primary studies - published, non RCT

Postural drainage and gastro-oesophageal reflux in infants with cystic fibrosis.

Code: PM9068307 **Year:** 1997 **Date:** 1997 **Author:** Button BM

Participants

20 (mean age 2.1 months) infants with cystic fibrosis

Interventions

30 hour oesophageal pH monitoring during which physiotherapy with head down tilt (standard physiotherapy, SPT) and physiotherapy without head down tilt (modified physiotherapy, MPT) were carried out for two sessions each on consecutive days.

Outcome measures

number of reflux episodes, fractional reflux time

Main results

The number of reflux episodes per hour, but not their duration, was significantly increased during SPT compared with MPT (SPT 2.5 (0.4) v MPT 1.6 (0.3), p = 0.007) and to background (1.1 (0.)1, p = 0.0005). Fractional reflux time was also increased during SPT (11.7 (2.6)%) compared with background (6.9 (1.3)%) p = 0.03) but not compared with MPT (10.7 (2.7)%). There was no significant difference between MPT and background for number of reflux episodes, their duration, or fractional reflux time.

Authors' conclusions

SPT, but not MPT, was associated with a significant increase in gastro-oesophageal reflux in infants with cystic fibrosis.

http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/610/CN-00137610/frame.html

See also

Arch Dis Child. 1997 Feb;76(2):148-50.

Keywords

Airway clearance technique; Drainage; Gastrointestinal Diseases; Infant; Newborn; non pharmacological intervention - diagn; non pharmacological intervention - devices OR physiotherapy; Postural Drainage; screening; Chest physiotherapy;