Top 10 priorities for clinical research in CF

1. What are the effective ways of simplifying the treatment burden of people with CF?
2. How can we relieve gastro-intestinal symptoms, such as stomach pain, bloating and nausea?
3. What is the best treatment for non-tuberculous mycobacterium (including when to start and what medication)?
4. Which therapies are effective in delaying or preventing progression of lung disease in early life?
5. Is there a way of preventing CF related diabetes?
6. What effective ways of motivation, support and technologies help people with CF improve and sustain adherence to treatment?
7. Can exercise replace chest physiotherapy?
8. Which antibiotic combinations and dosing plans should be used for CF exacerbations and should antibiotic combinations be rotated?
9. Is there a way of reducing the negative effects of antibiotics e.g. resistance risk and adverse symptoms in people with CF?
10. What is the best way of eradicating *Pseudomonas aeruginosa*?

These questions have been produced through a James Lind Alliance Cystic Fibrosis Priority Setting Partnership in collaboration with the Evidence Based Child Health group at the University of Nottingham.