

primary studies - published RCT

Modification of pediatric lung function measurement by antibacterial filters.

Code: PM1475266

Year: 1992 **Date:** 1997

Author: Gruper W

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

RCT

Participants

30 CF patients (age > 5 years) with biochemical cholestasis and compensated liver disease. Baseline clinical variables were comparable. low-dose (n = 17) or high-dose (n = 13) UDCA.

Interventions

low-dose (10 mg/kg/day) and high-dose (20 mg/kg/day) UDCA treatment for 3 and 12 months.

Outcome measures

liver biochemistry

Main results

After 1 year one patient had died of liver failure (low dose), and three had dropped out because of pruritus (one in each group) or personal choice (low dose). In the high-dose group improvement in gamma-glutamyl transferase values was more pronounced after 3 months and 1 year (P

Authors' conclusions

High-dose UDCA induces a better response of liver biochemistry values than low-dose UDCA in CF patients with cholestatic liver disease.

<http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/692/CN-00486692/frame.html>

See also

Pneumologie YR: 1992 VL: 46 DE: RCT NO: 11

Keywords

Adolescent; Adult; Child; Cholagogues and Cholaretics; Cholestasis; Gastrointestinal Diseases; High-Dose; Liver Diseases; Low-Dose; pharmacological_intervention; UDCA; Gastrointestinal Agents;