

primary studies - published RCT

Early antibiotic treatment for *Pseudomonas aeruginosa* eradication in patients with cystic fibrosis: a randomised multicentre study comparing two different protocols.

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Author: Taccetti G

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

randomised, open-label, parallel-group study

Participants

13 centres. Patients were eligible if they were older than 1 year with first or new *P aeruginosa* isolation.

Interventions

inhaled tobramycin/oral ciprofloxacin compared with inhaled colistin/oral ciprofloxacin (reference treatment) over 28 days

Outcome measures

The primary endpoint was *P aeruginosa* eradication, defined as three successive negative cultures in 6 months. Analysis was by intention to treat.

Main results

105 patients were assigned to inhaled colistin/oral ciprofloxacin (arm A) and 118 to inhaled tobramycin/oral ciprofloxacin (arm B). All patients were analysed. *P aeruginosa* was eradicated in 66 (62.8%) patients in arm A and in 77 (65.2%) in arm B (OR 0.90, 95% CI 0.52 to 1.55, $p=0.81$). Following treatment, an increase in *Stenotrophomonas maltophilia* was noted (OR 3.97, 95% CI 2.27 to 6.94, $p=0.001$) with no differences between the two arms (OR 0.89, 95% CI 0.44 to 1.78, $p=0.88$).

Authors' conclusions

No superiority of treatment under study was demonstrated in comparison to the reference treatment. Early eradication treatment was associated with an increase in *S maltophilia*.

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See also

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Keywords

Adult; Anti-Bacterial Agents; Bacterial Infections; Child; Ciprofloxacin; Colistin; Infection; pharmacological_intervention; *Pseudomonas aeruginosa*; *Pseudomonas*; Respiratory Tract Diseases; Respiratory Tract Infections; Tobramycin; Inhalation OR nebulised; Oral; Quinolones; other anti-bacterial agents; Aminoglycosides;