primary studies - published RCT

Long-term therapy with CFTR modulators consistently improves glucose metabolism in adolescents and adults with cystic fibrosis.

Code: PM38759874 **Year:** 2024 **Date:** 1988 **Author:** Cohen A

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

randomized, open trial.

Participants

15 CF patients

Interventions

aztreonam was compared to that of standard therapy consisting of tobramycin and azlocillin in the treatment of acute pulmonary exacerbations of cystic fibrosis

Outcome measures

Responses were assessed based on changes in pulmonary and clinical scores, white blood cell counts, pulmonary function tests and quantitative bacteriology of sputum which were performed before, every 5 to 7 days during and on the last day of therapy

Main results

Patients in both groups responded to therapy and there were no statistically significant differences in changes in the above indicators of response with therapy between the two groups (P greater than 0.05). The incidence of detection of Pseudomonas aeruginosa isolates resistant to all three study antibiotics increased with therapy. Side effects were limited to transient elevations of liver enzymes (both groups) and rash and fever in one patient treated with azlocillin.

Authors' conclusions

Aztreonam represents effective therapy for pulmonary exacerbations of cystic fibrosis associated with susceptible pathogens.

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See also

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Keywords

Adolescent; Anti-Bacterial Agents; Azlocillin; Aztreonam; Bacterial Infections; Child; Combined Modality Therapy; Infection; pharmacological_intervention; Pseudomonas aeruginosa; Pseudomonas; Respiratory Tract Diseases; Respiratory Tract Infections; Tobramycin; Exacerbation; Penicillins; Monobactams; Aminoglycosides;