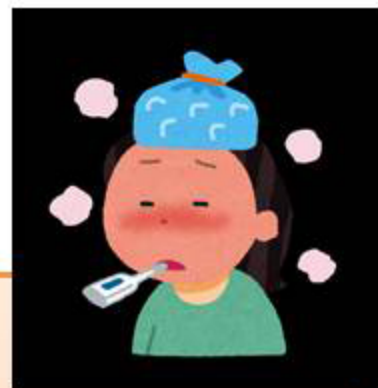# ６月２１日　朝の勉強会
テーマ　「発熱　嘔吐」

研修医　H先生

Table 2. Clinical Signs and Symptoms in the Prediction of Urinary Tract Infection* (cont)

Study	Positive Likelihood Ratio (95% CI)	Negative Likelihood Ratio (95% CI)
Vaginal Irritation		
Komaroff et al[29]	0.1 (0.0-0.2)	6.2 (5.0-7.6)
Wong et al[31]	0.6 (0.4-1.1)	1.2 (1.0-1.5)
Summary	**0.2 (0.1-0.9)**	2.7 (0.9-8.5)
Back Pain		
Wigton et al[32] (training set)	1.7 (1.1-2.6)	0.8 (0.7-1.0)
Wigton et al[32] (validation set)	1.6 (1.1-2.5)	0.8 (0.7-1.0)
Nazareth and King[30]	0.8 (0.3-2.5)	1.1 (0.8-1.5)
Summary	**1.6 (1.2-2.1)**	**0.8 (0.7-0.9)**
Self-diagnosis		
Gupta et al[33]	**4.0 (2.9-5.5)**	**0.0 (0.0-0.1)**
Vaginal Discharge on Physical Examination		
Wong et al[31]	0.8 (0.7-1.0)	1.9 (1.1-3.3)
Wigton et al[32] (training set)	0.3 (0.1-0.9)	1.1 (1.0-1.2)
Wigton et al[32] (validation set)	0.4 (0.2-1.0)	1.1 (1.0-1.2)
Summary	**0.7 (0.5-0.9)**	1.1 (1.0-1.2)
Costovertebral Angle Tenderness on Physical Examination		
Wigton et al[32] (training set)	2.0 (1.2-3.4)	0.8 (0.7-0.9)
Wigton et al[32] (validation set)	1.4 (0.8-2.4)	0.9 (0.8-1.0)
Summary	**1.7 (1.1-2.5)**	0.9 (0.8-1.0)
Dipstick Urinalysis†		
Hurlbut and Littenberg[18]	4.2	0.3

*CI indicates confidence interval. The study by Wigton et al[32] included 2 separate sets of patients evaluated by retrospective chart review: a training set and a validation set. Likelihood ratios in bold are significant.
†A positive result was defined as leukocyte esterase positive or nitrite positive; a negative result was defined as both negative.

Take home message

問診の際には
「正確な」言葉を用いる。

身体所見の感度、特異度、
尤度比を知ることで
見逃しが少なくなるかも。

診断した胃腸炎は胃腸炎
（だけ）でしたか・・・？