Epidural related maternal temperature and neonatal outcome: a randomised controlled study

Submission date	Recruitment status	Prospectively registered
30/09/2005	Stopped	Protocol
Registration date	Overall study status	Statistical analysis plan
30/09/2005	Stopped	Results
Last Edited	Condition category	Individual participant data
21/04/2011	Pregnancy and Childbirth	Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

Study information

Scientific Title

Study objectives

Maintaining normothermia during labour (including prevention of hyperthermia) will improve outcome in relation to:

- 1. Short term outcome:
- 1.1. Obstetric interventions FBS, emergency caesarean section, instrumental delivery
- 1.2. Neonatal outcome neonatal tone and neurobehaviour, neonatal encephalopathy, neonatal sepsis work up and antibiotic treatment, free oxygen radical induced cellular injury
- 2. Long term outcome score on Griffiths mental developmental scales at 1 year

Please note that as of 27/06/2008, this record was updated to reflect that this trial was proposed but never started.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Single blind interventional randomised controlled trial.

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Screening

Participant information sheet

Health condition(s) or problem(s) studied

Pregnancy and Childbirth: Labour

Interventions

Maintaining normothermia during labour versus care as usual.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Differences in mean NACS score at 24 +/- 6 hours between the intervention and control group

Secondary outcome measures

- 1. Differences in emergency caesarean and instrumental deliveries
- 2. Foetal intervention FBS
- 3. Neonatal adverse outcomes resuscitation requirements, Apgar score at 1 and 5 minutes, cord gases, feeding difficulties, encephalopathy
- 4. Neonatal intervention rate with sepsis evaluation and antibiotic treatment
- 5. Measurement of free oxygen radical metabolites (e.g. malonildehyde) as marker of lipid peroxidation in cord blood

Overall study start date

01/01/2003

Completion date

01/11/2004

Reason abandoned (if study stopped)

This trial was proposed but never started as the research fellow was appointed to a substantive post and left the project.

Eligibility

Key inclusion criteria

400 women in each group

Participant type(s)

Patient

Age group

Adult

Sex

Female

Target number of participants

800

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/01/2003

Date of final enrolment

01/11/2004

Locations

Countries of recruitment

England

United Kingdom

Study participating centre
Dept of Obstetrics & Gynaecology
London
United Kingdom
SW10 9NH

Sponsor information

Organisation

Department of Health

Sponsor details

Richmond House 79 Whitehall London United Kingdom SW1A 2NL +44 (0)20 7307 2622 dhmail@doh.gsi.org.uk

Sponsor type

Government

Website

http://www.dh.gov.uk/Home/fs/en

Funder(s)

Funder type

Government

Funder Name

Chelsea and Westminster Healthcare NHS Trust (UK)

Funder Name

NHS R&D Support Funding (UK)

Results and Publications

Publication and dissemination planNot provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summaryNot provided at time of registration