

Welcome to Newsletter 10 for the C*STEROID Trial

Can we safely reduce the risk of breathing problems for newborn babies by giving corticosteroid injections to their mothers before a planned caesarean section?

RECRUITMENT UPDATE

Well done to all sites who managed to recruit new participants last month. We fell short during March at reaching our monthly total goal of 30 recruits.

If any sites are facing particular challenges with recruitment, please get in touch with **csteroid@auckland.ac.nz**

We are so close to reaching 500 recruited babies!

This means we need 23 new recruits during April. We would love to see this happen and boost our recruitment numbers further!

Site	Total (babies)	Last month
Auckland	273	11
Waikato	89	2
Tauranga	28	0
Christchurch	43	2
Northland	5	0
Wellington	20	0
Counties	7	0
Sunshine (Australia)	7	3
Total	472	18

MEET THE AUCKLAND C*STEROID TEAM



From left to right: Elisa Tam (Clinical Trial Manager), Research Midwives: Hannah Kasper, Mikayla Cleeton, Rebecca Hay & Caitlin Woods.

The Auckland C*STEROID site is home to our principal investigator for the trial, Prof Katie Groom. Working within this team we also have a wonderful clinical trial manager and a great group of research midwives.

The Auckland team are always happy to help with any queries or provide further resources and support for the C*STEROID trial. Please feel free to contact them at any time.



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REDCAP REMINDERS

Thank you everyone for doing a great job with data entry so far. Reminder for this month:



CRF8 Neonatal Outcome in Trial database

Common error: Mother and baby often transfer to postnatal/maternity unit before discharging home, date of discharge home is often incorrectly entered as date of transfer to postnatal/maternity unit.

Solution: If mother and baby were transferred to postnatal/maternity unit prior to discharge home, please follow up and obtain the date of discharge home.

WHY IS C*STEROID IMPORTANT?

This month we wanted to focus and remind readers why C*STEROID is important and the primary question it will answer.

More than 58,000 babies are born by planned (also known as elective or pre-labour) caesarean section in New Zealand and Australia every year. Whichever way women birth there are some advantages and disadvantages for mother and baby, and this includes some disadvantages to planned caesarean section.



Photo shared with consent.

Babies born by caesarean section before labour has started are more likely to experience short term breathing problems compared to babies born by vaginal delivery or by caesarean section after labour has started.

While the overall risk of these breathing problems is low after 35 weeks gestation, we would like to assess whether giving mothers injections of corticosteroid can safely reduce this risk.

Corticosteroids are an existing treatment that has been in use for over 50 years to reduce breathing problems in babies less than 35 weeks gestation. C*STEROID wants to understand if this existing treatment should be part of the regular care offered to mums before a planned caesarean section.

If this is shown to be safe and effective it may decrease the number of babies needing breathing support and being admitted to the neonatal unit.

CONTACT US

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