

**Table 39: Clinical evidence profile: Comparison 2. Ciprofloxacin versus placebo**

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Ciprofloxacin	Placebo	Relative (95% CI)	Absolute		
<b>Lung function: FEV<sub>1</sub></b>												
Not reported											CRITICAL	
<b>Number of people with 1 or more exacerbations</b>												
NMA outcome											CRITICAL	
<b>Nutritional status: weight (follow-up 6 to 12 months; measured with: kg; Better indicated by higher values)</b>												
1 (Sheldon 1993)	randomised trials	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	15	16	-	MD 4.4 higher (3.7 lower to 12.5 higher)	VERY LOW	IMPORTANT
<b>Minor adverse events: gastrointestinal (follow-up 12 months)</b>												
1 (Sheldon 1993)	randomised trials	very serious <sup>3</sup>	no serious inconsistency	no serious indirectness	very serious <sup>4</sup>	none	2/20 (10%)	0/20 (0%)	RR 5 (0.26 to 98)	-	VERY LOW	IMPORTANT
<b>Mortality (follow-up 12 months)</b>												
1 (Sheldon 1993)	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious <sup>5</sup>	none	1/20 (5%)	1/20 (5%)	RR 1 (0.07 to 14.9)	0 fewer per 1000 (from 47 fewer to 695 more)	LOW	IMPORTANT
<b>Emergence of resistant organisms - isolation of resistant strains of <i>P aeruginosa</i> (follow-up 12 months)</b>												

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No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Ciprofloxacin	Placebo	Relative (95% CI)	Absolute		
1 (Sheldon 1993)	randomised trials	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	10/15 (66.7%)	5/16 (31.3%)	RR 2.13 (0.95 to 4.8)	353 more per 1000 (from 16 fewer to 1000 more)	VERY LOW	IMPORTANT
<b>Emergence of resistant organisms - isolation of resistant strains of <i>S aureus</i> (follow-up 12 months)</b>												
1 (Sheldon 1993)	randomised trials	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	very serious <sup>4</sup>	none	4/15 (26.7%)	6/16 (37.5%)	RR 0.71 (0.25 to 2.03)	109 fewer per 1000 (from 281 fewer to 386 more)	VERY LOW	IMPORTANT

Abbreviations: CI: confidence interval; FEV<sub>1</sub>: forced expiratory volume in 1 second; MD: mean difference; RR: risk ratio

1 The quality of the evidence was downgraded by 2 due to unclear blinding and reporting and high loss to follow-up

2 The quality of the evidence was downgraded by 1 as the 95% CI crossed 1 default MID

3 The quality of the evidence was downgraded by 1 due to unclear blinding and reporting

4 The quality of the evidence was downgraded by 2 as the 95% CI crossed 2 default MIDs

5 The quality of the evidence was downgraded by 2 as the 95% CI crossed the line of null effect, and the CI is very wide (trial underpowered to detect a difference)