The Project in a nutshell

Acronym:
LIFT-UP Preterm

Start date:
May 2023

Duration:
48 months

A project on:
Long Term Infant Follow-up in Trials Using a European Platform of Preterm Birth Cohorts

8 academic partners
and 24 hospitals across 13 European countries

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for easy access to the website

Why our research matters

High-quality randomised controlled trials (RCTs) have driven significant advances in obstetric and neonatal care, improving survival and reducing complications after very preterm births (those occuring below 32 weeks of gestational age). However, the number of neonatal RCTs is declining due to the increasing complexity of interventions and rising research costs. A key challenge is ensuring follow-up in RCTs of very preterm births, which is crucial for assessing long term safety and efficacy of medicines and interventions on health and neurodevelopment, including cognitive, pulmonary, metabolic and quality of life outcomes.

Find more information online

You can find more information about the background, methods, topics, and people involved by looking at the following websites:

https://recap-preterm.eu/for-scientists/lift-up-preterm/

https://treocapa.inserm.fr/index.php/about-treocapa-lt/

https://le.ac.uk/parca-r

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Long Term Infant Follow-up in Trials Using a European Platform of **Preterm** Birth Cohorts

LIFT-UP Preterm

Inserm | RECAP preterm | TREOCAPA Long Term

About LIFT-UP Preterm

LIFT-UP Preterm unites researchers, healthcare teams, professionals, parent representatives and stakeholders to promote RCTs in very preterm populations using the **RECAP Preterm** platform.

LIFT-UP Preterm will develop a data entry tool integrated into the **RECAP Preterm** platform, using the open-source PARCA-R questionnaire to assess cognitive and language development at 24 months. Additional tools will enable trial data analysis, facilitating comparisons between trials and **RECAP Preterm** platform cohorts to evaluate the "transportability" of trial results to different preterm infant populations.

The ultimate aim is to generate knowledge for better health, development and quality of life for those affected by very preterm birth.

About RECAP Preterm

The **RECAP Preterm** Cohort Platform is a multi-disciplinary, geographically diverse database of very preterm (<32 weeks of gestational age) / very low birthweight (birth weight <1500g) cohorts designed to support follow-up studies for a holistic under-standing of interventions' short- and long term effects. This platform reduces ethical, administrative, and technical barriers to collaboration, encouraging global research engagement. It enables timely responses to emerging questions on care and policy for those born very preterm or with low birth weight. By incorporating new cohorts and updating existing data, **RECAP Preterm** aims to become a sustainable European hub for research and healthcare innovation. The **RECAP Preterm** platform offers a unique opportunity for long term follow-up after RCTs, such as **LIFT-UP Preterm**.

Proof-of-Concept: TREOCAPA Long Term (LT)

The **LIFT-UP Preterm** tools are implemented in a proof-of-concept study to follow up on the **TREOCAPA trial**. This pan-European study investigates the safety and efficacy of using paracetamol in preterm infants to close the ductus arteriosus and reduce prematurity-related complications.

TREOCAPA Long Term will assess the 2-year outcomes of these children, determining whether early paracetamol use reduces the risk of neurodevelopmental disorders in early childhood.

New tools for data entry

Follow-up module

Based on core variables and harmonised definitions from very preterm birth cohorts

RECAP Preterm Platform

Infrastructure for federated analysis of research data

Randomised trials

23 Observational cohorts

- Population based data
- Data catalogues
- Harmonised definitions

New tools for data analysis

Integrated analysis of trial data

- Comparison of trial sample characteristics to population cohorts
- Improving external validity of trial results using observational cohorts
- Benchmarking of cohorts to trial data to enable additional investigation