



March 30, 2012

Dear Community Pediatrician,

The recent American Academy of Pediatrics Guidelines on Urinary Tract Infections have generated a great deal of confusion both within the Urology as well as the Pediatric communities regarding its implementation and applicability. We felt that a letter explaining our position on the issue would be appropriate.

The CCHMC Division of Urology is open to the use of evidence based medicine to fine tune the judicious use of limited medical resources in caring for children with urinary tract infections and vesicoureteral reflux; however, we remain concerned with the process of the UTI guidelines committee and the data in which the committee based their conclusions.

In particular, we are uncomfortable basing strong recommendations on an unpublished meta-analysis of small, underpowered, and flawed studies. As you may know, the RIVUR study has now concluded the enrollment of 600 patients nationwide and preliminary data should be forthcoming soon which should provide more robust evidence and guidance on this issue.

While we acknowledge that overtreatment of VUR may occur, the risk of allowing a preventable acute illness and subsequent renal injury is not insignificant. We also feel that "special circumstances" for radiographically evaluating a child after a first UTI such as a strong family history of vesicoureteral reflux is not strongly enough emphasized in the guidelines.

If you are interested in one of our faculty presenting a formal slide presentation to your group on the topic, please let us know and we will arrange this at your convenience. As always, we are happy to discuss patients on an individual basis either by email or Priority Link.

Please do not hesitate to contact us if any questions arise. Our direct line office number is (513) 636-7143.

Sincerely,

Pramod P. Reddy, MD, FAAP, Division Director

A handwritten signature in black ink, appearing to read "Pramod P. Reddy". The signature is written in a cursive style with a horizontal line underneath.

Curtis Sheldon, MD, FACS, FAAP  
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