

# Randomised controlled trial of Bubble CPAP versus infant flow driver for successful extubation in preterm infants

<b>Submission date</b> 29/09/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 29/09/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 15/04/2009	<b>Condition category</b> 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

### Protocol serial number

N0227165400

## Study information

### Scientific Title

**Study objectives**

To compare the efficacy and safety of two different systems of delivering nasal continuous positive airway pressure for successful extubation of preterm infants.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Neonatal Diseases: Respiratory

**Interventions**

Babies up to 30 week gestation and requiring ventilatory support would be eligible for study pre-extubation. Signed informed parental consent will be sought before randomisation. Babies will be randomised onto one of the currently used CPAP modes: Infant Flow Driver or Bubble CPAP. Nursing care including monitoring will be as per unit protocols. The successful extubation (primary outcome) will be analysed as per pre-defined clinical and physiological criteria. Each group will be analysed based on duration of ventilation (less than and equal to 2 weeks, and more than 2 weeks). Total number of babies required will be 59 each group.

**Intervention Type**

Other

**Phase**

Not Specified

**Primary outcome(s)**

Respiratory failure within 72 hours defined as:

1. Need for re-intubation primarily for respiratory distress AND/OR
2. Uncompensated Respiratory Acidosis ( $\text{pH} < 7.2$  AND  $\text{pCO}_2 > 8\text{kPa}$ )

**Key secondary outcome(s)**

1. Endotracheal reintubation
2. Duration of CPAP days
3. Chronic Lung Disease, Morbidity, Mortality and Data on complications including gastrointestinal will be collected.

**Completion date**

30/06/2007

# Eligibility

## Key inclusion criteria

1. Born between 24 and less than 30 weeks gestation, or with a birth weight of 600 to 1500 grams
2. Endotracheal intubation for any duration
3. Stable or improving respiratory status with inspired oxygen concentration of less than 50%
4. First extubation attempt
5. Signed parental consent
6. Considered ready for extubation by the clinical management team

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Neonate

## Sex

All

## Key exclusion criteria

1. Major congenital malformations, which are known to adversely affect life expectancy
2. Known congenital or acquired upper airway obstruction
3. Neuromuscular disorders

## Date of first enrolment

01/10/2004

## Date of final enrolment

30/06/2007

# Locations

## Countries of recruitment

United Kingdom

England

## Study participating centre

South Tees Hospital Trust

Middlesbrough

United Kingdom

TS4 3BW

# Sponsor information

## Organisation

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

## Funder(s)

### Funder type

Government

### Funder Name

South Tees Hospitals NHS Trust (UK)

### Funder Name

NHS R&D Support Funding (UK)

## 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	01/05/2009		Yes	No