

Fecal microbiota transplantation for improved Fructose catabolism and Insulin sensiTivity In patients with metabolic syndrome

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We hypothesize that restoration of gut microbiota diversity (by using donor FMT enriched in *Desulfovibrio* strains) could have explicit beneficial effects on glucose metabolism and NAFLD (via improved fructose catabolism), which is driven by...

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON24239

Bron

Nationaal Trial Register

Verkorte titel

FFIT trial

Aandoening

metabolic syndrome, insuline resistance

Ondersteuning

Primaire sponsor: Amsterdam UMC

Overige ondersteuning: ZONMW VICI

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Primary endpoint are changes in insulin sensitivity (assessed by 2 step hyperinsulinemic clamp and CGM) between 0 and 6 weeks.

Toelichting onderzoek

Achtergrond van het onderzoek

To investigate whether fecal microbial transplantation (FMT) from healthy donors (average Shannon diversity > 4.2 with desulfovibrio) compared to own feces administered through a small intestinal tube alters insulin sensitivity (assessed by 2 step hyperinsulinemic clamp and CGM (freestyle libre) and fructose catabolism in relation to gutmicrobiota composition between 0 and 6 weeks after intervention in patients with metabolic syndrome and low gut microbiota diversity from either South Asian Surinamese(i.e. Surinamese of Hindustani or Pakistani descent) (SAS) or Caucasian Dutch descent

Doel van het onderzoek

We hypothesize that restoration of gut microbiota diversity (by using donor FMT enriched in Desulfovibrio strains) could have explicit beneficial effects on glucose metabolism and NAFLD (via improved fructose catabolism), which is driven by different (fructose derived) metabolites between SAS and Caucasian Dutch metabolic syndrome subjects.

Onderzoeksopzet

0 and 6 weeks

Onderzoeksproduct en/of interventie

(donor) fecal transplantation

Contactpersonen

Publiek

AMC
Max Nieuwdorp

Wetenschappelijk

AMC

Max Nieuwdorp

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Inclusion criteria metabolic syndrome subjects:

- Treatment naïve (no medication use)
- Metabolic syndrome (3 out of 5 NCEP ATPIII criteria with at least fasting glucose ≥ 5.6 mmol/l)
- Aged 18-70 years
- BMI ≥ 25 kg/m²
- Low gut microbiome diversity in 3 baseline fecal samples taken during 1 week (average Shannon diversity 4.2 or lower)
- Male/postmenopausal females
- South Asian Surinamese (SAS) or Caucasian descent

Inclusion criteria fecal donors:

- Treatment naïve (no medication use)
- Normal fasting glucose and lipid levels
- aged 18-70 years
- BMI < 25 kg/m²
- Male / female gender
- High microbiota diversity in 3 fecal samples taken during 1 week (average Shannon 4.2 or higher) with presence of Desulfovibrio strains
- South Asian Surinamese (SAS) or Caucasian descent

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Exclusion criteria metabolic syndrome subjects/donors:

- Inability to provide written informed consent
- Antibiotics use in the last 3 months and proton-pump inhibitor use

- Alcohol or nicotine abuse
- Evidence for compromised immunity

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Dubbelblind
Controle:	Placebo

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	31-10-2021
Aantal proefpersonen:	48
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nee

Toelichting

see above

Ethische beoordeling

Positief advies	
Datum:	29-10-2021
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL9838
Ander register	METC AMC : 2021/170

Resultaten

Samenvatting resultaten

n/a