# Assessing the likelihood of needing a substance called surfactant for newborns born near their expected delivery date using lung ultrasound

Submission date 23/12/2023	Recruitment status  No longer recruiting	<ul><li>Prospectively registered</li></ul>		
		☐ Protocol		
Registration date 02/01/2024	Overall study status Completed	[X] Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	Individual participant data		
14/06/2024	Pregnancy and Childbirth			

#### Plain English summary of protocol

Background and study aims

Lung ultrasound is a non-invasive, easy and quick technique that is being increasingly used in the clinical practice worldwide. It has been proven to be very accurate to evaluate the severity of respiratory failure and the need for surfactant replacement in preterm and extremely preterm neonates. Nonetheless, it is unclear if it is equally accurate and useful to predict surfactant need in late preterm and term neonates, as they may be affected by different types of respiratory failure.

#### Who can participate?

Late preterm and term (i.e. beyond 34 weeks' gestation) may be enrolled in this study

#### What does the study involve?

The study is performed within the usual routine care in the participating centres. The results of lung ultrasound will be collected together with the data registered during the standard monitoring of these patients.

What are the possible benefits and risks of participating?

Participation in the study will be useful and bring benefits on a larger scale since it may significantly improve the management of these patients.

No test is performed solely for study purposes and and there is no risk whatsoever for the patients. On the contrary, lung ultrasound is non-invasive and is already used in clinical practice to visualise the lungs and have more insights about the respiratory disorder.

Where is the study run from?

APHP-Paris Saclay University DMU2 (France)

Universita degli Studi di Padova (Italy)-Dpt di Pediatria

NICU, Hospital Universitario "Puerta del Mar" Cadiz (Spain)

NICU, Dept of Pediatrics, Stanford University (Palo Alto-CA, USA)

NICU, Federico II University Napoli (Italy)

When is the study starting and how long is it expected to run for? June 2021 to December 2023

Who is funding the study? Investigator initiated and funded

Who is the main contact? Prof. Daniele De Luca (MD, PhD), daniele.deluca@aphp.fr

# Contact information

#### Type(s)

Public, Scientific, Principal Investigator

#### Contact name

Prof Daniele De Luca

#### **ORCID ID**

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#### Contact details

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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

Quantitative lung ultrasound to predict surfactant need in late preterm and term neonates with respiratory failure

#### **Acronym**

**ULTRAS** 

#### **Study objectives**

A previously validated and well known neonatal lung ultrasound score can predict the surfactant need in late preterm and term neonates with respiratory failure in the first 72h of life with at least the same accuracy shown in preterm neonates.

#### Ethics approval required

Ethics approval required

#### Ethics approval(s)

Approved 30/06/2022, Comitato Etico per la Sperimentazione Clinica della Provincia di Padova (via Giustiniani 1, Padova, 35128, Italy; +39 498211435; luca.bonadies@unipd.it), ref: 5495/AO/22

#### Study design

Prospective observational pragmatic non-invasive international multi-center cohort study

#### Primary study design

Observational

#### Secondary study design

Cohort study

#### Study setting(s)

Hospital

#### Study type(s)

Diagnostic

#### Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet.

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

Surfactant need in late preterm and term infants

#### **Interventions**

Calculation of the lung ultrasound scores performed upon NICU admission and before surfactant administration (if any) together with the consideration of data issued of vital monitoring. Ultrasound and monitoring are performed within the routine clinical care in the participating centers (so that no test is performed solely for study purposes) and the study is pragmatically "nested" within clinical care.

#### Intervention Type

Other

# Primary outcome measure

Upon NICU admission and before surfactant administration (if any):

1. Diagnostic accuracy measures (area under the ROC curve and derived accuracy variables). For these outcomes, lung ultrasound scores and need for surfactant replacement will be collected (i.

e.: this will allow the raw calculation of true and false positives and negatives).

2. Additionally demographics, clinical and monitoring variables usually registered during routine care will be collected.

#### Secondary outcome measures

Oxygenation metrics measured with usual vital monitoring available in each center and its relationship with lung ultrasound score measured using patient records upon NICU admission and before surfactant administration (if any)

#### Overall study start date

01/06/2021

#### Completion date

20/12/2023

# **Eligibility**

#### Key inclusion criteria

All late preterm and term (>=34 weeks' gestation) neonates admitted to the NICU in the first 72 h of life with respiratory failure

#### Participant type(s)

**Patient** 

#### Age group

Neonate

#### Sex

Both

# Target number of participants

142

#### Total final enrolment

157

#### Key exclusion criteria

- 1. Major congenital malformations or chromosomopathies
- 2. Airleaks preventing a comprehensive lung ultrasound examination
- 3. Early onset sepsis and hemodynamic instability (defined as need for any inotrope)
- 4. Congenital surfactant anomalies
- 5. Pulmonary hypoplasia or congenital lung malformations
- 6. PPHN
- 7. Need for surgery in the first week of life

#### Date of first enrolment

01/12/2022

#### Date of final enrolment

20/12/2023

# Locations

#### Countries of recruitment

France

Italy

Spain

United States of America

# Study participating centre APHP-Paris Saclay University, "Beclere" medical center

157 rue de la Porte de Trivaux Clamart France 92140

# Study participating centre Azienda Ospedaliero-Universitaria di Padova

V.le Giustiniani 2 Padova Italy 35128

# Study participating centre Azienda Ospedaliero-Universitaria "Federico II"

Via Sergio Pansini, 5 Napoli Italy 80131

## Study participating centre Hospital Universitario Puerta del Mar

Avenida Ana de Viya 21 Cadiz Spain 11009

#### Study participating centre

#### Lucile Packard Children's Hospital - Stanford University

725 Welch Road, Palo Alto, CA Palo Alto (CA) United States of America 94304

# Sponsor information

#### Organisation

APHP-Paris Saclay University DMU2

#### Sponsor details

157 rue de la Porte de Trivaux Clamart (Paris) France 92140 +33 145374837 alexandra.benachi@aphp.fr

#### Sponsor type

Hospital/treatment centre

# Funder(s)

#### Funder type

Other

#### **Funder Name**

Investigator initiated and funded

# **Results and Publications**

#### Publication and dissemination plan

Planned publication in high-impact journals and partial data presentation at the main North-America and European NICU congresses

#### Intention to publish date

01/06/2024

Individual participant data (IPD) sharing plan

The whole dataset used in the study will be available from the study coordinator (Prof. Daniele De Luca (MD, PhD) - daniele.deluca@aphp.fr) upon reasonable request with clear aims and respecting privacy regulation.

# IPD sharing plan summary

Available on request

### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Statistical Analysis Plan			28/12/2023	No	No
Results article		01/05/2024	14/06/2024	Yes	No