

# FATLOSE trial: Fecal Administration To LOSE weight.

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruiting
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON23407

### Source

Nationaal Trial Register

### Brief title

FATLOSE trial

### Health condition

metabolic syndrome, fecal therapy

## Sponsors and support

**Primary sponsor:** Academic Medical Centre

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**Source(s) of monetary or material Support:** Academic Medical Centre

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## Intervention

## Outcome measures

### Primary outcome

1. Fecal flora composition;
2. Weight.

### **Secondary outcome**

1. Insulin resistance;
2. Biochemical parameters;
3. Inflammatory parameters;
4. Gut epithelium (duodenal and jejunal mucosal biopsies).

## **Study description**

### **Background summary**

Recent research shows that obesity is associated with changed bowel flora composition with a relative abundance of the two dominant bacterial divisions, the Bacteroidetes and the Firmicutes. Interestingly, this specific bacteria associated condition is transmissible: colonization of obese mice with an 'leanmicrobiota' results in a significantly greater decrease in total body fat than colonization with a 'obese microbiota. In addition, Bacteroidetes species are decreased and Firmicutes increased in feces of obese people compared to lean people. Moreover weight correlated with percentage loss of body weight in obese subjects. Changing fecal flora composition in overweight MS patients might therefore be total novel and effective prevention of the rapid increase patients with type 2 diabetes, that is needed so urgently. This trial is performed which infusion of lean donor feces through a duodenal tube, compared with autologic (patients own feces) transplantation.

Endpoints are changes in faecal flora, weight, insulin resistance and systhemic/biochemical parameters.

Folluw up is 12 weeks

### **Study objective**

Hypothesis: infusion of lean donor feces in obese subjects is effective on weight reduction, systemic inflammatory pathways and insulin resistance.

### **Study design**

1. Baseline;
2. 2days;

3. 2 weeks;
4. 6 weeks;
5. 12 weeks.

### **Intervention**

1. Arm 1: allogenic fecal therapy (donor feces from lean volunteer);
2. Arm 2: autologic fecal therapy (patients' own feces).

## **Contacts**

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## **Eligibility criteria**

### **Inclusion criteria**

1. Male obese subjects with metabolic syndrome ( at least 3 out of 5 NCEP metabolic syndrome criteria);
2. 21-65 yr.

## Exclusion criteria

1. Cardiovascular event;
2. Diabetic kidney failure;
3. Prolonged compromised immunity;
4. Antidiabetic medicine;
5. Lipid lowering medicine.

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-01-2009
Enrollment:	20
Type:	Anticipated

## Ethics review

Positive opinion	
Date:	24-04-2009
Application type:	First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
NTR-new	NL1675
NTR-old	NTR1776
Other	CCMO : 17378
ISRCTN	ISRCTN wordt niet meer aangevraagd

## Study results

### Summary results

N/A