

SERIAL FECAL MICROBIOTA INFUSIONS BY COLONOSCOPY FOR ACTIVE ULCERATIVE COLITIS: A FEASIBILITY, SAFETY AND TRANSLATIONAL MONOCENTRIC ITALIAN STUDY

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Poster

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A prospective cohort study of 19 mild-to-moderately active ulcerative colitis patients receiving three serial fecal microbiota transplantations by colonoscopy found clinical response in 50% at week 6 and 56% at week 12, with specific gut bacteria associated with response versus non-response.

KEY POINTS

- Clinical response was achieved in 8 of 16 patients at week 6 (50% per-protocol, 42% intention-to-treat) and in 9 patients at week 12 (56% per-protocol, 47% intention-to-treat), maintained in 8 patients at week 24.
- Clinical remission was achieved in 5 patients at weeks 6 and 12 (31% per-protocol, 26% intention-to-treat), and endoscopic remission in 6 patients at week 12 (37% per-protocol, 31% intention-to-treat).
- Three patients dropped out: two due to disease worsening and one due to hospitalization for nephrolithiasis.
- Microbiota richness was higher in responders; Parabacteroides, Bacteroides, Faecalibacterium and Akkermansia were higher in responders while Peptostreptococcus, Lactobacillus and Veillonella were higher in non-responders.
- The authors concluded serial FMT infusions appear feasible and safe, with comparison to the Infliximab control group suggesting a potential role in maintaining clinical response.

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