

# A prospective double-blind randomised controlled trial of the effect of a prebiotic mixture of bifidogenic oligosaccharides on enteral tolerance in preterm infants

<b>Submission date</b> 29/09/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 29/09/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 01/10/2014	<b>Condition category</b> Neonatal Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> 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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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

## Secondary identifying numbers

N0112173765

# Study information

## Scientific Title

### Study objectives

The aim of the study is to determine if supplementation of preterm infant milk formula with 0.8 g GOS/FOS mixture/dl (galacto-oligosaccharides (GOS) and fructo-oligosaccharides (FOS) are prebiotic bifidogenic oligosaccharides) will lead to an improvement in enteral tolerance and a more rapid establishment of milk feeds.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Not provided at time of registration

### Study design

Prospective double-blind randomised controlled trial

### Primary study design

Interventional

### Secondary study design

Randomised controlled trial

### Study setting(s)

Not specified

### Study type(s)

Treatment

## Participant information sheet

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

Neonatal Diseases

### Interventions

Suitable babies less than 32+6 weeks gestation who are also of appropriate birth weight for gestational age will be identified by neonatal unit staff. Parent will be approached and explanation of study given by the first 24 hours prior to starting of feeds. Formula milk will only be used if there is a shortfall in the volume available of their own mother's milk, or as sole diet if maternal milk is unavailable. Randomisation will be performed to either a standard preterm formula or to one with GOS/FOS these will be labelled either A or labelled formula. Enteral feeding will be commenced within 24 hours of birth. Measurements will be taken on four/five occasions:

1. Day 1: commencement of enteral feed

2. Day 2: the first day of enteral feeding at a volume of 150 ml/kg
3. Day 3: day 28 of post-natal life
4. Day 4: the day when 37 weeks of gestational age is reached
5. Day 5: the day when 40 weeks of gestation age would have been reached, or the day of discharge, whichever occurs earlier

Information collected on the Case Report Form (CRF) will be logged with the trial administrator who will check for completeness. The principal investigator will coordinate CRFs and trial database at Imperial. Stool samples will be collected from the nappy on day 1 and 3.

### **Intervention Type**

Drug

### **Phase**

Not Applicable

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

Galacto-oligosaccharides (GOS) and fructo-oligosaccharides (FOS) are prebiotic bifidogenic oligosaccharides.

### **Primary outcome measure**

1. Number of days from birth to establish a total (sole formula or formula with breast milk) daily enteral intake of 150 ml/kg
2. Number of days between birth and 28 days that a total (sole formula or formula with breast milk) daily enteral intake of at least 150 ml/kg is tolerated

### **Secondary outcome measures**

1. Gain in weight, length and head circumference (change in Z score between birth and 40 weeks postmenstrual age)
2. Faecal flora (colony forming units/g stool of Bifidus sp., Lactobacilli sp., and pathogenic micro-organisms)
3. Faecal calprotectin
4. Stool characteristics
5. Gastrointestinal tolerance
6. Fluid balance (the number of days between trial entry and 28 days where serum sodium exceeds 148 mmol/l or serum creatinine exceeds 150 micromol/l)
7. Proven necrotising enterocolitis according to predefined diagnostic criteria
8. Proven bloodstream infection according to predefined diagnostic criteria

### **Overall study start date**

02/12/2005

### **Completion date**

31/08/2007

## **Eligibility**

### **Key inclusion criteria**

1. Written informed parental consent
2. Preterm infants, appropriately grown for gestational age (Child Growth Foundation UK

reference), with a gestational age of 32 weeks, whose mother agree to the use of formula if they are unable to or do not wish to breastfeed or are not able to provide sufficient breast milk

**Participant type(s)**

Patient

**Age group**

Neonate

**Sex**

Both

**Target number of participants**

4

**Key exclusion criteria**

1. More than 72 hours exclusive parenteral nutrition
2. Immediately life-threatening congenital abnormality
3. Any condition requiring major surgery

**Date of first enrolment**

02/12/2005

**Date of final enrolment**

31/08/2007

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

England

United Kingdom

**Study participating centre**

Epsom and St Helier NHS Trust

Carshalton

United Kingdom

SM5 1AA

**Sponsor information****Organisation**

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

**Sponsor details**

The Department of Health, 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**

Epsom and St Helier University Hospitals NHS Trust (UK)

**Funder Name**

NHS R&D Support Funding (UK)

## **Results and Publications**

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration