primary studies - published RCT

Cystic fibrosis: are volumetric ultra-low-dose expiratory CT scans sufficient for monitoring related lung disease?.

Code: PM19710003 **Year:** 2009 **Date:** 2012 **Author:** Loeve M

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

double-blind, placebo-controlled trial in two centers

Participants

Twenty-five patients with cystic fibrosis between 5 and 18 years

Interventions

Patients were randomized into two groups, to receive either cyproheptadine 4 mg three times per day for 12 weeks or placebo.

Outcome measures

Average weight gain, Body mass index (BMI), pulmonary function

Main results

Average weight gain was 0.67 kg in the placebo group and 1.61 kg in the cyproheptadine group (p = 0.036). Body mass index (BMI) decreased 0.07 kg/m(2); in the placebo group and increased 0.46 kg/m(2); in the intervention group (p = 0.027). The change in BMI for age (z score) was -0.19 in the placebo group and +0.20 in the cyproheptadine group (p = 0.003). BMI z score decreased 0.19 in the placebo group and increased 0.2 in the cyproheptadine group (p = 0.003). Changes in pulmonary function were not statistically different.

Authors' conclusions

Use of cyproheptadine in cystic fibrosis patients was well tolerated, showing a significant weight gain and a significant increase in BMI after 12 weeks. A clinically relevant effect size for weight/age (z score) and body mass index for age (z score) was found. Such findings suggest that the prescription of cyproheptadine can be an alternative approach for patients who need nutritional support for a short period of time.

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See also

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Keywords

Adolescent; Appetite Stimulants; Cyproheptadine; Gastrointestinal Agents; pharmacological_intervention; Malnutrition; Nutrition Disorders;