

Standardised, Concentrated and Additional Macronutrients in neonatal Parenteral nutrition study

Submission date 23/04/2009	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 28/05/2009	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 27/11/2023	Condition category Neonatal Diseases	<input type="checkbox"/> Individual participant data

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

Nil known

IRAS number

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

LWH 0776

Study information

Scientific Title

Standardised, Concentrated, Additional Macronutrients, Parenteral (SCAMP) nutrition in very preterm infants: a phase IV randomised, controlled study of macronutrient intake, growth and other aspects of neonatal care

Acronym

SCAMP

Study objectives

Maximising the macronutrient content of the standardised, concentrated neonatal parenteral nutrition formulation will improve head growth in very preterm infants.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Central Manchester Research Ethics Committee, North West Strategic Health Authority.
Approval expected on 11/05/2009 (ref: 09/H1008/91).

Study design

Phase IV randomized controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

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

Head growth in very preterm infants

Interventions

Informed consent and randomisation to the trial. Intravenous administration of either scNPN (standard) or scNPNmax (study) solution. Daily collection of routine biochemical monitoring data and all oral and intravenous fluid/drug administration on the case report form. All infants will be measured for weight, lower leg length, occipito-frontal circumference and length on day 0 (baseline) day 7,14,21,28. The total duration of interventions will be until the infant is 28 days old. The follow up will consist of weekly growth measurements until the infant reaches 36/40 post conceptual age and then neuro-developmental follow-up at 18 months corrected gestational age.

Intervention Type

Drug

Phase

Phase IV

Drug/device/biological/vaccine name(s)

Neonatal parenteral nutrition formulation

Primary outcome measure

To compare early head growth in premature infants receiving a standardised formulation of parenteral nutrition(scNPN) with a standardised, concentrated formulation of parenteral nutrition containing additional protein, fat and carbohydrate (scNPNmax). Timepoints: when the infant is 28 days old (having already had growth measurements on days 0, 7, 14 and 21).

Secondary outcome measures

1. Weight gain and linear growth
2. Monitoring supplementary infusion requirements such as insulin and electrolytes
3. Routine biochemical measures of PN tolerance
4. Cost-benefit analysis
5. Efficiency and safety of prescribing and administration
6. Neurodevelopmental outcome (Bayley III)

Timepoints:

For outcomes 1 - 5: At 28 days and 36 weeks post conceptual age

For outcome 6: At 18 months corrected for gestational age

Overall study start date

01/06/2009

Completion date

01/05/2013

Eligibility

Key inclusion criteria

All infants (both males and females) born less than 29 weeks gestation and weighing <1,200 grams born at Liverpool Women's Hospital (LWH) will be eligible. All infants meeting these criteria born outside LWH will be eligible if transfer takes place to LWH within 48 hours.

Participant type(s)

Patient

Age group

Neonate

Sex

Both

Target number of participants

150

Key exclusion criteria

1. Infants born in poor condition in the first 72 hours and are unlikely to survive the first week after birth
2. Infants diagnosed with major congenital and chromosomal abnormalities known to affect head growth or gastrointestinal function

Date of first enrolment

01/06/2009

Date of final enrolment

01/05/2013

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Lead Research Nurse

Liverpool

United Kingdom

L8 7SS

Sponsor information

Organisation

Liverpool Women's Hospital NHS Foundation Trust (UK)

Sponsor details

c/o Ms Gillian Vernon

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Sponsor type

Hospital/treatment centre

Website

<http://www.lwh.me.uk/>

ROR

<https://ror.org/04q5r0746>

Funder(s)

Funder type

Charity

Funder Name

BLISS (UK) - Innovations in Care Programme

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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	10/06/2011		Yes	No
Results article	results	01/06/2013		Yes	No
Results article	results	01/01/2014		Yes	No
Results article	results	01/05/2015		Yes	No

[HRA research summary](#)

[Results article](#)

10/11/2023

28/06/2023

27/11/2023

No

Yes

No

No