# Avoid Mechanical Ventilation: The AMV-trial

Submission date Recruitment status Prospectively registered 27/09/2007 No longer recruiting [ ] Protocol [ ] Statistical analysis plan Registration date Overall study status 15/11/2007 Completed [X] Results [ ] Individual participant data Last Edited Condition category 20/12/2011 **Neonatal Diseases** 

## Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Wolfgang Gopel

#### Contact details

Universitatsklinikum Schleswig-Holstein Ratzeburger Allee 160 Kinderklinik Lubeck Germany D-23538 goepel@paedia.ukl.mu-luebeck.de

# Additional identifiers

# EudraCT/CTIS number

2006-006912-31

**IRAS** number

ClinicalTrials.gov number

# Secondary identifying numbers

AMV-12\_12\_2006 Vers. 2

# Study information

#### Scientific Title

### Acronym

**AMV** 

## **Study objectives**

The primary objective of this study is to demonstrate that the treatment of preterm infants with intratracheal instillation of surfactant shortly before an expected intubation is able to reduce the frequency of mechanical ventilation.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Ethics approval received from the local medical ethics committee (Ethikkommission der medizinischen Fakultat der Universitat Lubeck) on the 3rd July 2007 (ref: 07-037).

## Study design

Prospective, interventional, randomised controlled multicentre trial

#### Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

# Study type(s)

Treatment

# Participant information sheet

# Health condition(s) or problem(s) studied

Respiratory distress syndrome of preterm infants

#### **Interventions**

Please note that as of 25/08/10 the patient enrollment phase of this trial has been completed.

#### Intervention:

Surfactant is given at a dose of 100 mg surfactant per kg body weight via a thin gastric tube into the trachea of the spontaneously breathing infants. Surfactant without intubation will be given as a single dose at the first day of life. Repeated surfactant treatment without intubation is possible until the third day of life.

#### Control group:

Standard care.

### **Intervention Type**

#### Phase

**Not Specified** 

# Drug/device/biological/vaccine name(s)

Surfactant

#### Primary outcome measure

The primary outcome is a combined parameter which is measured between the 25th and 72nd hour of life (day 2 and 3 of life). The primary endpoint is positive if an infant is:

- 1. Intubated and ventilated between the 25th and the 72nd hour of life
- 2. Fraction of inspired Oxygen (FiO2) is greater than 0.6 for more than two hours between the 25th and the 72nd hour of life (to keep oxygen saturation above 85%)
- 3. Partial pressure of Carbon Dioxide (pCO2) greater than 65 mmHg for more than two hours between the 25th and 72nd hour of life

## Secondary outcome measures

- 1. Ventilation rate
- 2. Intraventricular Haemorrhage (IVH)
- 3. Periventricular Leukomalacia (PVL)
- 4. Bronchopulmonary Dysplasia (BPD)
- 5. Death
- 6. Operation due to retinopathy (Retinopathy Of Prematurity [ROP])
- 7. Patent Ductus Arteriosus (PDA)
- 8. Necrotising Enterocolitis (NEC)
- 9. Intestinal perforation
- 10. Hydrocephalus and ventricular-peritoneal-shunt
- 11. Number of surfactant doses
- 12. Total surfactant (mg/kg bodyweight)
- 13. Days on assisted ventilation
- 14. Days on supplemental oxygen
- 15. Duration of hospitalisation
- 16. Weight gain per day
- 17. Pneumothorax
- 18. Other complications of prematurity

All outcomes will be measured until discharge. Bronchopulmonary dysplasia will be assessed at 36 weeks + 0 days (+/- 5 days) of corrected gestational age.

# Overall study start date

27/09/2007

# Completion date

31/12/2010

# **Eligibility**

# Key inclusion criteria

- 1. Preterm infants with a gestational age between 26 weeks + 0 days and 28 weeks + 6 days
- 2. Birth weight below 1500 g
- 3. Age less than 12 hours

## Participant type(s)

**Patient** 

### Age group

Neonate

#### Sex

Both

# Target number of participants

210

## Key exclusion criteria

- 1. Lethal malformations
- 2. Prior surfactant treatment without intubation

### Date of first enrolment

27/09/2007

#### Date of final enrolment

31/12/2010

# Locations

#### Countries of recruitment

Germany

# Study participating centre Universitatsklinikum Schleswig-Holstein

Lubeck Germany D-23538

# Sponsor information

## Organisation

Schleswig-Holstein University Hospital (Universitatsklinikum Schleswig-Holstein) (Germany)

# Sponsor details

c/o Dr Gopel
Ratzeburger Allee 160
Kinderklinik
Lubeck
Germany
D-23538
goepel@paedia.ukl.mu-luebeck.de

### Sponsor type

Hospital/treatment centre

#### Website

http://www.uk-sh.de/

#### **ROR**

https://ror.org/01tvm6f46

# Funder(s)

## Funder type

Industry

#### Funder Name

Chiesi Farmaceutici S.p.A. (Italy)

# **Results and Publications**

# Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

## **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	05/11/2011		Yes	No