STUDY UPDATE FOR PARENTS: Australian Placental Transfusion Study

Thank you for taking part in the **Australian Placental Transfusion Study (APTS).**

This is a summary of the childhood health outcomes of APTS babies. It talks about the APTS study and a summary of all the available evidence.

We greatly appreciate your baby's and your contribution to APTS. There were over 1600 babies took part in this study. They are from 25 hospitals in 7 countries. Your contribution has helped improve medical treatment of premature babies in the future.

What was the trial about?

- Before APTS, it was standard practice to clamp the umbilical cord immediately at birth. This allowed doctors and nurses to care for the mother and the baby separately. Care is especially important when babies are born premature.
- Some studies had reported that waiting for 60 seconds before clamping the cord sends more blood to babies' brains and other organs – giving them a better start.
- APTS aimed to find out whether immediate cord clamping (clamping within 10 seconds of delivery), or delayed cord clamping (waiting at least 60 seconds before clamping) was better for premature babies in the short term and the long term.

What did the long-term childhood follow-up aim to find out?

- The Childhood Follow-up of APTS babies compared their survival and health outcomes at 2 years corrected age. This is to find out whether deferred cord clamping has a lasting benefit for premature babies.
- The lasting benefit aimed to look at whether child is:
    - Alive at 2 years of age; and/or
    - Free from one or more of the following major disabilities: cerebral palsy, severe visual loss, deafness, major problems with language or speech, or cognitive delay

What do the results tell us?

The results give the best evidence to date, showing positive outcomes at 2 years of age from delayed cord clamping:

- It reduces the likelihood of death or major disability in early childhood by 17%.
- It reduces death before 2 years of age alone by 30%.
- It reduces the need of blood transfusions after birth by 15%.

How will the results help patients and doctors in future?

Without the research which you have made possible, we still would not know whether immediate or delayed cord clamping was better. The results now tell us babies received delayed cord clamping have good outcomes when they get older. That is an important step forward, thanks to your support. More premature babies will survive in future.

Can these results explain why my baby had a particular outcome?

The difference in clamping time only explains some risks these tiny babies have. They cannot explain exactly why a baby had a particular outcome.

If you would like to discuss the study further, please contact your APTS researcher, at the hospital where your baby was born. They will be happy to speak with you.

If my baby died or had a bad outcome, was I wrong to join the study?

No. Babies outside the study were at least as likely to have a bad outcome as those who took part. By joining the study, you have helped improve the outlook for other parents and babies.

One of my twins or triplets died and the other survived. Was I wrong to join the study?

No. Each twin or triplet had an equal chance to be allocated to the immediate or delayed cord clamping arm.

What are the implications for practice?

We aim to see this important finding will be put into practice; medical staff being trained to improve adherence to the new guidelines. This will help reduce death and major disability in preterm babies.

What will the researchers do next?

Preventing complications of preterm birth is a very important area for research.

Several large trials have begun in the past few years. They seek the best treatments for preterm infants during their time in intensive care. This aim to improve their long-term physical and cognitive health.

We aim to collaborate with international researchers, specialists, parents, and policymakers. This ensures trials like this can run larger and faster in the future.

Where can I find out more about the trial?

Please speak with a specialist neonatal doctor at the hospital where your baby was cared for.

The Childhood Follow-up of APTS study is being published in

- The Lancet Child & Adolescent Health: www.thelancet.com

The APTS study and the systematic review of APTS and other studies are both being published in

- New England Journal of Medicine: www.nejm.org (APTS)
- The American Journal of Obstetrics and Gynecology: www.ajog.org (Systematic review)

You can also find out more from the following websites:

- https://www.ctc.usyd.edu.au/public-trial-pages/apts.aspx
- https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=335752

Thank you again for taking part in this important work.

APTS is funded by the National Health and Medical Council (Grant 571309) and sponsored by the University of Sydney. The authors have no financial relationships to disclose.