

primary studies - published RCT

Impact of pharmacy services on time to elexacaftor-tezacaftor-ivacaftor initiation.

Code: PM36001103

Year: 2022 Date: 1987

Author: Roder L

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

open prospective clinical trial

Participants

26 adult cystic fibrosis patients

Interventions

conventional aminoglycoside plus beta-lactam treatment was compared to monotherapy with oral quinolones: six two-week courses of antipseudomonas treatment were administered with an interval of approximately three months between treatments. In each patient two courses of conventional treatment were followed by two courses of quinolone treatment and then by another two courses of conventional treatment.

Outcome measures

pulmonary function

Main results

The observed improvements in pulmonary function were somewhat higher when the patients received conventional treatments, and in the most seriously affected patients conventional treatment was significantly better than quinolone treatment.

Authors' conclusions

On the basis of these findings it is suggested that quinolone monotherapy cannot replace conventional antipseudomonal chemotherapy in patients with severe pulmonary involvement.

<http://dx.doi.org/10.18553/jmcp.2022.28.9.989>

See also

J Manag Care Spec Pharm. 2022 Sep;28(9):989-996. doi: 10.18553/jmcp.2022.28.9.989.

Keywords

Anti-Bacterial Agents; quinolones; Intravenous; Oral; pharmacological_intervention; Bacterial Infections; Respiratory Tract Infections; Respiratory Tract Diseases; Infection; Pseudomonas aeruginosa; Pseudomonas; Monotherapy;