Barrier Enhancement for Eczema Prevention

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered			
25/07/2014		[X] Protocol			
Registration date	Overall study status Completed	[X] Statistical analysis plan			
25/07/2014		[X] Results			
Last Edited 19/07/2024	Condition category Skin and Connective Tissue Diseases	[] Individual participant data			

Plain English summary of protocol

Background and study aims

Children born into families with a history of eczema, asthma or hay fever are more likely to develop eczema. We want to find out if applying moisturisers every day for the first year of life will make a difference to whether children will develop eczema or not.

Who can participate?

Babies who are less than 3 weeks old and who have a direct relative diagnosed with eczema, allergic rhinitis or asthma.

What does the study involve?

If you decide to take part, you will be randomly allocated to either best practice skin care routine for your baby or best practice skin care routine including applying moisturiser to your baby at least once a day for a year. The moisturiser will be provided free of charge. You will be asked to complete some short questionnaires which will be sent and returned either online or by post and you will see a researcher just after your babys second birthday to assess whether they have developed eczema.

What are the possible benefits and risks of participating?

There is very little risk involved in taking part and we dont expect to discover any new side-effects of the skin care advice. Taking part in this study will take up some of your time as you will need to follow the skin care advice until your baby is 1 year old and complete the questionnaires every 3, 6 or 12 months until your child is 5 years old. For those receiving the advice to also apply the moisturiser for a year, there is a low risk that this could cause skin infections because it may block the pores in the skin.

Where is the study run from?

16 sites around the England are involved in running the study, it is being co-ordinated from the Nottingham Clinical Trials Unit in collaboration with the Centre of Evidence Based Dermatology.

When is the study starting and how long is it expected to run for? November 2014 to October 2021

Who is funding the study? National Institute for Health Research (NIHR) (UK) Who is the main contact? Dr Laura Wyatt beep@nottingham.ac.uk

Study website

http://beepstudy.org/

Contact information

Type(s)

Scientific

Contact name

Dr Laura Wyatt

Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

149888

ClinicalTrials.gov number

Secondary identifying numbers

16940; HTA 12/67/12

Study information

Scientific Title

A randomised controlled trial to determine whether application of emollient from birth for a year, can prevent eczema in high-risk children

Acronym

BEEP

Study objectives

The purpose of the trial is to determine whether advising parents to apply emollient to their child for the first year of life in addition to best practice infant skin care advice can prevent or delay the onset of eczema.

Updated 04/01/2019:

A copy of the trial protocol, statistical analysis plan and health economics analysis plan can be found at: https://www.journalslibrary.nihr.ac.uk/programmes/hta/126712/#/documentation

Ethics approval required

Old ethics approval format

Ethics approval(s)

14\WM\0162; First MREC approval date 09/06/2014

Study design

Randomised; Interventional; Design type: Prevention

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

GP practice

Study type(s)

Prevention

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

Topic: Children, Primary Care, Dermatology; Subtopic: All Diagnoses, Not Assigned, Skin (all Subtopics); Disease: Dermatology, All Diseases, All Diseases

Interventions

Participants are randomised to the intervention group will, in addition, be advised to apply emollient daily to the childs entire body surface area for the first year of life. Parents of children in the intervention group will be given a choice of two emollients (Doublebase Gel® and Diprobase Cream®) and may change between the two emollients throughout the trial if they wish. Families will be seen at around the time of the childs second birthday to collect the primary outcome data, and then followed up for a further 3 years after this. During this time, we will ask parents to complete nine questionnaires at the start the study and then at 3, 6, 12, 18, 24, 36, 48 and 60 months. The questionnaires will include questions about any skin problems, eczema, wheezing, hayfever-like or food allergy symptoms or diagnosis, visits to the doctors and prescriptions, use of skin and wash products, feeding and your quality of life.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Primary outcome measure as of 08/12/2016:

Diagnosis of eczema between 12 and 24 months of age defined as meeting the UK Working Party Diagnostic criteria).

Original primary outcome measure:

Parent reported - UK Working Party Diagnosic Criteria for atopic deramtitis; Timepoint(s): 12 & 24 months

Secondary outcome measures

Secondary outcome measures as of 08/12/2016:

- 1. Presence of eczema between birth and 24 months is assessed using:
- 1.1. Any parental report of a clinical diagnosis of eczema
- 1.2. Completion by parents of UK Working Party Diagnostic Criteria for Atopic Dermatitis at 12 and 24 months
- 2. Presence of visible eczema at 24 months (skin examination by researcher)
- 3. Time to onset of eczema is assessed using:
- 3.1. First parental report of a clinical diagnosis of eczema
- 3.2. First topical corticosteroid and /or immunosuppressant prescription for eczema
- 4. Severity of eczema is assessed using EASI at 24 months and POEM*at 12 and 24 months
- 5. Presence of other allergic diseases:
- 5.1. Parental reported wheezing and allergic rhinitis between 12 and 24 months
- 5.2. Parental report of a clinical diagnosis of food allergy at 12 and 24 months
- 5.3. Parental report of food allergy at 12 and 24 months. Parents will be specifically questioned about cow's milk, egg, peanuts, and other nuts plus "any other food".
- 5.4. Allergic sensitisation at 24 months to any of the following common allergens: milk, egg, peanut, cat, grass pollen, house dust mite.
- 5.5. Confirmed diagnosis of food allergy at 24 months to milk, egg, peanut or 'any of milk, egg or peanut'. The diagnosis is derived from a combination of parental report, allergic sensitisation and food challenge.
- 6. Health-related quality of life is measured using CHU-9D at 24 months in order to estimate QALYs and parental quality of life measured using the EQ-5D-5L at baseline and 24 months in order to estimate the change in parental QALYs, if any
- 7. Health economic outcomes:
- 7.1. Health care resource use at 3, 6, 12, 18 and 24 months.
- 7.2. Cost-effectiveness and cost-utility at 24 months (combining health resource use and health-related quality of life outcomes).

Original secondary outcome measures:

- 1. EASI Eczema Area and Severity Index; Timepoint(s): 24 months
- 2. EQ5D-5L Parental quality of life; Timepoint(s): Baseline and 24 months
- 3. IDQoL Infant Dermatitis Quality of Life; Timepoint(s): 24 months
- 4. POEM Patient-oriented eczema measure; Timepoint(s): 12 and 24 months

Added 01/02/2022:

Tertiary outcome measures*

1. Presence of eczema in the previous year at 36, 48 and 60 months based on parental report of a clinical diagnosis of eczema

- 2. Any parental report that in their opinion their child has eczema at 3, 6, 12, 24, 36, 48 and 60 months
- 3. Presence of eczema at 36, 48 and 60 months based on completion by parents of UK Working Party Diagnostic Criteria for Atopic Dermatitis
- 4. Severity of eczema at 36, 48, and 60 months as measured by POEM
- 5. Parental reported wheezing, at 36, 48 and 60 months
- 6. Parental reported allergic rhinitis at 36, 48 and 60 months
- 7. Parental reported food allergy symptoms at 36, 48 and 60 months
- 8. Parental report of a clinical diagnosis of asthma or allergic rhinitis by 60 months
- 9. Parental report of a clinical diagnosis of food allergy at 36, 48 and 60 months
- 10. CHU-9D at 36, 48 and 60 months in order to estimate QALYs
- 11. Parental quality of life measured using EQ-5D-5L at 36, 48 and 60 months in order to estimate parental QALYs
- 12. Health care resource use at 36, 48 and 60 months
- 13. Cost utility and cost-effectiveness at 60 months (combining health resource use and health-related quality of life outcomes)
- 14. Parental report of clinical diagnosis of eczema from the age of 12 months to 60 months
- 15. Parental report of clinical diagnosis of food allergy by 60 months
- *Details of the analyses of the tertiary outcomes were added by the trial statistician after the analysis of the primary and secondary outcomes at which point, the investigators, trial management, data management and statisticians were aware of the results.

Overall study start date

01/11/2014

Completion date

30/10/2021

Eligibility

Key inclusion criteria

Inclusion criteria as of 08/12/2016:

- 1. Child has a first degree relative with parental reported doctor diagnosis of eczema, allergic rhinitis or asthma.
- 2. Child up to 21 days old.
- 3. Mothers must be aged ≥16 years
- 4. Consenting adult has the ability to understand English.

Original inclusion criteria:

- 1. Child has a first-degree relative with parental reported doctor diagnosis of eczema, allergic rhinitis or asthma
- 2. Child in overall good health
- 3. Child up to three weeks old
- 4. Consenting adult has the ability to understand English

Participant type(s)

Patient

Age group

Neonate

Sex

Both

Target number of participants

Maximum of 1400 children

Total final enrolment

1394

Key exclusion criteria

Exclusion criteria as of 08/12/2016:

- 1. Preterm birth (defined as birth prior to 37 weeks gestation)
- 2. Sibling (including twin) previously randomised to this trial. If multiple birth the first child will be randomised into the trial
- 3. Child has a severe widespread skin condition that would make the detection and/or assessment of eczema difficult
- 4. Child has a serious health issue which, at parent or investigator discretion, would make it difficult for the family to take part in the trial
- 5. Any condition that would make the use of emollient inadvisable or not possible

Original exclusion criteria:

- 1. Preterm birth (defined as birth prior to 37 weeks gestation)
- 2. Sibling (including twin) previously randomised to this trial
- 3. Child has serious health issues or a severe widespread skin condition
- 4. Any condition that would make the use of emollient inadvisable or not possible

Date of first enrolment

01/11/2014

Date of final enrolment

30/11/2016

Locations

Countries of recruitment

England

United Kingdom

Study participating centre Centre of Evidence-Based Dermatology

University of Nottingham C Floor, South Block Queen's Medical Centre Nottingham University Hospitals NHS Trust Nottingham United Kingdom NG7 2UH

Study participating centre St Mary's Hospital

Dermatology Dept Milton Road Portsmouth United Kingdom PO3 6AD

Study participating centre Harrogate District Hospital

Lancaster Park Road Harrogate United Kingdom HG2 7SX

Study participating centre Kings Mill Hospital

Mansfield Road Sutton in Ashfield United Kingdom NG17 4JL

Study participating centre Queen's Hospital

Burton Hospitals NHS Belvedere Road Burton upon Trent United Kingdom DE13 0RB

Study participating centre Derby Children's Hospital

Royal Derby Hospital Uttoxeter Road Derby United Kingdom DE22 3NE

Study participating centre

Leicester Royal Infirmary

Infirmary Square Leicester United Kingdom LE1 5WW

Study participating centre York Hospital

Wiggington Road York United Kingdom YO31 8HE

Study participating centre University of Sheffield

K Floor The Medical School (RHH tower) Beech Hill Road Sheffield United Kingdom S10 2RX

Study participating centre St Mary's Hospital

Imperial College Healthcare NHS Trust London United Kingdom W2 1NY

Study participating centre Francis Grove Medical Practice

Wimbledon London United Kingdom SW19 4DL

Study participating centre Streatham Common Medical Practice

St Andrew's Church room Guildersfield Road London United Kingdom SW16 5LS

Study participating centre Clapham Park Group Practice

72 Clarence Avenue Clapham Park London United Kingdom SW4 8JP

Study participating centre Park Group Practice

Annerley London United Kingdom SE20 8AJ

Study participating centre St Thomas' Hospital

Westminster Bridge Road London United Kingdom SE1 7EH

Study participating centre University of Bristol

Room 1.01a Canynge Hall 39 Whatley Road Bristol United Kingdom BS8 2PS

Sponsor information

Organisation

University of Nottingham (UK)

Sponsor details

Research Innovation Services Kings Meadow Campus Lenton Lane Nottingham England United Kingdom NG7 2NR

Sponsor type

University/education

ROR

https://ror.org/01ee9ar58

Funder(s)

Funder type

Government

Funder Name

Health Technology Assessment Programme

Alternative Name(s)

NIHR Health Technology Assessment Programme, HTA

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Publication and dissemination plan

To be confirmed at a later date

Intention to publish date

Individual participant data (IPD) sharing plan

The participant-level data will be freely available but the trialists are still working on their inhouse policy as to how this information will be available.

IPD sharing plan summary Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient- facing?
<u>Protocol article</u>	protocol	21/07 /2017		Yes	No
Results article	results	21/03 /2020	24/02 /2020	Yes	No
Results article	SWAT results	08/06 /2020		Yes	No
<u>Statistical</u> <u>Analysis Plan</u>	version 2.0	06/01 /2022	17/06 /2022	No	No
Protocol file	version 7.0	26/02 /2021	16/11 /2022	No	No
Results article	5-year results	19/10 /2022	16/11 /2022	Yes	No
Results article	Prevalence and risk factors for milk allergy overdiagnosis in the BEEP trial cohort	20/06 /2024	20/06 /2024	Yes	No
Results article	Emollient application	18/07 /2024	19/07 /2024	Yes	No