Effectiveness and safety of ior EPOCIM in anemia in premature infant.

	Public little:
Effectiveness and safety of ior EPOCIM in	anemia in premature infant.
Effectiveness and Safety of use ior EPOCIN premature infant.Phase III	In the prophylaxis or treatment of anemia in the
IIC-RD-EC121	
Center of Molecular Immunology(CIM)	Issuing Authority of the Secondary Identifying Numbers:
Center of Molecular Immunology(CIM)	• •
No proceed	Source(s) of Monetary or Material Support:
Goverment found	Regulatory authority to approve the initiation to the study:
Center for State Control of the Quality of M	Medicines (CECMED)
24/08/2009 00:00 	
994/05.018.09.B 	
Cuba 	Province of Principal Site:
Havana City 	Principal Clinical Site:
Mother and Child Teaching Hospital 10 de	Octubre Principal Investigator:
Anett Sijó Yero,MD.First degree specialist	in Neonatology.
Havana City, Ginecobstetric Hospital "Ran MD.Second degree specialist in Neonatolo	nón González Coro", Fernando Domínguez Dieppa,
in Neonatology. Havana City, Enrique Cabrera Hospital, De	ebora Villegas Cruz, MD. First degree specialist in
specialist in Neonatology.	érica Arias", Eugenio Carro Puig, MD. Second degree
	Research Ethics Committees: nild Teaching Hospital, May 15,2009.
Havana City, Ginecobstetric Hospital "Ran	nón González Coro", May 6,2009.
Havana City, Ginecobstetric Hospital "Eus Havana City, Enrique Cabrera Hospital, M	
Havana City, Ginecobstetric Hospital "Ame	érica Arias", May 14,2009.
1. Pending	
	Health Condition(s) or Problem(s) Studied.:

Anemia in the premature infant.
Intervention(s):
Schema: ior® EPOCIM+ Vitamin therapy + Ferric supplement ior® EPOCIM 900 IU/kg/per week (subcutaneosly), 3 times for week, 300 IU/kg in each administration, in the right deltoid region. It will administer in patient hospitalized. If the premature infant have the minimal weight established (2500 g), the administration will be in ambulatory way. Vitamin therapy (oral route): VitaminE (25 mg), Vitamin C (50 mg), Folic acid (1mg) and Multivitamin complex 6 dropes. This treatment will begin since 5 days of life, like appears in the protocol of the newborn that are low weight. Ferric supplement (Ferrous fumarate) by oral route. Doses 4 mg/kg/day; allowed scale up 6
mg/kg/day, according oral tolerability, until premature infant take in 100 ml/kg/day of maternal milk and/or artifitial milk. All treatments will finish when the patient reaches corrected gestational age of 40 weeks.
Number of red globules transfusions required (total of transfusions of blood required by the patient). Measurement time: at the end of treatment and 30 days after end of treatment. Hematological status: Hemoglobin (g/l) and Hematocrit (%). Time of measurement: baseline, 7, 15, 30 and 45 days of treatment, at the end of treatment and 30 days after end of treatment. Adverse Events (AE). Measurement time: 7, 15, 30 and 45 days of treatment, at the end of treatment and 30 days after end of treatment. - AE occurrence in the subject (Yes/No) - AE description (name of the AE) - AE duration (different between of start date and the end date of the AE) - AE Intensity (Mild, Moderate, Severe) - AE severity (Grave/Serious, Not Grave/ Not Serious) - Attitude from study treatment (Without change, Modification of doses, Temporal withdrawal, Definitive withdrawal from treatment) - AE outcome (Recovered, Improved, Sequelae, Persists, Death) - Casualty related (1.Very probably, 2.Probably 3.Possible, 4.Improbably, 5.Not related 6.Not evaluate)
3. Both Minimun Age:
8 days of birth Maximun Age:
none Inclusion Criteria:
 1.Preterm patients with weight ≤ 1500 g and gestational age <34 weeks(determined by the method of date of last menstrual period). 2.Patients whose parent or responsible family has given its consent for participation in the study in writing. 3.Patients with more than 7 days old. 4.Patients with an intake of at least 50 ml/kg/ day of milk and/or artificial.
1.Patients with hemolytic or hemorrhagic disease. 2.Patients diagnosed with major congenital malformation requiring transfer to another department of Neonatology. 3.Patients with known hypersensitivity to products derived from cells above or hypersensitivity to human albumin.
Type of Participant: 2. Patients Type of study:

1. Interventional	A11
3. N/A: single arm study.	
1. Open.	o .
3. Uncontrolled	•
1. Single Group	•
1. Treatment	Phase:
7. Phase III	Target Sample Size:
72 	· First Name (Contact for Public Queries):
Patricia MD.	· Middle Name (Contact for Public Queries):
Piedra	Last Name (Contact for Public Queries):
CIMAB SA.	
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Cuba	Country (Contact for Public Queries):
11600	· Zip Code (Contact for Public Queries):
271-50-57 Ext.111	Telephone (Contact for Public Queries):
	Email Address (Contact for Public Queries):
	First Name (Contact for Scientific Queries):
	Middle Name (Contact for Scientific Queries):
Piedra	Last Name (Contact for Scientific Queries):
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	- Primary Register
RPCEC	Timary Register.
	- Unique ID number:
RPCECoooooo88	emque 12 number.
	- Date of Registration in Primary Register:
22/10/2009 20:00	, ,
	- Record Verification Date:
01/09/2009 20:00	

Agregar un Comentario