

The Clinical Practice Research Datalink (CPRD) Phenotyping Electronic Health Records for Research

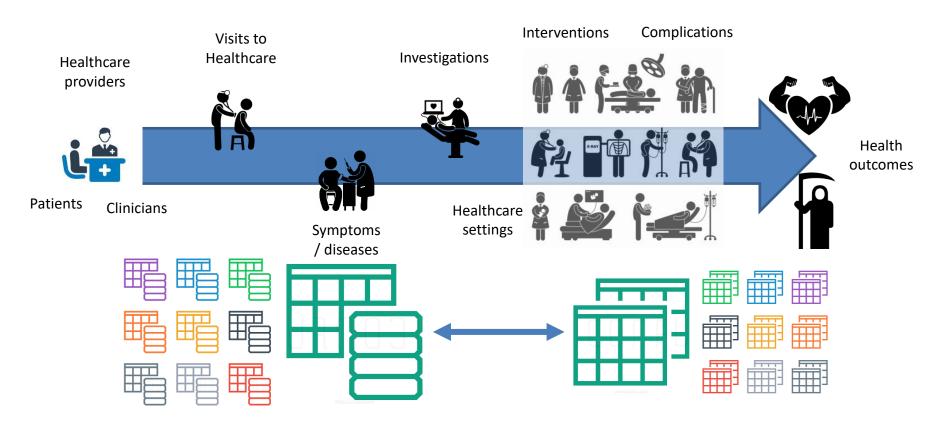
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Objective

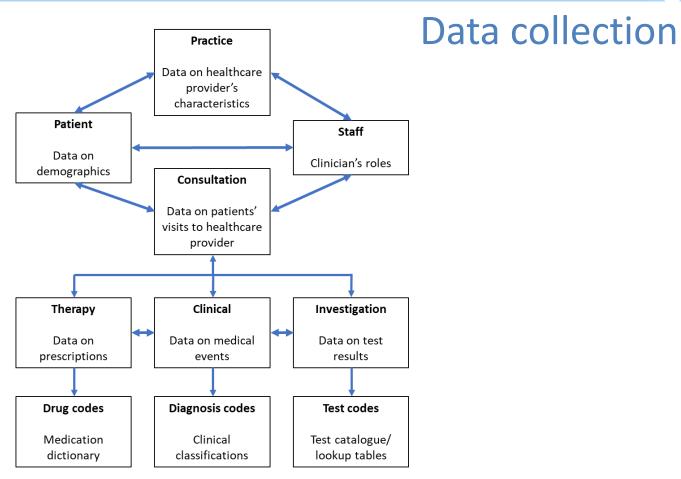
Provide the basic elements for the derivation of a phenotype using Electronic Health Records from Primary Care



Data generation mechanism

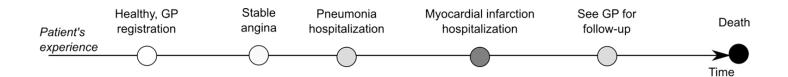




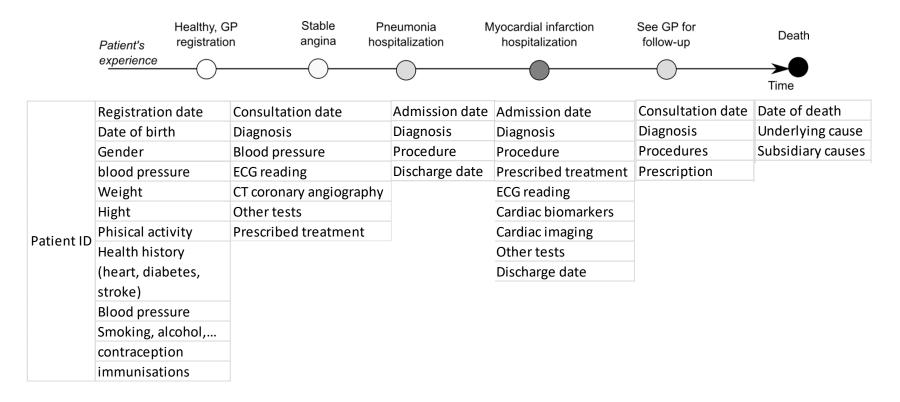


NCRM Research Methods e-Festival - November 2023

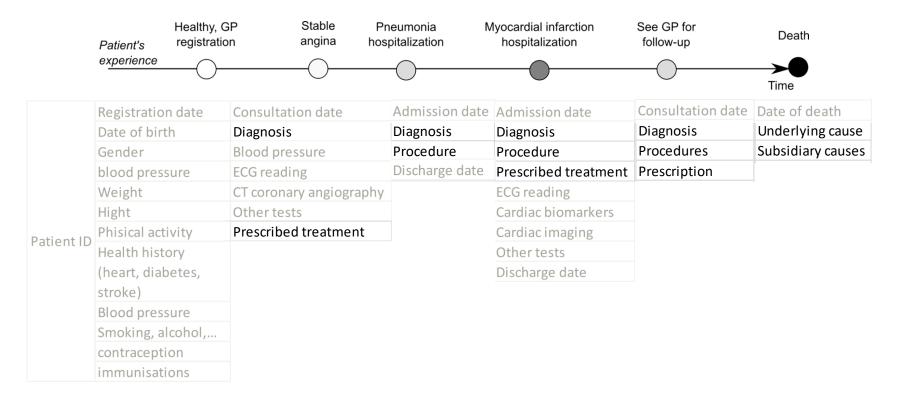












- Medical classification coding systems
 - Transformation of diagnoses, procedures and prescribed drugs into standard codes
 - For costing or resource planning purposes/
 epidemiologic surveillance/ scientific research
 - Hierarchical structure
 - National or International

- Coding systems in EHRs
 - Primary care:
 - Diagnosis, symptoms, signs... Read or SNOMED codes
 - Prescribed medication BNF, prodcodes
 - Secondary care
 - Diagnosis ICD10
 - Procedures OPCS



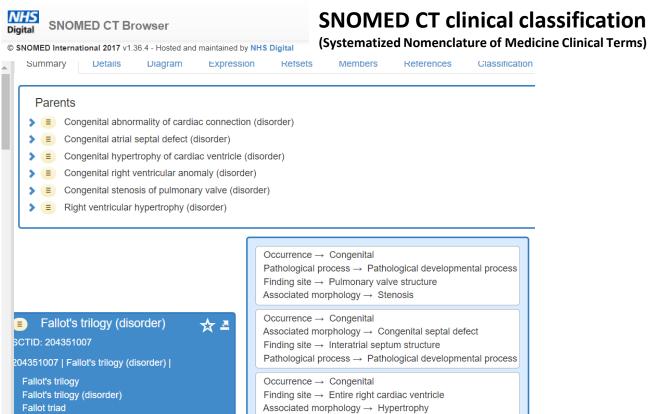
0.... Occupations

- 1.... History / symptoms
- 2.... Examination / Signs
- 3.... Diagnostic procedures
- 4.... Laboratory procedures
- 5.... Radiology/physics in medicine
- 6.... Preventive procedures
- 7.... Operations, procedures, sites
- 8.... Other therapeutic procedures
- 9.... Administration
- A.... Infectious and parasitic diseases
- B.... Neoplasms
- C.... Endocrine, nutritional, metabolic and immunity
- D.... Diseases of blood and blood-forming organs
- ♠ E.... Mental disorders
- F.... Nervous system and sense organ diseases
- G.... Circulatory system diseases
- → H.... Respiratory system diseases
- J.... Digestive system diseases
- K.... Genitourinary system diseases
- 1 L.... Complications of pregnancy, childbirth and the
- M.... Skin and subcutaneous tissue diseases
- 🔁 N.... Musculoskeletal and connective tissue disea
- P.... Congenital anomalies
- 砫 Q.... Perinatal conditions
- R.... [D]Symptoms, signs and ill-defined conditions
- S.... Injury and poisoning
- T.... Causes of injury and poisoning
- ■U.... [X]External causes of morbidity and mortality
- Z.... Unspecified conditions

Occupations History / symptom Depth of history Family history Fami	Read Code	Term Code	Term	
	G30	0	Acute myocardial infarction	Preferred Terr
		11	Attack – Heart	Synonym
		12	Coronary Thrombosis	Synonym
	G30	14	Heart attack	Synonym
		15	MI – Acute Myocardial Infarction	Synonym
	tive cough-green: tive cough-yellow: tive cough NOS ough present ough absent	sputum Te	erms become more specific as you go own the hierarchy.	

Read clinical classification





Pathological process → Pathological developmental process

Fallot trilogy

ICD-10 Version:2019

Search

ICD-10 Version:2019

- ▶ I Certain infectious and parasitic diseases
- ▶ II Neoplasms
- ▶ III Diseases of the blood and blood-formin certain disorders involving the immune m
- IV Endocrine, nutritional and metabolic dis
- V Mental and behavioural disorders
- ▶ VI Diseases of the nervous system
- ▶ VII Diseases of the eve and adnexa
- ▶ VIII Diseases of the ear and mastoid proce
- IX Diseases of the circulatory system
- X Diseases of the respiratory system
- > XI Diseases of the digestive system
- XII Diseases of the skin and subcutaneous
- XIII Diseases of the musculoskeletal syster tissue
- ► XIV Diseases of the genitourinary system
- XV Pregnancy, childbirth and the puerperi
- NVI Certain conditions originating in the p
- XVII Congenital malformations, deformations and chromosomal abnormalities
- XVIII Symptoms signs and abnormal clinical and laboratory

International Classification of Diseases (ICD10)

Chapter V
Mental and behavioural (F00-F99)

I61

I61.0

I61.1

Incl.: disorders of psychological

Excl.: symptoms, signs and abno

This chapter contains the

- <u>F00-F09</u> Organic, including s • <u>F10-F19</u> Mental and behavio
- <u>F20-F29</u> Schizophrenia, schi:
- <u>F30-F39</u> Mood [affective] dis **I61.4**F40-F48 Neurotic, stress-rela
- F50-F59 Behavioural syndroi
- F60-F69 Disorders of adult p I61.6
- <u>F70-F79</u> Mental retardation
- F80-F89 Disorders of psycho I61.8
- <u>F90-F98</u> Behavioural and em adolescence **I61.9**
- F99-F99 Unspecified mental disorder

Intracerebral haemorrhage

Excl.: sequelae of intracerebral haemorrhage (<u>I69.1</u>)

Intracerebral haemorrhage in hemisphere, subcortical

Deep intracerebral haemorrhage

Intracerebral haemorrhage in hemisphere, cortical

Cerebral lobe haemorrhage Superficial intracerebral haemorrhage

Intracerebral haemorrhage in hemisphere, unspecified

Intracerebral haemorrhage in brain stem

Intracerebral haemorrhage in cerebellum

Intracerebral haemorrhage, intraventricular

Intracerebral haemorrhage, multiple localized

Other intracerebral haemorrhage

Intracerebral haemorrhage, unspecified



patid	eventdate	readcode	data1	data2
1001	2011-12-01	24600	67	67
1001	2012-06-05	G3014		
1001	2012-06-05	8H2Z.00		
2221	2011-12-01	M211.12		
2221	2011-12-01	24600	80	110
2221	2013-11-02	24600	69	128
3241	2009-11-03	H2600		
7810	2014-01-12	17100		
7810	2014-01-12	H06z011		

Basic phenotyping

 How can we identify patients that meet the criteria of a specific medical condition, using routinely collected data?

Basic phenotyping

- Phenotype
- EHR Phenotype
 - Definition
 - Identification
 - Extraction
 - Use / Validation

- Definition what characteristic?
 - Clinical condition
 - Mental disorder
 - Physical trait
 - Biochemistry trait

- Identification what data are available and how is it generated?
 - Components (symptoms, diagnosis, treatment...)
 - Core vs supporting information
 - Precision (scales of measurement)

- Definition what characteristic?
 - Clinical condition: Hypertension

A patient will be classified as having hypertension if their health records show: A diagnosis of hypertension during a GP consultation or during a hospitalisation; or blood pressure readings: at least 2 systolic or diastolic high blood pressure readings within a 6 month period (systolic_BP >= 150 mmHg OR diastolic_BP >= 90 mmHg). For diabetic patients and patients over 60 years old, a lower threshold is used (SYS_BP >= 140 mmHg OR DIAS_BP >= 90 mmHg); or at least two prescriptions of blood pressure lowering medication within 6 months

- Extraction How will we derive the new data?
 - Identify specific fields from each data source
 - Define specific instructions to transform the available information into components of the phenotype
 - Define the level of granularity to express the phenotype
 - Systematic across individuals Phenotype Algorithm!

IF HT = 1, THEN HT comp = 1

metrics, test results, time dependent thresholds

IF there are at least three occurences of (SYS BP >= 140 mmHg OR DIAS BP >= 90 mmHg) within 1 year of releva nt date) OR if there are at least three occurences of (BP cat = 3) within 1 year of relevant date THEN HT comp = 1

Diagnoses

7001 00

6627.00	30 IF there are at least three occurence	¥	
6628.00	DOC t date OR if there are at least thr	2	
662F.00	THEN HT_comp = 1		
662G.00	Hypertensive treatm.changed	1	
6620.00	On treatment for hypertension	9	
662b.00	Moderate hypertension control		
662c.00	Hypertension six month review	U	
662d.00	Hypertension annual review		
662r.00	al withdrawal of antihypertensive therapy		

High cost hypertension drugs

For diabetic patients:

130 mm OR DIAS BP >= 80 mmHg) within one year of relevan

(BP cat = 3) within 1 year of relevant date

Medication

All primary care prescriptions from BNF chapters:

2.2.1 Thiazides and related diuretics

2.2.3 Potassium-sparing diuretics and aldosterone antagonists

2.2.4 Potassium-sparing diuretics with other diuretics

2.4 Beta-adrenoceptor blocking drugs

2.5 Hypertension and heart failure

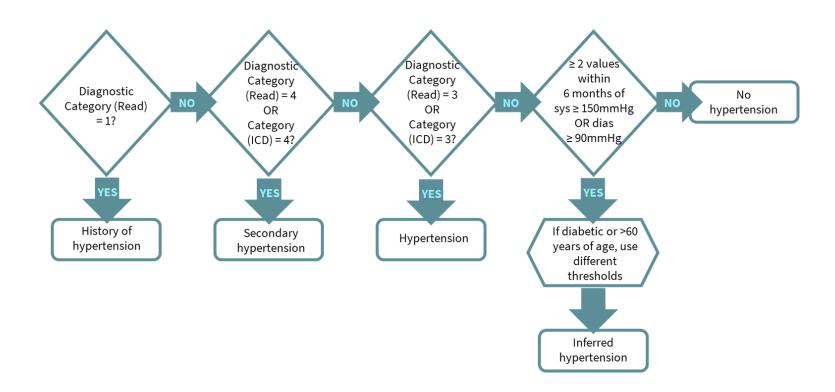
2.6.2 Calcium-channel blockers

Health care utilisation patterns

- Developing a new <u>code list</u>
- HDR UK <u>Phenotyping Library</u>

https://phenotypes.healthdatagateway.org/





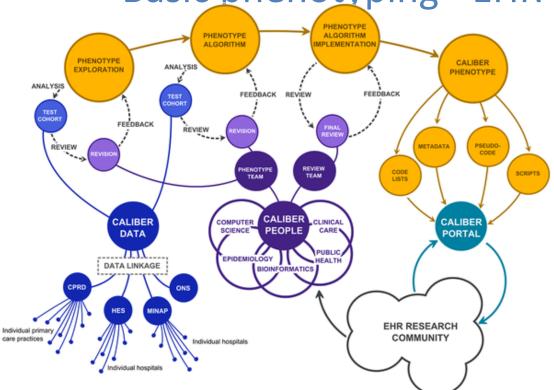


Increasing phenotype granularity according to available data			
Binary (presence/	Multiple categories		In depth
absence)	Certainty	Severity	Propensity score
	"Definite"	Severe	
Yes		Moderate	
		Mild	Continuous
	Probable	Probable	scale
	Possible	Possible	
No	No	No	



Hypertension phenotype			
Binary	Multiple categories		
classification	Certainty	Classification	
Yes	Diagnosed Hypertension	History of hypertension	
		Hypertension	
		Secondary hypertension	
	Inferred hypertension	Inferred hypertension	
No	No	No	

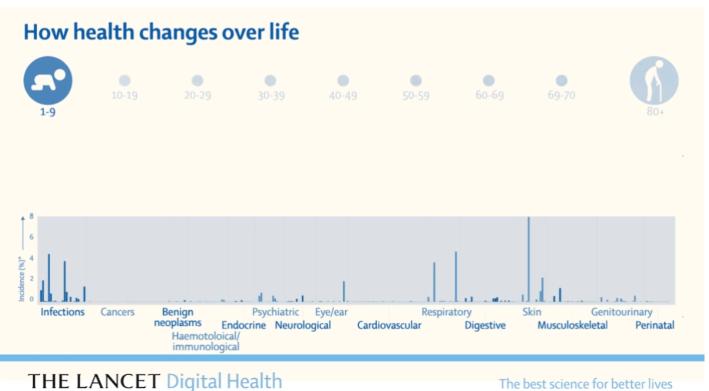




Morley, K. PLOS ONE, 10.1371/journal.pone.0110900



Chronological map of human disease



V. Kuan et al. The Lancet Digital Health 2019