

primary studies - published RCT

## **Dietary supplementation with multiple micronutrients: no beneficial effects in pediatric cystic fibrosis patients.**

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

This was a randomised, open-label, crossover, dose response study.

### **Participants**

48 CF patients with a mean (SD) FEV(1) % predicted of 64 (13.2)

### **Interventions**

Following a 2-week treatment with mannitol 400mg b.i.d., patients received a further 3 treatments with 40mg, 120mg or 240mg b.i.d. for 2weeks each, in random order.

### **Outcome measures**

FEV(1) and FVC.

### **Main results**

The study demonstrated a dose dependent increase in FEV(1) and FVC. The 400mg dose showed the greatest improvement and the 40mg dose had no discernible effect. The mean percent change in FEV(1) was -1.57%, 3.61%, 3.87% and 8.75% respectively for the 40mg, 120mg, 240mg and 400mg treatments. There was a statistically significant change in FEV(1) for 400mg compared to 40mg (p

### **Authors' conclusions**

Based on these results the 400mg b.i.d. dose has been further studied in phase III trials.

<http://dx.doi.org/10.1016/j.jcf.2006.05.005>

### **See also**

J Cyst Fibros. 2007 Jan;6(1):35-40. Epub 2006 Jun 19.

### **Keywords**

Adolescent; Adult; Aged; Bacterial Infections; Child; Infection; Inhalation OR nebulised; Mannitol; pharmacological\_intervention; Pneumonia; Powders; Respiratory Tract Infections; Airway clearance drugs -expectorants- mucolytic- mucociliary-; Respiratory System Agents; Respiratory Tract Diseases;