Late preterm survey

No registrations found.

Ethical review Positive opinion **Status** Recruitment stopped

Health condition type -

Study type Observational non invasive

Summary

ID

NL-OMON28728

Source NTR

Brief title

LAPS

Health condition

Late preterm infants

Sponsors and support

Primary sponsor: FrieslandCampina

Source(s) of monetary or material Support: FrieslandCampina

Intervention

Outcome measures

Primary outcome

Percentage of health care practitioners adhering to ESPAGHAN guidelines for management of early preterm infants in management of late preterms.

Secondary outcome

Differences in dietary management of late-preterm infants among low, middle and high-income countries

Study description

Background summary

The new estimates in 2014 show that the incidence of preterm births widely varied across the world. Around 70% of preterm infants are born as late-preterm (between 32-37 wk of Gestational Age).

ESPGHAN guidelines published in 2010 are for stable preterm born infants with a body weight of 1000 to 1800 g. This means that half of the moderate preterm infants (≥32-33 6/7 weeks GA) and the majority of late preterm born infants (≥34-36 6/7 weeks GA) are not in scope of these recommendations. At the same time, they are also not in scope of nutritional guidelines for term infants, and have to be considered as a 'new' target group. Moderate to late preterm infants have a 2 to 10-fold increased incidence of mild to moderate morbidities compared with term infants, show a developmental delay and have a different growth pattern. Today, nutritional care of preterm infants varies greatly among countries and centers, we foresee that this situation will also reflect those of late preterm. Thus the purpose of this initiative is to get more insight in current feeding practices in low, middle- and high-income countries.

This protocol describes a survey using electronic data capture to collect information on feeding practice and growth assessment during hospital care of late preterm infants.

Study objective

- 1. Hospital care and feeding strategies are different among low, middle and high-income countries.
- 2. In lieu of no international guidelines on feeding late preterm infants, most of healthcare professionals will follow international guidelines for feeding preterm infants also for late preterm.
- 3. No specific guidelines are available to monitor growth of these infants during their hospital stay.

Study design

One time survey

Intervention

NA (its a survey)

Contacts

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Eligibility criteria

Inclusion criteria

Individual practicing health care professionals (HCP)s in participating countries who manage preterm infants. The HCPs can have public or private practices; and are willing to participate in the electronic survey.

Exclusion criteria

Individual practicing health care professionals (HCP)s in participating countries who do not manage preterm infants.

Study design

Design

Study type: Observational non invasive

Intervention model: Other

Allocation: Non controlled trial

Masking: Open (masking not used)

Control: N/A, unknown

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 24-01-2020

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Enrollment: 250

Type: Actual

IPD sharing statement

Plan to share IPD: No

Plan description

There will be no individual data, as it is survey about hospital practice

Ethics review

Positive opinion

Date: 24-01-2020

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 NL8325

Other TBD: tbd (will be filled in after submission to MEC)

Study results