**Title:** Can roxithromycin improve quality of life in bronchiectatic patients?

**Body:** Rationale: Patients with bronchiectasis suffer from sputum production and exacerbated. The aims of this study were roxithromycin, an anti-inflammatory macrolide antibiotic, could alter clinical outcome.

Material and Methods: A randomized, double blinded, placebo controlled study was conducted to evaluate the effect of a 12-weeks of roxithromycin (300 mg/d) and a 12-week wash out period in HRCT proved bronchiectasis. Results: 30 bronchiectasis patients mainly from postuberculosis with history of 2.5 times exacerbation per year were studies. During the treatment period patients in the roxithromycin group (n=15, mean age 67 yrs) and the placebo group (n=15, mean age 65 yrs) had improved quality of life by total SGRQ scores 7.31 ± 17.14 vs. 6.31 ± 18.11(mean different +/-SD) but could not reach statistical significant (p = 0.53), at follow up wash out period there was more improvement in all domains of SGRQ scores in the roxithromycin group than the placebo group especially in the impact domain 4.17 vs -3.24 (mean different). There was no parallel improvement in sputum volume, symptom scores and pulmonary function tests. Two patients in treatment group and a patient in control group developed exacerbation and no patients in either group reported side effects. The microbiology results showed colonization of P. aeruginosa and K. pneumonia without any reported emerging drug resistance. Conclusion: 12-week roxithromycin 300 mg once daily in symptomatic stable bronchiectatic patients did not show significant improvement of QoL by SGRQ scores, reduced sputum volume nor improved lung function. Further long term study of anti-inflammatory macrolide should be done in symptomatic bronchiectatic patient.