











Developmental Outcome of Long Term Feed Supplementation in Neonates - The DOLFIN randomised controlled trial

Site Initiation Visit (SIV) – Training for Continuing Care sites



#### Presentation Overview

- Study Overview
- Continuing care site responsibilities
- Supplement
- Safety Reporting
- Data Management
- FAQ's
- Trial team contact details



- Multicentre, blinded, randomised placebo-controlled trial. NOT A CTIMP
- Does giving a nutritional supplement plus usual care from birth to 12 months post EDD improve cognitive development at 24 months post EDD compared to a matched placebo plus usual care?
- Active supplement contains:
- Long-chain polyunsaturated fatty acids (LCPUFAs)
- Choline
- Uridine-5'-monophosphate (UMP)
- Cytidine-5'-monophosphate (CMP)
- Control supplement contains:
  - Tiny amounts of same ingredients except UMP and CMP



#### **DOLFIN Outcomes**

#### **Primary Outcome**

At 24 months post estimated delivery date (EDD)

Non-verbal cognitive scale standardised score of the Parent Report of Children's Abilities-Revised (PARCA-R)

#### **Secondary Outcomes**

#### At 24 months post EDD unless otherwise stated

- Language scale standardised score of Parent Report of Children's Abilities Revised (PARCA-R)
- Emotional, conduct, hyperactivity and peer problems scale scores and prosocial scale scores of the Strengths and Difficulties Questionnaire (SDQ)
- Motor Skills using the Fine and Gross Motor scales score of the Ages and Stages Questionnaire (ASQ-3)
- NHS data at discharge and 24 months for health (including necrotising enterocolitis, sepsis, chronic lung disease, post discharge hospitalisations, overweight and obesity)
- · Weight and head circumferance at birth, and height, weight and head circumferance at 24 months
- Safety of supplementation throughout the intervention phase
- Parental adherence to supplementation throughout the intervention phase
- Parent acceptability of supplementation at 6 and 12 months post EDD
- Bespoke Health Economic questionnaire at 6, 12, 18 and 24 months
- Parental health-related quality of life using the EuroQol EQ-5D-5L questionnaire at randomisation, discharge, 6, 12, 18 and 24 months
- Supplement tolerance questionnaire (IGSQ) at NNU discharge, 3, 6, 12 months

All trial outcomes are measured at 24 months post estimated delivery date (EDD)



#### **DOLFIN Transfer Pack**

The infant will be transferred with a **DOLFIN Transfer Pack**. The contents include:

- DOLFIN supplement
- Parent Information Leaflet (Recruiting site contact details are on the back)
- Serious Adverse Event Report form
- Incident and deviation Form
- Red Book Stickers (to use on notes)
- Cot card
- Daily dosing log
- Guidance sheet 8 for Continuing Care Sites
- Guidance sheets relating to trial procedures
- Parent Discharge Pack





#### Continuing Care Site responsibilities

- Continuing Care sites are responsible for completing the following:
- Serious Adverse Event Form
- Incident and Deviation Form
- NNU Daily Dosing log (in some cases parents will be reporting via the app so dosing log completion is not required)
- Continuing Care site is not responsible for Case Report Forms (CRFs) completion:
  - recruiting site responsibility
    - CCS do not have study database (OpenClinica) access.



## Supporting supplementation

- The infant will be transferred with sufficient supply of supplement to use at the Continuing Care Site.
- Videos explaining how to make up the supplement can be found on the DOLFIN website:

https://www.npeu.ox.ac.uk/dolfin/parents/resources

Or direct link:

https://youtu.be/VtggW8vmvBM

https://youtu.be/4zVvDSDbNPw





## Administration of supplement

- Each box of supplement contains 1g measuring scoops
  - These are not single use. Please do not discard!
- Measured dose dissolved in infants usual feed. e.g. oral, nasogastric tube, gastrostomy tube.
- The infant must be on full milk feeds before starting supplement
  - Supplement may be stopped for a short period according to clinical need
- Breastfeeding mothers are supported in this trial; the DOLFIN breastfeeding materials outline options for supplement delivery



#### Supplement Dosing

- Dose is 1g (1 scoop) per whole kilogram body weight
  - E.g.an infant weighing 3.0-3.99kg will receive 3 scoops daily.
- Each 1g of supplement requires a minimum of 15mls milk
  - E.g. a 3kg infant having 3 scoops will have a total feed volume of at least 45mls.
- Supplement 'shot' for breast fed babies:
  - Each 1g of supplement is mixed with 3mls of milk and given ahead of feed
  - Baby put to breast immediately after supplement given
- Total daily supplement dose can be divided across more than one feed.

### Dosing for babies weighing less than 1kg

- Infants weighing less that 1kg should be dosed as follows:
- > 0.5kg -0.749kg, make up as for 1g/3ml and discard half
- ➤ 0.75-0.99kg, make up as for 1g/3ml and discard one quarter The daily dose of supplement can be split across feeds to allow the smallest babies to start supplementation as early as possible.
  - each 0.25g of supplement needs to be accompanied by 3.8mls feed.



## Dosing examples

- 1.2kg baby on 2 hourly feeds of 150mls/kg/day (180mls @ 15ml per feed):
  - Dose = 1g in 15mls milk (min. volume)
    - Add 1g of supplement to 15mls milk.
- 900g baby on 2 hourly feeds of 150mls/kg/day (135mls @ 11.2ml per feed):
  - Dose = 0.75g with a minimum milk feed volume of 11mls
    - Add 1g of supplement to 3mls milk; discard one quarter
    - Add the supplement mix to milk feed to make up to 11.2ml
    - If preferred, give the supplement mix as a shot first and then top up with remaining feed volume



### Splitting doses

- 600g baby on hourly feeds 150mls/kg/day (90 mls per day = 3.8mls per feed):
- Daily supplement dose is 0.5g
  - Each 0.25g of supplement needs to be accompanied by 3.8mls milk so the supplement will have to be split across two feeds. (i.e. 0.25g supplement per feed)
- > Add 1g supplement to 3mls of milk
- Discard half
- ➤ Add the supplement mix to feed to make up 7.6ml (for 2 feeds).
- > Give 3.8ml for the first feed and store the remaining 3.8ml for the next feed

Note: Milk containing supplement should be used within 1 hour.



# Supplement guidance

- The volume of milk given with the supplement counts towards the total feed volume.
- Opened sachets must be discarded after 24 hours and a new sachet used.
- Dispose of in a domestic bin or according to trust policy.
- Supplement should be stored at ambient temperature.
- There are no contraindicated medication or dietary supplements.
   Infants will be able to have all medicines and fortifiers normally prescribed.
- You may choose to omit fortifier from the feed containing DOLFIN.





#### Supplementation Guidance

- The transfer pack contains guidance sheet 4a & 4b explaining more about the supplement as well as dosing, preparation and administration.
- Further supplement will be delivered directly to the family

home on final discharge.

Dosing charts can be found in the transfer pack and online at:

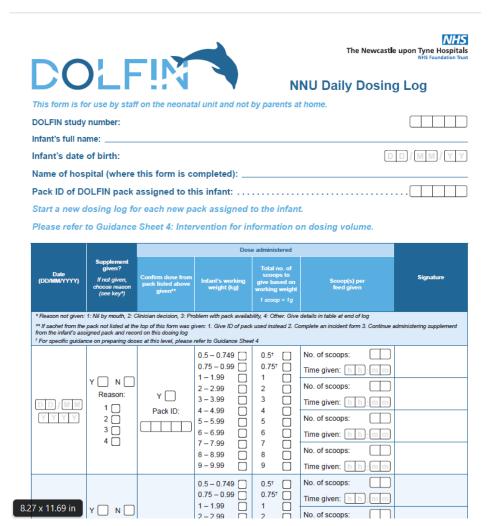
https://www.npeu.ox.ac.uk/dolfin/parents/resources





## NNU Daily Dosing log

- The NNU daily dosing log will be sent in the transfer pack. This only needs to be completed if the parents are not recording dosing via the DOLFIN App.
- Complete daily when the infant receives the dose.
- If the infant does not receive the supplement on any given day, please record the reason on the log.
- If the infant transfers to another site please send the daily dosing log, transfer pack and supplement with the infant.
- Once the infant is discharged home, please send the Daily Dosing log to the research nurse at the recruiting site.





## Blinding and code breaking

- Families and clinical teams are blinded to trial allocation
- The treating health care professional should contact the PI at the recruiting site to discuss unblinding.
- Consider treating the infant as if they have received the active supplement.
- Emergency unblinding can be carried out by recruiting site. Non urgent requests should be directed to NPEU for Chief Investigator or safety delegate review.

# Safety Reporting – Serious Adverse Events (SAE's)

- The following must be reported:
- Serious prolonged gastrointestinal disturbance (except NEC)
- Serious prolonged gastrointestinal disturbance associated with culture/growth of an unusual organism
- Safely

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- > Sepsis associated with culture/growth of an unusual organism
- Reporting window is from supplement start to 12 months and 2 weeks post EDD.
- The DOLFIN protocol lists all foreseeable SAE's which do not require reporting (page 33 of protocol).





## SAE Reporting

- Any member of the team can report SAE's.
- Report as soon as you are aware. DO NOT wait for the causality assessment to be completed.
- SAEs can be reported by phone or email (do not send patient identifiable information to the DOLFIN email address.)
- Refer to guidance sheet 9 for more information (in transfer pack or on the DOLFIN website.)



### Discharge

- Please let the recruiting site know when baby is discharged home or to another continuing care site.
- Send parents' home with their discharge pack and the remainder of their supplement.
- Ensure parents are provided with information on who to contact with trial related queries (recruiting site, research team and NPEU CTU)
- All follow up questionnaires for parents are sent from NPEU CTU.

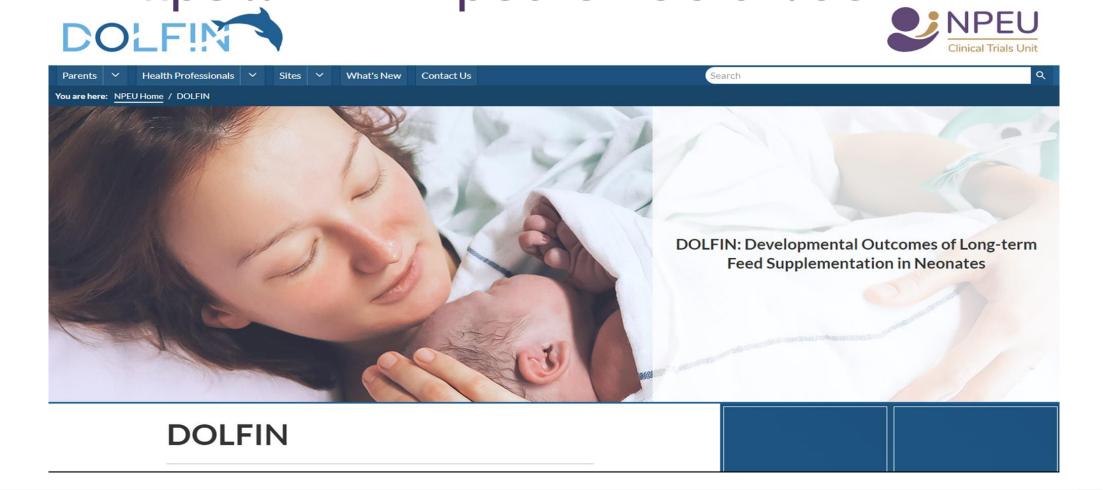
#### FAQ's

- Do we need CV/GCP? We do not require a CV or GCP for staff at continuing care sites due
  to the limited activity taken place. Please follow your own Trust policies for CV/GCP
  documentation.
- Is there any funding available for continuing care sites? Unfortunately, there is no
  funding for continuing care sites due to restrictions on funding from the Funder and the
  limited activity taking place. The study is a CRN portfolio trial and so may be eligible for CRN
  funding please contact your local CRN.
- Do we have any data entry responsibilities or have respond to data queries? No, all
  data entry and queries are the responsibility of the recruiting site. Completion of the dosing
  log to confirm supplementation is the only data recording required, this should be sent to the
  recruiting site by email or post to enter onto the database.
- Will the supplement arrive with the baby? A box of supplement should arrive with the
  baby alongside a DOLFIN Transfer Pack and DOLFIN Discharge Pack. This should last for
  the duration of the hospital stay but if more is required please contact us.

#### FAQ's

- Is there training provided for staff for giving supplement? We provide guidance sheets to sites which detail preparation, administration and storage of supplement. There are also videos available on the DOLFIN website alongside this presentation. The DOLFIN study team can be contacted for further support and training if required.
- Will we need to train the parents to give supplement when they are discharged? No, the recruiting site are responsible for training and supporting the parents. If this was not done ahead of transfer, the recruiting site will liaise with the parents to arrange training.
- How many babies may be transferred to us? As transfers are unpredictable, we are
  unable to estimate the number of transfers within the trial and it will vary across hospitals.
- Can baby have other supplements? Yes. As previously mentioned, there are no contraindicated medication or dietary supplements. Infants will be able to have all medicines and fortifiers normally prescribed.
- Can we get training credits or recognition for our contributions? We can provide
  certificates to sites for CPD evidence and all continuing care sites will be acknowledged in
  any publications.

# Further Information https://www.npeu.ox.ac.uk/dolfin





# Thank you for listening

#### **DOLFIN Study Team Contact details:**

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# Any Questions??

