# **E-TOP - Digital information for parents of very and moderat preterm born infants**

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The aim of this study is to evaluate the feasibility of the E-TOP module for both VP infants as an addition to the TOP program as well as for MP infants in an adapted TOP program.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

# **Summary**

### ID

NL-OMON54151

**Source** ToetsingOnline

Brief title E-TOP

### Condition

• Other condition

# **Synonym** birth before 34 weeks of gestation, prematurity

#### **Health condition**

ontwikkelingsproblemen

#### **Research involving** Human

### **Sponsors and support**

Primary sponsor: Academisch Medisch Centrum Source(s) of monetary or material Support: SIA RAAK

### Intervention

Keyword: e-health, parental knowledge, prematurity, responsive parenting

### **Outcome measures**

#### **Primary outcome**

The process evaluation for the feasibility includes the online use of the E-TOP module and the adapted TOP program for MP infants and parental experiences with the E-TOP module. and the adapted TOP program.

#### Secondary outcome

Outcomes measures include the questionnaires: Maternal self-efficacy in the Nurturing Role (SENR), Parental Reflective functioning Questionnaire (PRFQ), Massie Cambell scale of Mother-Infants Attachement indicators during Stress (ADS), Ages and Stage Questionnaire: Socio-Emotional, Second Edition (ASQ:SE-2), Distress Thermometer for Parents (DT-P), . Parent-child interaction will be evaluated by the Massie Cambell Scale of Mother-Infants Attachement indicators during Stress (ADS). Motor development will be assessed by the Alberta Infant Motor Scale (AIMS). Parental experiences with the E-TOP and adapted TOP program will be assessed using questionnaires as well as by semi-structured interviews.

# **Study description**

#### **Background summary**

Very preterm (VP) and moderate preterm (MP) born infants are vulnerable and at risk for developmental problems. In the Netherlands, the TOP program, a post-discharge responsive parenting program, is part of routine care for VPT infants in the first year. Despite this support, parents still have more

information needs. More parental knowledge of development is associated with better outcomes. Parents of MP infants do not receive the TOP program, and also have information needs.

### Study objective

The aim of this study is to evaluate the feasibility of the E-TOP module for both VP infants as an addition to the TOP program as well as for MP infants in an adapted TOP program.

### Study design

A pilot feasibility study with a pretest-post test design

#### Intervention

E-TOP module, families will receive information regadring prematurity, en de consequences for e.g. feeding, sleeping, crying, the behaviour and development of pretermborn infants, and parenthood after preterm birth. Families with an MP infant will receive additionally the adapted TOP program consisting of 6 home visits by a TOP interventionist in the first 6 months.

### Study burden and risks

Parents fill in three questionnaires at baseline, and four questionnaires at 6 months follow up. In addition, the TOP paediatric physical therapist will assess at the post-test motor development with the AIMS (already standard for the VPT infants in the TOP program). mother-child interaction will be assessed at pre and posttest using a videotaped observation of a daily situation of approximately 5 minutes, using the ADS.

We hypothesize that the E-TOP module added to the (adapted) TOP program has a positive effect on parental knowledge, parental satisfaction, parental responsiveness and thereby on the development of preterm infants, whereas the risk for children is neglible.

# Contacts

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# **Trial sites**

## **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

Babies and toddlers (28 days-23 months) Premature newborns (<37 weeks pregnancy)

### **Inclusion criteria**

VP group: participating in the TOP program MP group: born between 32-34 weeks of gestation

### **Exclusion criteria**

infants with severe congenital abnormalities of parents with severe mental illness

# Study design

### Design

Study phase: Study type: Masking: 2 Interventional Open (masking not used)

Control:	Uncontrolled
Primary purpose:	Prevention

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	15-11-2022
Enrollment:	80
Туре:	Actual

# **Ethics review**

Approved WMO	
Date:	10-05-2022
Application type:	First submission
Review commission:	METC Amsterdam UMC

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ISRCTN CCMO ID ISRCTN65709138 NL78996.018.21