

Fermentation characteristics of individuals with patients with an ileoanal pouch compared to ulcerative colitis and a healthy colon

ACTRN12624000912583

Status	RECRUITING
Sponsor	Monash University
Enrollment	50 participants

Plain Language Summary

This study is exploring how dietary fibre is processed in people who have had a specific bowel surgery called an ileoanal pouch procedure — an operation that removes the colon and reshapes the small intestine to create a new storage area for waste. For these patients, the usual relationship between dietary fibre and gut health may work differently, and understanding this could lead to much better dietary advice for this group.

Researchers will recruit three groups: people with an ileoanal pouch with active inflammation (pouchitis), people with an ileoanal pouch without inflammation, people with ulcerative colitis, and healthy controls. Participants will provide stool and other samples so researchers can study how their gut bacteria ferment different fibres. The goal is to give people with pouches more personalised dietary guidance that could reduce inflammation and improve their quality of life.

You may be eligible if you are aged 18 to 75, live in metropolitan Melbourne, can read and speak English, and are eligible for Medicare. The study needs people with UC-pouches (with or without pouchitis), people with ulcerative colitis (with or without active disease), and healthy controls. People with Crohn's disease, coeliac disease, or who have taken prebiotics or antibiotics recently are not eligible. The study is run by Monash University at The Alfred.

Key Eligibility Criteria

Inclusion (9)

- Three cohorts of subjects will be recruited:
 - (1) Patients with UC-pouches
 - Patients with both current active pouchitis (n=15) and without pouchitis (n=15) will be recruited via social media, advertisements, word of mouth and the Alfred inflammatory bowel disease (IBD) clinic. Active pouchitis will be defined as PDAI >7 and without pouchitis will be a pouch disease activity index (PDAI) <7 as determined by histologic, clinical and endoscopic assessment. If patients are recruited from the Alfred, pouchoscopies will be completed via standard of care for patients who are already coming into attend the pouch clinic.
 - (2) n=30 patients with UC with mild to moderately disease activity (n=15) and patients in clinical remission (n=15) will be recruited via the same channels as the first cohort. Diagnosis of activity or remission was determined based on faecal calprotectin and the Partial Mayo questionnaire. If available, these results can also be confirmed with intestinal ultrasound to confirm findings and colonoscopy and histology reports.
 - (3) A total of 15 healthy controls with an intact colon and no history of gastrointestinal diseases (i.e. coeliac disease, inflammatory bowel disease) and no active investigations for gastrointestinal issues will be recruited from study flyers or word of mouth.
- ... and 4 more (see full listing online)

Exclusion (4)

- Presence of Crohn's disease, coeliac disease and indeterminate colitis
- Prebiotic, probiotic supplements in the last 2 weeks
- Antibiotic use (including sulfasalazine) in last 4 weeks except if they have pouchitis that is antibiotic-dependent.
- Unable to provide informed consent

<https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?ACTRN=ACTRN12624000912583>

Locations (1 total)

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