

Meeting Minutes for Ehden Hmb

Review of HMB SAP

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2023-08-11

1 Attendance

- Siir Su Saydam (Bayer)
- Marta Pineda Moncusi (Oxford)
- Martin Lavallee (Odysseus)

2 Minutes

Cohort Diagnostics

- Before meeting, BI sent Cohort Diagnostic results for THIN Belgium and Germany DA
- Reviewed Cohort Diagnostic results:
 - Databases collected: Hospital Del Mar (Spain), CPRD GOLD, CPRD AURUM, Optum Claims, MarketScan, THIN Belgium and Germany DA
 - HMB cohort seems reasonable
 - Note: THIN Belgium and Hospital del Mar have small cohort sizes (less than 2K persons). They will remain in the study as sample size not a problem.
 - minimal orphan concepts from databases. Nothing to add
 - logical incidence trends across databases
- Data partners in contact but yet to run:
 - Israel - Odysseus sent Cohort Diagnostics code, no response
 - Oslo - Sent corrected CD to run, in progress
 - Finland - Bayer to contact
 - Hungary - Ran previous Cohort Diagnostics code, has not run new one

SAP Review

- Odysseus sent SAP to Bayer on August 4th. Bayer returned with comments on August 8th
- Clarifications:
 - Concept vs Cohort prevalence: Bayer suggest to add some text to explain the difference between calculating concepts at baseline using FeatureExtraction and calculating prevalence of cohorts for those unfamiliar with OMOP. Similar text used in previous protocol, Odysseus to add
 - Addition of pregnancy as censoring criteria in HMB cohort: Was added into the cohort definition of HMB sent out during Cohort Diagnostics. Odysseus to add in SAP
 - Use of Comorbidity scores (Charlson and CHADS2Vasc): question on how these scores were calculated in OMOP. Sql to derive scores is provided in FeatureExtraction package.
 - Underlying Causes of HMB - want prevalence of conditions before and after index. Consider windows of -365 to 0 days, 1 to 365 days, 366 to 730 days and 731 to 1825 days.
 - Treatment Patterns:
 - * remove iron preparations (only for baseline)
 - * ablation, hysterectomy etc (procedures) considered an exit for drug exposures. Looking at drugs taken prior to procedure, menopause, pregnancy or death
 - * Only consider changes in treatment for treatment sequences
 - * Limit treatment sequences to the top 15 for all databases, removing sequences with less than 10 patients. Concern that smaller databases would not meet 100 person limit previously specified.
 - Study to use IncidencePrevalence DARWIN package for incidence analysis

Study Admin

- Incidence
 - Request for incidence portion of analysis to be distributed to partners before remaining analysis
 - Agreed study can be done in phases: a) Cohort Diagnostics, b) Incidence, c) Treatment Patterns/Clinical Characterization
- Github
 - Request for study to be hosted in a github repository. Saw issue of multiple versions of Cohort Diagnostics over email, github would help make it easier to provide current version of study and collect issues with code.
 - Discussion over whether study should be hosted as a public repository, current code is in Odysseus private github. EHDEN would likely request for code to be public
 - Suggested location for study would be in ohdsi-studies organization on github

- `renv`
 - some sites have issues running `renv`. Bayer can not use in environment
 - Odysseus to provide dependency snapshot and instructions to deactivate if cannot use `renv`

3 Action Items

In no particular order of precedence

- 1) Odysseus to respond to comments in SAP and send to Bayer and Oxford (**due: 8/18**)
- 2) Bayer to confirm if study can be hosted on a public repository (**due: 8/18**)
- 3) Team to follow up with data partners yet to run CD (**due: 9/1**)
 - Israel (Odysseus)
 - Finland (Bayer)
 - Oslo (Oxford/Odysseus)
 - Hungary (Oxford)
- 4) Odysseus to provide draft of study code (**due: 8/30**)
- 5) Confirm date of Study-A-thon (**due: 8/16**)