primary studies - published RCT

Comprehensive analysis of risk factors for acquisition of Pseudomonas aeruginosa in young children with cystic fibrosis.

Code: PM9727757 **Year:** 1998 **Date:** 2002 **Author:** Kosorok MR

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

three-centre RCT, cross-over design

Participants

59 patients with a mean age 10 years (range 3-17)

Interventions

patients took Creon 8,000 ms for 14 days and were then randomised to 28 days of Creon 8,000 ms followed by 28 days of Creon 10,000 MMS, or vice versa.

Outcome measures

preference of cystic fibrosis (CF) patients for these products. In one centre, 72 h stool fat excretion and coefficient of fat absorption (CFA) were also compared.

Main results

At the end of the second treatment period, 51 of 54 patients who completed the study expressed a preference, with a statistically significant preference in favour of Creon 10,000 MMS (47/51; 87%) vs. Creon 8,000 ms (4/51; 7.4%; P

Authors' conclusions

In CF children we found a clear preference for Creon 10,000 MMS compared with Creon 8,000 ms with no difference in fat absorption between the two products. Creon 10,000s smaller capsules are easier to take and should aid patient compliance.

3.0.CO;2-K" target="_blank">http://dx.doi.org/10.1002/(SICI)1099-0496(199808)26:2<81::AID-PPUL2>3.0.CO;2-K

See also

Pediatric Pulmonology YR: 1998 VL: 26 DE: RCT NO: 2

Keywords

Adolescent; Child; Creon; Gastrointestinal Agents; Gastrointestinal Diseases; Microspheres; Minimicrospheres; pharmacological_intervention; Oral; Pancreas insufficiency; Pancreatic Diseases; Pancreatic Enzyme Replacement Therapy; Malabsorption; Nutrition Disorders;