ISPEN Basic Nutrition Support Study Day for Gastroenterology SpRs

7th January 2011

Are We Able to Treat IBD with Diet?

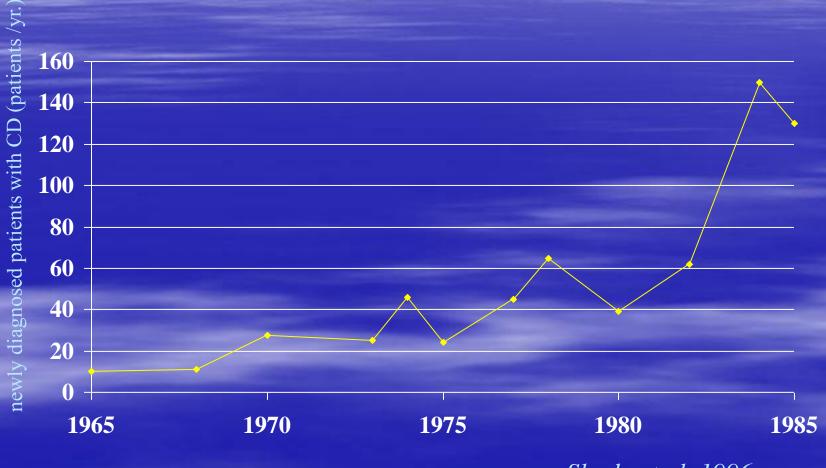
Professor Colm Ó'Moráin, D.Sc. (University of London), D.ScHonoris Causa (University of Athens), M.Sc., M.D., M.A., Dip. Imm., F.A.C.G., F.E.B.G., F.R.C.P., F.R.C.P.I., F.T.C.D., A.G.A.F. Consultant Gastroenterologist, Adelaide and Meath Hospital Incorporating The National Children's Hospital. Dean of Health Sciences and Professor of Medicine, Trinity College Dublin. President-Elect, United European Gastroenterology Federation.

Overview of Presentation

Diet & Malnutrition

- Enteral Diet Therapy
 - Evidence
 - Side effects
 - Mode of action
- Diet the Future

Diet as a Risk Factor in IBD Incidence of CD in Japan



Shoda et al, 1996

Diet as a Risk Factor in I.B.D.

Incidence of I.B.D. in Europe:

- 0.81 / 10⁵ in Galicia Spain.

 $-4-6/10^5$ in Northern Europe.

Diet as a Risk Factor in I.B.D.



Northern Europe (7.0)

Southern Europe (3.9)

(Shuhaibar, M. 2011)

Incidence of I.B.D. in Ireland

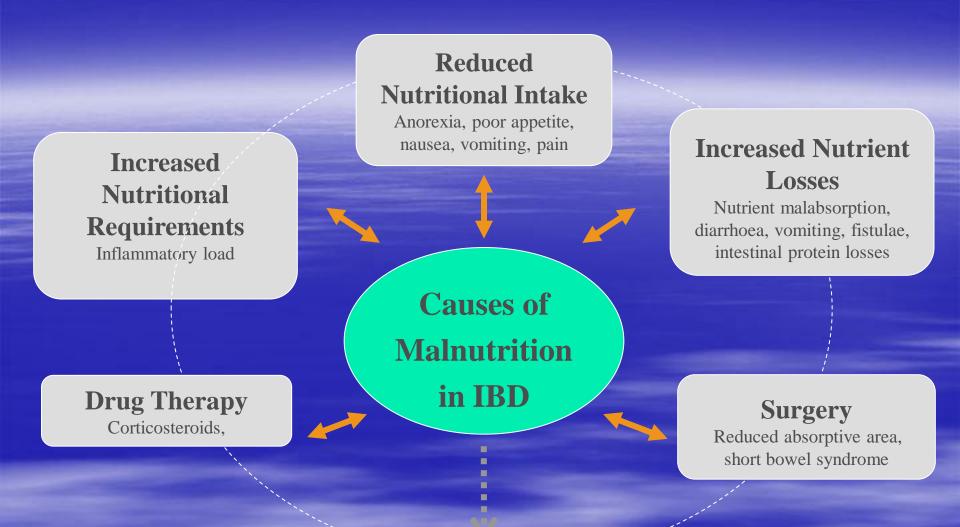
U.C. (M: F= 18.6 :11.6 / 100,000)

C.D. (M: F= 4.5 :5.9 / 100,000)

(Shuhaibar, M. 2011)

Diet in IBD

Nutritional role Primary therapeutic role



Prevention Strategy

Nutritional monitoring and appropriate intervention as part of the multidisciplinary management of CD

O'Sullivan. Proc Nut Soc 2009

Diet and Osteoporosis - General Guidelines

General Advice: all IBD: BSG: Gut 2000 Diet

- Adequate dietary calcium; add calcium tablets if necessary to ensure daily intake of 1500 mg
- Seek and treat vitamin D deficiency
- Lifestyle
- Exercise
- No smoking
- No alcohol excess

Diet and Osteoporosis - General Guidelines

Steroids: BSG, Gut 2000

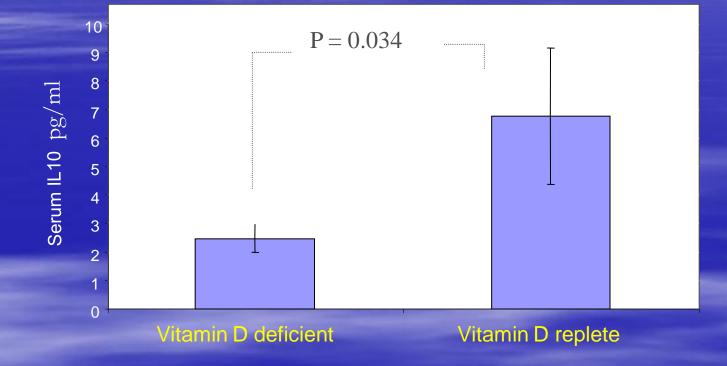
- Lowest dose for as short as possible
- Concurrently 800 units vitamin D daily
- Measure BMD, repeat each year in which steroids are given
- If T score < 1.5 offer bisphosphonate (in addition to vitamin D)</p>

AGA, Gastroenterology, 2003

- Ensure adequate calcium
- At-risk Sub-groups

Vitamin D and Inflammation in CD

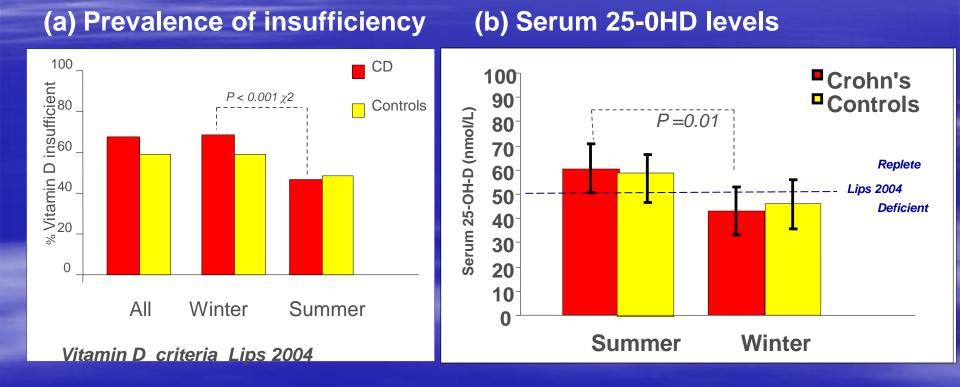
25 (OH) D and IL-10 in CD



Kelly P, Nic Suibhne T, Ó'Moráin C, <u>O'Sullivan M</u>; IJVNR 2010 in press

Vitamin D Deficiency is Common in CD

N=200



Nic Suibhne, Ó'Moráin, O'Sullivan 2009

Vitamin D Therapy in IBD?



IRCSET funding – novel roles of vitamin D in inflammation in IBD O'Sullivan, Raftery 2010-13

Iron Deficiency in IBD

Iron deficiency occurs in 45% of patients with IBD and is higher among CD than UC.

Anaemia is present in 35% of IBD patients in OPD and has a significant impact on QOL.



Iron Replacement and I.B.D.

- A recent literature review concluded that iv iron is:
- 1. More effective.

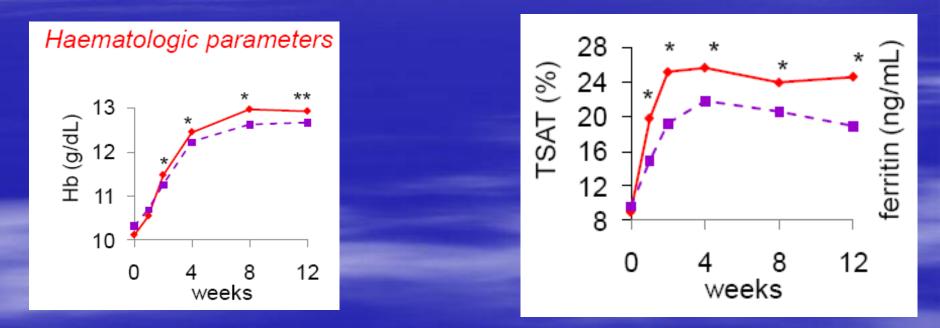
· IIII

- 2. Better tolerated.
- 3. Improves quality of life to a greater extent.
- The mean response of iv iron is 72.5% vs 58.2% for oral iron



Iron Replacement in I.B.D.

 Ferric carboxymaltose versus Iron Sucrose (n=475) in IBD



← FCM -■-IS ; *p <0.001 and **p ≤0.015 for change vs. baseline

Iron Replacement in I.B.D.

Both treatments showed significant improvement in quality of life.

Fewer infusion site reactions 0.4 vs 2.5%.

FCM also required fewer infusions and better adherence.

Efficacy and safety of standardised ferric carboxymaltose doses vs. individually calculated iron sucrose doses for IBD-associated iron deficiency anaemia: A multicentre, randomised controlled trial (FEGRIcor)

R. Evstatiev, et al. P0420

Enteral Nutrition as Primary Therapy in CD

Primary Therapy

<u>1. Elemental Diet</u>

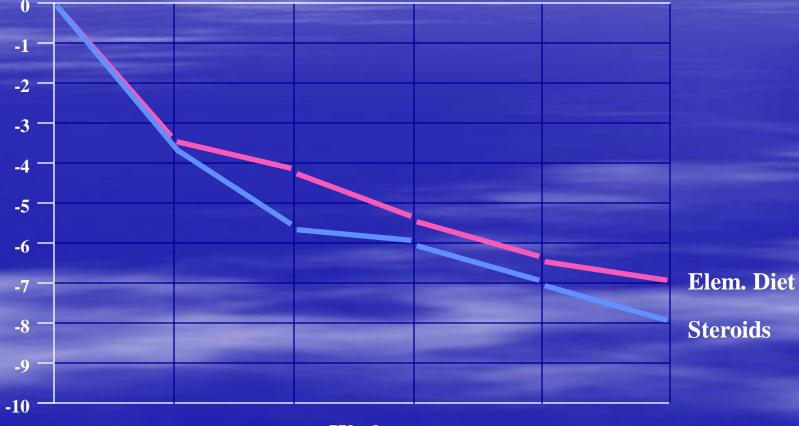
nutrients in simplest form (protein as aa, short chain fatty acids, glucose) 2. Semi-Elemental (peptide) **3. Polymeric** (whole protein, routine use, cheap)

Landmarks in Diet Therapy

- 1970s Uncontrolled trials
- 1984 Controlled trial
- 1990s Meta analyses
- 2000 Reviews
- 2000+ Guidelines; Era of Biologics

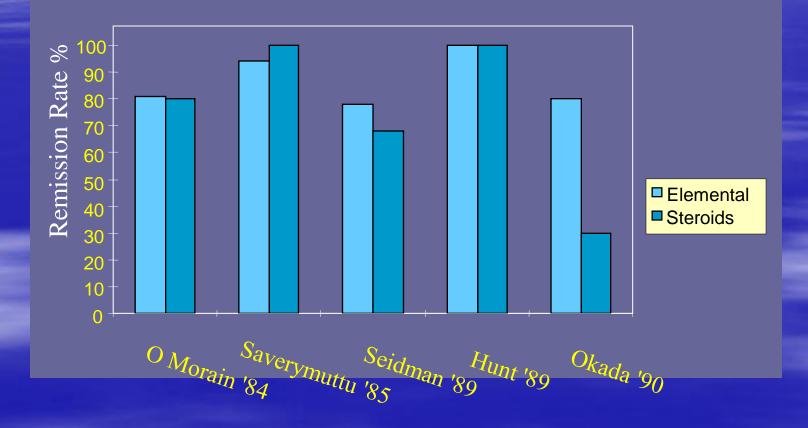
Elemental Diet v. Steroids in CD

Change in clinical score (neg. score indicates clinical improvement)



Weeks O'Morain et-al Digestive diseases and sciences 1987

Primary Therapy: Enteral Nutrition v Steroids in CD



Enteral Diets as Primary Therapy Meta-analysis

- Steroids are superior
- Enteral better than placebo (60%)
- No difference between polymeric v elemental : peptide inferior
- Not essential to be elemental
- Diet more suited to some subgroup Messori 1990, Fernandez-Banares 1995

Enteral Diets - Efficacy

Elemental diets induced remission in 77-100% of compliant patients (4 trials; n = 111),

Elemental diets are as effective as steroids

O'Morain'84, Hunt '89 Seidman '91, Gorard '93

Drug Therapy – Side Effects

Drug

Side effects

Corticosteroids

Newer steroids Methotrexate Cyclosporin

Azathioprine Sulphasalazine Bone disease, growth suppression, Cushings

Fewer side-effects

Bone marrow suppression, abnormal LFT's

Nephrotoxicity, hypertension

Pancreatitis, Bone marrow suppression

Rashes, allergy

Nutritional Therapy - Side effects

Free from major side effects.

Safe therapy.

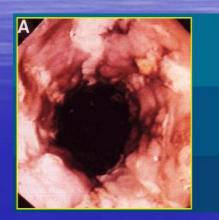
Diarrhoea, nausea, headaches.

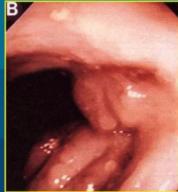
Nutrition - End-Points for Clinical Trials?

- Drop in CDAI 70 points.
- Improved Quality of Life.
- Changes in inflammatory cytokine levels.

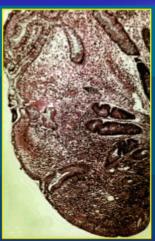
Nutrition - End-Points for Clinical Trials?

Endoscopic healing





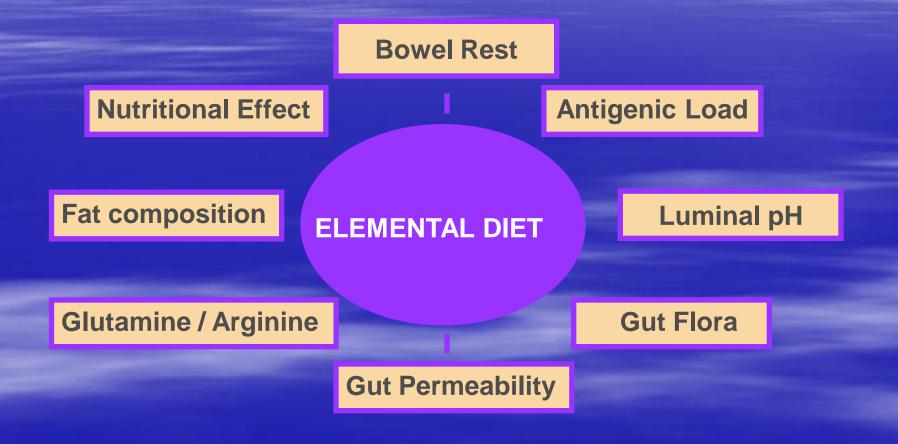
Histological healing



4 Weeks posttreatment

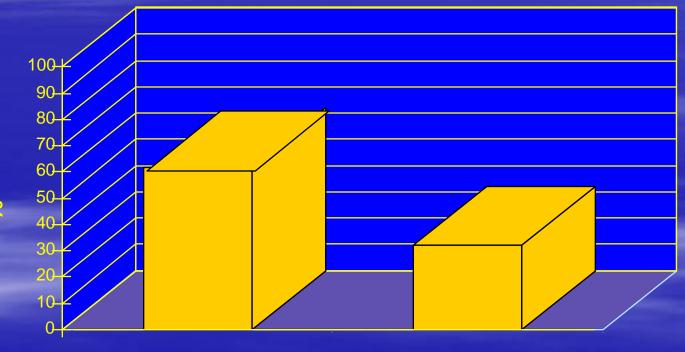


Elemental Diet - Mode of Action



Node of Action : Intestinal Permeability crEDTA Before and After Rx with an Elemental Diet

Teahon et al 1990

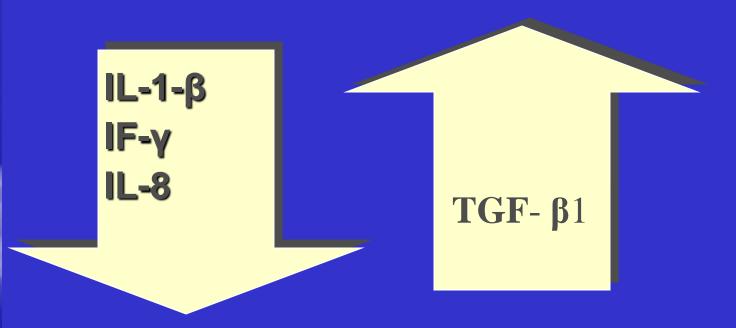


BEFORE

AFTER

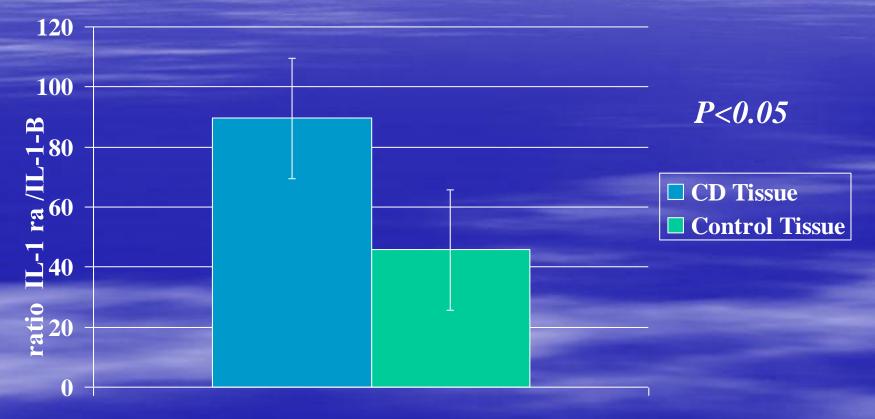
Mode of Action: Anti-Inflammatory

Mucosal Cytokine (mRNA) Response to Polymeric Diet CT3211



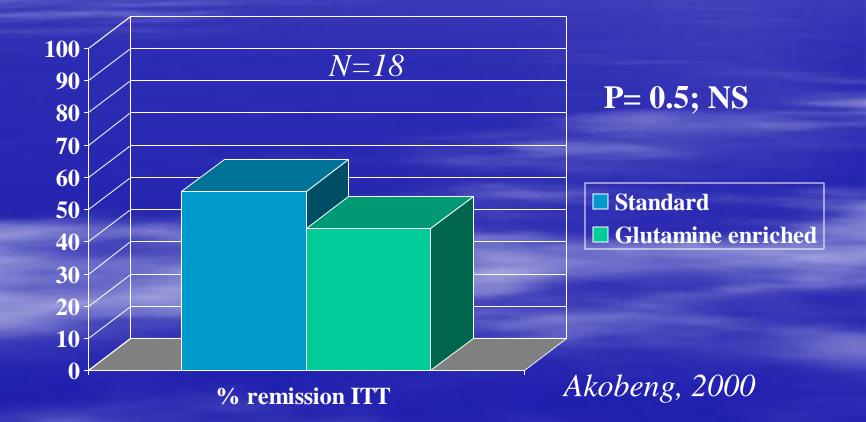
Fell, 2000

Mode of Action: Anti-inflammatory Effects of an enteral diet on CD-affected tissues in vitro

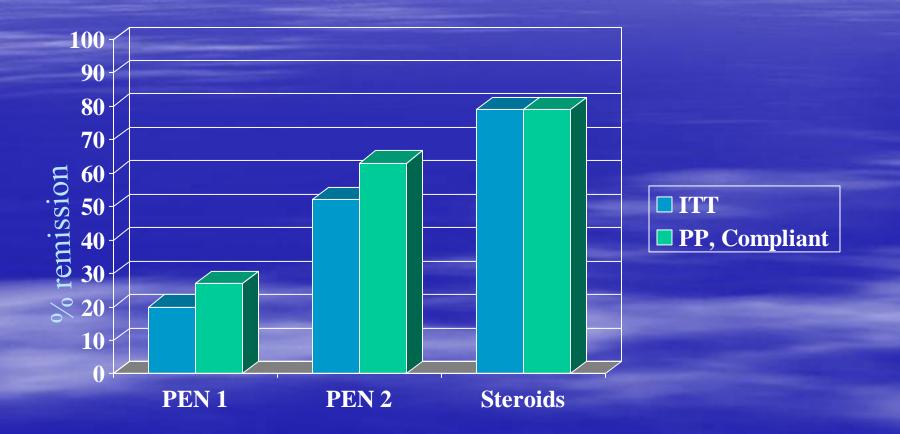


Meister, et al 2001

Mode of Action: Glutamine Glutamine-enriched polymeric diet in active CD

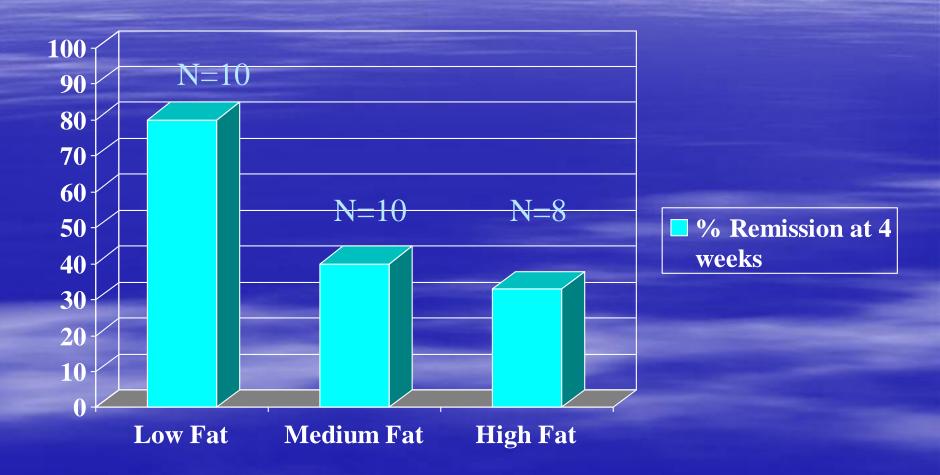


Mode of Action : Role of Fat



Gassull et al, 2002

Mode of Action : Role of Fat



Bamba et al, 2003

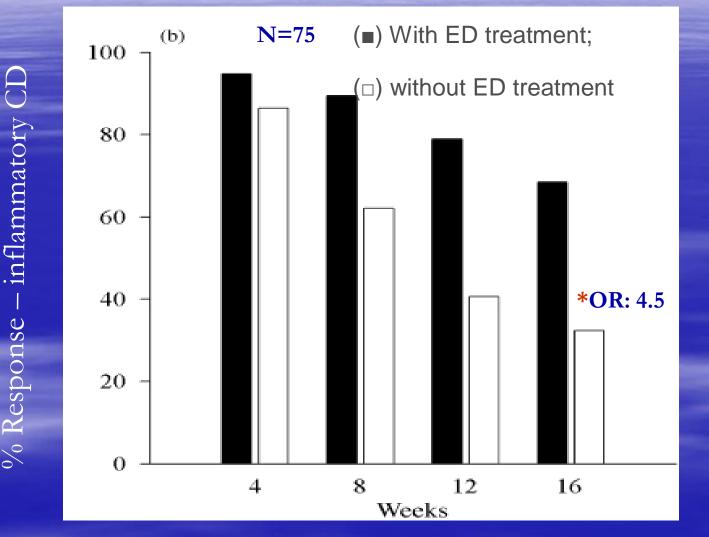
Fat: Fish Oil in Crohn's Disease

| | Remission at 1 Year |
|---------------|------------------------|
| Fish Oil | |
| (2.7g n-3 FA) | 23 (59%) * |
| n = 39 | |
| Placebo | 10 (26%)* |
| n = 39 | |

*P = 0.003

Belluzzi et al, N Eng. J Med, 1996

Elemental Diet and Infliximab



Torao Tanaka et al. J Gastroenterol Hepatol. 2006;21(7):1143-9

EN as Primary Therapy : Guidelines

Europe - ESPEN (2006)

- First line therapy in children
- Therapy in adults in whom steroids are not suitable

UK - BSG (2004)

- First line in children with impaired growth/malnutrition
- Adults specific cases

O'Sullivan. Proc Nut Soc 2009

Enteral Diets In CD - Summary

INDICATIONS

- Active disease
- Paediatric patients
- Conventional treatment failure
- Steroid dependence
- Steroids poorly tolerated / side-effects
- Strictures due to oedema
- Pregnancy

Diet and IBD - The Future

Basic research

- Clinical trials
- Multidisciplinary

Disease specific formula



6th Congress of ECCO 10 year ECCO anniversary February 24-26, 2011