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primary studies - published RCT

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

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### 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;