

Erratum

A clinical prediction rule for urinary tract infections in patients with type 2 diabetes mellitus in primary care

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Within the Summary section the word optimism was incorrectly replaced with the word optimum. The corrected version of the summary is shown below.

SUMMARY

We aimed to develop a prediction rule for urinary tract infections (UTIs) in patients with type 2 diabetes mellitus (DM2). A 12-month prospective cohort study was conducted in patients with DM2 aged ≥ 45 years to predict the occurrence of recurrent UTIs in women and lower UTIs in men. Predictors for recurrent UTI in women ($n=81$, 2%) and lower UTIs in men ($n=93$, 3%) were age, number of general practitioner (GP) visits, urinary incontinence, cerebrovascular disease or dementia. In women, renal disease was an additional predictor. The optimism corrected area under the receiver-operating curve (AUC) was 0.79 (95% CI 0.74–0.83) for women and 0.75 (95% CI 0.70–0.80) for men. Using a cut-off score of 4, women with a lower risk assignment had a probability of 0.3% for the outcome. For a cut-off score of 6, women with a higher risk assignment had a probability of 5.8%. For men these figures were 0.8 and 7.1 for a cut-off score of 2 and 4, respectively. Simple variables can be used for the risk stratification of patients.

Reference

1. Venmans LMAJ, Gorter KJ, Rutten GEHM, Schellevis FG, Hoepelman AIM, Hak E. A clinical prediction rule for urinary tract infections in patients with type 2 diabetes mellitus in primary care. *Epidemiol. Infect.* Published by Cambridge University Press, 17 July 2008. doi:10.1017/S0950268808001015