# THE LANCET Child & Adolescent Health

# Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Beardsall K, Thomson L, Guy C, et al. Real-time continuous glucose monitoring in preterm infants (REACT): an international, open-label, randomised controlled trial. *Lancet Child Adolesc Health* 2021; published online Feb 9. http://dx.doi.org/10.1016/S2352-4642(20)30367-9.

#### **Supplementary Data**

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Sensor Glucose mmol/l	Falling	Stable	Rising
<2.6	Check Blood Glucose Stop any Insulin & Check all lines Give additional Dextrose Consider starting 20% Dextrose at 1ml/kg/hr	Check Blood Glucose Stop any Insulin & Check all lines Give additional Dextrose Consider starting 20% Dextrose at 1ml/kg/hr	Check Blood Glucose Review infusions & check lines Ensure Insulin is not running Consider starting/increasing 20% Dextrose at 1ml/kg/hr
2.6-4.0	Check Blood Glucose Stop any Insulin & Check all lines Give additional Dextrose Consider starting 20% Dextrose at 1ml/kg/hr	Check Blood Glucose Stop any Insulin & Check all lines Give additional Dextrose Consider starting 20% Dextrose at 1ml/kg/hr	Observe the rate of rise Review infusions & check lines Ensure Insulin is not running Consider need for additional Dextrose
Target Range	IN TARGET  If the rate of fall means you will be <4.0mmol/I within 1 hour consider reducing Insulin	IN TARGET	IN TARGET  Consider weaning any additional 20% Dextrose
8.0-10.0	Observe the rate of fall Consider <i>reducing</i> Insulin infusion rate by 25%	Stop any additional 20% Dextrose or Start Insulin at 0.05 units/kg/hr or if Insulin is already running <i>increase</i> Insulin infusion rate by 50%	Stop any additional 20% Dextrose or Start Insulin at 0.05 units/kg/hr or if Insulin is already running <i>increase</i> Insulin infusion rate by 50%
10-15.0	Observe the rate of fall Consider <i>increasing</i> Insulin infusion rate by 25%	Stop any additional 20% Dextrose or Start Insulin at 0.05 units/kg/hr or if Insulin is already running <i>increase</i> Insulin infusion rate by 50%	Stop any additional 20% Dextrose or Start Insulin at 0.05 units/kg/hr or if Insulin is already running <i>increase</i> Insulin infusion rate by 50%
>15	Observe the rate of fall Consider <i>increasing</i> Insulin infusion rate by 50%	Start Insulin at 0.05 units/kg/hr or consider <i>increasing</i> Insulin infusion rate by 100% (that is: Double) Always check infusion lines if there is little or no response to an intervention	Start Insulin at 0.05 units/kg/hr or consider <i>increasing</i> Insulin infusion rate by 100% (that is: Double) Always check infusion lines if there is little or no response to an intervention
CRITICAL CONCERN IN TARGET	They provide additional information o	ntinuous glucose sensor readings are provided to support of n trends in glucose levels which should be used to guide the Capillary/venous blood glucose levels are more accurate. heck infusion lines if there is little or no response to an into	need for blood glucose measurement.

Figure 1 Paper Guideline

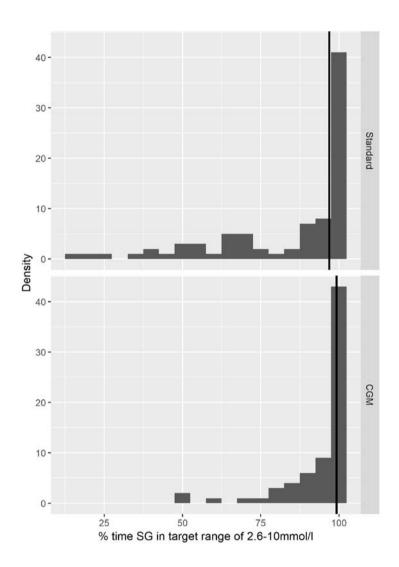


Figure 2 Histogram of the primary outcome by treatment group (n=179)

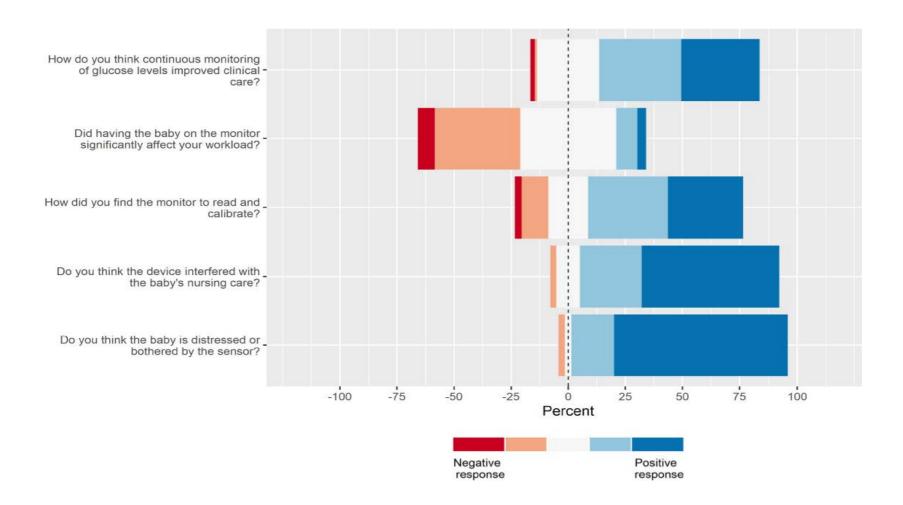


Figure 3 Staff Questionnaire of acceptability.

Stacked bar chart showing proportion of response for each Likert question Pooled data from day 3 and day 7 (n=54).

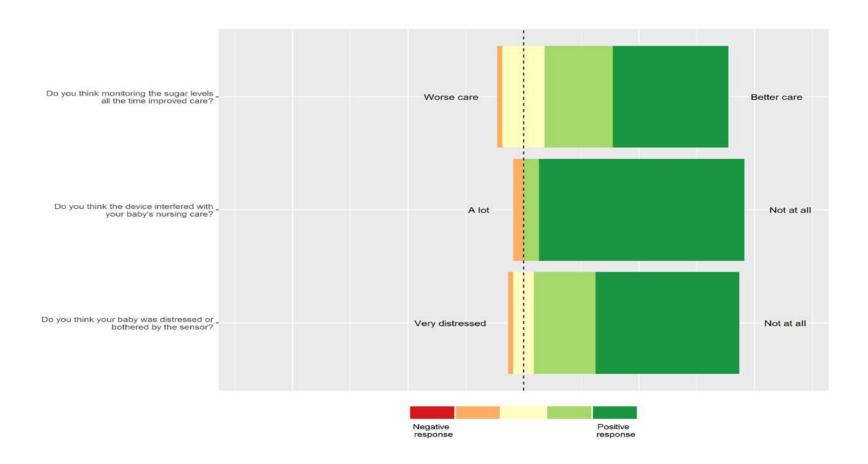


Figure 4 Parent Questionnaire of acceptability.

Stacked bar chart showing proportion of response for each Likert question (n=45)

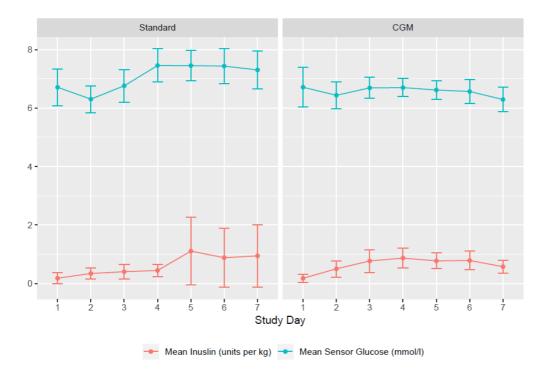


Figure 5 Mean glycaemia and mean insulin infused by treatment arm

CGM: Continuous glucose monitoring intervention

	mean	sd	median	Min	maz
Standard Care	7.31	5	7.19	2	28
Real Time CGM	6.46	3	7.62	1	28

Sites were adjusted for using a fixed effects model in the primary analysis. This was borderline case as to whether fixed- or random-effects for site were more appropriate. We report based on the pre-specified choice. Sensitivity analysis show the treatment effect is consistent with either modelling assumtpion: 9.26 (2.79) [estimate (SE)] in the random effects model

eTable 1. Summary Data of Number of Subjects per Centre

Outcome	Standard	CGM	Adjusted Estimate <sup>a</sup> (95% CI)	P- value
Mortality	6% (6/95)	2% (2/84)	0·263 [0·0353, 1·3]	0.13
Infection	62% (53/85)	58% (50/74)	1 [0.46, 2.2]	0.99
NEC	28% (24/85)	13% (10/75)	0·328 [0·129, 0·78]	0.014
PDA	31% (26/85)	26% (19/74)	0.52 [0.199, 1.3]	0.16
Intracerebral pathology	32% (27/84)	33% (25/75)	1.02 [0.51, 2.1]	0.95
BPD	66% (56/85)	60% (45/75)	1.2 [0.52, 2.8]	0.66
Maximum ROP	1.5 (3.6)	1.1 (3.8)	-0.26 (-1.37, 0.85)	0.64
Weight SDS – day 7	-1·3 (0·75)	-1·26 (0·79)	0.05 (-0.19, 0.28)	0.69
Weight SDS – 36 weeks gestation	-1.54 (0.94)	-1.56 (0.93)	-0.04 (-0.34, 0.25)	0.78
Body length SDS – day 7	-1.81 (1.07)	-1.78 (0.87)	-0.02 (-0.36, 0.31)	0.89
Body length SDS – 36 weeks gestation	-2.6 (1.6)	-2.9 (1.8)	-0·38 (-1·19, 0·42)	0.34
Head circumference – day 7	-1.84 (0.77)	-1.76 (0.83)	0.07 (-0.2, 0.35)	0.60
Head circumference – 36 weeks gestation	-1·3 (1·6)	-1·1 (1·7)	0.13 (-0.44, 0.7)	0.65
Total insulin – week 2 (units per kg)	1·1 (2·6)	1.1 (3.0)	0·1 (-0·76, 0·96)	0.82

Data presented as mean (SD) or percentage (frequency). <sup>a</sup>Adjusted for gestation and centre: data presented as mean difference (95% CI) and odds ratio [95% CI]. NEC: necrotizing enterocolitis; PDA: patent ductus arteriosus; BPD: bronchopulmonary dysplasia; ROP: retinopathy of prematurity; SDS: standard deviation score

## eTable 2 Clinical Outcomes Exploratory Analyses

				Logistic regression	
Variable	Statistics	Standard	CGM	Adjusted Odds Ratio <sup>a</sup> (95% CI)	P-value
2.2mmol/l< BG <2.6mmol/l	Yes	11.8% (11/93)	14.7% (11/75)	1.2 (0.48, 3.2)	0.7
BG ≤2.2mmol/l	Yes	6.5% (6/93)	13.3% (10/75)	2.2 (0.7, 7.1)	0.2
Continuous episode of SG <2.6mmol/l for >1 hr	Yes	15.3% (13/85)	5.7% (4/70)	0.361 (0.0919, 1.2)	0.1
Length of time SG <2.6mmol/l (hours)	n Mean (SD) Median Min, Max	85 1.0 (3.2) 0 0, 22	70 0.5 (1.7) 0 0, 11.2		
% time SG <2.6mmol/l	n Mean (SD) Median Min, Max	85 1.1 (3.2) 0 0, 16.7	70 1 (5.3) 0 0, 41		

<sup>&</sup>lt;sup>a</sup>Adjusted for centre and gestation (<26 weeks, ≥26 weeks)

eTable 3 Safety analyses of real time continuous glucose monitoring versus standard care

## Title: Primary outcome Population: Full Analysis (N = 179) Subtitle: Model fitting results - sensitivity analyses

Model	Outcome	Covariate	Estimate	95% CI	P-
			(Std. Error)		value
LM weighted by number of SG observations	% time SG in target of 2.6- 10mmol/l	(Intercept)	80 (3.39)	(73.3, 86.7)	<0.001
		CGM versus standard	8.5 (2.58)	(3.4, 13.6)	0.001
		N36 (ref: N01)	-4.57 (15.1)	(-34.4, 25.3)	0.763
		N42	7.04 (5.5)	(-3.85, 17.9)	0.203
		N43	-0.0351 (3.82)	(-7.59, 7.52)	0.993
		N68	1.73 (3.95)	(-6.09, 9.54)	0.663
		N73	3.55 (5.39)	(-7.1, 14.2)	0.511
		N74	10 (12.4)	(-14.6, 34.6)	0.422
		N85	8.28 (6.43)	(-4.42, 21)	0.2
		N86	-21 (8.66)	(-38.1, - 3.89)	0.017
		N87	-16.5 (12)	(-40.3, 7.31)	0.173
		N88	-26.5 (7.21)	(-40.8, - 12.2)	<0.001
		ND3	6.33 (6.22)	(-5.96, 18.6)	0.311
		SP3	9.19 (7.64)	(-5.91, 24.3)	0.231
		Gestation >= 26 weeks	6.07 (3.29)	(-0.431, 12.6)	0.067
RSD = 15.8					
LM adjusted for start time of first SG and first SG	% time SG in target of 2.6- 10mmol/l	(Intercept)	82.8 (4.66)	(73.6, 92)	<0.001
or mor de and mor de	101111101/1	CGM versus standard	9.09 (2.64)	(3.86, 14.3)	<0.001
		Time from birth (hours) to first SG	0.0353 (0.132)	(-0.226, 0.297)	0.79
		First SG measurement (mmol/l)	-2.3 (0.553)		<0.001
		N36 (ref: N01)	-12.8 (12.3)	(-37.1, 11.6)	0.302
		N42	2.77 (6.01)	(-9.11, 14.6)	0.645
		N43	0.00483 (4.03)	(-7.97, 7.98)	0.999
		N68	-2.76 (4.17)	(-11 <sup>°</sup> , 5.49)	0.51
		N73	-0.444 (5.29)	(-10.9, 10)	0.933

Model	Outcome	Covariate	Estimate	95% CI	P-
Wiodei	Outcome	Covariate	(Std. Error)	33 /0 GI	value
		N74	3.84 (12.2)	(-20.2,	0.753
				27.9)	
		N85	4.94 (6.61)	(-8.13,	0.456
		NOC	440(054)	18)	0.00
		N86	-14.6 (8.54)	(-31.4,	0.09
		N87	-16.4 (11.9)	2.31) (-39.9,	0.171
		1107	-10.4 (11.9)	7.16)	0.171
		N88	-26.9 (7.74)	(-42.2, -	< 0.001
			,	11.6)	
		ND3	2.7 (6.72)	(-10.6,	0.688
				16)	
		SP3	7.13 (8.46)	(-9.59,	0.401
		Gestation >= 26 weeks	1.25 (3.51)	23.9) (-5.68,	0.721
		Gestation >= 20 weeks	1.25 (3.51)	(-3.66, 8.18)	0.721
RSD = 16.14				0.10)	
LM with interaction	% time SG in	(Intercept)	82.6 (5.71)		< 0.001
between	target of 2.6-			93.9)	
time to first SG and	10mmol/l				
treatment		CGM versus standard	9.47 (6.83)	(-4.04,	0.168
		CON VEISUS Standard	9.47 (0.03)	23)	0.100
		Time from birth (hours)	0.043	(-0.319,	0.815
		to first SG	(0.183)	0.405)	
		First SG measurement	-2.3 (0.555)	(-3.4, -	< 0.001
		(mmol/l)		1.2)	
		N36 (ref: N01)	-12.8 (12.4)	(-37.4,	0.303
		N42	2.71 (6.1)	11.7)	0.657
		IN4Z	2.71 (6.1)	(-9.35, 14.8)	0.057
		N43	-0.00716	(-8.02,	0.999
			(4.05)	8.01)	
		N68	-2.76 (4.19)	(-11 <sup>°</sup> ,	0.51
				5.52)	
		N73	-0.467	(-11,	0.93
		N74	(5.32)	10.1)	0.740
		N74	3.96 (12.4)	(-20.5, 28.5)	0.749
		N85	4.93 (6.63)	(-8.18,	0.458
			(,	18)	
		N86	-14.6 (8.62)	(-31.7,	0.092
				2.42)	
		N87	-16.5 (12)	(-40.3,	0.173
		N88	27 (7 07)	7.33) (-42.7, -	-0 001
		INOO	-27 (7.97)	11.2)	<0.001
		ND3	2.7 (6.75)	(-10.6,	0.689
			(0 0)	16)	0.000
		SP3	7.11 (8.49)	(-9.68 <sup>°</sup> ,	0.404
				23.9)	
		Gestation >= 26 weeks	1.26 (3.52)	(-5.7,	0.72
		ICCM tractment.Time	0.04.47	8.23)	0.050
		[CGM - treatment:Time from birth (hours) to first	-0.0147 (0.242)	(-0.494, 0.465)	0.952
		SG]	(0.242)	0.400)	
RSD = 16.2		20]			
				_	_

Model	Outcome	Covariate	Estimate (Std. Error)	95% CI	P- value
LM with interaction between first SG and treatment	% time SG in target of 2.6- 10mmol/l	(Intercept)	80 (4.63)	(70.8, 89.1)	<0.001
ilist 30 and treatment	TOTTITIOI/T	CGM versus standard	10.3 (2.61)	(5.17, 15.5)	<0.001
		First SG measurement (mmol/l)	-3.49 (0.673)	(-4.82, - 2.16)	<0.001
		Time from birth (hours) to first SG	0.0591 (0.129)	(-0.196, 0.314)	0.648
		N36 (ref: N01)	-11.6 (12)	(-35.3, 12.2)	0.337
		N42	1.84 (5.86)	(-9.75, 13.4)	0.754
		N43	0.839 (3.94)	(-6.95, 8.63)	0.831
		N68	-2.56 (4.06)	(-10.6, 5.47)	0.53
		N73 N74	-0.185 (5.15) 2.68 (11.9)	(-10.4, 10)	0.971 0.822
		N85	4.75 (6.43)	(-20.8, 26.1) (-7.97,	0.822
		N86	-19.1 (8.46)	17.5) (-35.9, -	0.025
		N87	-16.8 (11.6)	2.42) (-39.7,	0.149
		N88	-27.1 (7.54)	6.12)	<0.001
		ND3	3.11 (6.54)	12.2) (-9.83,	0.635
		SP3	5.63 (8.25)	16.1) (-10.7,	0.496
		Gestation >= 26 weeks	3.38 (3.49)	21.9) (-3.52, 10.3)	0.334
RSD = 15.71		[CGM - treatment:First SG measurement (mmol/l)]	3.07 (1.04)	,	0.004
GLS allowing for heteroscedastic variances between treatment groups	% time SG in target of 2.6- 10mmol/l	(Intercept)	81.9 (3.44)	(75.2, 88.7)	<0.001
3 - 1		CGM versus standard	8.92 (2.7)	(3.63, 14.2)	0.001
		N36 (ref: N01)	2.88 (9.38)	(-15.5, 21.3)	0.759
		N42	8.28 (5.15)	(-1.82, 18.4)	0.11
		N43	3.87 (3.3)	(-2.59, 10.3)	0.242
		N68	-0.0845 (3.22)	(-6.4, 6.23)	0.979
		N73	4.67 (4.24)	(-3.63, 13)	0.272

Model	Outcome	Covariate	Estimate	95% CI	P-
			(Std. Error)		value
		N74	9.2 (9.38)	(-9.18,	0.328
				27.6)	
		N85	8.46 (5.5)	(-2.33,	0.126
			(- (-)	19.2)	
		N86	-23.2 (8.15)	(-39.2, -	0.005
		Noz	44.0 (45.7)	7.26)	0.450
		N87	-11.8 (15.7)	(-42.5,	0.453
		N88	12.2 (6.5)	18.9) (-25,	0.062
			-12.2 (6.5)	0.523)	0.062
		ND3	7.3 (5.5)	(-3.48,	0.187
				18.1)	
		SP3	9.02 (6.79)	(-4.28,	0.186
			4 =0 (0.00)	22.3)	
		Gestation >= 26 weeks	1.53 (2.93)	(-4.21,	0.603
DCD 0.50				7.27)	
RSD = 9.59					
Random intercept for	% time SG in	(Intercept)	79.5 (4.14)	(71.3,	< 0.001
site	target of 2.6-	` ' '	` ,	87.7)	
	10mmol/l			,	
		CGM versus standard	9.26 (2.79)	(3.75,	0.001
				14.8)	
		Gestation >= 26 weeks	5.19 (3.56)	(-1.84,	0.146
				12.2)	
RSD = 17.15					
LM adjusting for	% time SG in	(Intercept)	80.1 (3.45)	(73.3	<0.001
gestation only	target of 2.6-	(тистосри)	00.1 (0.40)	86.9)	<b>VO.001</b>
godanon omy	10mmol/l			00.0)	
		CGM versus standard	9.38 (2.88)	(3.7,	0.001
			, ,	15.1)	
		Gestation >= 26 weeks	5.28 (3.62)	(-1.87 <sup>°</sup> ,	0.147
			. ,	12.4)	
RSD = 17.8				•	

RSD = residual error standard deviation; LM = linear regression model; GLS = generalised least squares

eTable 4: Sensitivity Analyses for Primary outcome