

primary studies - published RCT

## **Children and Adults Tai Chi Study (CF-CATS2): a randomised controlled feasibility study comparing internet-delivered with face-to-face Tai Chi lessons in cystic fibrosis.**

**Code:** PM30568967

**Year:** 2018 **Date:**

**Author:** Carr SB

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

Phase 3, two-part (part A and part B), open-label extension study

### **Participants**

Children Aged  $\geq 6$  Years with Cystic Fibrosis and at Least One F508del Allele

### **Interventions**

Children weighing

### **Outcome measures**

The primary endpoint was safety and tolerability. Adverse events and serious adverse events were consistent with common manifestations of CF disease.

### **Main results**

Overall, exposure-adjusted rates of adverse events and serious adverse events (407.74 and 4.72 events per 100 patient-years) were lower than in the parent study (987.04 and 8.68 events per 100 patient-years). One child (1.6%) had an adverse event of aggression that was moderate in severity and resolved after study drug discontinuation. From parent study baseline at Week 96 of this extension study, the mean percent predicted FEV<sub>1</sub> increased (11.2 [95% confidence interval (CI), 8.3 to 14.2] percentage points), sweat chloride concentration decreased (-62.3 [95% CI, -65.9 to -58.8] mmol/L), Cystic Fibrosis Questionnaire-Revised respiratory domain score increased (13.3 [95% CI, 11.4 to 15.1] points), and lung clearance index 2.5 decreased (-2.00 [95% CI, -2.45 to -1.55] units). Increases in growth parameters were also observed. The estimated pulmonary exacerbation rate per 48 weeks was 0.04. The annualized rate of change in percent predicted FEV<sub>1</sub> was 0.51 (95% CI, -0.73 to 1.75) percentage points per year.

### **Authors' conclusions**

ELX/TEZ/IVA continued to be generally safe and well tolerated in children aged  $\geq 6$  years through an additional 96 weeks of treatment. Improvements in lung function, respiratory symptoms, and CFTR function observed in the parent study were maintained. These results demonstrate the favorable long-term safety profile and durable clinical benefits of ELX/TEZ/IVA in this pediatric population.

<http://dx.doi.org/10.1183/23120541.00042-2018>

### **See also**

ERJ Open Res. 2018 Dec 14;4(4). pii: 00042-2018. doi: 10.1183/23120541.00042-2018. eCollection 2018 Oct.

### **Keywords**

CFTR Modulators; Genetic Predisposition to Disease; pharmacological\_intervention; placebo; VX-770; VX-661; ivacaftor; Aminophenols; tezacaftor; VX-445; elexacaftor; Trikafta; Child; kaftrio;