

primary studies - published RCT

Cardiac involvement in cystic fibrosis: early noninvasive detection and vasodilator therapy.

Code: PM3900900

Year: 1985 **Date:** 1992

Author: Moskowitz WB

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

RCT.

Participants

Age: mean (25 years); median (NR); SD (NR); range (17-33 years). Inclusion criteria: participants who were clinically stable; producing more than 20 g of sputum in 24 hours; and fit enough to carry out their own chest physiotherapy. 24 enrolled/ 24 evaluated/ 16 males (66.7% male). Exclusion criteria: participants with a pneumothorax; frank haemoptysis; or an FEV1 which increased more than 15% after bronchodilators.

Interventions

Each participant used 3 treatment regimens for 24-hour periods in randomised order over 3 consecutive days. The treatments were coughing, ACBT (gravity-assisted position), and ACBT (sitting). The frequency of the treatment sessions varied between 2-4 per d. ACBT (gravity-assisted position): postural drainage and ACBT; including breathing control, thoracic expansion, and FET. ACBT (sitting): ACBT including breathing control; thoracic expansion; and FET. Coughing (sitting): coughing and breathing control.

Outcome measures

Outcome measures: lung function; sputum weight; oxygen saturation.

<http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/809/CN-00039809/frame.html>

See also

Pediatric pharmacology (New York, N.Y.) YR: 1985 VL: 5 NO: 2

Keywords

Airway clearance technique; Drainage; forced expiration technique; non pharmacological intervention - devices OR physiotherapy; Active Cycle of Breathing Technique -ACBT-; Postural Drainage; Chest physiotherapy;