
primary studies - published RCT

Mealtime problems predict outcome in clinical trial to improve nutrition in children with CF.

Code: PM19953660

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Author: Opiari-Arrigan L

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

clinical trial

Participants

67 children, aged 4-12 years with cystic fibrosis

Interventions

Behavioral intervention and nutrition education

Outcome measures

Participants completed baseline measures of mealtime behavior problems, maternal depression, and fat absorption, and baseline and post-treatment caloric intake and weight.

Main results

Assignment to behavioral group (R(2) change = 0.09), higher baseline weight (R(2) change = 0.10), fat absorption (R(2) change = 0.02), and lower frequency of mealtime behavior problems (R(2) change = 0.06) predicted greater weight gain baseline to post-treatment. Less frequent mealtime behavior problems led to better calorie intake and weight gain in a 9-week clinical trial of behavior intervention and nutrition education to improve nutritional status in cystic fibrosis.

Authors' conclusions

The key implication from these findings is that early referral to behavioral intervention as soon as growth deficits become a concern will likely yield the best nutritional outcomes.

<http://dx.doi.org/10.1002/ppul.21147>

See also

Pediatr Pulmonol. 2010 Jan;45(1):78-82.

Keywords

Caloric Intake; Child; Depression; Food; Mental Disease-Psychiatric Conditions; non pharmacological intervention - diet; non pharmacological intervention - psycho-soc-edu-org; Nutrition Disorders; Supplementation; Behavioural interventions;