

Cochrane Database of Systematic Reviews - - Cochrane Review

Neuraminidase inhibitors for the treatment of influenza infection in people with cystic fibrosis

Code: CD008139 Year: 2016 Date: 2010 - updated: 15 FEB 2016 Author: Jagannath Vanitha A

Study design (if review, criteria of inclusion for studies)

Randomised controlled trials and quasi-randomised controlled trials comparing neuraminidase inhibitors with placebo or other antiviral drugs.

Participants

Children and adults with confirmed diagnosis of CF by the presence of two disease causingmutations, or by a combination of positive sweat test and recognised clinical features of CF. Participants should also have either or both (post hoc change - see Differences between protocol and review) of the following: • a clinical diagnosis of influenza (temperature above 37.8 °C; at least two of the following symptoms: cough, headache, myalgia, sore throat or fatigue; and no clinical evidence of bacterial infection) made by a healthcare professional in a community in which there was an influenza outbreak; • laboratory or near-patient test confirmation of influenza.

Interventions

Neuraminidase inhibitors

Outcome measures

Primary outcomes 1. Need for hospitalisation (directly related to influenza illness) 2. Time to alleviation of constitutional symptoms (fever and associated symptoms) 3. Respiratory function (FEV1, FVC)

Main results

No relevant studies were retrieved after a comprehensive search of the literature.

Authors' conclusions

We were unable to identify any randomised controlled studies or quasi-randomised controlled studies on the efficacy of neuraminidase inhibitors for the treatment of influenza infection in people with cystic fibrosis. The absence of high level evidence for the effectiveness of these interventions emphasises the need for well-designed, adequately powered, randomised controlled clinical studies.

http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008139.pub4/abstract

See also

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Keywords

Immunization; Infection; Influenza A virus; pharmacological_intervention; Respiratory Tract Diseases; Respiratory Tract Infections; Virus; Antiviral Agents;