

# The efficacy of probiotics for prevention of necrotising enterocolitis in very low birth weight infants: a randomised clinical trial

<b>Submission date</b> 09/08/2007	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 17/08/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 02/02/2011	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Prof Taciana Duque-Braga

### Contact details

IMIP - UTI Neonatal  
Rua dos Coelhos, 300  
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Brazil  
50070-550

## Additional identifiers

### Protocol serial number

N/A

## Study information

### Scientific Title

### Study objectives

Necrotising enterocolitis is an inflammatory bowel disease. It is the most common gastrointestinal emergency in neonates mainly associated with prematurity and inappropriate gastrointestinal colonisation by bacteria.

The study hypothesis is that the use of probiotics - Lactobacillus casei and Bifidobacterium breve - will have a positive impact on very low birth weight infants related to:

1. The reduction of the risk of necrotising enterocolitis
2. The reduction of the time span to reach the full enteral intake
3. The reduction of pathogenic bacteria in the faeces culture

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Ethical Committee in Research of the Institute for Maternal/Infant Health (Instituto Materno Infantil de Pernambuco [IMIP]) (Brazil) (c/o Prof Fernando Figueira) approved in August 2006.

### **Study design**

Randomised controlled trial

### **Primary study design**

Interventional

### **Study type(s)**

Treatment

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

Necrotising enterocolitis in very low birth weight infants.

### **Interventions**

The participants will be randomised into two groups of 315 infants:

Control group: 3 ml of pasteurised human milk once a day on the second to the 30th day of life, or at the discharge if it happens before the 30th day.

Intervention group: Lactobacillus casei and Bifidobacterium breve (Yakult - LB) diluted with 3 ml of pasteurised human milk once a day on the second to the 30th day of life, or at the discharge if it happens before the 30th day.

### **Intervention Type**

Drug

### **Phase**

Not Specified

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

Probiotics (Lactobacillus casei and Bifidobacterium breve)

### **Primary outcome(s)**

To compare the frequency of the necrotising enterocolitis classified as higher or equal to 2 according to Bells criteria modified by Walsh and Kleigman during the first 30 days of life.

**Key secondary outcome(s))**

1. To compare the frequency of pathogenic bacteria in the faeces tested weekly during the first month of life, in neonates treated with or without antibiotics; collecting stool samples (rectal swab) on 1, 7, 14 and 30 days of life, under sterile conditions and immediately transported to the bacteriology laboratory situated in the same building for processing
2. To compare the duration of birth weight recovery; assessment of the weight of the infants daily during the hospital stay
3. To compare the time taken to reach full enteral feeds - defined as a daily intake of 120 ml/Kg; across the diary registration of the enteral feeds volumes during the hospital stay
4. To compare the duration of hospital stay; the time between the admission and the discharge

**Completion date**

01/05/2009

**Eligibility****Key inclusion criteria**

Infants with birth weight from 750 g to 1500 g admitted in the Neonatal intensive Care Unit of the Institute for Maternal/Infant Health (Instituto Materno Infantil de Pernambuco [IMIP]).

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Neonate

**Sex**

Not Specified

**Key exclusion criteria**

1. Newborns with severe congenital malformations
2. Newborns with severe chromosomal abnormalities

**Date of first enrolment**

01/09/2007

**Date of final enrolment**

01/05/2009

**Locations****Countries of recruitment**

Brazil

**Study participating centre**  
**IMIP - UTI Neonatal**  
Recife  
Brazil  
50070-550

## Sponsor information

### Organisation

Institute for Maternal/Infant Health (Instituto Materno Infantil de Pernambuco [IMIP]) (Brazil)

### ROR

<https://ror.org/01rtyyz33>

## Funder(s)

### Funder type

Government

### Funder Name

Laboratorio Yakult ([www.yakultfarma.com.br](http://www.yakultfarma.com.br)) (Brazil) - providing the probiotics treatments

### Funder Name

Institute for Maternal/Infant Health (Instituto Materno Infantil [IMIP]) (Brazil) - c/o Prof Fernando Figueira, where study and assessments will be carried out

### Funder Name

The National Council of Scientific and Technologic Development (CNPq) (Brazil) - granted financial support to the research project

## Results and Publications

### 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?
<a href="#">Results article</a>	results	01/01/2011		Yes	No