

# Evaluation of the effect of early BCG-vaccination on development of asthma and allergic rhinitis during childhood - follow-up study at age 7 years.

Published: 20-05-2008

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To establish the effect of BCG vaccination in 6 weeks old high-risk infants on the prevalence of asthma and allergic rhinitis at the age of 7 years.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Allergic conditions
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON36994

### Source

ToetsingOnline

### Brief title

Follow-up study on BCG vaccination and atopy

### Condition

- Allergic conditions

### Synonym

asthma, hayfever

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Kinderlongziekten

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** allergic rhinitis, asthma, atopy, BCG

## Outcome measures

### Primary outcome

Asthma, defined by periodic wheezing and dyspnoea, combined with a 9% reversibility in FEV1 and/or exhaled NO above 20 ppb.

Allergic rhinitis. defined by periodic or perennial sneezing, runny or blocked nose when not having a cold or the flu.

### Secondary outcome

Nitric oxide measurements in nasal air, specific IgE to allergens and immunologic parameters in serum.

## Study description

### Background summary

The increase in prevalence of allergic diseases in countries with a so-called Western lifestyle may be due to a decreased exposure to infectious agents in early life.

### Study objective

To establish the effect of BCG vaccination in 6 weeks old high-risk infants on the prevalence of asthma and allergic rhinitis at the age of 7 years.

### Study design

Prospective, single blind, randomised trial.

### Study burden and risks

Parents and child are asked to fill in a questionnaire, and pay one visit to the out patient department for physical examination, blood sampling and

pulmonary function testing with measurement of exhaled nitric oxide. The risks of these procedures are negligible and the burden minimal. It should be carried out specifically in these children, since they have been included in the former study and received placebo or BCG vaccination.

A minimal risk is carried in the discontinuation of the beta-mimetics for a short period of maximally 48 hours, and of nasal corticosteroids for 6 weeks in advance of the lung function testing and nasal NO measurements. Participants might observe an increase in wheezing in the first case, in which case the advice is to restart the beta-mimetics. The same applies to an exacerbation of allergic rhinitis, in which case restarting of corticosteroids is advised or alternative medication. These risks will be deliberated with the treating physician, whose advice will be followed by the investigator.

## Contacts

### **Public**

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### **Scientific**

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## Trial sites

### **Listed location countries**

Netherlands

## Eligibility criteria

### **Age**

Children (2-11 years)

## Inclusion criteria

participation in study with code WOK 98-24, dd 01-02-1999

## Exclusion criteria

no participation in earlier study with code WOK 98-24

## Study design

### Design

Study type:	Observational invasive
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)

**Primary purpose:** Prevention

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	05-10-2008
Enrollment:	116
Type:	Actual

## Ethics review

Approved WMO	
Date:	20-05-2008
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	17-06-2011
Application type:	Amendment

## 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
CCMO	NL19075.041.07