Nanopreterm December Newsletter

Introduction

from Cheryl Battersby, Chair of Nanopreterm

Welcome to Nanopreterm's first newsletter. Thank you to the 504 BAPM members who have signed up to join the Nanopreterm Special Interest Group. We look forward to meeting many of you over a series of virtual "roadshows" planned for 2026.

We spent the summer setting up the Nanopreterm team, and we are thrilled to announce nearly 40 have joined the leadership team. In addition to myself, and the other Nanopreterm officers, David Quine (Secretary), Lambri Yianni (Education), Julie-Clare Becher (Quality Improvement) and Charles Roehr (Research), we have appointed consultant neonatologists to represent the MDTs in their network, and also representatives of allied health professionals and specialist areas relevant to extremely preterm birth. You can find out more about them and how to **contact them here**.

We had our first meeting in September 2025 and have published our vision and workplan for 2026 on the **BAPM website**.

Nanopreterm's vision

To build a multi-professional community focused on delivering optimal care and improving outcomes for the smallest and most immature babies.

Nanopreterm is focused on care for babies born at 22–23 weeks gestation. The SIG aims to:

- Build a collaborative, multi-professional community.
- Identify areas of uncertainty and research gaps.
- Share experiences and develop national resources/frameworks.
- Identify units with good outcomes and share guidance.
- Improve survival and long-term outcomes for extremely preterm infants.
- Support collaborative audits and quality improvement projects.
- Advocacy; including perinatal optimisation including antenatal counselling.
- Collaboration with Tiny baby Collaborative and planned webinar 11th February 2026 (time to be confirmed).

Regional Networking

- Members encouraged to form Nano Preterm groups within their networks.
- Suggested activities include webinars, teaching days, and collaborative forums.
- Each month, a region will be hosting will be hosting a NanoPreterm “roadshow” in 2026 to showcase local practices and challenges. The theme for each SIG will be “What you do well” and “What are the challenges” in the care of babies born 22 and 23 weeks in your region. We envisage this being a presentation from a multiprofessional team, and we will send a formal invite that the regional reps can then circulate to their MDT, including obstetricians, maternity teams etc.

The aims of these roadshows:

1. Provides a purpose and opportunity for regional leads to reach out to their MDT to talk about Nanopreterm and prepare for their “roadshow” together.
2. Facilitates conversations that we hope will lead to formation of MDT team focused on extreme preterms, where these networks do not exist already.
3. Provides a chance for regional leads to reach out to all their neonatal units in their region to invite them to take part / for their input / and also raise awareness of Nanopreterm and facilitate invitation to network.
4. Provides a chance for the Nanopreterm SIG to understand what is working well or not so well or a challenge in each region, and also appreciate the variation in care (hence meeting the objective of understanding variation across country, and at the same time raising profile of Nanopreterm nationally).
5. Chance to network nationally and raise the profile of Nanopreterm SIG.
6. This can lead to a meeting at the next BAPM Annual Conference and even a session to present the data.

Research Priorities Identified

- Long-term outcomes and follow-up standards, likely linked to other frameworks where possible.
- Drug safety and pharmacology in extremely preterm infants.
- Transport and capacity transfer issues.
- Variation in survival-focused care and its impact.

The 22 Week Study (IRAS 346626)

Led by NeoTRIPs, a BAPM affiliated, resident doctor led research group

This is a prospective, observational study including all babies born at 22+0-22+6 in a NICU centre with the neonatal team present and/or admitted to a NICU (from delivery room or outborn) over a 12-month period. Parents must receive an information leaflet, which is available in 7 languages, to let them know how the data will be collected & used. The data collected is pseudonymised and there is detailed clinical data collection throughout the neonatal journey. We estimate there may be 100 babies in the study, which was launched in June 2025 and is likely to run to early 2027.

Our aim is to describe this population and clinical care in detail, in addition to exploring potential associations and predictive factors.
Update

Firstly, a HUGE thank you and well done to everyone recruiting, keeping a lookout for babies and data collecting - some units have had a lot to do & have been doing a fantastic job!

- 42 NICU and stand-alone surgical centre sites open (listed below by region/network).
- There are 2 more units left to open in England then all planned participating centres will be open out of a possible 48, with a further 5 units in Scotland ready to participate but awaiting national data governance processes.
- 40 babies in the database.

England:

East of England – Norfolk & Norwich University Hospital, Rosie Maternity Hospital Cambridge, Luton & Dunstable Hospital

East Midlands – Leicester Royal Infirmary, University Hospitals Nottingham

Kent, Surrey, Sussex – William Harvey Hospital East Kent, Medway Maritime Hospital Gillingham, Ashford & St Peter’s Hospital Chertsey

London – St George’s Hospital, Kings College Hospital, Chelsea & Westminster Hospital, Queen Charlotte & Chelsea Hospital, University College London, Royal London Hospital, Homerton Hospital, Great Ormond Street Hospital

Northern – James Cook University Hospital

North West – Royal Preston Hospital, East Lancashire NHS Trust Burnley, Royal Bolton Hospital, Royal Oldham Hospital, St Mary’s Hospital Manchester, Liverpool

Women’s Hospital & Alder Hey, Arrowe Park Hospital

South West – Southmead North Bristol, St Michael’s Bristol, Derriford Hospital Plymouth

Thames Valley Wessex – John Radcliffe Hospital Oxford, Princess Anne Hospital Southampton, Queen Alexandra Hospital Portsmouth

West Midlands – New Cross Hospital, Birmingham Women’s and Children’s Hospitals, Birmingham Heartlands Hospital

Yorkshire – Hull Royal Infirmary, Leeds Neonatal Service, Bradford Royal Infirmary, The Jessop Wing Sheffield

Wales:

University Hospitals Wales, Cardiff, Singleton Hospital, Swansea

Northern Ireland:

Royal Maternity Hospital, Belfast.