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**Title:** Early eradication of pseudomonas aeruginosa (PA) in cystic fibrosis patients (CF): Which is the best treatment?

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**Body:** CF patients usually have an intermittent period of PA infection before they become chronically infected. To date, there is no clearly identified which is the best practice for early treatment of PA infection. Objective: To compare two different eradication treatments against initial PA infection. Methods: Observational, analytic and retrospective cohort study. Clinical reports from patients assisted at our Center were reviewed and those with first acquisition of PA between 1997 and 2011 were included. Age at first acquisition, gender, and genetics were considered. Two types of treatment were indicated: Group1: Oral ciprofloxacin plus inhaled colistin for three months or Group 2: Intravenous Ceftazidime plus amikacin during 14 days. Time to recurrence of PA, eradication treatment rate (six months free of PA or more) and effective treatment (at least one culture negative after treatment) were the analyzed variables. Kaplan Meier curves were performed. Results: 26 patients (15 males) in group 1 and 39 patients (24 males) in group 2 were included. The median age (interquartile range) at first acquisition was 1.8 years (0.6 to 4.2) and 0.8 years (0.3 to 1.7) for group 1 and 2, respectively (NS). 67% and 62% of the patients had p.F508 del mutation in each group (NS). The median time to recurrence was 13 months (3.2 to 24) in group 1 and 5 months (0 to 11) in group 2 ( $p < 0.01$ ). Effective treatment and eradication treatment were 81% vs. 69% (NS) and 69% vs. 48% (NS) for group 1 and 2, respectively. Conclusion: in our study, oral ciprofloxacin plus inhaled colistin was a better option than intravenous Ceftazidime plus amikacin for the treatment of the early PA infection.