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primary studies - published RCT

## **Efficacy and safety of acarbose in patients with cystic fibrosis and impaired glucose tolerance.**

**Code:** PM10378391

**Year:** 1999 **Date:** 1999

**Author:** Kentrup H

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

double-blinded, randomized crossover trial.

### **Participants**

12 CF patients with IGT

### **Interventions**

During a 2-week inpatient period for treatment of *Pseudomonas* infection each patient received acarbose (50 mg t.i.d.) for 5 days and placebo for 5 days (days 3-8 and days 10-14, respectively).

### **Outcome measures**

Glucose, insulin and C-peptide responses to a standardized nutritional load were measured at baseline and at the end of each study period (Days 2, 8 and 14).

### **Main results**

Treatment with acarbose was associated with significant reductions in the mean value, mean peak values and the area under the curve of plasma glucose, insulin and C-peptide, compared to respective baseline values and placebo. Gastro-intestinal disturbances were recorded in 67% of patients during therapy with acarbose

### **Authors' conclusions**

Acarbose has a positive therapeutic effect on glucose tolerance in cystic fibrosis patients, as shown by attenuation of postprandial plasma glucose increase and a significant decrease in insulin secretion response. However, acarbose treatment was associated with adverse gastro-intestinal effects that may prevent patients from accepting long-term therapy.

<http://dx.doi.org/10.1007/s004310051119>

### **See also**

Eur J Pediatr. 1999 Jun;158(6):455-9.

### **Keywords**

Acarbose; Adolescent; Adult; Child; Hypoglycemic Agents; non pharmacological intervention - diet; pharmacological\_intervention; Supplementation; *Pseudomonas aeruginosa*; *Pseudomonas*; Respiratory Tract Diseases; Respiratory Tract Infections; Infection; Glucose Intolerance; Pancreatic Diseases; Gastrointestinal Diseases;