

The Canadian preterm labour nitroglycerin trial

Submission date 26/09/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 26/09/2005	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 03/03/2009	Condition category Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<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

Protocol serial number
MCT-41550

Study information

Scientific Title
Transdermal nitroglycerin to reduce the incidence of neonatal mortality in women who present in preterm labour: a placebo-controlled randomised trial

Study objectives

To determine if transdermal nitroglycerin (GTN), compared to placebo, reduces the incidence of neonatal mortality (and/or mortality) by prolonging pregnancy in women who present in preterm labour between 24 and 32 weeks gestation.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Queen's University Health Sciences and Affiliated Teaching Hospitals Research Ethics Board gave approval on the 9th March 1999

Primary study design

Interventional

Study design

Randomised controlled trial

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Preterm labour

Interventions

Patients receive a intravenous bolus of saline (500 - 1000 ml) prior to randomisation. They have 1 study patch (drug or placebo) placed and a second additional patch placed after one hour if ongoing uterine activity or further cervical changes. The patch or patches are replaced in 24 hours for a further 24 hours. Patient have maternal blood pressure monitoring every 10 minutes for one hour after a patch is placed. Antenatal corticosteroids and use of antibiotics are as per the centres protocol for patients in preterm labour.

Trial details received: 12 Sept 2005

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Neonatal morbidity and prenatal mortality

Key secondary outcome(s)

1. Randomisation to delivery interval
2. Incidence of preterm delivery less than 48 hours after initiation of treatment
3. Incidence of delivery within 7 days of commencement of treatment
4. Incidence of delivery prior to 34 weeks gestation
5. Frequency of chorioamnionitis in preterm delivery
6. Frequency of completed course of antenatal corticosteroids
7. Frequency of side effects

Completion date

30/08/2006

Eligibility

Key inclusion criteria

1. Greater than or equal to 24 to less than or equal to 32 weeks gestational age based on menstrual dates or earliest ultrasound scan
2. Preterm labour:
 - 2.1. At least four painful uterine contractions per 20 minutes
 - 2.2. Change in the cervix (change in bishop score or bishop score greater than or equal to 6)

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Key exclusion criteria

1. Any maternal (e.g. significant antepartum haemorrhage) or foetal (e.g. non-reassuring heart rate pattern) condition necessitating immediate delivery
2. Multiple gestations (i.e. twins, triplets etc.)
3. Premature prelabour rupture of the membranes (PPROM)
4. Intrauterine foetal demise or lethal foetal anomalies
5. Cervix dilated greater than 8 cm
6. Treatment with another agent within 24 hours
7. Previous enrolment in this trial
8. Known sensitivity to GTN
9. Failure to give consent

Date of first enrolment

04/05/2001

Date of final enrolment

30/08/2006

Locations

Countries of recruitment

Canada

Study participating centre
Clinical Research Centre
Kingston
Canada
K7L 2V7

Sponsor information

Organisation
Queen's University (Canada)

ROR
<https://ror.org/02y72wh86>

Funder(s)

Funder type
Research organisation

Funder Name
Canadian Institutes of Health Research (CIHR) (Canada) - <http://www.cihr-irsc.gc.ca> (ref: MCT-41550)

Funder Name
Physicians' Services Incorporated Foundation (Canada)

Alternative Name(s)
PSI Foundation, PSI

Funding Body Type
Private sector organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location
Canada

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?
Results article	results	01/01/2007		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes