

LINC-study: Linking EDCs in maternal Nutrition and Child health.

No registrations found.

| | |
|------------------------------|----------------------------|
| Ethical review | Positive opinion |
| Status | Pending |
| Health condition type | - |
| Study type | Observational non invasive |

Summary

ID

NL-OMON26040

Source

NTR

Brief title

LINC-study

Health condition

Endocrine Disrupting Chemicals
Prenatal exposure
Prenatale blootstelling
Childhood obesity
Overgewicht op de kinderleeftijd

Sponsors and support

Primary sponsor: VU University Amsterdam

European Union: KBBE-2B-227391

Source(s) of monetary or material Support: VU University Amsterdam

European Union: KBBE-2B-227391

Intervention

Outcome measures

Primary outcome

The main study endpoint is BMI at the age of twelve months in relation to levels of exposure markers of EDCs in cord blood.

Secondary outcome

1. Gestational age;
2. Birth weight;
3. Birth height;
4. Head circumference (at birth, 6 and 12 months);
5. Waist circumference (at birth, 6 and 12 months);
6. Asthma;
7. Allergies;
8. Neurodevelopment;
9. Behaviour, sleep, crying.

Study description

Background summary

Rationale:

Obesity prevalence is still increasing, which reflects the complexity of treatment. Emphasis is shifting towards prevention; however more knowledge is needed on the aetiology of obesity. A certain class of chemicals has the ability to mimic hormones, disturbing endocrine pathways. Animal studies have shown that prenatal exposure to some of these endocrine disrupting chemicals (EDCs) increases body weight in offspring. However, prospective studies in humans are lacking. It is hypothesized that increased prenatal exposure to EDCs is related to an increased risk of obesity later in life.

Objective:

To relate exposure markers of EDCs with effect biomarkers, health outcome data and other parameters via multiple regression and multivariate analysis, while taking into account relevant confounders and covariates.

Study design:

This project is embedded in a European multidisciplinary study in which four cohorts participate, in combination with results obtained from animal studies. The current project is designed as an observational cohort study.

Study population:

The cohort (N = 500) will be based on women living in the city of Zwolle. Women eligible for participation should be less than twelve weeks pregnant at their first visit to the midwifery clinic. They should be able to fill out Dutch questionnaires.

Main study parameters/endpoints:

The main study endpoint is BMI at the age of twelve months in relation to levels of exposure markers of EDCs in cord blood.

Study procedures:

Data will be primarily obtained from regular health care as it is provided for women and children (midwifery clinics and youth health care). Further data on maternal health topics, demographics, diet and exposure of mother and child will be collected by means of questionnaires and collection and analysis of cord blood.

Analysis:

Exposure variables will be categorized in tertiles and it will be tested whether BMI differs significantly between these tertiles. Stepwise regression will be used to quantify the relation between BMI and exposure. Predefined models will be tested which include important covariates.

Study objective

It is hypothesized that increased prenatal exposure to Endocrine Disrupting Chemicals (EDCs) is related to an increased risk of obesity later in life.

Study design

Birth, six months and twelve months.

Intervention

No intervention is planned as this is an observational study.

Contacts

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Eligibility criteria

Inclusion criteria

Women eligible for participation should be living in the area of Zwolle and should be less than twelve weeks pregnant at their first visit to the midwifery clinic. They should be able to fill out Dutch questionnaires. Incapacitated subjects will not be asked to participate.

Exclusion criteria

Women with pre-eclampsia or twin pregnancies are excluded from further participation. Preeclampsia is defined as pregnancy-induced hypertension (1x > diastolic pressure > 90

mmHg) in association with proteinuria (>0.3 g/day). Furthermore major congenital anomalies at birth will be reason for exclusion.

Study design

Design

| | |
|---------------------|----------------------------|
| Study type: | Observational non invasive |
| Intervention model: | Factorial |
| Allocation: | Non controlled trial |
| Control: | N/A , unknown |

Recruitment

| | |
|---------------------------|-------------|
| NL | |
| Recruitment status: | Pending |
| Start date (anticipated): | 17-01-2011 |
| Enrollment: | 500 |
| Type: | Anticipated |

Ethics review

| | |
|-------------------|------------------|
| Positive opinion | |
| Date: | 08-12-2010 |
| Application type: | First submission |

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

| Register | ID |
|----------|-------------------------------------|
| NTR-new | NL2528 |
| NTR-old | NTR2646 |
| Other | METC VUMC : 2010/251 |
| ISRCTN | ISRCTN wordt niet meer aangevraagd. |

Study results

Summary results

N/A