



Protocol for the study on pregnant women

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Nordic Iodine Meeting 16-17 September 2015





Iodine status during pregnancy and its effect on infant development; a randomized intervention trial with cod

Short title: Mammas mat (NO), Mommy's food (EN)



Partners

Scientific

- NIFES: Maria Wik Markhus, Marian Kjellevold Malde, Lisbeth Dahl, Ingvild Eide Graff, Jannike Øyen, Ive Nerhus and Øyvind Lie
- RKBU vest, Uni helse: Ingrid Kvestad and Mari Hysing

Finance

- The Norwegian Seafood Research Fund - FHF

Recruitment

- Women's Clinic, Helse Bergen, Haukeland University Hospital









Aim

Investigate if a regular intake of cod in pregnancy has impact on infant develpment









Objectives (work packages)

WP 1: Measure iodine levels in a variety of fish species and dairy products

FOOD ANALYSIS

WP2: Does a regular dierary intake of iodine change the iodine status in pregnants?

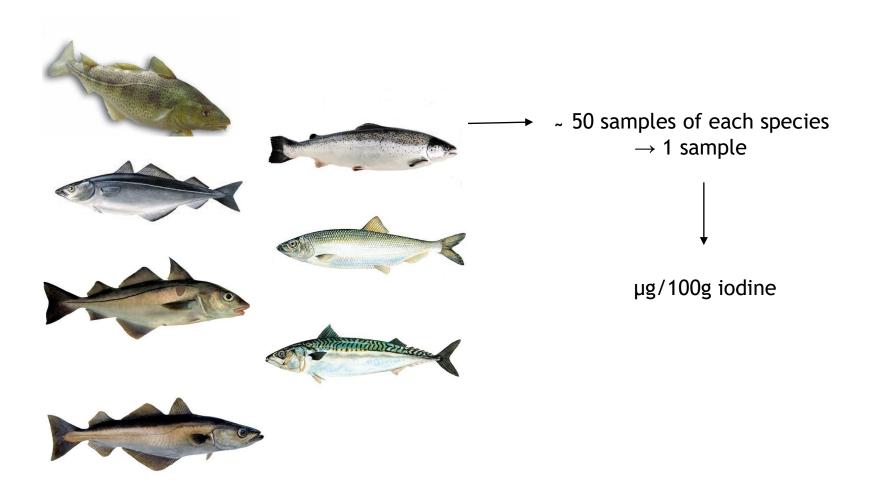
INTERVENTION STUDY

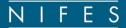
WP3: Will an increased iodine status in pregnancy be reflected in child development?

FOLLOW UP ON INTERVENTION

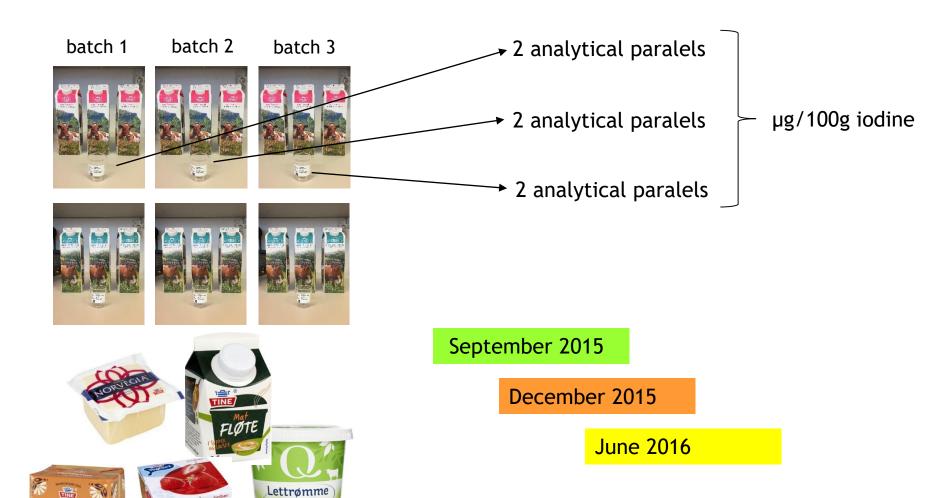


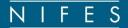
WP 1: FOOD ANALYSIS -Fish





WP 1: FOOD ANALYSIS -Dairy



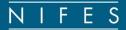


Mammas mat (Mommy's food) WP2 & WP3





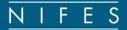




Aim and Hypoteses



- H₀ Dietary intake of iodine rich food such as cod has no impact on iodine status of mothers in pregnancy and/or infant development
- H₁ Dietary intake of iodine rich food such as cod has an impact on iodine status of mothers in pregnancy and/or infant development



Design and main variables

Design

Two armed randomized non-blinded intervention trial

Primary outcome variable

Maternal and infant iodine status

Secondary outcome variable

Neurodevelopment



Subjects



Source population

All pregnant women receiving a summons for the routine ultrasound check-up of their fetus in week 17-19 during the recruitment, ~400 monthly

Inclusion criteria

≤gestational week 19, primiparous singleton pregnancy, comprehension of Norwegian language

Exclusion criteria

allergies to fish, chronic disease known to affect iodine status (Graves' disease, thyroditis, thyroid nodules, hypothyroidism, hyperthyroidism)



Power



Based on the following simplified equation

(Institute of Medicine 2001)

UIC / $0.92 \times (0.0009 \text{ L/h/kg} \times 24 \text{ h/d}) \times \text{weight (kg)} = daily iodine intake$

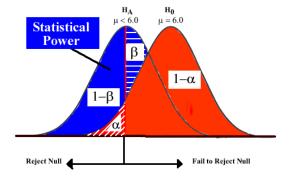
and data from the «Little in Norway» cohort

The median UIC was 82 μ g/L and the estimated iodine intake was thus 114 μ g/day



Power

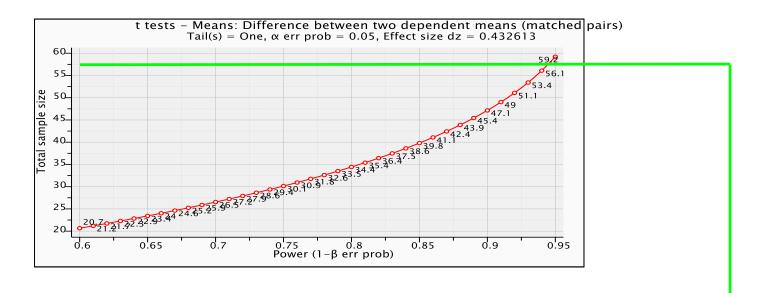
- 400 grams of cod per week
- ~iodine 100 µg /100 gram



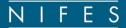
• will increase the mean estimated intake of iodine per week from 800 μg /week to 1200 μg /week



Power



- a sample size of 60 women/group will have a 95% power to detect a 30% higher UIC in the intervention group than in the control group
- taken into account a 20% drop out rate a total sample size of 144, divided into two groups, is anticipated

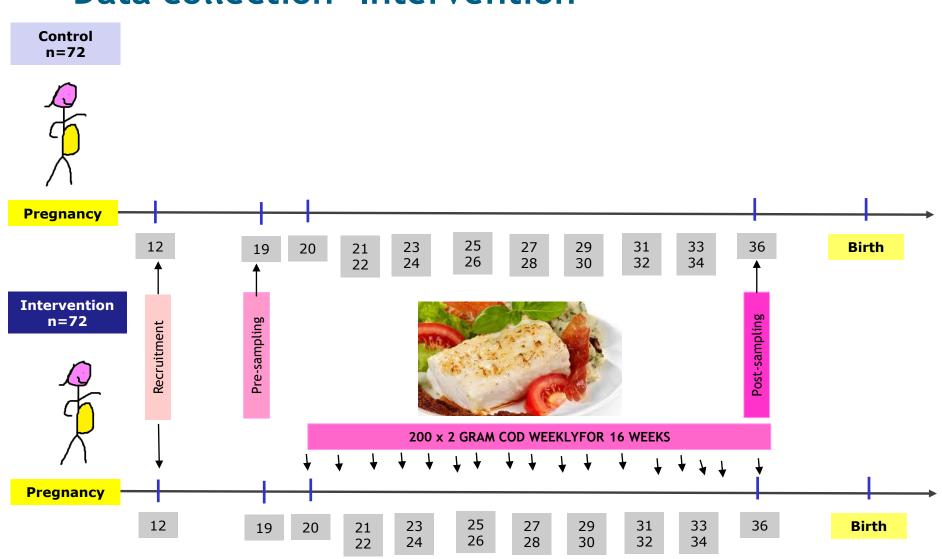


Recruitment

- All pregnant women in the source population will be given a folder with information regarding the intervention trial together with the date/time for their routine ultrasound, which takes place in gestational week 17-19
- Recruitment has a planned start 1st October 2015
- Intervention will start in December 2015...
- Estimated recruitment for four months...



Data collection -Intervention





Sampling



Pre sampling, gestationalweek 19

<u>Bological</u>: UIC (4-6 spot per individual incl. creatinin), thyroid hormone status, fatty acid status, mercury status, iron status

Questionaires: Short-FFQ, SES & background variables,...

Intervention

Food dairy to record intake of study diet

Post sampling, gestaional week 36

Identical to pre sampling

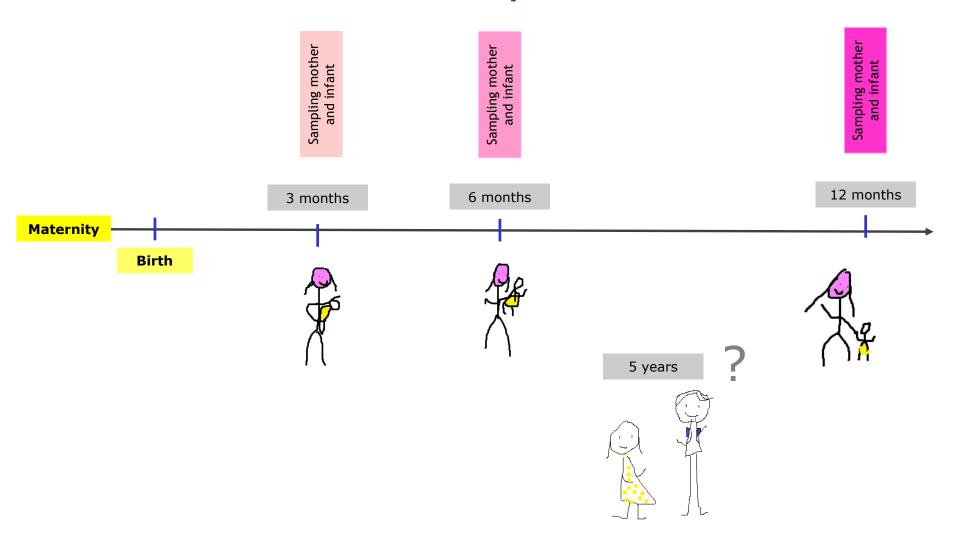




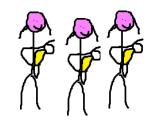
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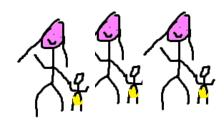
Data collection -follow up



Sampling







3, 6 and 12 months sampling (mother & child)

<u>Bological</u>: UIC (4-6 spot per individual incl. creatinin), thyroid hormone status, fatty acid status, mercury status, iron status, breast milk iodine status (4-6 spot per individual)

<u>Questionaires:</u> Short-FFQ, SES & background variables, ASQ-SE 24-hour dietary recall (infants)

12 months sampling

Extensive infant development testing (BSID-III ADBB, sleep



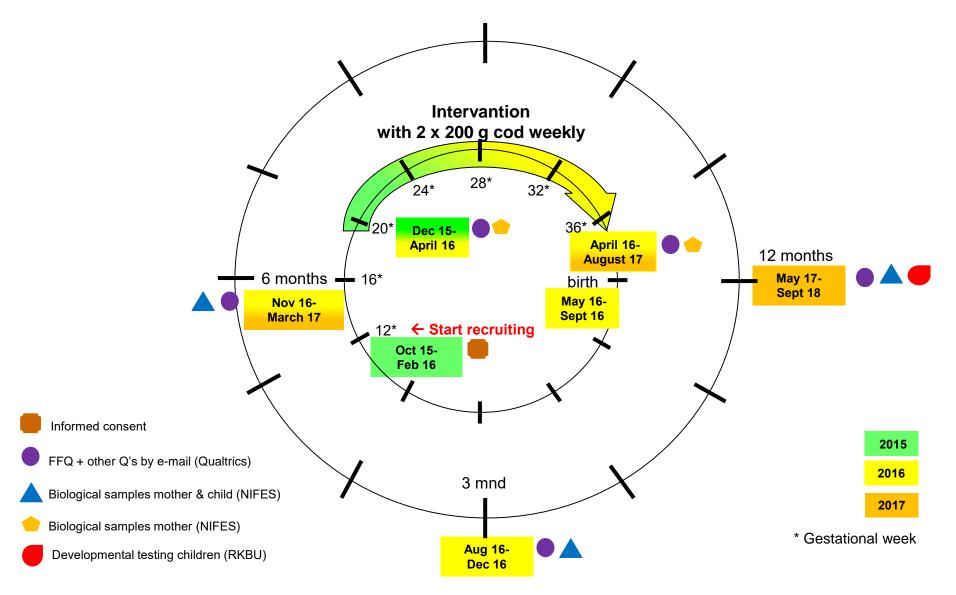








Timewheel





Analysis & publishing

- KEEP
 CALM
 AND
 WAIT FOR
 THE RESULTS
- Laboratory analysis starts August 2016
- Data analysis starts autumn 2016

Publishing

- WP 1: 2016

- WP 1 and 2: 2017

- WP 2 and 3: 2018

