

EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE



#### Development and first-in-child feasibility clinical trial of a new MRI mini-capsule device to measure whole gut transit time in paediatric constipation

#### PROF LUCA MARCIANI – UNIVERSITY OF NOTTINGHAM

A magnifying glass in the world of the medical device development – EPTRI webinar 25/11/2021



- 10% of children suffer from constipation at some point in their life.
- 27,500/year in England are referred to secondary and tertiary care.
- Managing illness in these children can be challenging and the diagnosis often based on symptom reports.

Koppen IGN *et al.* J Pediatr 2018, 198, 121-130 NICE Costing report. Clinical guideline 99. 2010.





- An objective measure of the whole gut transit time (WGTT) available early in the clinical pathway can help with selection of therapy.
- Transit tests can distinguish between normal transit, anorectal retention or slow transit constipation.
- Useful when medical history and/or physical examination is unreliable.





- Current X-ray radiopaque marker (ROM) method uses ionizing radiation, associated with risk of subsequent malignancy in children.
- Has poor anatomical definition of colon loops hence difficult to determine where the ROMs are.



X-ray test **<b>
OPT R** EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE



Theory





- Current X-ray radiopaque marker (ROM) method uses ionizing radiation, associated with risk of subsequent malignancy in children.
- Has poor anatomical definition of colon loops hence difficult to determine where the ROMs are.

Aim: to take this on with MRI – no ionizing radiation and higher quality cross-sectional imaging





Ψ

Practice



## The new paediatric device

- EU Class IIa ingestible device.
- Small (8mm×4mm), inert, plastic mini-capsules, filled with a MRI-visible oil-inwater emulsion.
- Co-designed with our Young Persons Advisory Panel (YPAG) and manufactured P by JEB Technologies

PTRI

EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE





L Marciani et al, patents: US11013427B2; EP3166488B1; AU2015287435



## Young people involvement







# Young people involvement







**eptri** 

EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE

Abrehart et al. Research Involvement and Engagement (20 https://doi.org/10.1186/s40900-020-00243-0

Generation

(2021) 7:2

Research Involvement and Engagement

Magic

#### COMMENTARY

"A little (PPI) MAGIC can take you a long way" : involving children and young people in research from inception of a novel medical device to multi-centre clinical trial *Roald Dahl, James and the Giant Peach* (1961)

Check for updates

**Open Access** 

Welcome to the Magic study website

Nichola Abrehart<sup>1\*†</sup>, Kate Frost<sup>2+</sup>, the Young Persons Advisory Group<sup>2</sup>, Roy Harris<sup>1</sup>, Andrew Wragg<sup>2</sup>, Derek Stewart<sup>2</sup>, Hayfa Sharif<sup>1</sup>, Rachel Matthews<sup>3</sup> and Luca Marciani<sup>1</sup>





## Young people involvement





EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE

#### The new paediatric device













- First-in-child study of new device: safety and acceptability.
- 16 patients + 19 healthy participants age 7-18 years old.
- 24 mini-capsules each day for 3 days (a common Xray ROMs protocol). MRI at Day 4 and if needed Day 7 (also Day 28 for this first study only).
- Whole gut transit time calculated from the count of the mini-capsules in the gut (as ROMs).





- The MRI test was well accepted and safe.
- The mini-capsules were imaged in the colon successfully by MRI, providing bright signal against colonic chyme on the derived in-phase minus out-of-phase images.











MRI images from a 7 year old patient participant





\* P < 0.0001

- The transit time was longer in the patient group.
- The last MRI scan confirmed exit of the device in all participants.







**ORIGINAL ARTICLE: GASTROENTEROLOGY** 

#### OPEN

#### The transit t longer in the group.

 The last MR confirmed e device in all



#### Feasibility Study of a New Magnetic Resonance Imaging Mini-capsule Device to Measure Whole Gut Transit Time in Paediatric Constipation

\*<sup>†</sup>Hayfa Sharif, \*Nichola Abrehart, \*<sup>‡</sup>Caroline L. Hoad, \*<sup>‡</sup>Kathryn Murray, \*<sup>§</sup>Alan C. Perkins, <sup>‡||</sup>Murray Smith, <sup>‡</sup>Penny A. Gowland, \*Robin C. Spiller, \*Roy Harris, <sup>§</sup>Sian Kirkham, <sup>¶</sup>Sabarinathan Loganathan, <sup>¶</sup>Michalis Papadopoulos, <sup>#</sup>Kate Frost, The Young Persons Advisory Group (YPAG), # David Devadason, and \* Luca Marciani

#### ABSTRACT

Objective: In England, 27,500 children are referred annually to hospital with constipation. An objective measure of whole gut transit time (WGTT) could aid management. The current standard WGTT assessment, the x-ray radiopaque marker (ROM) test, gives poor definition of colonic anatomy and the radiation dose required is undesirable in children. Our objective was to develop an alternative magnetic resonance imaging (MRI) WGTT measure to the x-ray ROM test and to demonstrate its initial feasibility in paediatric constipation. Methods: With the Nottingham Young Person's Advisory Group we developed a small (8 × 4 mm), inert polypropylene capsule shell filled with MRI-visible fat emulsion. The capsule can be imaged using MRI fat and water in-phase and out-of-phase imaging. Sixteen patients with constipation and 19 healthy participants aged 7 to 18 years old were recruited. Following a common ROM protocol, the participants swallowed 24 mini-capsules each day for 3 days and were imaged on days 4 and 7 using MRI. The number of successful studies (feasibility) and WGTT were assessed. Participants' EuroQol Visual Analogue Scale were also collected and compared between the day before the taking the first set of mini-capsules to the day after the last MRI study day.

Results: The mini-capsules were imaged successfully in the colon of all participants. The WGTT was 78 ± 35 hours (mean ± standard deviation) for patients, and  $36 \pm 16$  hours, P < 0.0001 for healthy controls. Carrying out the procedures did not change the EuroQol Visual Analogue Scale scores before and after the procedures.

Conclusions: Magnetic Resonance Imaging in Paediatric Constipation was a first-in-child feasibility study of a new medical device to measure WGTT in paediatric constipation using MRI. The study showed that the new method is feasible and is well tolerated.

#### What Is Known

- · Current methods for assessing whole gut transit time include the traditional abdominal x-ray and radiopaque markers.
- X-ray radiopague marker methods expose children and young people ionizing radiation in the range 0.03 to 0.11 mSv.
- >X-ray radiopaque markers produce 2-dimensional radiographs in which the bowel and location of the radiopaque markers may be difficult to distinguish.

#### What Is New

- We developed a new, magnetic resonance imaging visible mini-capsule, specifically aimed at children and young adults.
- This first-in-child feasibility study showed that whole gut transit time can be measured in paediatric constipation using the new mini-capsule device in conjunction with magnetic resonance imaging.

unctional constipation in childhood is common, with estimated prevalence of 14% (1-5). The diagnosis is based on symptom and is defined according to the Rome IV diagnostic criteria (6-8)



(a) Patient, 9 years old, weight 48 Kg, height 130 cm, BMI 21.4 kg/m<sup>2</sup>. TCV= 237 mL / WGTT = 75 Hours. (b) Healthy control, 10 years old, weight 42 Kg, height 145 cm, BMI = 19.9 kg/m<sup>2</sup>. TCV = 227 mL/ WGTT = 26 Hours.





#### Additional insights: transit and volumes



Coefficient of correlation R=0.56, p=0.0005.





#### Additional insights: transit and volumes

Whole gut transit time (h)

0

#### Coefficient of correlation

EUROPEAN PAEDIATRIC TRANSLATIONAL RESEARCH INFRASTRUCTURE



CONSORZO PER VALUTAZIONI BOLOGICHE FARMACOLOGICHE

## Next steps: MAGIC2

- Current second grant funded by NIHR i4i.
- Partnership with JEB Technologies, young persons and parents.
- CE marking.
- Multi-centre clinical efficacy study.
- High volume production.
- Commercialisation.



This work was funded by a NIHR Invention for Innovation (i4i) award programme. The views expressed are those of the authors and not necessarily those of the NHS, the NIHR, or the Department of Health & Social Care.







**NIHR** National Institute for Health Research

FUNDED BY





