Improving Pregnancy Outcomes with Progesterone: a Trial of 17-Hydroxyprogesterone Caproate to Reduce Preterm Birth Among Women Receiving Antiretroviral Therapy in Pregnancy

This NIH-sponsored trial aims to assess the efficacy of 17P for preventing PTB among HIV-infected pregnant women receiving ART. This is a Phase III, placebo-controlled, double-masked, randomized controlled trial. Participants are randomly allocated in a 1:1 ratio to receive either a weekly intramuscular injection of 250mg 17P or an indistinguishable placebo started between 16-24 weeks gestation and administered weekly thereafter until 36 $^{6}/_{7}$ gestational weeks, stillbirth, or delivery, whichever is sooner.

Project status: Currently enrolling

Date enrollment completed/expected: December 2019

Date participant follow-up completed/expected: September 2020

Potential research activities for fellows: Lab (biochemical mechanisms in the pathway to preterm birth), clinical/epidemiological (determinants of adverse birth outcomes)

Contact: Joni Price, MD, MSCR, MPH