primary studies - published RCT

Ranitidine compared with the dimethylprostaglandin E2 analogue enprostil as adjunct to pancreatic enzyme replacement in adult cystic fibrosis.

Code: PM2126147 **Year:** 1990 **Date:** 1990 **Author:** Heijerman HG

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

double-blind cross-over randomized study

Participants

8 adult cystic fibrosis (CF) patients receiving a fixed dose of enteric-coated microsphere capsules of pancreatin (Pancrease).

Interventions

adjunct therapy with ranitidine (2 x 150 mg) was compared with enprostil (2 x 35 micrograms). The study consisted of two consecutive 14-day treatment periods.

Outcome measures

The study consisted of two consecutive 14-day treatment periods.

Main results

During treatment with ranitidine there was less faecal fat excretion (18.9% versus 25.1%; NS), less faecal weight (263 versus 303 g/day; NS), and a lower gastrointestinal complaints score (5.3 versus 3.1; P less than 0.05) compared with the treatment with enprostil. One patient dropped out during the treatment period with enprostil because of very severe diarrhoea and abdominal discomfort.

Authors' conclusions

adjunct therapy with ranitidine has significantly less side effects and may give a better reduction of faecal fat excretion and daily faecal weight in CF.

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See also

Scand J Gastroenterol Suppl. 1990;178:26-31.

Keywords

Adult; Combined Modality Therapy; Enprostil; Gastrointestinal Agents; pharmacological_intervention; Pancreatic Enzyme Replacement Therapy; Prostaglandins; Ranitidine; Supplementation; Pancreas insufficiency; Pancreatic Diseases; Gastrointestinal Diseases; Malabsorption; Nutrition Disorders; Histamine H2 Antagonists;