Supplementary Online Content


eAppendix 1. Results of the analysis of mean number of CRs in women without a urinary catheter, antibiotic consumption, other infections, masking efficacy and compliance with study medication.

This supplementary material has been provided by the authors to give readers additional information about their work.
eAppendix

Analysis restricted to women without a urinary catheter

The mean number of CRs after 12 months of prophylaxis in 235 women without a urinary catheter (both with complicated and uncomplicated UTIs) was 2.3 (95% CI, 1.9-2.9) in the TMP-SMX and 3.3 (95% CI, 2.7-4.0) in the lactobacilli group, corresponding with a difference of 1.0 (95% CI, 0.1-2.1).

Antibiotic use and other infections

The median number of antibiotic prescriptions for a UTI during the study period was 1 (interquartile range [IQR], 0-4) in the TMP/SMX group and 1 (IQR, 0-3) in the lactobacilli group. In both groups, nitrofurantoin was the most commonly prescribed antibiotic (33.0% and 37.1%, respectively), followed by norfloxacin (16.7% and 12.7%). The median number of antibiotic prescriptions for other bacterial infections, usually respiratory tract infections, was 0 in both groups (IQR, 0-0 for both groups).

Masking efficacy and adherence to study medication

At the end of the study, 28 of 101 (27.8%) and 30 of 112 (26.8%) participants in the TMP/SMX and lactobacilli groups, respectively, correctly guessed which active treatment they had used. Antibacterial activity was present in 1028 of 1112 urine samples (92.4%) obtained from women during TMP/SMX prophylaxis.

At baseline, L reuteri was identified in 7 of 90 fecal samples (7.8%) in the TMP/SMX group and 17 of 89 fecal samples (19.1%) in the lactobacilli group. At 12 months, these figures were 8.6% (7/81) and 93.4% (71/76), respectively.