Antibiotics in IBD:

The good, the bad and the ugly

Dr Smita Halder

Case 2: 39M patient

- UC dx 2013, PSC dx in 2015.
- Recurrent flares of his UC and PSC over past few years
- Compliant with 5 ASAs for UC and ursodeoxycholic acid for PSC
- 4 week history of jaundice and RUQ pain
- Researching potential Rx for PSC : read about the use of vancomycin
- He remembers being on this for C difficile earlier in the year
- Asks if the infection has led to his liver issues??

What would you say to him?

Vancomycin in C Difficile

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Mild diarrhea to severe colitis	Oral and Intravenous Forms	First-Line Treatment	Dosing
High fecal concentration	Risk of Resistance	Fidaxomicin	Combination Therapy



Vancomycin in PSC

Hypothesis

Gut microbiome and bacterial translocation from the gut leads to PSC

Mechanism of action

Vancomycin *may* influence the composition of the gut microbiota and reduce the inflammation associated with PSC



Damman Aliment Pharmacol Ther Feb 2018; 47(7):886-895

Mayo Clinic RCT: vancomycin or metronidazole in patients with PSC- a pilot study





Vancomycin in IBD

- Role of gut bacteria and dysbiosis in the pathogenesis of IBD.
- Case report

Rahman et al.Clin J Gastroenterol 2021 Feb;14(1):159-164.

- 51 M pt with UC/ PSC and post transplant.
- Intractable UC symptoms despite Vedo, switched to Remicade and steroids
- Vancomycin 125mg bid eventually led to remission

Crohn's and Antibiotics



RCTs

Use of antibiotics in patients with Crohn's disease: a systematic review and meta-analysis

- 15 RCTs
- Pooled effect of RR 1.33, 95% CI (1.17-1.51, p<0.00001) Jie Wen Su. J Dig Dis 2015;16(2):58-66

Antibiotics for induction and maintenance of remission in Crohn's disease

- 13 RCTs
- Failure to achieve remission RR 0.86, 95% CI (0.76-0.98)

Townsend et al. Cochrane Database Syst Rev. 2019(2): CD012730

UC and Antibiotics

Reduction in butyrate-producing Firmicutes bacteria in fecal microbiota Increased Actinobacteria and Proteobacteria in colonic mucosal microbiota

Gut microbiota dysbiosis may induce and sustain chronic intestinal inflammation in UC patients Antibiotics decrease the bacterial invasion ability, direct immune modulatory properties

Meta-Analysis of 12 RCTs: UC & Abx

01 Methods:

Compared antibiotic therapy with placebo or no intervention 02 Antibiotics:

Ciprofloxacin Amoxicillin Tetracycline Flagyl Tobramycin Vancomycin Rifaximin 03 Outcome:

Proportion of patients who failed to achieve remission RR 0.77; 95% CI (0.60-0.98), p 0.03

Scandinavian Journal of Gastroenterology, 56:2, 162-170

	Experim	ental	Control		Risk Ratio	Risk Ratio	
Study or Subgroup	Events	Total	Eyents.	Total	Weight	M-H. Bandom, 95% CI	M-H. Random, 95% Cl
2.2.1 Combined antib	olotic thera	PY.					
Mantzaris 1994	7	19	7	20	6.2%	1.05 [0.46, 2.43]	
Ohkusa 2005	2	10	5	10	2.7%	0.40 [0.10, 1.60]	
Ohkusa 2010	85	105	89	105	23.6%	0.96 [0.84, 1.08]	*
Turner 2019	13	16	11	12	18.4%	0.89 [0.66, 1.19]	
Subtotal (95% CI)		150		147	50.8%	0.94 [0.84, 1.05]	•
Total events	107		112			and a start of the	
Heterogeneity; Tau ^a =	0.00; ChP	= 1.80.	# = 3 (P =	0.61)	1" = 0%		
Test for overall effect.	Z = 1.07 (P	= 0,29)				
2.2.2 Ciprofloxacin							
Mantzaris 1997	10	34	10	36	7.4%	1.06 (0.50, 2.22)	
Mantzaris 2001	6	29	6	26	4.7%	0.90 [0.33, 2.44]	
Petersen 2014	7	25	5	25	4.7%	1.40 10.51, 3.821	
Turumen 1998	8	38	20	45	8.1%	0.47 10.24, 0.951	
Subtotal (95% CI)	-	126		132	24.9%	0.83 [0.51, 1.35]	-
Total events	31	0.0	41		0.000	These accesses to the	
Heterogeneity: Tau* =	0.05; ChP	- 3.96.	df = 3 (P =	0.271	1 = 24%		
Test for overall effect:	Z = 0.75 (P	= 0.45)				
2.2.3 Other single an	tibiotic the	rapy					
Burke 1990	11	42	24	42	10.4%	0.45 10.26, 0.811	
Chapman 1986	5	19	6	20	4.7%	0.8810.32, 2.401	
Dickinson 1985	2	18	7	15	2.6%	0.24 (0.06, 0.98)	
Gionchetti 1999	5	14	9	14	6.6%	0.56 10.25. 1.241	
Subtotal (95% CI)		93		91	24.3%	0.51 [0.34, 0.76]	•
Total events	23		46			and the second of	
Heterogeneity: Tau ² =	0.00; Chi#	2.42	di = 3 (P =	0.49)	H = 0%		
Test for overall effect:	Z = 3.29 (P	= 0.00	10)	1.14			
Total (95% CI)		369		370	100.0%	0.77 (0.60, 0.98]	•
Total events	161		199				
Heterogeneity: Taut =	0.06; Chi?	= 20.80	df = 11 (P = 0.0	4); 1" = 47	8	1 4 4 1 1 1 1
	7	- 0.02			10.0 - 10		01 0.2 0.5 1 2 5 10
Test for overall effort-	Z = Z.10 DP	= 0.03					and the second s

Role of Antibiotics in UC

- Not typically considered first-line Rx
- May be considered in specific situations, eg. infections or complications
 Pouchitis
- Metronidazole and ciprofloxacin are commonest ones

