SILDENAFIL IN CROHN'S DISEASE: AN OPEN LABEL PILOT STUDY OF SILDENAFIL IN 15 PATIENTS WITH ACTIVE COLONIC CROHN'S DISEASE

Protocol version 1.2, 08 Feb 2008
[incorporating Amendment 2, 08 Feb 2008]

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Study jointly sponsored by:

University College London *and*
University College London Hospitals NHS Foundation Trust

STUDY OUTCOME REPORT

10/08/09

Date of Regulatory Approval: 29/08/06
Date of Ethics approval: 27/09/06
Date first patient recruited: 23/01/07
Date last patient recruited: 01/08/08
Number patients recruited: 6 [target 15]
Date of study termination: 19/01/09 [early termination]

Aim of the study

To determine whether the Sildenafil-induced improvement in forearm blood flow demonstrated in patients with colonic Crohn's disease translates into clinical benefits in patients with active disease.

Primary endpoint

The primary endpoint will be the proportion of patients experiencing a 100 point fall in the CDAI score at Week 6 (end of treatment) compared to baseline.

Secondary endpoints

Secondary endpoints will be differences in the remission rates (absolute CDAI ≤150), plasma neutrophil and white cell count, platelet count, erythrocyte sedimentation rate, serum C-reactive protein level and faecal calprotectin levels at Week 6 (end of treatment) compared with baseline.

OUTCOME

Recruitment into the study was initially hindered by the requirement for subjects to undergo two colonoscopies, and in response to this a substantial amendment to remove the need for this procedure from the protocol was submitted. Following MREC approval of this amendment we were however disappointed to find that recruitment did not increase. We put much effort into identifying potentially eligible patients and believe the poor uptake was likely to have been due to the unproven nature of the study intervention when weighed up against the available alternative standard therapies.

Due to the difficulties with recruitment an interim analysis of the data was undertaken.

Primary endpoint: four subjects completed the study and two withdrew early. Of the four that completed study participation objective response was seen in only one and all five non-responders required rescue therapy (standard measures) either at the end of the study period or at the time of early withdrawal.

Secondary endpoints: the one responding patient did achieve remission however the number of subjects recruited was too few for meaningful interpretation this or the other secondary endpoints.

A decision was therefore taken to terminate the study as the balance of probability was against significant clinical benefit being demonstrated in the required eight further subjects, such that even if the study period was extended, to continue in it's current form would not be appropriate.

Dissemination of results

All six participating subjects verbally informed of study outcome; due to inadequate subject numbers for meaningful data to be extracted no publications planned

Use of information gained from this study

Laboratory studies into the defective acute inflammatory response in Crohn's disease which underpinned this study are ongoing and the lessons learned from this clinical study will be used in any future such studies.

DR STUART BLOOM	CHIEF INVESTIGATOR		10/08/09
Name	**Designation**	**Signature**	**Date**