

primary studies - published, non RCT

Palivizumab prophylaxis in infants with cystic fibrosis does not delay first isolation of Pseudomonas aeruginosa or Staphylococcus aureus.

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

retrospective case-control study

Participants

young children with CF.

Interventions

children who systematically received PVZ (PVZ+; n = 40) or not (PVZ-; n = 140). One case was matched with at least three same-gender controls born the same year and month.

Outcome measures

microbiological outcomes

Main results

Median (range) age at first Pa isolation was not statistically different between PVZ- (12.3 [3.8-32.6] months) and PVZ+ (10.4 [1.2-33.0] months; p = 0.953) patients. A similar trend was found for Sa (PVZ+: 6.4 [2.0-59.0] months; PVZ-: 3.8 [0.1-74.1] months; p = 0.191). The proportion of Pa isolations by 3 years of age did not differ between groups (PVZ+ 40% vs. PVZ- 41.4%), but this proportion was higher for Sa in the PVZ+ group (97%) than in the PVZ- group (85%; p = 0.001). Healthcare consumption and growth outcomes did not significantly differ between groups.

Authors' conclusions

Systematic PVZ use did not delay key pathogen acquisition in young children with CF.

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See also

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Keywords

Antiviral Agents; Child; Infant; Infection; Palivizumab; pharmacological_intervention; Respiratory Syncytial Virus Infections; Respiratory Tract Diseases; Respiratory Tract Infections; Virus; Immunoregulatory; Bronchiolitis;