

Screening the Newborn for Familial Ureteric Reflux

Submission date 23/01/2004	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 23/01/2004	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 21/12/2009	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

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
93020001

Study information

Scientific Title

Study objectives

Ureteric reflux is an asymptomatic malfunction in the urinary tract: when complicated by urinary infection reflux nephropathy ensues; this causes end-stage renal failure in a significant number of young adults. To prevent reflux nephropathy, reflux must be detected before infection occurs. The peak incidence for infection is in early infancy, so reflux must be detected in the newborn. Reflux is a familial condition thought to have a sibling prevalence of 40%. A detailed enquiry to elicit the presence of reflux in members of a pregnant mothers family will enable an at risk population to be mustered antenatally. These babies will be subjected to cystography at birth. To determine whether chemoprophylaxis will prevent the onset of renal scarring, babies in whom reflux is detected will be randomised into two groups; one group will be given the therapy, the other will not. Assessment will take place at 3 years and 5 years.

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

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Screening

Participant information sheet**Health condition(s) or problem(s) studied**

Neonatal diseases; Other urological and genital disease

Interventions

Maintenance chemotherapy with trimethoprim 2 mg/kg daily

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Not provided at time of registration

Secondary outcome measures

Not provided at time of registration

Overall study start date

06/01/1993

Completion date

31/05/1995

Eligibility

Key inclusion criteria

Pregnant mothers with a familial ureteric reflux problem

Participant type(s)

Patient

Age group

Neonate

Sex

Both

Target number of participants

Not provided at time of registration

Key exclusion criteria

Does not match inclusion criteria

Date of first enrolment

06/01/1993

Date of final enrolment

31/05/1995

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

School of Population and Health Sciences
Newcastle upon Tyne
United Kingdom
NE2 4HH

Sponsor information

Organisation

NHS R&D Regional Programme Register - Department of Health (UK)

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.doh.gov.uk>

Funder(s)

Funder type

Government

Funder Name

NHS Executive Northern and Yorkshire (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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	09/08/1997		Yes	No