




institution of interventional measures that have been shown to be effective in reducing proteinuria, retarding the progression of kidney disease, and improving cardiovascular mortality and morbidity, with the consequent improvement of outcomes for all individuals at increased risk.

Sir Robert Hutchison (1871–1960) must have had a premonition of things to come, when at the turn of the past century he noted that; the ghosts of dead patients that haunt us do not ask why we did not employ the latest fad of clinical investigation. They ask us, why did you not test my urine? 

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## CORRECTIONS

### Osteoporosis in men

(MARCH 2003)

“Osteoporosis in men: Suspect secondary disease first,” by Angelo Licata, MD, PhD (*Cleve Clin J Med* 2003; 70:247–254) contained a typographic error. On page 251 the T-score range for osteopenia was listed as between –1.5 and –2.5. The World Health Organization criteria specify –1.0 to –2.5. We would like to thank Dr. Stefan Monev, of Oshkosh, Wis, for pointing this out.

### Preventing kidney failure

(APRIL 2003)

TABLE 2 in “Preventing kidney failure: Primary care physicians must intervene earlier” by Christopher J. Hebert, MD (*Cleve Clin J Med* 2003; 70:337–344) contained a typographic error. The exponent of the serum albumin concentration should be positive, not negative. The corrected table is shown at right. We would like to thank

Dr. Robert Misson, of San Luis Obispo, Cal, for pointing this out.

#### TABLE 2

#### Three formulas for calculating the glomerular filtration rate (GFR)

MDRD formula (most accurate – calculator at [www.kdoqi.org](http://www.kdoqi.org))

$$\begin{aligned} \text{GFR} = & 170 \times \text{serum creatinine concentration}^{-0.999} \\ & \times \text{age}^{-0.176} \\ & \times 0.762 \text{ (if female)} \\ & \times 1.18 \text{ (if race is black)} \\ & \times \text{blood urea nitrogen concentration}^{-0.17} \\ & \times \text{serum albumin concentration}^{0.318} \end{aligned}$$

24-hour creatinine clearance  
(intermediate accuracy, least convenient)

$$\text{GFR} = \frac{\text{urine creatinine concentration} \times \text{volume in mL}}{\text{serum creatinine concentration} \times \text{time in minutes}}$$

Cockcroft-Gault formula (least accurate, most convenient)

$$\text{GFR} = \frac{(140 - \text{age}) \times \text{weight in kg} \times (0.85 \text{ if female})}{72 \times \text{serum creatinine concentration}}$$