

EDUCATION

From the journals: important excerpts from other leading

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Is appendicectomy superior to standard medical therapy alone in maintenance of remission in ulcerative colitis?

Is there a role for appendicectomy in patients with ulcerative colitis? This was answered by an open-label, international, randomised controlled trial involving 22 centres across the Netherlands, Ireland and the United Kingdom, which evaluated the clinical effectiveness of laparoscopic appendicectomy in maintaining remission in patients with ulcerative colitis. Of the 1,386 patients screened for the study between September 2012 and September 2022, 99 were randomised to the appendicectomy group and 98 to the control group (standard medical therapy alone), after exclusion of some patients. They assessed the proportion of patients who relapsed within 1 year. They found out that those in the appendicectomy group had a lower relapse rate (36%) than those who received only standard medical therapy (56%). The study reported some adverse events but no deaths. It was concluded that standard medical therapy alone was inferior to appendicectomy in maintaining remission in patients with ulcerative colitis.

Lancet Gastroenterol Hepatol 2025; 10(6): 550–61. doi: 10.1016/S2468-1253(25)00026-3

Paradigm shift in colorectal cancer screening: a case for a cell-free DNA (cfDNA) blood-based test

Colorectal cancer-related deaths can be nipped in the bud through early detection. With colorectal cancer being the third most commonly diagnosed cancer in the United States, it was imperative to design a screening test with better adherence, early detection and eventual reduction in morbidity from the cancer. This study sets out to assess the performance characteristics of the cfDNA blood-based test in colorectal cancer screening. Ten thousand two hundred fifty-eight people were included in the clinical validation cohort, of whom 7,861 met the eligibility criteria. The sensitivity and specificity of the blood-based test for colorectal cancer, advanced neoplasia and advanced precancerous lesions were evaluated. The cfDNA blood-based test had 83% sensitivity for colorectal cancer, 90% specificity for advanced

neoplasia and 13% sensitivity for advanced precancerous lesions in an average-risk screening population.

N Engl J Med 2024; 390(11): 973–83 doi: 10.1056/NEJMoa2304714

The blood pressure-lowering effect of dietary approaches to stop hypertension for diabetes (DASH4D) diet: a randomised controlled trial

Dietary patterns of diabetic patients have a significant impact on their cardiovascular risks. Only a few trials have assessed if dietary interventions have blood pressure-lowering effects in diabetics, necessitating this trial, which was a randomised four-period crossover feeding study conducted at a community-based centre between June 2021 and June 2024. The study randomised 102 adults with type-2 diabetes with a systolic blood pressure of 120–159 mmHg and a diastolic blood pressure of less than 100 mmHg to a sequence of four diets, each for 5 weeks. The effect of the DASH4D diet with lower sodium was compared with that of the DASH4D diet with higher sodium, the typical US diet with lower sodium and that with higher sodium. Participants were mostly females (66%) and blacks (87%), and 83.3% completed all diet periods. The DASH4D diet with lower sodium had the greatest blood pressure-lowering effects among the diets, with this effect mostly occurring during the first 3 weeks of exposure. This shows that blood pressure can be reduced by dietary sodium reduction in the diet of diabetics.

JAMA Intern Med 2025. doi: 10.1001/jamainternmed.2025.1580

Is there any difference in haematological and postoperative outcomes of total splenectomy and partial splenectomy in sickle cell disease?

Splenectomy is required in sickle cell disease (SCD) patients who develop complications of the disease, like acute splenic sequestration crisis and hypersplenism. This first systematic review and meta-analysis, spanning PubMed, Web of Science, Scopus, Embase and the Cochrane databases from inception to June 2024, evaluated differences in outcomes

between partial splenectomy (PS) and total splenectomy (TS). Eighteen studies involving SCD patients who underwent PS or TS and evaluated haematological and postoperative outcomes were evaluated. Seven hundred and fifty six SCD patients were included, and the study found that both TS and PS have little or no effect on haemoglobin but significantly lower the reticulocyte count. In addition, there was a lower incidence of short-term infections and acute chest syndrome following TS than PS. Better surgical decision-making will be guided by further clinical trials on the subject.

J Pediatr Surg 2025; 60(2): 162058. doi: 10.1016/j.jpedsurg.2024.162058

Preventing recurrent *Clostridioides difficile* infection: assessing the role of faecal microbiota transplant

Healthcare-associated infections in US hospitals are most commonly caused by *Clostridioides difficile* infection

(CDI), also known as *Clostridium difficile*. This randomised, double-blind clinical trial, conducted between 2018 and 2022, aims to evaluate the efficacy and safety profile of Faecal Microbiota Transplant (FMT) in preventing the recurrence of CDI. It included 153 veterans across the Veterans Health Administration system who had recurrent CDI and were randomised to oral FMT (76) or placebo capsules (77) groups in a 1:1 ratio, with clinical recurrence by day 56 assessed. Though the study was stopped due to futility, there was no difference in recurrence or adverse events between the two treatment groups. Conclusively, FMT therapy did not reduce the recurrence of CDI.

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