

Single-blind, randomized, multicentre, placebo-controlled trial.

Adult patients with active CD (CDAI ≥ 150) were randomly allocated to one of the following 4 groups: a diet low in microparticles or normal in microparticles and low (400mg) or normal calcium (800mg) for 16 weeks. Hence, patients were randomized to one of four groups (LCLM, LCNM, NCLM, NCMN) allowing the influence of calcium and microparticle intakes to be assessed independently.

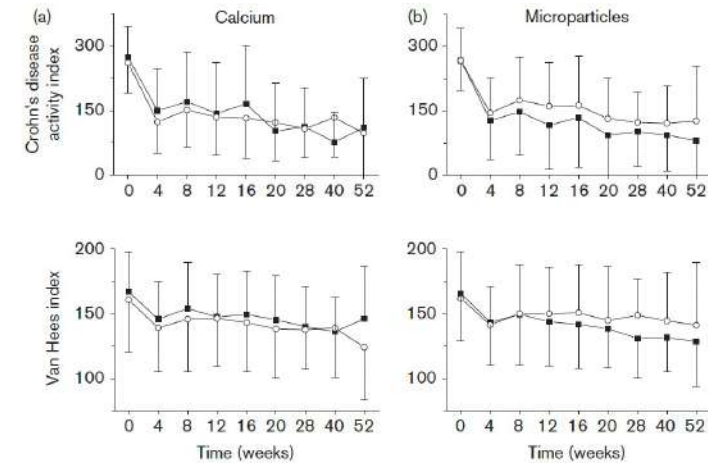
Primary endpoint: Clinical remission week 4.

Results: N=83

- Dietary manipulation did not prove an effect added to corticosteroid treatment on any of the outcomes both at 16 weeks and up to 1 year.

Conclusion:

Our adequately powered and carefully controlled dietary trial found no evidence that reducing microparticle intake aids remission in active Crohn's disease.



Disease activity scores for calcium and microparticle groups. CDAI (mean \pm SD) from entry to 52 weeks for (a) normal calcium \blacksquare ($n=40$) versus low calcium, \circ ($n=43$) groups and (b) normal microparticle \blacksquare ($n=41$) versus low microparticle, \circ ($n=42$) groups. There were no significant differences between groups.

