### Sex

Female

### Key exclusion criteria

Current exclusion criteria as of 13/09/2016:

1. Known or suspected pregnancy or breast feeding. In women of child bearing age a urine pregnancy test will usually be performed unless not indicated (for instance prior hysterectomy)
2. Known immunodeficiency state, long term corticosteroids therapy or chemotherapy
3. Diabetes
4. Has any of the following known contraindications or cautions to Ibuprofen and any as listed in the current SmPC:
  - 4.1. Asthmatics sensitive to NSAIDS/Ibuprofen or Aspirin
  - 4.2. Severe heart failure and uncontrolled hypertension
  - 4.3. Active gastrointestinal ulceration or bleeding
  - 4.4. Crohn's disease or ulcerative colitis
  - 4.5. Documented poor renal function
  - 4.6. Chronic Kidney disease (Grade 3-5)
5. Currently or within 7 days taken antibiotics
6. Using a NSAID or Uva Ursi preparation and unwilling to discontinue for the study period
7. Suspected upper urinary tract infection (back pain, high fever >38C, systemic illness)
8. Women whom immediate antibiotics are otherwise indicated frequent recurrent infection: >3 UTI episodes in past 12 months
9. Defect of the blood clotting system

10. Bladder surgery including cystoscopy in the last four weeks
11. Currently taking Warfarin
12. Recruited to another interventional trial in previous 6 weeks

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12. Recruited to another trial in previous 4 weeks.

**Date of first enrolment**

01/08/2015

**Date of final enrolment**

21/10/2016

## **Locations**

**Countries of recruitment**

United Kingdom

England

**Study participating centre**

**Abbeywell Surgery**

United Kingdom

SO51 8QN

**Study participating centre**

**The Adam Practice**  
United Kingdom  
BH15 4JQ

**Study participating centre**  
**Bere Regis Surgery**  
United Kingdom  
BH20 7HB

**Study participating centre**  
**Bosmere Medical Practice**  
United Kingdom  
PO9 1DQ

**Study participating centre**  
**Cowplain Family Practice**  
United Kingdom  
PO8 8DL

**Study participating centre**  
**Friarsgate Practice**  
United Kingdom  
SO22 6EL

**Study participating centre**  
**Highcliffe Medical Centre**  
United Kingdom  
BH23 5ET

**Study participating centre**  
**Liphook & Liss Surgery**  
United Kingdom  
GU32 2BL

**Study participating centre**

**Oaklands Practice**

United Kingdom

GU46 7LS

**Study participating centre**

**Portsdown Group Practice**

United Kingdom

PO4 0DY

**Study participating centre**

**Rowlands Castle Surgery**

United Kingdom

PO9 6BN

**Study participating centre**

**The Three Swans Surgery**

United Kingdom

SP1 1DX

**Study participating centre**

**Wareham Surgery**

United Kingdom

BH20 4PG

**Study participating centre**

**Woolston Lodge Surgery**

United Kingdom

SO19 9AL

**Study participating centre**

**Forest End Surgery**

United Kingdom

PO7 7AH

**Study participating centre**

**Swanage Medical Centre**  
United Kingdom  
BH19 1HB

**Study participating centre**  
**Pioneer Medical Group**  
United Kingdom  
BS10 6SP

**Study participating centre**  
**Brockway Medical Centre**  
United Kingdom  
BS48 1BZ

**Study participating centre**  
**Churchdown Surgery**  
United Kingdom  
GL3 2DB

**Study participating centre**  
**Coleridge Medical Centre**  
United Kingdom  
EX11 1EQ

**Study participating centre**  
**Combe Down Surgery**  
United Kingdom  
BA2 5EG

**Study participating centre**  
**Crown Medical Centre**  
United Kingdom  
TA2 8QY

**Study participating centre**

**Grange Road Surgery**

United Kingdom

BS13 8LD

**Study participating centre**

**Hawthorne Medical Centre**

United Kingdom

SN2 1UU

**Study participating centre**

**Kingswood Health Centre**

United Kingdom

BS15 4EJ

**Study participating centre**

**Mendip Vale Medical Practice**

United Kingdom

BS49 4ER

**Study participating centre**

**Nightingale Valley Practice**

United Kingdom

BS4 4HU

**Study participating centre**

**Portland Practice**

United Kingdom

GL50 4DP

**Study participating centre**

**Rame Group Practice**

United Kingdom

PL11 2TB

**Study participating centre**

**Rolle Medical Partnership**

United Kingdom

EX8 2JF

**Study participating centre**

**The Avenue Surgery**

United Kingdom

BA12 9AA

**Study participating centre**

**Vine Surgery**

United Kingdom

BA16 0ET

**Study participating centre**

**Wells City Practice**

United Kingdom

BA5 1XJ

**Study participating centre**

**The Wellspring Surgery**

United Kingdom

BS5 9QY

**Study participating centre**

**Westbury on Trym Primary Care Centre**

United Kingdom

BS9 3AA

**Study participating centre**

**The Boathouse Surgery**

United Kingdom

RG8 7DP

**Study participating centre**

**Bridge Street Medical Centre**  
United Kingdom  
CB2 3LS

**Study participating centre**  
**Broadshires Health Centre**  
United Kingdom  
OX18 1JA

**Study participating centre**  
**Brockwood Medical Practice**  
United Kingdom  
RH3 7NJ

**Study participating centre**  
**Hightown Surgery**  
United Kingdom  
OX16 9DB

**Study participating centre**  
**Hollow Way Medical Centre**  
United Kingdom  
OX4 2NB

**Study participating centre**  
**The Ivers Practice**  
United Kingdom  
SL0 9NU

**Study participating centre**  
**Kingswood Surgery,**  
United Kingdom  
HP13 7UN

**Study participating centre**

**Leighton Road Surgery**

United Kingdom

LU7 1LB

**Study participating centre****Montgomery House Surgery**

United Kingdom

OX26 6HT

**Study participating centre****St Clement's Surgery**

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OX4 1JS

**Study participating centre****Temple Cowley Medical Group**

United Kingdom

OX4 2HL

**Study participating centre****Wymondham Medical Practice**

United Kingdom

NR18 0RF

## Sponsor information

**Organisation**

University of Southampton

**ROR**

<https://ror.org/01ryk1543>

## Funder(s)

**Funder type**

Government

**Funder Name**

National Institute for Health Research

**Alternative Name(s)**

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

United Kingdom

## Results and Publications

**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Data sharing statement to be made available at a later date

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/08/2019		Yes	No
<a href="#">Protocol article</a>	protocol	08/09/2017		Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes