

Only slightly worse disease course for bacterial LRI

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percent; $P = 0.004$). There was no difference in the resolution of symptoms rated moderately bad or worse ($P = 0.375$).

"Patients with acute bacterial LRTI have a slightly worse course of disease when compared with those without an identified bacterial cause, but the relevance of this difference is not meaningful," the authors write.

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(HealthDay)—In patients with acute cough, those with bacterial lower respiratory tract infection (LRTI) have a slightly worse disease course than those without an identified bacterial cause, according to research published in the November/December in the *Annals of Family Medicine*.

Jolien Teepe, M.D., from the University Medical Center Utrecht in the Netherlands, and colleagues conducted a secondary analysis of a multicenter European trial involving 2,061 adults with [acute cough](#) who were randomized to amoxicillin or placebo. The study analyzed data from the 1,021 patients in the [placebo group](#), of whom 187 were excluded for missing diary records.

The researchers found that 162 of the 834 patients had bacterial LRTI. Compared to those without bacterial LRTI, patients with bacterial LRTI had worse symptoms at day two to four following the first office visit ($P = 0.014$), and more often returned for a second consultation (27 versus 17

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