primary studies - published RCT

Omeprazole, a proton pump inhibitor, improves residual steatorrhoea in cystic fibrosis patients treated with high dose pancreatic enzymes.

Code: PM13680386 **Year:** 2003 **Date:** 2003 **Author:** Proesmans M

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

random cross-over design

Participants

15 patients (3 girls and 12 boys) with confirmed steatorrhoea (residual steatorrhoea despite high dose pancreatic enzyme supplements (> or =10,000 U lipase/kg per day)) during the control evaluation. Median age was 8.7 years (range 3.5-15.9 years). Median daily lipase intake was 13,500 U/kg per day (range 10,000-22,000 U/kg per day).

Interventions

omeprazole (Losec), a proton-pump inhibitor, on fat absorption

Outcome measures

Fat digestion was evaluated with and without omeprazole by means of chemical fat measurements in 3-day stool collections together with 3-day weighed food records for calculation of fat absorption

Main results

During treatment with omeprazole, median faecal fat loss (g fat/day) decreased from 13 g (quartiles 11.5-16.5 g/day) to 5.5 g (quartiles 4.9-8.1 g/day) (P

Authors' conclusions

Omeprazole improves fat digestion and absorption in cystic fibrosis patients with residual faecal fat loss despite maximal pancreatic enzyme substitution.

http://dx.doi.org/10.1007/s00431-003-1309-5

See also

Eur J Pediatr. 2003 Nov;162(11):760-3. Epub 2003 Sep 17.

Keywords

Adolescent; Child; Drug Administration Schedule; Gastrointestinal Agents; Gastrointestinal Diseases; non pharmacological intervention - devices OR physiotherapy; pharmacological_intervention; Omeprazole; Pancreas insufficiency; Pancreatic Diseases; Pancreatic Enzyme Replacement Therapy; Proton pump inhibitors; Malabsorption; Nutrition Disorders; High-Dose;