
primary studies - published RCT

Improvement of fecal fat excretion after addition of omeprazole to pancrease in cystic fibrosis is related to residual exocrine function of the pancreas.

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

double-blind placebo-controlled crossover study

Participants

11 adult cystic fibrosis (CF) patients with a fecal fat excretion of more than 10% during treatment with pancrease 2 capsules three times a day.

Interventions

20 mg omeprazole

Outcome measures

fecal fat excretion

Main results

Adjunct therapy with omeprazole resulted in a reduction of fecal fat excretion in patients with residual pancreatic function. This improvement showed significant positive correlations with urinary PABA excretion and the increase in serum PP after the meal (P

Authors' conclusions

the addition of omeprazole to pancrease is most successful in CF patients with residual pancreatic function, determined by urinary PABA excretion or incremental PP.

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See also

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Keywords

Adult; Gastrointestinal Agents; Omeprazole; Pancreatic Enzyme Replacement Therapy; pharmacological_intervention; Pancreas insufficiency; Pancreatic Diseases; Gastrointestinal Diseases; Malabsorption; Nutrition Disorders; Proton pump inhibitors;