APNEA OF PREMATURITY · OCTOBER 2026

How much caffeine? A 3,900-baby trial will now answer it.

BabyCCINO compares three caffeine citrate regimens in infants born before 32 weeks.

REFERENCES

Caffeine Citrate to Improve Neonatal Outcomes (BabyCCINO). ClinicalTrials.gov NCT06972849. University of Melbourne; 2026.

Schmidt B, Roberts RS, Davis P, et al. Caffeine therapy for apnea of prematurity. N Engl J Med. 2006;354(20):2112–2121.

Caffeine citrate: drug information. In: NeoFast app, Medicines. Micromedex; Lexicomp Pediatric Dosage Handbook, 30th ed., 2023.

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THE GAP

2006

The CAP trial made caffeine standard care.

Twenty years later, the optimal dose is still unknown, and dosing varies between units and countries.

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THE THREE ARMS

Caffeine citrate, randomized

	Loading	Daily maintenance
Arm 1	**20** mg/kg	**10** mg/kg
Arm 2	**30** mg/kg	**15** mg/kg
Arm 3	**40** mg/kg	**20** mg/kg

Loading before 72 hours of life. Maintenance starts 24 hours later, for as long as clinically indicated.

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WHO AND HOW

Large enough to settle the question

3,900

infants planned

<32

weeks of gestation at birth

NICUs across Australia, New Zealand and the UK. Outcomes scored on the PLATIPUS ordinal scale at 42 weeks PMA or discharge.

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PRACTICAL RULE

> Until results arrive, the dose is your unit's protocol or your clinical judgement. Check the salt.

20 mg caffeine citrate	=	**10 mg** caffeine base

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NEOFAST · LOADING DOSE, 1.2 KG INFANT

20 mg/kg
Arm 1



30 mg/kg
Arm 2



40 mg/kg
Arm 3



Type the dose your protocol sets. NeoFast returns mg, mL, interval and infusion time, IV or oral, loading or maintenance.

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Neonatal calculations with the source cited on every screen.

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The app calculates. The prescriber decides.