

Comparison of Percutaneous Endoscopic Gastrostomy, Megestrol Acetate and Nasogastric feeding in adult patients with Cystic Fibrosis

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derivative of progesterone, is used as appetite stimulant to promote weight in patients with advanced cancers [11]. MA has been used to treat malnutrition and may promote weight gain in CF patients [12]. However, steroid related side effects including adrenal suppression, glucose intolerance and diabetes have been reported [12,13].

To date, there are no studies comparing effects of PEG tube feeding

Analyses of post-intervention weight

At 12 months there were no statistically significant differences in weight between feeding interventions ($p=0.69$) (Table 2), after adjusting for baseline weight ($p<0.001$) and gender ($p=0.026$). There were statistically significant increases in weight at 12 months compared

to baseline for MA (mean 2.72 kg 95% CI 0.46, 4.98 $p=0.021$) and PEG (mean 2.49 kg 95% CI 0.69, 4.29 $p=0.009$). For NG feeding weight gain was similar but not significant at the 5% level, though there was a significant increase at the 10% level (mean 2.04 kg 95% CI -0.22, 4.29 $p=0.073$) (Table 3).

	Baseline Mean (SD) Range	12 month follow-up Mean (SD) Range	12 month change Mean change (95% CI)	p-value for 12 month change
Weight				
MA (n=17)	47.73 (8.94) 33.00-61.45	50.45 (9.24) 35.40-69.50	2.72 (0.46, 4.98)	0.021
NG (n=14)	54.18 (9.86) 36.80-71.05	56.22 (11.41) 39.40-74.00	2.04 (-0.22, 4.29)	0.073
PEG (n=22)	50.98 (8.56) 34.80-63.80	53.48 (8.95) 38.40-69.90	2.49 (0.69, 4.29)	0.009
FEV				

MA has been used in several studies to try to improve nutritional status and pulmonary function. Marchand et al. conducted randomized, double blind, placebo controlled study of MA in 12 patients with CF for 12 weeks, followed by another 12 weeks of a

