

On the Research Front

New trials

We have a number of trials due to start in the next couple of months. These trials are focussing on the following conditions:

- Crohn's disease
- Ulcerative Colitis
- Erosive Oesophagitis

These trials are still undergoing HREC process, however if you would like to register your interest in participating please contact the centre on 02 9713 4011 or email: clinical_trials@cdd.com.au.

Long-term anti-MAP therapy – minimal side effects

An abstract on the side-effects profile of long-term anti-MAP therapy was submitted to the American College of Gastroenterologists (ACG), Annual Scientific Meeting 2008 and will be published in the September Issue of American Journal of Gastroenterology.

This abstract is available to those interested.

Bowel Preparation Capsules

Current bowel preparations come in a powder form that is often difficult to finish with patients experiencing side effects such as nausea, headaches and vomiting.

CDD is in the process of assessing the effectiveness of a bowel preparation with added electrolytes and salts to minimise side effects.

This new bowel preparation also comes in capsule form which should make it easier to take the bowel preparation.

CDD is currently doing clinical practice observations to assess whether the bowel prep capsules can adequately prepare the bowel for colonoscopy while at the same time ease the discomfort and side effects associated with taking bowel preparations.

CDD is in the process of finalising the bowel prep capsule in anticipation of a clinical trial; however the bowel preparation capsules can be made available to patients undergoing colonoscopy at the Centre.

HEPACONDA Trial

The Hepatitis C trial has been suspended so that further research and refinement to the double therapy could be conducted. While results showed significant improvement was demonstrated in liver function among participants in the study, total normalisation of liver function was not seen and further formulation is warranted before continuing the study.

GGT showed an immediate and lasting return to the normal range, and AST came back close to normal, though there was minimal effect on viral load and ALT.

Hep C infections which reports high levels of adverse effects, this is a significant factor in planning the dose ranging study.

We hope to improve the therapy and provide patients with a more effective treatment that will increase the health of the liver and aim to minimise damage caused by this disease to the liver.

We thank the numerous patients who showed interest in the study and the patients who completed study participation. Thank you to Dr Benstock, Dr Weltman and the CDD gastroenterologists for all their help with the trial!

NOVEL THERAPY

FOR DIENTAMOEBIA FRAGILIS AND BLASTOCYSTIS HOMINIS PARASITES

B. hominis and *D. fragilis* are arguably the most common parasites in Australia and the Western world. Some of these strains cause diarrhoea, cramping, wind and indeed Colitis and the major feature of these two parasites is that they are extremely difficult to eradicate. Flagyl (Metronidazole) has been previously recommended but almost uniformly fails to eradicate. Hence a new therapy – enema administration of special anti-parasitic antibiotics has been developed at the CDD to

tackle this problem. Although the numbers are very early so far, four out of four people who have had multiple treatments with various other medications – were cured after a single treatment.

Trials are now undergoing especially in those who have had failed therapy for these parasites elsewhere to see how well we can deliver this treatment to the community and cure the parasite infestation without having to take oral medications, consequently reducing side effects.

Don't forget if you receive a follow-up letter from us, please call CDD as soon as possible. A simple phone call might make all the difference...

ISSUE 008 OCTOBER 2008

THE Inside Story

Published quarterly for the Centre for Digestive Diseases

Surf's up...at CDD



Constipation –
Light at the end of the Tunnel?

Pigs don't miss out on
Colonoscopy!

CDD HREC: Patients welfare first

On the Research Front New Trials

Novel therapy for *Dientamoeba fragilis* and *Blastocystis hominis* parasites



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CDD enters the city to surf



In August, CDD entered a small but keen team in the City to Surf.

No ifs...just butts!

None of us had entered before and while we were excited, we were overwhelmed with the numbers of people who enter this run/walk.

Four starting points were needed

Much discussion ensued about slogans for our team's T-shirts and we finally decided on a very simple but effective

around Hyde Park to control the 70,000 entrants. Fortunately we had entered ourselves in the "back of the pack" so we were not crushed in the rush.

While waiting for our starting gun to go off, the race had already been won...so armed with that information we all decided we would just enjoy the stroll. We had never intended to run, just walk briskly, but we hadn't realised how difficult it would be to do that with so many people in front and behind.

Everyone enjoyed the day, we all completed with times we were happy with and while there were a few swollen knees, stiff bodies and vows that we would never do it again on Monday, we are now talking about entering next year and getting sponsorship.

New treatment for *C. difficile* diarrhoea

C. difficile bacterium infects the colon causing diarrhoea and abdominal pain and commonly causes hospital acquired diarrhoea. Standard treatment uses antibiotics however many patients relapse after treatment. CDD has developed a novel therapy called hyperimmune egg powder, which contains antibodies produced by healthy chickens immunised with *C. difficile* antigens. Eggs are spray dried to produce a powder which is taken for 10 days. This treatment currently has a 90% cure rate. For further enquires please contact CDD.

Dr Warwick Adams

MBBS FRACS MS
Colorectal Surgeon

Dr Warwick Adams graduated from the UNSW with Honours in 1982 and undertook surgical training at The Westmead Hospital. He gained his general surgical fellowship in 1989, certified in Colonoscopy with the Gastroenterological Society of Australia, completed his fellowship in Colorectal surgery in 1993 and completed his MS in 1994.

He has been a lecturer in surgery at the UNSW and has been involved in extensive research in the field of colon cancer.

Dr Adams has been a member of the team at CDD since April 2007 and is interested in the various therapies that are available for the treatment of constipation.



Dr Warwick Adams MBBS FRACS MS
Colorectal Surgeon

Constipation light at the end of the tunnel?

Dr Warwick Adams a surgeon with extensive experience in laparoscopy, haemorrhoid treatment and treatment of constipation has joined the Centre for Digestive Diseases. He has developed a particular interest in exposing the underlying cause of constipation. His research efforts will attempt to identify whether there is an underlying infective cause of constipation – almost certainly the most common cause of constipation in the community – which has in the past been bothered by a misconception that lack of fibre,

lack of exercise and lack of water is the cause. Preliminary indicators are that treatment with certain antimicrobial agents can give relief to patients with the most difficult of constipation that has troubled them for many years.

Consultation appointments can be made through the centre with a GP referral in order to avail all the therapy. We invite you to help with this very important research and to support Warwick Adams in his effort.

Travel Diary DDW 2008

Digestive Diseases Week showcases the research and clinical work relating to numerous gastrointestinal conditions such as Crohn's disease and IBS. This year the annual DDW was held in San Diego.

Having never been to the United States, I was more than excited when I was given the opportunity to travel with Prof Borody to the annual DDW. The wonderful work of research and CDD staff saw 3 of our abstracts accepted for poster presentation.

A flurry of activity was seen in the weeks leading up to DDW, as the research department prepared for the poster presentation.



As we boarded the plane in Sydney bound for Los Angeles, Prof Borody guarded the posters as if they were national treasure.

The flight to Los Angeles was anything but uneventful with Prof Borody and his angels enjoying the fabulous services offered by the gracious staff of Qantas. Going through LA airport for our

connecting flight however, took the better part of 2 hours with airport clearance procedures feeling more like a jet lagged Broadway musical as we took our shoes on and off for security.

Checking into the hotel we were suddenly surrounded by a sea of purple backpacks as thousands of other gastroenterologists and

Pigs don't miss out on COLONOSCOPY!

Recent work is in progress at the CDD Research Department in developing a colonoscope that can be assisted in its movement forward using a special forward thrusting device. The second prototype has now been built and had to be tested in animals. Hence, the Research Department together with the Endoscopy team flew down to Avalon where 10 pigs underwent colonoscopy in the University of Melbourne Veterinary School Werribee grounds. You might be interested to know that a colon in a pig is far longer than it is in a human being but the colonoscopies all went very smoothly and the new equipment was shown to work better with the forward advancing device. More on this in the future – suffice to say that none of the pigs had any polyps and no bowel cancer!



CDD HREC: Patients welfare first

The Centre for Digestive Diseases has built an impressive reputation for conducting and upholding quality research and excellent patient care. What is not well known is the group of people that ensures that the safety of patients is considered first and foremost before the start of any clinical trial.

The Human Research and Ethics Committee or HREC is a group of individuals representing the community. According to guidelines, one individual from each of the following is required to make the committee:

- Medical profession
- Scientific Research
- Professional care

Travel Diary (continued)

physicians all over the country and the world descended upon to the San Diego Convention Centre.

The next five days were a blur of activity as we attended workshops, seminars and presentations regarding the most recent research into treatments for GI conditions. We had the opportunity to showcase

- Legal Profession
- Religious community
- Laity (Lay people)

At CDD, to ensure that all studies are assessed and reviewed as closely as possible, our HREC consists of 2 individuals from each section of the community. This also ensures that we have a complete committee at each meeting.

The HREC members are all volunteers contributing many valuable hours, reviewing and reading studies that will be conducted at the Centre, ensuring that the welfare and rights of patients are considered first. They also make sure that any research is carried out in an ethical, honest manner and

CDD's contribution to research as we presented our posters to DDW attendees.

All our posters were met with great interest and enthusiasm as Prof Borody fielded questions from a crowd of fellow gastroenterologists and researchers. It was interesting to see the impact our treatments and our clinical research has on the worldwide community.

most importantly, the risks for the patient are minimised. The HREC forms an important part of the process of taking new medicines, devices and treatments from experimental stages to clinical use. **But CDD needs volunteers from members of the community.**

Due to members leaving, **we are currently seeking volunteers from the Religious and Scientific Research community to help complete our HREC.** If you would like to know more or are interested in volunteering for any of the available positions please contact the Centre on 9713 4011 (press 3 for research) or email your expressions of interest and resume to secretary_hrec@cdd.com.au.

People were more than eager to hear and learn what we offer our patients in the treatment of their G.I. conditions.

As we boarded the midnight flight home, we couldn't help reflecting on the last couple of days. All in all, it was a successful venture allowing us the opportunity to show the world that CDD is indeed the centre for excellence!

your team

- Prof Thomas Borody is the founder and Medical Director of CDD (1984). He graduated with honours in Medicine from the UNSW. He is a Fellow of the Royal Australian Society of Physicians, Fellow of American College of Gastroenterology and Fellow of American College of Physicians.
- Dr Antony Wettstein is a graduate with Honours from the University of NSW. He is a Fellow of the Royal Australian Society of Physicians.
- Dr Simon Benstock is a graduate in Medicine from the University of NSW. He is a Fellow of the Royal Australian Society of Physicians.
- Dr Warwick Adams became a Fellow of the Royal Australian College of Surgeons in 1989. He completed his Master of Surgery Degree in 1995. He has been a specialist consultant in Colorectal Surgery since 1995.
- Dr Sanjay Ramrakha is a staff specialist at RPA and Liverpool Hospitals. He graduated from UNSW in 1986 and is a fellow of the Royal College of General Practitioners and the Australasian College for Emergency Medicine.
- Dr John Saxon graduated from the University of NSW in 1985 and has been the Senior Sedationist at CDD since 1995.
- Dr Andrew Finckh is a senior staff specialist at St Vincent's Hospital, Sydney. He holds degrees in both Bachelor of Arts from Macquarie University and Medicine from the University of Sydney. He is a fellow of the Australasian College for Emergency Medicine.
- Dr Nisha Kendall graduated from UNSW and became a Fellow of the Royal Australasian College of General Practitioners in 1997.

STOP PRESS: UPGRADE FOR WEBSITES

The CDD website and the *C. diff* support website have recently upgraded. Peter Tomsia, Head of IT, has been working on this with Peter Mackie, our Consultant in the field. We hope to have a brighter and more attractive set of websites to serve you.