2004. IFX+ Cipro

RCT/IFX+Ciprofloxacin/perianal CD/Induction

Clinical and endosonographic effect of ciprofloxacin on the treatment of perianal fistulae in Crohn's disease with infliximab: a double-blind placebo-controlled study

Double-blind, placebo-controlled, randomized trial.
Adult patients with active perianal Crohn's disease (PCDAI >5) were randomized to ciprofloxacin 500mg BD or placebo for 12 weeks. All patients received 5mg/kg infliximab IV at weeks 6,8 and 12 and then q8w (Randomization stratidied according to combo with AZA/MTX)

Primary endpoint: Clinical response >=50% reduction from baseline in the number of draining fistulae at week 18

Results: N=24

- At week 18 response 73% CIPRO-IFX vs 39% PLACEBO-IFX, p=0.12
- Logistic regression analysis showed patients treated with CIPRO-IFX tended to respond better OR 2.37 (95%CI 0.94-5.98), p=0.07.
- Perianal disease activity index score only improved in the CIPRO-IFX group, p=0.008

Conclusion:
A combination of ciprofloxacin and infliximab tended to be more effective than infliximab alone.

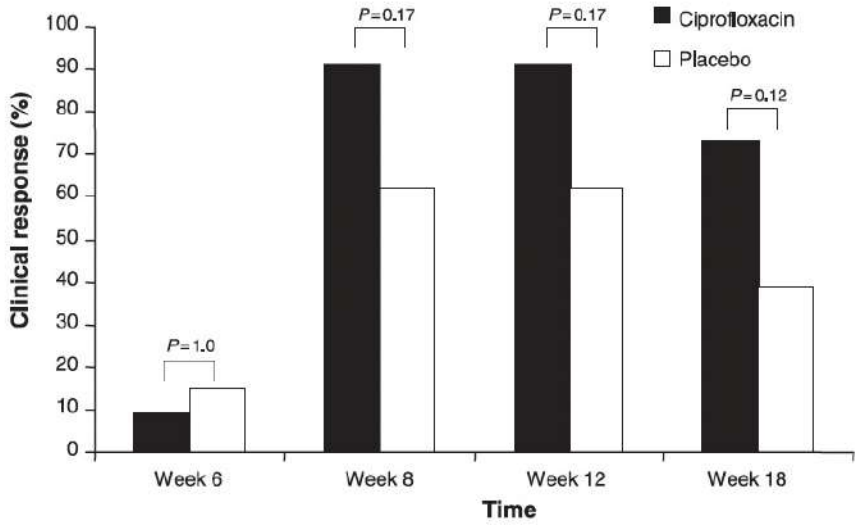

Figure 1. Clinical response at week 6, 8, 12 and 18 in the ciprofloxacin and placebo group.

West RL et al. Aliment Pharmacol Ther 2004; 20: 1329–1336.