# Impact of zinc supplementation in low birth weight infants on severe morbidity and zinc status: a randomised controlled trial (India)

Submission date Recruitment status Prospectively registered 08/02/2005 No longer recruiting [ ] Protocol [ ] Statistical analysis plan Registration date Overall study status 10/02/2005 Completed [X] Results [ ] Individual participant data Last Edited Condition category **Neonatal Diseases** 15/07/2021

**Plain English summary of protocol**Not provided at time of registration

# Contact information

Type(s)

Scientific

#### Contact name

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# Additional identifiers

ClinicalTrials.gov (NCT) NCT00272142

Protocol serial number WHO/HNI04002

# Study information

#### Scientific Title

Impact of zinc supplementation in low birth weight infants on severe morbidity and zinc status: a randomised controlled trial (India)

## **Study objectives**

To determine the impact of daily oral supplementation of 1 Recommended Daily Allowance (RDA) of zinc in low birth weight infants on:

- 1. All causes hospitalisations, and
- 2. Illnesses requiring visit to health care providers

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Ethics approval received from the World Health Organization (WHO) Ethical Review Committee on the 26th October 2005.

## Study design

Randomised controlled trial

#### Primary study design

Interventional

## Study type(s)

Quality of life

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

Low Birth Weight (LBW)

#### Interventions

2000 infants in total: Infants in the intervention group will receive one Recommended Daily Allowance (RDA) of elemental zinc (5 mg elemental zinc per day in infants aged 14 days to 6 months and 10 mg per day for infants older than six months) daily for a period of one year compared to placebo (plain glucose) in the control group for a period of 12 months.

## Intervention Type

Supplement

#### Phase

Not Specified

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

Zinc supplementation

## Primary outcome(s)

- 1. Hospitalisations, measured at three monthly intervals
- 2. Healthcare provider visits, measured at three monthly intervals
- 3. Diarrhoea and Acute Respiratory Infection (ARI) morbidity, measured at three monthly intervals
- 4. Mortality, death identified at regular home visits

- 5. Proportion of stunted and under weight children, measured at three monthly visits
- 6. Plasma zinc, copper and iron, measured at baseline and end of study

## Key secondary outcome(s))

Not provided at time of registration

#### Completion date

10/09/2005

# **Eligibility**

#### Key inclusion criteria

- 1. Infants aged 14 to 28 days born after 37 weeks of gestation and weighing less than or equal to 2.5 kg at birth (less than 10th percentile of the National Center for Health Statistics [NCHS] median birth weight)
- 2. Either sex
- 3. Resides within 7 km of the hospital

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Neonate

#### Sex

All

#### Total final enrolment

2052

#### Key exclusion criteria

- 1. Likely to leave the area of residence within six months of enrolment, i.e. visitors to the area, those that have already planned to visit their village, those definite that they are moving to another locality
- 2. Congenital malformations, congenital heart disease, metabolic disorders, renal diseases etc.
- 3. Non-consent for participation
- 4. Temporary exclusion criteria: illness requiring hospitalisation
- 5. Twins

#### Date of first enrolment

10/09/2004

#### Date of final enrolment

10/09/2005

# Locations

#### Countries of recruitment

India

Switzerland

Study participating centre World Health Organization Geneva-27 Switzerland

CH 1211

# Sponsor information

#### Organisation

The Department of Child and Adolescent Health (CAH)/World Health Organization (WHO) (Switzerland)

#### **ROR**

https://ror.org/01f80g185

# Funder(s)

## Funder type

Research organisation

#### **Funder Name**

The Department of Child and Adolescent Health (CAH)/World Health Organization (WHO) (Switzerland)

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# **Study outputs**

Output typeDetailsDate createdDate addedPeer reviewed?Patient-facing?Results article01/08/200915/07/2021YesNo