ISRCTN46568273 https://doi.org/10.1186/ISRCTN46568273

The effect of nasal mupirocin, prior to percutaneous endoscopic gastrostomy (PEG), upon peristomal colonisation and infection

Submission date	Recruitment status	[ ] Prospectively registered
30/09/2004	No longer recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
30/09/2004	Completed	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
06/11/2014	Injury, Occupational Diseases, Poisoning	[ ] Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

Contact name
Mrs Judith McGovern

Contact details
Department of Gastroenterology
Norfolk and Norwich University Hospital NHS Trust
Colney
Norwich
United Kingdom
NR4 7UY

Additional identifiers

Protocol serial number
N0547127258

Study information

Scientific Title

Study objectives
Does the treatment, nasal mupirocin, have an effect on peristomal infection rate following percutaneous endoscopic gastrostomy (PEG) placement?

Ethics approval required
Old ethics approval format

Ethics approval(s)
Not provided at time of registration

Primary study design
Interventional

Study design
Randomised controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Post-percutaneous endoscopic gastrostomy sepsis

Interventions
Nasal mupirocin versus standard care (no prophylactic antibiotics).

Mupirocin was administered for 5 days before PEG insertion. Nasopharyngeal swabs, PEG site appearance and bacteriology were recorded up to 10 days post-PEG.

Intervention Type
Drug

Phase
Not Applicable

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

Primary outcome(s)
Pilot:
Will access the practicalities of the study design, the consistency of the scoring tool and also give an indication of the bacteriology of nasal colonisation, peristomal colonisation and infection within the proposed research setting.

Main:
The primary outcome measure is that of perstomal infection.

Key secondary outcome(s)
Secondary outcomes of peristomal colonisation and risk factors for methicillin resistant staphylococcus aureus (MRSA) colonisation will also be measured.

Completion date

01/12/2003

Eligibility

Key inclusion criteria
Pilot study of 20 patients recruited, pilot study of 10 controls

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Not Specified

Sex
Not Specified

Key exclusion criteria
Not provided at time of registration

Date of first enrolment
01/06/2003

Date of final enrolment
01/12/2003

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
Department of Gastroenterology
Norwich
United Kingdom
NR4 7UY

Sponsor information

Organisation
Department of Health

Funder(s)

Funder type
Government

Funder Name
East Norfolk and Waveney Research Consortium (UK) - Norfolk and Norwich University Hospital /Norwich PCT

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration