

A pilot, open-label, multicentre study to investigate the safety of calf intestine alkaline phosphatase in patients with fulminant active ulcerative colitis refractory to steroid therapy

Submission date 07/06/2006	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 07/06/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 07/09/2011	Condition category Digestive System	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Study information

Scientific Title

Acronym

AP IBD 02-01

Study objectives

Ulcerative colitis (UC) is characterized by abnormal activation of the colon epithelium, which is considered to be a central pathogenic mechanism. Activation of colon epithelium cells in UC is associated with an abnormally high expression of Toll-like receptors (TLR), including TLR-4, the major transducer of lipopolysaccharide (LPS), binding specifically the lipid A portion of LPS. Alkaline phosphatase binds and subsequently dephosphorylates LPS, thereby eliminating the ability of LPS to activate TLR-4. This is expected to:

1. Prevent activation of the intestinal epithelium
2. Prevent systemic inflammatory responses that result from transmigration of endotoxin through the leaky inflamed intestinal mucosa.

Therefore, it is expected that administration of calf intestine alkaline phosphatase (CIAP) may attenuate or prevent the local and systemic inflammatory response in patients with fulminant ulcerative colitis.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

A pilot, open-label, non-randomized, multicentre study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Fulminant ulcerative colitis

Interventions

Subjects will receive 30,000 U alkaline phosphatase per 24 hr for 7 consecutive days via a duodenal catheter.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Safety and tolerability

Key secondary outcome(s)

1. Rescue medication including cyclosporin, experimental medication such as anti-CD-3 antibodies or colectomy rate at 9 weeks (63 days)
2. Clinical response based on change in the MTWSI for disease activity between baseline - day 15 - clinical, endoscopic and serological activity scores at baseline and after 1 week of treatment, including the Modified Truelove and Witts Severity Index, the Mayo score, colon biopsy samples
3. CRP plasma levels and stool markers of disease activity (calprotectin)

Completion date

31/12/2007

Eligibility

Key inclusion criteria

1. Patients between 18 and 70 years (inclusive)
2. A diagnosis of UC verified by colonoscopy and confirmed by histology
3. Active disease documented by a Modified True Love and Witts Severity Index (MTWSI) score of 11-21, despite an ongoing treatment course of intravenous steroids for a minimum of 3 days prior to the study; a stool frequency >8 stools or a stool frequency between 3 and 8 and a C-reactive protein (CRP) >45 mg/l (Travis criteria)
4. Women of childbearing potential who have a negative serum pregnancy test at baseline screening
5. Patients must have tested negative for stool cultures including Clostridium difficile
6. Patients who are capable of understanding the purpose and risks of the study and who provide a signed and dated written informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. UC requiring immediate surgical, endoscopic, or radiological interventions, including massive hemorrhage, perforation and sepsis, suppurative complications (intra-abdominal or peri-anal abscesses) or toxic colon
2. History of large bowel surgery
3. Patients with serious infections
4. Significant organ dysfunction
5. Pregnant women or nursing mothers
6. Concomitant medications:

- a.. Altered dose of any 5-aminosalicylates (5-ASA) preparation within two weeks of screening
- b. Altered dose of azathioprine or mercaptopurine within four weeks of screening
- c. Patients who have started azathioprine in the last three months prior to baseline
- d. Received probiotic, antibiotics or cyclosporine within 1 month or 2 months respectively prior of screening
- e. Received any experimental treatment for this population e.g. infliximab, tacrolimus, (FK506) within two months of screening

Date of first enrolment

06/12/2006

Date of final enrolment

31/12/2007

Locations

Countries of recruitment

Netherlands

Study participating centre

AM-Pharma B.V.

Bunnik

Netherlands

3981 AK

Sponsor information

Organisation

AM-Pharma B.V. (The Netherlands)

ROR

<https://ror.org/02bpbnv34>

Funder(s)

Funder type

Industry

Funder Name

AM-Pharma B.V.

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration