Diabetes and Antenatal Milk Expressing: The DAME trial

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What is the DAME trial?

Researchers at Mother & Child Health Research, La Trobe University, together with The Women's and the Mercy Hospital for Women are conducting a trial to evaluate the practice of antenatal milk expressing for women with diabetes in pregnancy who require insulin. The evaluation is being undertaken as a randomised controlled trial for women at low risk of obstetric complications. The trial will be recruiting women for two years.

Eligible women are offered the option of participating in the **DAME** trial when they attend the hospital for an antenatal visit between 34 and 36 weeks. If they are agree to participate, they are randomly allocated to either expressing antenatally (the intervention) (in addition to their usual care) or they are allocated receive care as usual with no extra requirements (except completing some questionnaires, which all women in the study do).

Why are we doing the study?

Some hospitals or maternity care providers are advising women with diabetes in pregnancy to express breast milk/colostrum late in pregnancy so that they can give the milk to their baby after birth if needed. There may be some benefits for a baby to have only their own mother's milk, but as yet there is limited evaluation of this practice, so it is not known if the practice is of benefit or if it causes harm. The DAME trial will be the first randomised trial of antenatal expressing.

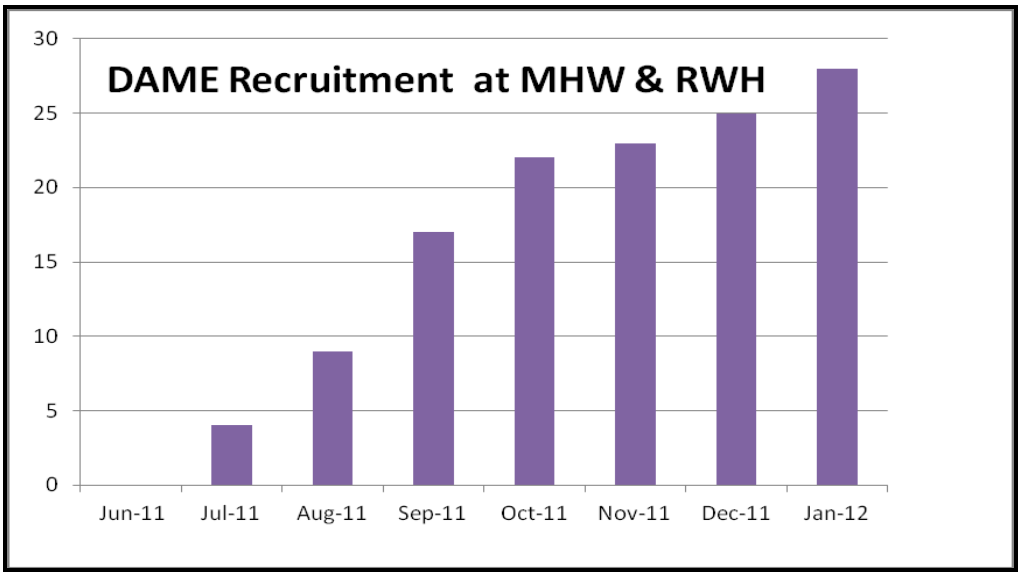
What is involved?

After women have agreed to participate in the trial, before being randomised, they will have their routine CTG reviewed to ensure it is reassuring. Only then will the women be randomised to the intervention arm or usual care. Women in the intervention arm will be asked to hand express twice daily from 36 weeks until birth. Once each week expressing will be done while the woman is having her weekly CTG. The women will freeze any breast milk they express at home, and will bring it from home in an esky when they come to hospital to give birth. If needed, the breast milk can be used by their baby in the early postnatal period. Frozen breast milk will be stored in the **dedicated DAME freezer** in Ward 4 East (The Women's) or Ward 5A (Mercy).

Recruitment and research midwives

Recruitment to the **DAME** trial commenced on 6th June 2011 at the Women's and 13th July 2011 at the Mercy. The **DAME** recruiters are Anita Moorhead (the trial co-ordinator), Carmel Jeffers, Fiona Mc Lardie-Hore, Wendy Thornton and Rachael Ford. They approach eligible women in clinic to see if they are interested in being part of the trial. There has already been a great deal of interest from women. To date **28** women have agreed to participate in the **DAME** trial and there has been **26** births.

Recruitment by month



How do I know if a woman is in the DAME trial?

Look for this sticker in her medical record on the Alert Sheet and ask the woman. If it is not clear feel free to contact the trial co-ordinator.

Do these women and babies require any extra care?

The women in the DAME trial and their babies will have routine postnatal care, except that ALL babies in the trial (either in birth suite, the postnatal ward or NISC/SCN/NICU) will have True Blood Glucose (TBGs) levels rather than blood sugar levels (BSLs) with a glucometer.

Please use the iSTAT machine to take a TBG and record as (for example) ‘’3.6mmols-TBG with iSTAT” on the baby’s record. If in NISC/SCN/NICU continue to use the blood gas machine.

Questions?

If you would like iSTAT training or would like to know more about the DAME trial contact Anita Moorhead (trial co-ordinator) on **8345 2932** *or* ***email*** ***dame@latrobe.edu.au***

Thank you to all staff throughout the Women’s and the Mercy for their support and contribution to the trial so far.

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