

# Beyond conventional treatment of Atopic eczema in infants: Management By specific prObiOtic strains. A double blind placebo-controlled trial.

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To investigate the therapeutic effect of a selected probiotic mixture on the severity of AD in infants aged 0-15 months. The probiotic mixture has been studied in vitro and has proven IL-10 stimulating effects. Therefore it is thought to decrease AD...

<b>Ethical review</b>	Not approved
<b>Status</b>	Will not start
<b>Health condition type</b>	Allergic conditions
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON34286

### Source

ToetsingOnline

### Brief title

the BAMBOO study

### Condition

- Allergic conditions
- Epidermal and dermal conditions

### Synonym

allergy, atopic dermatitis, eczema

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Sint Antonius Ziekenhuis

**Source(s) of monetary or material Support:** Ministerie van Economische Zaken (Food & Nutrition Delta)

## Intervention

**Keyword:** adaptive immunology, atopic dermatitis, infants, probiotics

## Outcome measures

### Primary outcome

Primary goal: Is there a decrease in severity of atopic dermatitis (AD) in young children by daily supply of a multispecies probiotic mixture?

The primary outcome will be measured by change in the severity of AD by using the SCORAD score.

Secondary outcomes: subjective (parental) change in eczema severity, change in amount of and type of topical steroid use, quality of life during and after intervention (measured by the validated ITQOL questionnaire), amount of respiratory tract infections, use of antibiotics, use of primary care medicine (general practitioner), change of microbiota composition, change in cytokine pattern.

### Secondary outcome

-Effects on infant gut microbiota

Analyses will be done by molecular microbiological techniques on feces samples (that will be collected at baseline, and after 1,3 and 6 months after enrollment.

-Effects on the immature immune system

These effects will be measured by analyzing serum IgE and different (Th1/Th2) cytokines and chemokines

## Study description

### Background summary

Atopic dermatitis (AD) is a highly prevalent chronic, itching, inflammatory skin disease that often presents in infancy. The disease can be the first manifestation of the so-called atopic march, the natural progression of allergic disorders, with subsequent development of asthma and allergic rhinitis. Approximately 40% of the children with AD will develop asthma later in childhood.

Currently, topical corticosteroids are the mainstay treatment of atopic dermatitis; however, relapses are common and parents often fear possible side-effects, leading to non-compliance. There is increasing evidence that the intestinal microbiota plays an important role in the development of allergic diseases. Modulation of the intestinal microbiota with probiotics, living micro-organisms with immunomodulatory effects, could possibly offer a new way of treatment of allergic disease. Clinical trials investigating the therapeutic effect of probiotics on atopic dermatitis show inconsistent results. A systematic review of all these clinical trials concluded that the probiotic strains studied to date are not an effective treatment for AD; however, other strains might have a greater effect. So, better results can possibly be achieved by using a selected, in vitro proven modulatory probiotic mixture, containing 6 different strains.

### Study objective

To investigate the therapeutic effect of a selected probiotic mixture on the severity of AD in infants aged 0-15 months. The probiotic mixture has been studied in vitro and has proven IL-10 stimulating effects. Therefore it is thought to decrease AD severity in these young children.

### Study design

Participants will be randomized, using computer-generated block design lists, drawn up by a statistician, with stratification according to serum IgE, to daily receive either a powder (sachets) with additional probiotics or the same powder (sachets) without probiotics for a period of 12 weeks.

Patients will be enrolled by the investigator (NR) and sequentially assigned a patient number. Powders will be prepared and coded by Wilclove Bio Industries

BV, Amsterdam and dispensed by the pharmacy of St. Antonius Hospital. Both formulas are identical with respect to smell, taste, texture, color and packaging. The investigators (NR, AV), participant\*s own physicians and parents are all blind to the treatment groups. The randomization key will be owned by the hospital\*s pharmacy as well as the company that produces the probiotics.

## **Intervention**

One intervention arm, in which participants daily ingest an (in vitro designed and proven effective modulatory) probiotic mixture for a period of 3 months; compared to controls (in the other arm) that receive a placebo.

- Product name: Ecologic ® Panda II
- Probiotic strains: Bifidobacterium breve (W25), Bifidobacterium lactis (ATCC SD 5219 en ATCC SD 5220), Lactobacillus plantarum (W62), Lactobacillus salivarius (W57) and Lactococcus lactis (W19), 1\*10<sup>9</sup> Colony Forming Units/g.
- Composition: rice starch, maltodextrines, potassium chloride, magnesium sulphate, bacterial strains and manganese sulphate.

The placebo mixture is similar in aspect, consistency and taste.

## **Study burden and risks**

- The supply of probiotics to young children has been considered as safe in general. All used strains contain the QPS status.
- All children have to endure blood samples twice. The first one is part of the standard 'eczema treatment', while the second one is considered as additional intervention. Nevertheless, the second blood sample is important because of determination of specific IgE and cyto- and chemokines before and after (probiotic or placebo) intervention.
- Parents have to visit our hospital 4 times during the study, that is usual frequency for children suffering from atopic dermatitis.
- The parents will be asked to update an included diary weekly. They should report eczema severity, nutrition pattern, periods of illness/infection, medication use, and possible (serious) side effects.

You may also see paragraph 5 (Safety) and 7 (Ethical issues) of the (Dutch) protocol.

## **Contacts**

### **Public**

Sint Antonius Ziekenhuis

Postbus 2500  
3430 EM Nieuwegein  
Nederland  
**Scientific**  
Sint Antonius Ziekenhuis

Postbus 2500  
3430 EM Nieuwegein  
Nederland

## **Trial sites**

### **Listed location countries**

Netherlands

## **Eligibility criteria**

### **Age**

Children (2-11 years)

### **Inclusion criteria**

age 0-15 months  
atopic dermatitis for at least 2 weeks, with SCORAD score 15-50

### **Exclusion criteria**

class II or higher class topical corticosteroid use, or use of systemic corticosteroids  
antibiotic treatment just before enrollment or in the first week of the study  
syndromal abnormalities, major medical problems  
lack of knowledge of the Dutch language

## **Study design**

## Design

Study phase:	3
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Treatment

## Recruitment

NL	
Recruitment status:	Will not start
Enrollment:	120
Type:	Anticipated

## Ethics review

Not approved	
Date:	18-01-2011
Application type:	First submission
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

## 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

ClinicalTrials.gov

CCMO

### ID

NCT01230190

NL34163.100.10