ESCP CRAFT Study

CRyptoglandular Anal Fistula Treatment

The new international, prospective combined Audit & Cohort Study







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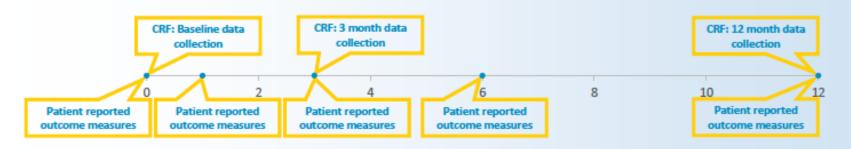


Objectives

CRAFT Audit: Practice variation, Short-term outcomes, FU 3 months



CRAFT Cohort: PROMs, Long-term outcomes, FU 12 months







Research questions

Main question:

1. What associations can be observed between patient demographic factors, diagnostic and treatment modalities, and outcomes, as defined by the AF-COS, in real-world clinical settings?

Further questions focusing on:

- 1. Demographic data & fistula types
- 2. Diagnostics
- Treatment



Data collection

- Baseline
 - Demographic data
 - Medical history
 - Primary fistula
 - Recurrent fistula

- Work-up
 - MRI
 - EA-US
 - EAU

- Treatment
 - Fistulotomy/-ectomy
 - Seton
 - RAF
 - LIFT
 - Laser
 - VAAFT
 - Plugs
 - Autologous products



Anal Fistula Core Outcome Set

Clinician reported outcomes:

- Clinical fistula healing
- Radiological healing
- Recurrence
- Development of additional fistulas
- Complications & reinterventions

Patient reported outcomes:

- Fistula symptoms
- Incontinence
- Psychological impact of treatment
- Patient satisfaction
- Quality of life



Anal Fistula Core Outcome Set

Patient reported outcomes

Clinical fistula healing

- Defined as: absence of any discharge symptoms, absence of abscess, infection or inflammation, and no recurrence or persistence of the fistula
- Healing is achieved after a 6 month discharge symptom free period

Recurrence

Radiological healing

- · Modality: MRI
- Defined as: the complete resolution of any visible fistula tract and inflammatory mass +/formation of fibrosis within the tract

Development of additional fistula

Complications and reinterventions

- Complications: Clavien Dindo Classification
- Reinterventions only refer to surgical and radiological reinterventions



Anal Fistula Core Outcome Set

Patient reported outcomes

Quality of life

- Anal Fistula Quality of Life Questionnaire (AF-QOL)
- EQ-5D

Incontinence

St. Marks (Vaizey) Incontinence Score

Fistula symptoms

AF-QOL

Psychological impact of treatment

AF-QOL

Patient satisfaction

Numerical Rating Score (NRS)

Financial impact on healthcare systems

- Work Productivity Activity Index (WPAI)
- EQ-5D

AF-QoL: The Anal Fistula Quality of Life Scale The aim of this questionnaire is to understand the impact that your fistula is having on your daily life, and the adjustments you are having to make because of it. The following questions ask about your fictula, the symptoms it gives you and how they have affected your life over the last 4-to weeks. Please answer all the questions. If you are unsure about how to answer any question, just give the best answer you can. Do not spend too much time thinking about your answer, as your first thoughts are likely to be the most accurate. If you do not wish to answer any of these questions, please leave it blank, or leave details of the mason's why it was not answered Part 1: Your symptoms: On average, over the last 4-6 weeks 1) How often have you experienced pain or discomfort from your fistula? at Never In Occasionally c) A few times a week d) Daily el Several times a day 2) How severe has the pain from your fistule been? at No pain stall. b) Mild main ci Moderate pain d) Severe pain of The worst pain imaginable 1) How often have you experienced discharge of fluid, put or blood from your fistula? b) Occasionally cl A few times a week of Several times a day/constant's 4) How often have you been worsted about not being able to control the passage of wind or leaking stool from your back passage or fistula? c) A few times a week d) Daily er Several times a dar

Iqbal, N. et al. (2024). The development of a cryptoglandular anal fistula quality of life scale (AF-QoL). Colorectal disease, 26(4), 716–725



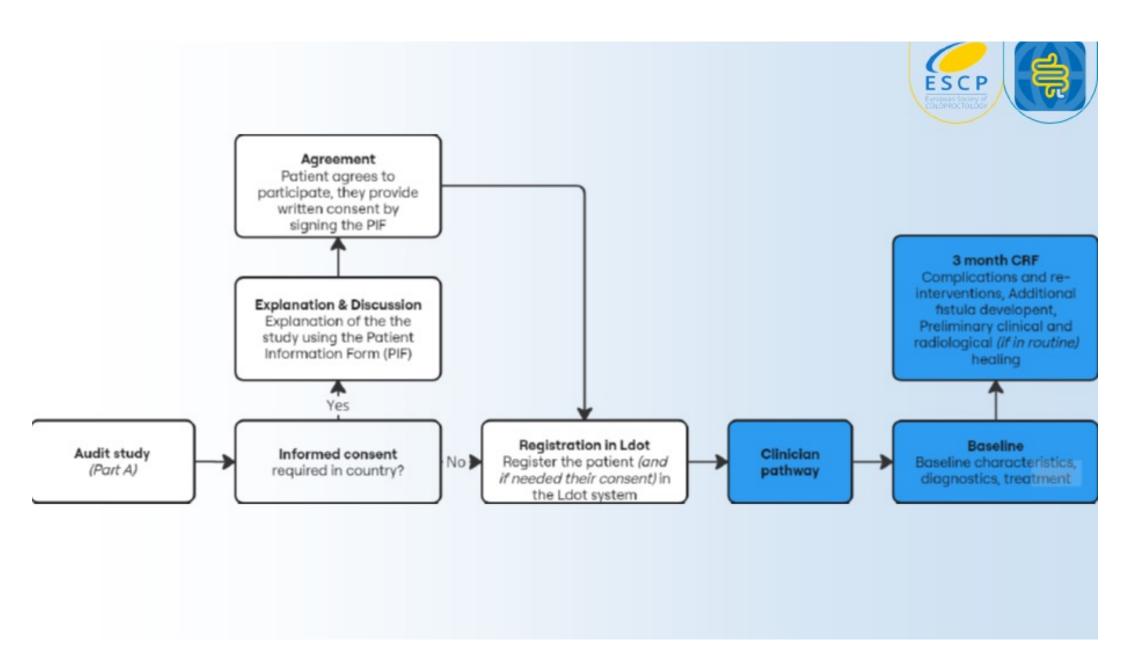
Audit study

Phase	Start Date	End Date	Duration
Centre Accrual	September 26 th , 2024	January 1 st , 2025	3 months
Patient Recruitment	January 6 th , 2025	March 31 st , 2025	3 months per centre
Patient Follow-up	Varies per patient	July 1 st , 2025	3 months per patient

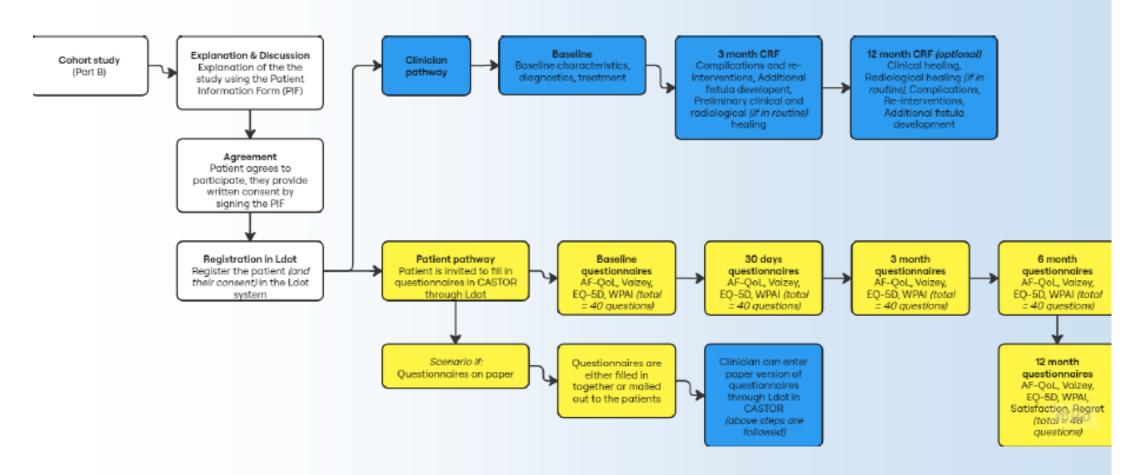


Cohort study

Phase	Start Date	End Date	Duration
Centre Accrual	September 26 th , 2024	March 31 st , 2025	6 months
Patient Recruitment	April 1 st , 2025	July 1 st , 2025	3 months per centre
Patient Follow-up	Varies per patient	July 1 st , 2026	12 months per patient









Collaborative authorship

- Study Management Group
- National Coordinator



- Local Coordinator
- Collaborator



- MINIMUM of 10 patients per center
- 95% data-completeness



• Up to 5 per center



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