Point-of-Care C-Reactive Protein to Assist Antibiotic Prescribing for Respiratory Tract Infections

Ann Fam Med 2010;8:iii. doi:10.1370/afm.1097.

The *Annals of Family Medicine* encourages readers to develop the learning community of those seeking to improve health care and health through enhanced primary care. You can participate by conducting a RADICAL journal club, and sharing the results of your discussions in the *Annals* online discussion for the featured articles. RADICAL is an acronym for: Read, Ask, Discuss, Inquire, Collaborate, Act and Learn. The word *radical* also indicates the need to engage diverse participants in thinking critically about important issues affecting primary care, and then acting on those discussions.[1]

HOW IT WORKS

In each issue, the *Annals* selects an article or articles and provides discussion tips and questions. We encourage you to take a RADICAL approach to these materials, and to post a summary of your conversation in our online discussion. (Open the article online and click on "TRACK Comments: Submit a response.") You can find discussion questions and more information online at: http://www.AnnFamMed.org/AJC.

CURRENT SELECTION

Article for Discussion

Cals JWL, Schot MJC, de Jong SAM, Dinant GJ, Hopstaken RM. Point-of-care C-reactive protein testing and antibiotic prescribing for respiratory tract infections: a randomized controlled trial. *Ann Fam Med.* 2010; 8(2):124-133.

Discussion Tips

In the last issue *Annals* journal club assessed a systematic review of an uncommon treatment for a particular kind of respiratory infection. This issue's journal club provides an opportunity to consider a new adjunctive aid to decisions about antibiotic prescribing for a wider range of respiratory tract infections.

Discussion Questions

- What questions are addressed by this article? How do the questions fit with what already is known about diagnostic tests and delayed prescriptions for respiratory infections?
- How does the way the questions were framed affect the utility of the findings?
- How strong is the study design for answering the questions?
- To what degree can the findings be accounted for by:
  1. How study participants were selected or excluded?
  2. How the main variables were measured?
  3. Confounding (false attribution of causality because 2 variables discovered to be associated actually are associated with a 3rd factor)?
  4. Chance?
- How do the methods match up against the CONSORT Guidelines for clinical trials: http://www.consort-statement.org/consort-statement/?
- What are the main study findings across the different outcome measures?
- What can we learn from the subgroup analyses?
- Does the study funding affect your confidence in the findings? Does the registration of the trial increase your confidence?[2] (See: http://www.trialregister.nl/trialreg/admin/rctview.asp?TC=1112.)
- How comparable are the study populations to your practice? What is your judgment about the transportability of the findings?
- How (if at all) could this study change your practice?
- What important researchable questions remain?

References

1. Stange KC, Miller WL, McLellan LA, et al. *Annals* Journal Club: It's time to get RADICAL. *Ann Fam Med.* 2006;4(3):196-197. http://annfammed.org/cgi/content/full/4/3/196.
2. De Angelis C, Drazen JM, Frizelle, JM, et al. Clinical trial registration: a statement from the International Committee of Medical Journal Editors. *N Engl J Med.* 2004; 351:1250-1251.