# Point-of-care diagnostic test for neonatal infection

Submission date	<b>Recruitment status</b> Suspended	[X] Prospectively registered		
07/08/2019		☐ Protocol		
<b>Registration date</b> 09/08/2019	Overall study status Completed	Statistical analysis plan		
		Results		
Last Edited	Condition category	Individual participant data		
20/09/2023	Infections and Infestations	Record updated in last year		

#### Plain English summary of protocol

Background and study aims

Being born before 37 weeks of pregnancy, also known as premature birth, is the leading cause of death among babies. Around 60 000 babies are born early in the UK each year with 40% of cases being associated with an infection. Among these cases the most commonly isolated bacteria are Ureaplasma. Ureaplasma in the lungs of the premature babies has been associated with an increased risk of lung disease, damage to the gut and bleeding on the brain compared with babies born early but are not infected. Administration of the correct antibiotic has been shown to eradicate Ureaplasma from the lungs, but a specific type of antibiotic (azithromycin) is required to treat these babies, one which is not given as routine practice. It is therefore imperative to obtain a rapid diagnosis of Ureaplasma to administer the correct treatment, but current diagnostic methods are expensive and take many days to obtain a result. This study will look at the feasibility of a newly developed diagnostic device to detect Ureaplasma among premature neonates.

#### Who can participate?

This study will focus on babies which are born prematurely between 25 and 30 weeks gestational age and are being ventilated as a high percentage of this group have previously been shown to be positive for Ureaplasma.

#### What does the study involve?

As part of routine care, ventilator tubes are cleared of mucus which can build up over time. It is this waste material, which we will use to assess the feasibility of the new device to detect Ureaplasma. Samples will be collected over an 18 month period from babies admitted to the Neonatal Intensive Care Unit at Singleton Hospital, Swansea. Samples will be run on the new device and compared to the current accepted method at Cardiff Metropolitan University.

## What are the possible benefits and risks of participating?

The information that we aim to obtain from this study will enable neonatal teams in the future to quickly assess if a preterm baby has Ureaplasma in their lungs and may therefore help with treating that baby. Your baby will not directly benefit from participating in the study, because the results of any tests will not be made available to the team as these results will be preliminary. There are no foreseeable risks associated with participating in this study.

Where is the study run from? Singleton Hospital, Swansea, UK

When is the study starting and how long is it expected to run for? October 2019 to March 2021

Who is funding the study? This study is funded by the Sir Halley Stewart Trust.

Who is the main contact?
The main contact for this study is Dr Michael Beeton (mbeeton@cardiffmet.ac.uk)

# Contact information

## Type(s)

Public

#### Contact name

Dr Michael Beeton

#### **ORCID ID**

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#### Contact details

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#### Type(s)

Scientific

#### Contact name

Dr Michael Beeton

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# Additional identifiers

#### EudraCT/CTIS number

Nil known

#### **IRAS** number

#### ClinicalTrials.gov number

Nil known

#### Secondary identifying numbers

Nil known

# Study information

#### Scientific Title

Development of a rapid and cost-effective Point-of-Care diagnostic test for the detection of Ureaplasma infection among premature neonates

#### **Study objectives**

The novel diagnostic test will be able to detect the presence of the bacteria Ureaplasma in lung secretions obtained from perterm babies.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 16/07/2019, London - Brighton & Sussex Research Ethics Committee (Level 3, Block B, Whitefriars, Lewins Mead, Bristol, BS1 2NT; 020 797 22567; NRESCommittee.SECoast-BrightonandSussex@nhs.net), ref: 19/LO/1285

#### Study design

Single centre screening study

# Primary study design

Other

# Secondary study design

# Study setting(s)

Hospital

# Study type(s)

Screening

#### Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

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

Bacterial infection in ventilated preterm neonates

#### **Interventions**

As part of routine care, ventilator tubes are cleared of mucus which can build up over time. It is this waste material, which we will use to assess the feasibility of the new device to detect Ureaplasma. Samples will be collected over an 18 month period from babies admitted to the Neonatal Intensive Care Unit at Singleton Hospital, Swansea. Samples will be run on the new device and compared to the current accepted method at Cardiff Metropolitan University.

#### Intervention Type

Other

#### Primary outcome measure

- 1. Sensitivity of the new diagnostic device estimates of the new diagnostic device positive rate in comparison with qPCR methods currently used.
- 2. Specificity of the new diagnostic device estimates of the new diagnostic device negative rate in comparison with qPCR methods currently used.
- 3. Estimate of the positive predictive and negative predictive value of the new diagnostic device as other basic measures of diagnostic accuracy given their relationship to sensitivity and specificity through disease prevalence.

#### Secondary outcome measures

Relationship between qPCR copy numbers and the new diagnostic device values obtained using regression analysis

#### Overall study start date

12/01/2018

#### Completion date

30/09/2021

# **Eligibility**

#### Key inclusion criteria

Babies born between 25 and 30 weeks gestational age

#### Participant type(s)

**Patient** 

#### Age group

Neonate

#### Sex

Both

#### Target number of participants

100

#### Key exclusion criteria

- 1. Parents of any baby which are deemed not to have the capacity to consent
- 2. Parents of any baby who cannot speak English or Welsh
- 3. Baby receiving palliative care

- 4. Parents are under the age of 16 years
- 5. Baby under a care order
- 6. Any other reason that the clinical lead feels it may be inappropriate.

#### Date of first enrolment

01/10/2019

#### Date of final enrolment

31/03/2021

# Locations

#### Countries of recruitment

**United Kingdom** 

Wales

# Study participating centre Singleton Hospital

Swansea United Kingdom SA2 8QA

# Sponsor information

#### Organisation

Cardiff Metropolitan University

#### Sponsor details

Llandaff Campus
Western Avenue
Cardiff
Wales
United Kingdom
CF5 2YB
+442920205557
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#### Sponsor type

University/education

#### **ROR**

https://ror.org/00bqvf857

# Funder(s)

#### Funder type

Charity

#### Funder Name

Sir Halley Stewart Trust

#### Alternative Name(s)

#### **Funding Body Type**

Private sector organisation

#### **Funding Body Subtype**

Other non-profit organizations

#### Location

**United Kingdom** 

# **Results and Publications**

#### Publication and dissemination plan

The results from this study will be written up and submitted for publication in a leading scientific journals and presented at conferences. All participant details will remain anonymous.

# Intention to publish date

31/03/2022

# Individual participant data (IPD) sharing plan

All data generated or analysed during this study will be included in the subsequent results publication.

# IPD sharing plan summary

Other

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			20/09/2023	No	No