Table 62: Clinical evidence profile: Comparison 1.1. PERT + Cimetidine versus. PERT alone in children

	y assessmen Design		Inconsistenc y	Indirectnes s	Imprecisio n	Other consideration s	No of pat PERT + Cimetidi ne		Effect Relati ve (95%	Absolute		Importan
Faecal fat excretion (FFE) (follow-up 14 days; measured as: % of intake, or consumed fat that is excreted; Better indicated by lower values)												
1 (Duri	randomise d trials¹	very serious	no serious inconsistenc y	no serious indirectnes s	Not assessed ⁴	none	21		-	-	LOW	CRITICA L
e 1980) 2							Mean: 17.8±9. 74	Mean: 27.6±1 3.3				
Faecal fat excretion (FFE) (follow-up 14 days; measured as: g/ 24hours*; Better indicated by lower values)												
1 (Duri e 1980)	randomise d trials ¹	serious 5	no serious inconsistenc y	very serious indirectnes s ⁶	serious imprecisio n ⁷	none	21		7	MD 11 lower (18.577 to 3.423 lower)	LOW	CRITICA L

Abbreviations: CI: confidence interval; FFE: faecal fat excretion; g: grams; MD: mean difference; PERT: pancreatic endocrine enzyme therapy

¹ Cross-over trial

² Treatment details: Cotazym 26 capsules/ day + Cimetadine 20 mg/kg/day or placebo

³ The quality of evidence was downgraded by 1 due to unclear randomization, concealment and single-blinding. The quality of the evidence was further downgraded by 1 due to the quality of the statistical analysis. Means are provided instead of medians, although it is not normally distributed.

⁴ Imprecision was not assessed, as it was considered not appropriate. See footnote 3.

⁵ The quality of evidence was downgraded by 1 due to unclear randomization, concealment and single-blinding.

⁶ The quality of the evidence was downgraded by 2 because method of measuring fat excreted is inaccurate, as it does not take into account fat intake.

⁷ The quality of the evidence was downgraded by 1 because the CI crossed 1 clinical MID