Anorectal function and the effect of childbirth in patients with M Crohn

Published: 26-04-2013 Last updated: 26-04-2024

Disease activity, perianal involvement and lesion localisation are important influential parameters making sure no pregnancy is exactly alike and mode of delivery needs to be considered on an individual patient level. A complete anorectal function...

Ethical review Approved WMO

Status Recruitment stopped

Health condition type Anal and rectal conditions NEC

Study type Observational invasive

Summary

ID

NL-OMON39857

Source

ToetsingOnline

Brief title

Anorectal function, childbirth and M Crohn

Condition

- Anal and rectal conditions NEC
- Pregnancy, labour, delivery and postpartum conditions

Synonym

Feacal incontinence

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit Medisch Centrum

Source(s) of monetary or material Support: Ministerie van OC&W,Anorectaal functie onderzoek voor de bevalling wordt als deel van de academische zorg door de verzekering betaald. Het anorectaal functieonderzoek na de bevalling wordt bij het ontbreken van

klachten door onderzoeker zelf verricht.

Intervention

Keyword: Anorectal function, Childbirth, Colitis Ulcerosa/M Crohn, Feacal incontinence

Outcome measures

Primary outcome

Anorectal function evaluation (questionaires, anal manometry, rectal compliance and anal endosonography) before and six months after delivery.

Secondary outcome

The effect of child birth on anorectal function regarding

- * Perianal involvement
- * Complaints
- * Disease activity
- * Pregnancy outcome

Study description

Background summary

The European Crohn and Colitis organisation (ECCO) guidelines advise that elective caesarean section is indicated for all woman with perianal involvement even though the evidence suggesting harm from vaginal delivery in woman with inactive disease is scarce.

Disease activity, perianal involvement and lesion localisation are important influential parameters making sure no pregnancy is exactly alike and mode of delivery needs to be considered on an individual patient level.

A complete anorectal function evaluation (AFE) in relation to degree of (perianal) involvement prior to delivery could be a tool in predicting functional sphincter outcome and incontinence after vaginal delivery in patients with Crohn*s disease and Colitis Ulcerosa. Thereby contributing to the decision making process surrounding what mode of delivery is the most

appropriate for each patient.

Study objective

Disease activity, perianal involvement and lesion localisation are important influential parameters making sure no pregnancy is exactly alike and mode of delivery needs to be considered on an individual patient level.

A complete anorectal function evaluation (AFE) in relation to degree of (perianal) involvement prior to delivery could be a tool in predicting functional sphincter outcome and incontinence after vaginal delivery in patients with Crohn*s disease or Colitis Ulcerosa. Thereby contributing to the decision making process surrounding what mode of delivery is the most appropriate for each patient.

Study design

Descriptive prospective study.

Study burden and risks

No additional risks are associated with participation for the healthy controls, patients with M Crohn or for patients with Colitis Ulcerosa.

In providing the best possible care it is of the utmost importance to know what mode of delivery is best suited for each individual patient.

Contacts

Public

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

- * Age 18 years and older
- * Informed Consent (IC)
- * Pregnancy
- * Healthy controls, patients with Colitus Ulcerosa, patients with M Crohn

Exclusion criteria

* Refusal of participation

Study design

Design

Study type: Observational invasive

Intervention model: Other

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Prevention

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 26-04-2013

Enrollment: 300

Type: Actual

Ethics review

Approved WMO

Date: 26-04-2013

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 23-04-2014

Application type: Amendment

Review commission: METC Amsterdam UMC

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

CCMO NL42002.029.12

Study results

Date completed: 20-08-2015

Actual enrolment: 12

Summary results

Trial ended prematurely