Abstract Submission for ESPEN 2010

Liver and gastrointestinal tract

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PATIENT OUTCOMES OF STOPPING TEDUGLU TIDE (GATTEX)

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The presenting author fulfills the above conditions and wants to apply for a Travel Award: No

Rationale: An analogue of glucagon-like peptide-2, Gattex was tested in patients with parenteral nutrition (PN)-dependent short bowel syndrome in a phase III clinical trial for effectiveness to reduce PN volume. This study evaluated clinical outcomes within the first year after stopping Gattex.

Methods: Subjects who completed the Gattex trial were eligible for outcomes reporting by their clinical sites. Reported outcomes were PN volume, weight, serum proteins, and adverse events. Subjects with stable or reduced PN volume by 12 mo after stopping drug (POS, n=22) were compared to those who had their PN volume increased (NEG, n=14). Data are median (range). The Gattex clinical trials defined drug non-response (NR) as <20% reduction in PN volume (n=15).

Results: 11/20 sites reported complete data for 36/53 eligible study subjects. POS subjects had longer small bowel (SB) and colon and trended towards lower baseline PN volume (Table). POS subjects had lower PN volume change with Gattex (NEG vs POS, -4.7 (-9.6 to -1.4) vs -1.9 (-10.6 to +1.8) L/wk, p=0.006. During 12 mo after stopping Gattex, weight change was not different for NEG vs POS [-2.5 (-11.5 to +5.0) vs -0.10 (-5 to +3.7) kg, p=0.178]. Subjects without colon in continuity (n=6) increased PN volume. When 4 NR from NEG and 11 NR from POS were removed, colon length was longer (p=0.028) and pre-Gattex PN volume trended lower (p=0.139) in the POS subjects.

<table>
<thead>
<tr>
<th></th>
<th>SB (cm)</th>
<th>Colon (cm)</th>
<th>Pre-Gattex PN Volume (L/wk)</th>
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</thead>
<tbody>
<tr>
<td>NEG</td>
<td>30 (0-213)</td>
<td>55 (0-200)</td>
<td>13.25 (4.65 - 24.5)</td>
</tr>
<tr>
<td>POS</td>
<td>59 (10-170)</td>
<td>90.5 (0-200)</td>
<td>7.99 (3.77 - 17.25)</td>
</tr>
<tr>
<td>P</td>
<td>0.042</td>
<td>0.007</td>
<td>0.067</td>
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</tbody>
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Conclusion: SBS patients with longer colon and SB length, colon in continuity, and lower baseline PN volume are more likely to sustain the reductions in PN volume they obtain using Gattex. Longer outcomes may support that weaning facilitated by Gattex in some patients has a lasting effect without nutritional compromise.


Keywords: home parenteral nutrition, intestinal failure