WHAT DESIRED EFFECTS COULD PATIENTS WITH IPF EXPECT AFTER THREE MONTHS OF PIRFENIDONE TREATMENT?

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Background Idiopathic pulmonary fibrosis (IPF) is a chronic, progressive, and irreversible fibrotic lung disease. Until recently, the standard of care for patients with IPF was limited to palliative care and lung transplantation. Pirfenidone, an antifibrotic drug was approved for the treatment of adult patients with IPF based on the favorable benefit-risk profile. In this analysis, impact of Pirfenidone treatment on patients' quality of life, and symptoms affecting patients' life as dyspnoea, fatigue and cough were investigated. Material and methods Between May 2017 and May 2018, surveys on fatigue (FAS), dyspnoea (MRC, BDI), cough (Leicester Cough Questionnaire) and quality of life (SF-36, SGRQ) were collected from 40 patients with IPF who completed first 3 months of Pirfenidone treatment. The same surveys were collected before treatment. Changes from baseline for continuous data were analyzed using two-sided paired t tests and the mean differences (T0-T1) with 95% confidence intervals (95% CI) and standardized response mean, (SRM) were provided. Results The results of Leicester Cough Questionnaire were higher in response to Pirfenidone treatment (88.7 ± 24.1 vs. 93.4 ± 24.6), however, no significant differences were observed following the three months treatment (p=0.47). Similarly, pre- and post-treatment scores of Borg scale showed no important differences (p=0.26). Meaningful effect of treatment was observed in dyspnea and fatigue (p