

No registrations found.

Ethical review	Positive opinion
Status	Completed
Health condition type	-
Study type	Interventional

Summary

Source

NTR

Brief title

COMRADE

Health condition

This will be a prospective study comparing two imaging techniques. MR enteroclysis will be performed at the department of Radiology of the Medical Centre Alkmaar. The double-balloon enteroscopy and videocapsule will be performed at the department of Gastroenterology of the Medical Centre Alkmaar and the department of Gastroenterology and Hepatology of the Erasmus Medical Centre Rotterdam.

Sponsors and support

Primary sponsor : Schering AG, Christiane Pering, M.D.

Source(s) of monetary or material Support : Siemens Nederland, Ronald Prinsze
Foreest instituut, P. Kieviet, Alkmaar, The Netherlands.

Intervention

Outcome measures

Primary outcome

diagnostic yield, including location and nature of lesions. The pathologic findings in the small

bowel of the different diagnostic methods will be correlated with each other to analyse location and nature of lesions. For patients with known or suspected Crohn's disease of the small bowel, a comparison will be made for prevalence, location, severity of inflammatory lesions, and complications such as formation of stenotic lesions. For patients with gastrointestinal blood loss, the techniques will be compared for prevalence and location of bleeding foci and characters of the lesion. The findings at the double balloon endoscopy will be used as the gold standard.

Secondary outcome

patients' appreciation of the different diagnostic methods. This will be analysed by means of a questionnaire. Patients will be asked to repeatedly fill out the same questionnaire, 24 hours before and after each examination and 5 weeks after all the examinations.

Study description

Background summary

Rationale:

There has been no study so far that compared videocapsule endoscopy and MR enteroclysis for common small bowel diseases and especially not with the improved reference standard double balloon endoscopy. Such a comparison is highly needed to select appropriate techniques for individual patients. Because the double balloon endoscopy is in accordance with standard endoscopy, it can be used as a gold standard method.

Objective:

Comparison of two new techniques for detection of small bowel pathology: MR enteroclysis and videocapsule enteroscopy with double-balloon enteroscopy with respect to diagnostic yield, accuracy of findings, and patient preference.

Study design:

This will be a prospective study comparing two imaging techniques. MR enteroclysis will be performed at the department of Radiology of the Medical Centre Alkmaar. The double-balloon enteroscopy and videocapsule will be performed at the department of Gastroenterology of the Medical Centre Alkmaar and the department of Gastroenterology and Hepatology of the Erasmus Medical Centre Rotterdam.

Study population:

A total of 80 patients with suspected small bowel disease across 2 hospitals in the Netherlands will be included in this multicenter study; 40 patients with proven or suspected

Crohn's disease, and 40 patients with signs of chronic or repeated gastrointestinal bleeding with negative gastroscopy and colonoscopy

Main study parameters/endpoints:

diagnostic yield, including location and nature of lesions. The pathologic findings in the small bowel of the different diagnostic methods will be correlated with each other to analyse location and nature of lesions. This will be assessed in two populations:

1. Patients with known or suspected Crohn's disease.

2. Patients with signs of chronic or repeated gastrointestinal bleeding with negative gastroscopy and colonoscopy.

Patients' appreciation of the different diagnostic methods. This will be analysed by means of a questionnaire.

Nature and extent of the burden and risks associated with participation, benefit and group relatedness:

MR enteroclysis: The dose radiation received in order to place the nasogastric tube is very small (less than one X-ray of the Thorax).

Videocapsule: While swallowing, the videocapsule does not cause any side effects. If stenosis of the bowel is suspected, a test capsule is swallowed, which can fall apart in the small bowel.

Double-balloon endoscopy: The chance of complications as a result of the endoscopy is less than 1 per 1000 endoscopies

Study objective

Comparison of two new techniques for detection of small bowel pathology: MR enteroclysis and videocapsule enteroscopy with double-balloon enteroscopy with respect to diagnostic yield, accuracy of findings, and patient preference.

Intervention

1. MRI enteroclysis

2. Double balloon endoscopy

3. Videocapsule

Contacts

Public

Medical Center Alkmaar
P.O.Box 500
B.M. Wiarda
Alkmaar 1800 AM
The Netherlands
+31(0)72 5483419

Scientific

Medical Center Alkmaar
P.O.Box 500
B.M. Wiarda
Alkmaar 1800 AM
The Netherlands
+31(0)72 5483419

Eligibility criteria

Inclusion criteria

1. Patients of >18 and < 75 years
2. One of the following patient groups:
 - 2.1 Patients with suspected Crohn's disease
 - 2.2 Patients with Crohn's disease, in need of visualization of the small bowel because of suspected disease activity.
 - 2.3 Patients with signs of chronic or repeated gastrointestinal bleeding with negative gastroscopy and colonoscopy
3. Patients must be able to give informed consent and the consent must be obtained prior to any study procedures

Exclusion criteria

1. Patients with suspected intra-abdominal abscess
2. Abdominal surgery in the 6 weeks prior to inclusion

3. Patients with clinical suspicion of high grade small bowel obstruction
4. Pregnancy
5. Breastfeeding
6. Inability to swallow the video capsule
7. Presence of a pacemaker or cardioversion device
8. Patients with a history of contrast media reaction and history of allergy (esp. asthma)
9. Severe concomitant disease with limited life expectancy
10. A psychiatric, addictive, or any disorder that compromises ability to give truly informed consent for participation in this study.

Study design

Design

Study type :	Interventional
Intervention model :	Factorial
Masking :	Single blinded (masking used)
Control :	N/A , unknown

Recruitment

NL	
Recruitment status :	Completed
Start date (anticipated) :	01-10-2006
Enrollment :	80
Type :	Actual

Ethics review

Positive opinion	
Date :	05-09-2006
Application type :	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL763
NTR-old	NTR774
Other	: 0503
ISRCTN	ISRCTN78685405

Study results

Summary results

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13. Mylonaki M, Fritscher-Ravens A, Swain P. Wireless capsule endoscopy: a comparison with push enteroscopy in patients with gastroscopy and colonoscopy negative gastrointestinal bleeding.

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