

EFFICACY OF LUBIPROSTONE FOR TREATMENT OF CHILDHOOD FUNCTIONAL CONSTIPATION: AN OPEN LABEL RANDOMIZED CONTROLLED TRIAL

Mohammed M. Shamseya

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Poster

Colorectal

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Open-label randomized controlled trial found lubiprostone superior to conventional laxatives for functional constipation in children and adolescents aged 8-18 years.

KEY POINTS

- In 277 patients with functional constipation (ROME IV criteria), 93.4% of the lubiprostone group achieved the primary endpoint (increased spontaneous bowel movements ≥ 1 /week and maintaining ≥ 3 /week for at least 8 weeks) compared to 34.3% in the control group receiving bisacodyl, lactulose, or sodium picosulfate ($p < 0.001$).
- Mean spontaneous bowel movements at 12 weeks were 4.78 ± 0.99 /week with lubiprostone versus 2.70 ± 1.04 /week with conventional laxatives ($p < 0.001$), with sustained effect at 16 weeks (4 weeks post-treatment) in the lubiprostone group only.
- Side-effects occurred in 46% of lubiprostone patients versus 48% of controls ($p = 0.99$), with the most common adverse events being colicky abdominal pain (26%) and headache (14%); no life-threatening drug-related adverse events occurred.
- Lubiprostone is an oral chloride channel-2 activator approved in the United States for adult chronic idiopathic constipation; evidence in pediatric populations has been limited.
- This trial may be relevant to clinicians managing functional constipation in children and adolescents where conventional laxatives show low response rates, frequent side-effects, and non-sustained effects.

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