

Multicenter, randomized trial.

Pediatric IBD patients (age 8-18) with anemia were randomized to IV dose of ferric carboxymaltose or 12 weeks of oral ferrous fumarate.

Primary endpoints: Change in the 6-minute walking distance (6MWD) from baseline, expressed as Z-score.

Results: N=64

- At week 4 the 6MWD z-score decreased 0.71 in IVferric vs 0.11 oralferrous.
- At 3 and 6 month follow-up, no significant differences in 6MWD were observed.
- Haemoglobin gradually increased in both groups with no differences of the rate of increase at 1,3 and 6 months.
- Adverse events occurred in 16% on IVferric vs 21%oralFerrous.
- Hypophosphatemia was not detected.

Conclusion:

A single dose of IV ferric carboxymaltose was superior to oral ferrous fumarate with respect to quick improvement of physical fitness. At 3 and 6 months after initiation of therapy, no differences between oral and IV therapies. The increase of Hb over time was comparable in both treatment groups.

Ferric Carboxymaltose Versus Ferrous Fumarate in Anemic Children with Inflammatory Bowel Disease: The POPEYE Randomized Controlled Clinical Trial

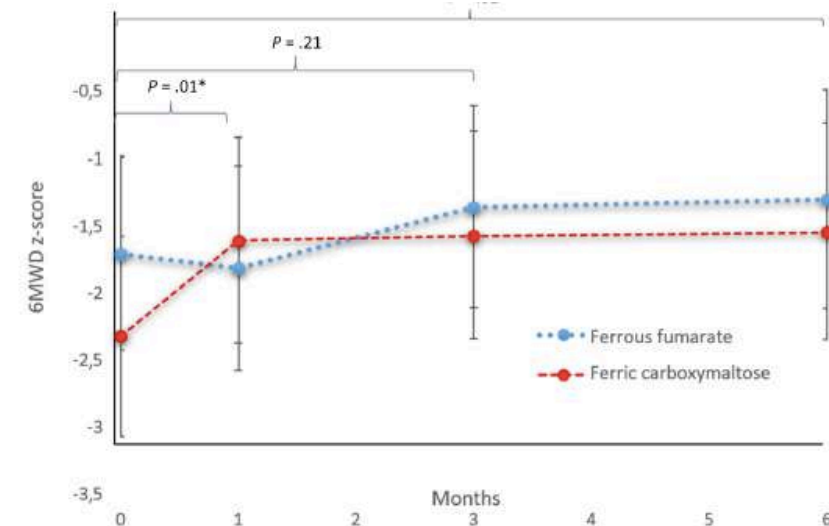


Figure 3. Increase in mean 6-minute walking distance z-score and 95% CIs over time in participants assigned to ferric carboxymaltose (red line) and ferrous fumarate (blue line). * significant.

