primary studies - published RCT

Ambulatory vs. inpatient intravenous antibiotic therapy in mucoviscidosis patients--a controlled study.

Code: PM10091516 **Year:** 1999 **Date:** 1999 **Author:** Klettke U

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

controlled, intra-individual cross-over design

Participants

14 patients with cystic fibrosis and chronic pulmonary pseudomonas infection

Interventions

four courses of two-week intravenous antibiotic therapy at home and during hospitalisation over an 18-month period.

Outcome measures

Parameters for inflammation, lung function, and body mass index were obtained at the beginning and end of each intravenous antibiotic therapy. Health-related quality of life, i.e. physical, emotional, social and functional components as well as happiness and medical care, was assessed at the end of each course.

Main results

There was a trend towards better reduction of infection (p = 0.20 for leukocyte reduction) and improvement of lung function (p = 0.20 for FEV1 improvement) with hospital intravenous antibiotic therapy, although the differences did not attain statistical significance. Quality of life during therapy was significantly higher with home therapy regarding social (p

Authors' conclusions

From our data we conclude that home intravenous antibiotic therapy is a useful option for a selected subgroup of patients with cystic fibrosis, but professional support and family aid is important to gain an effect similar to hospital treatment.

http://www.ncbi.nlm.nih.gov/pubmed/10091516

See also

Pneumologie. 1999 Jan;53(1):31-6.

Keywords

Adolescent; Adult; Ambulatory; Anti-Bacterial Agents; Bacterial Infections; Child; Home; Infection; Intravenous; percutaneous; pharmacological_intervention; Pneumonia; Pseudomonas aeruginosa; Pseudomonas; Respiratory Tract Diseases; Respiratory Tract Infections;