
primary studies - published RCT

Growth hormone treatment enhances nutrition and growth in children with cystic fibrosis receiving enteral nutrition.

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

RCT

Participants

18 (9+9) prepubertal children who received enteral nutritional supplementation for at least 2 years before enrollment.

Interventions

9 patients were randomly assigned to receive no GH for 1 year, followed by 1 year of GH. 9 patients were randomly assigned to receive 1 year of GH followed by a second year of GH.

Outcome measures

Measurements included height, weight, pulmonary function, lean tissue mass, bone mineral content, hospitalizations, outpatient antibiotic use, and caloric intake.

Main results

Growth hormone resulted in significant improvement in height, weight, bone mineral content, lean tissue mass, and number of hospitalizations. Pulmonary function was similar at baseline. Absolute forced vital capacity and forced expiratory volume in 1 minute significantly increased in GH treatment, but there was no significant change in percent predicted pulmonary function. Caloric intake was similar in both groups during both years.

Authors' conclusions

These results suggest that GH is a useful for enhancing growth in children with cystic fibrosis receiving enteral nutritional supplementation.

<http://dx.doi.org/10.1016/j.jpeds.2004.10.037>

See also

J Pediatr. 2005 Mar;146(3):324-8.

Keywords

Caloric Intake; Child; Enteral Nutrition; Failure to Thrive; Growth Hormone; Hormones; Malnutrition; non pharmacological intervention - diet; Nutrition Disorders; pharmacological_intervention; Recombinant Proteins; Supplementation;