

Prediction Rule for Admission policy in Complicated urinary Tract Infection LEiden.

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Introduction of the PRACTICE into clinical practice leads to lower hospitalization rates without compromising clinical outcome, and lower medical costs.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON25370

Bron

Nationaal Trial Register

Verkorte titel

The PRACTICE study.

Aandoening

Urinary tract infections, urosepsis, acute pyelonefritis, acute prostatitis.

Ondersteuning

Primaire sponsor: Leiden University Medical Center (LUMC)

Overige ondersteuning: ZON-MW, The Netherlands Organization for Health Research and Development

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

- Primary hospital admission rate.

- Secondary hospital admission rate defined as the percentage of patients who need to be hospitalized after initially being treated at home.

Toelichting onderzoek

Doel van het onderzoek

Introduction of the PRACTICE into clinical practice leads to lower hospitalization rates without compromising clinical outcome, and lower medical costs.

Onderzoeksopzet

Day 0, 2-4, 24-32 and 84-98.

Onderzoeksproduct en/of interventie

Use of the PRACTICE to guide physicians, summing the points for each characteristic: age in years (females age-10); nursing home resident +10; malignancy +30; liver cirrhosis +20; congestive heart failure +10; cerebrovascular disease +10; renal disease +10; altered mental status +20; respiratory rate $\geq 30/\text{min}$ +20; systolic blood pressure <90 mmHg +20; pulse rate $>124/\text{min}$ +10; temperature >39.9 C +15. Recommendations: <75 points: strongly recommendation towards home-based management; 75-100 points: consider home-based management; >100 points: strongly recommendation towards hospital admission.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Competent patient aged 18 years or above;
2. One or more symptom(s) suggestive of urinary tract infection (dysuria, frequency or urgency*; perineal or suprapubic pain; costo-vertebral tenderness or flank pain);
3. Fever(ear or rectal temp of 38.2 C or higher, or axillary temp of 38 C or higher), or history of feeling feverish with shivering or rigors in the past 24 hours;
4. Positive urine nitrate test and/or leucocyturia as depicted by positive leukocyte esterase test or microscopy.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Known allergy to fluoroquinolones;
2. Female patients who are pregnant or lactating;
3. Patients with known polycystic kidney disease;
4. Patients on permanent renal replacement therapy (hemodialysis or peritoneal dialysis);
5. Patients with history of kidney transplantation;
6. Residence outside country of enrolment;
7. Inability to speak or read Dutch;

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Anders
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-06-2012
Aantal proefpersonen:	652
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	25-03-2014
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 41359
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL4340

Register

NTR-old

CCMO

OMON

ID

NTR4480

NL35220.058.11

NL-OMON41359

Resultaten