

Randomized placebo controlled trial.
Hospitalised children due to ASUC were randomized to antibiotics (amoxicillin, vancocin, metronidazole, doxycycline/ciprofloxacin) or placebo.
All of them with IV steroids

Primary endpoint: disease activity (PUCAI) at day 5.

Results:

- Day 5 PUCAI: 25 vs 40.4 in AB+IV steroids vs IV steroids, $p=0.037$
- No differences in colectomy rate.
- Decreased microbiome diversity at admission associated to day5-response in the IV steroids arm

Conclusions:

Patients with ASC have alterations in the microbiome characterized by loss of diversity and presence of predominant bacterial species. Quadruple therapy in addition to IVCS improved disease activity on day 5, but larger studies are needed to determine whether this is associated with improved long-term outcomes.

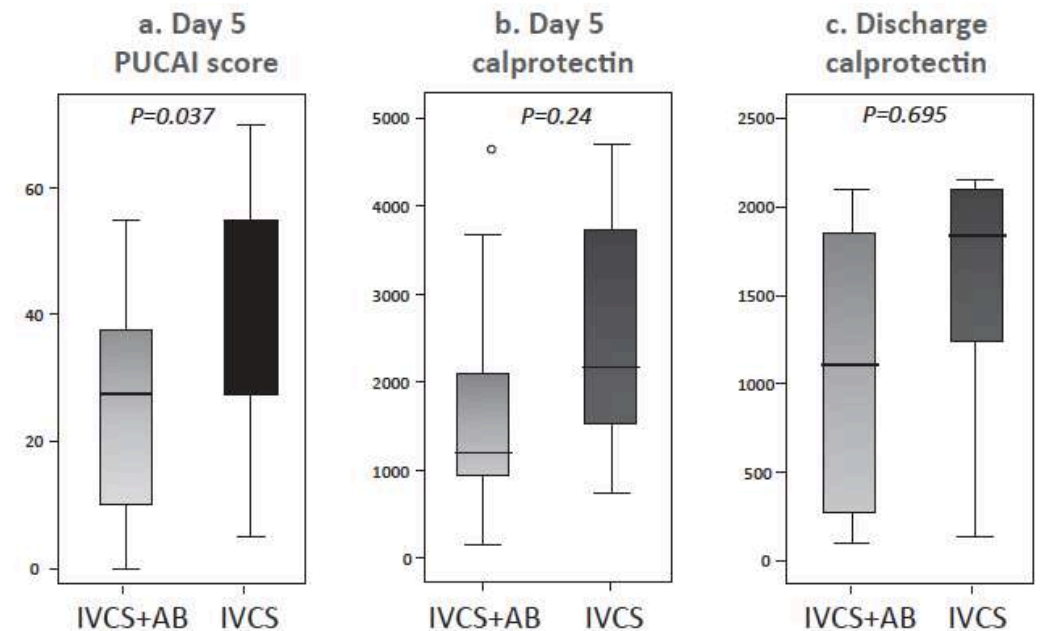


FIGURE 2. Pediatric UC activity index and fecal calprotectin values stratified by the treatment groups.

