Sympo 10 years PICE



emma kinderziekenhuis AMC

VU medisch centrum





International perspective



LEIDS UNIVERSITAIR MEDISCH CENTRUM









Pediatrische Intensive Care Evaluatie

International perspective PICE registry

- International PICU datasets
- comparing Dutch PICUs with other countries

- PICU registraties vergelijken
- Vergelijking Nederland UK/Aus/USA

Examples PICU registraties

```
USA – VPS, NQF NACH (PICU focusgroup)
```

Aus/NZ - ANZPIC

UK – PICANet

Portugal – REUNIR

NL - PICE

Enkele kenmerken registraties

USA – gesloten, beperkt

Aus/NZ – openbaar, volledig

UK – openbaar, beperkt

Portugal – gesloten, volledig

PICE registratie

- Uniform, standardized, continues registration
- complete coverage national PICU population
- Registered by PICU staff
- Centrally led trainings, definitions
- Explanations/Help texts in software
- Between PICU's reports openly discussed
- Externally reports are anonymized

Conditions before comparing with other countries

Population selection

Quality data explained

Dataset definitions

Models and data case-mix

Rregistry Quality DoCDat criteria (Critical Care April 2004 Vol 8 No 2 Harrison et al.)							
PICE	(ICNARC)	DoCDat		Level 1	Level 2	Level 3	Level 4
A. 4	(3)	3	A. Extent to which the eligible population is representative of the country	No evidence or unlikely to be representative	Some evidence eligible population is representative	Good evidence eligible population is representative	Total population of country included
B. 4	(4)	3	B. Completeness of recruitment of eligible population	Few (< 80%) or unknown	Many (80 – 89%)	Most (90 – 97%)	All or almost all (> 97%)
C. 2~3	(3)	3	C. Variables included in the database	 identifier admin info condition or intervention 	 identifier admin info condition or intervention short-term outcome or long-term outcome 	 identifier admin info condition intervention short-term outcome or long-term outcome major known confounders 	 identifier admin info condition intervention short-term outcome major known confounders long-term outcome
D. ~4	(3)	2	D. Completeness of data (percentage of variables at least 95% complete)	Few (< 50%) or unknown	Some (50 – 79%)	Most (80 – 97%)	All or almost all (> 97%)
E. 4	(4)	4	E. Form in which continuous data (excluding dates) are collected (percentage collected as raw data)	Few (< 70%) or unknown	Some (70 – 89%)	Most (90 – 97%)	All or almost all (> 97%) or no continuous data collected
F. 4	(4)	2	F. Use of explicit definitions for variables	None	Some (< 50%)	Most (50 – 97%)	All or almost all (> 97%)
G. 4	(4)	2,5	G. Use of explicit rules for deciding how variables are recorded	None	Some (< 50%)	Most (50 – 97%)	All or almost all (> 97%)
H.1~	(2)	1	H. Reliability of coding of conditions and interventions	Not tested	Poor	Fair	Good
I. 4	(4)	4	I. Independence of observations of primary outcome	Outcome not included or independence unknown	Observer neither independent nor blinded to intervention	Independent observer not blinded to intervention	Independent observer blinded to intervention or not necessary as objective outcome (e.g. death or lab test)
J. 4	(3)	3	J. Extent to which data are validated	No validation	Range or consistency checks	Range and consistency checks	Range and consistency checks plus external validation using alternative source

comparing with other countries

– indirect / directly

Indirect: models derived from other populations PRISM:USA en PIM:Australië/NZ(UK)

Direct: reports

public reports: PICANet ANZPIC

Indirectly comparing with PICUs abroad

Models mortality prediction PICU

PRISM: USA ca.1985

PRISM3: ca.1994

PIM1: Australië/NZ(UK1) ca.1995

PIM2: Australië/NZ(UK4) ca.1999

-ANZ06 Australië/NZ 2006

-ANZ08 Australië/NZ 2008

Validityt models?

Discrimination PRISM > PIM

(AUC)

Prism3: 0,90

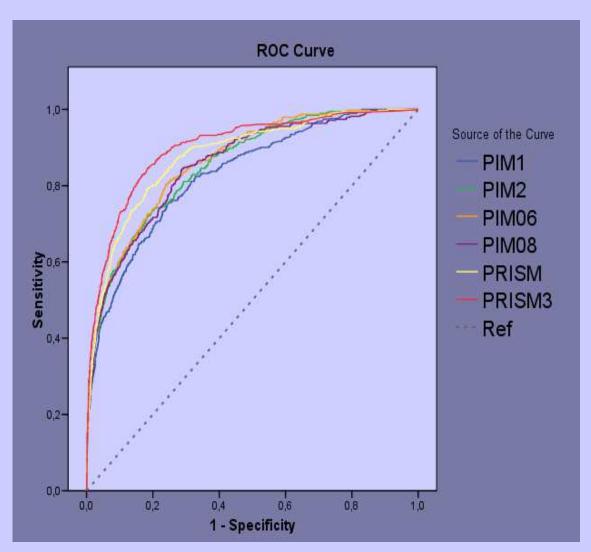
Prism: 0,88

Pim06: 0,86

Pim2: 0,85

Pim08: 0,85

Pim1: 0,83



Wich model to use?

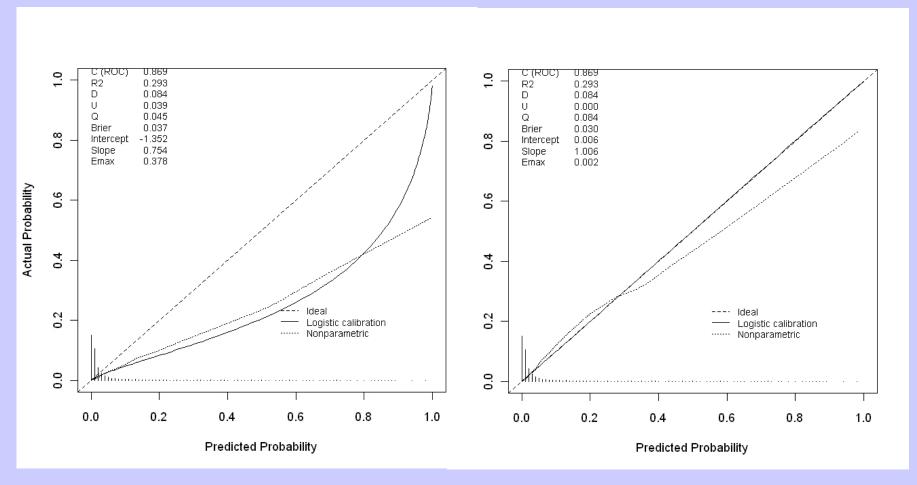
most recent?

– update your dataset to the new models?

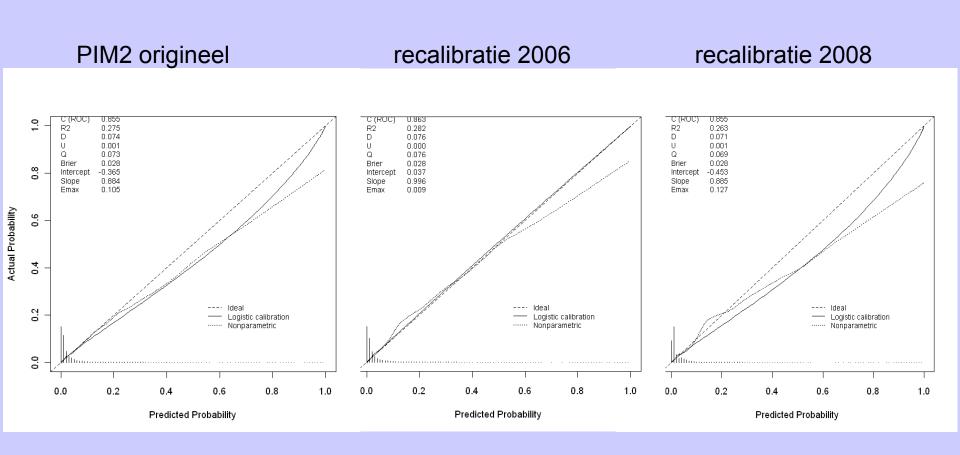
or use the best discriminating model

– even if its rather old and out of calibration?

PRISM(2): original and recalibrated in PICE2006/07



PIM2 en recalibrations 2006 & 2008 (by ANZPIC)



Indirectly International comparison

standardized Mortality Ratio (SMR) werkelijke sterfte op de PICU/verwachting model

SMR=1: sterfte gelijk aan verwachting

SMR>1: meer sterfte dan verwacht

SMR<1: als deze patiënten in de model-populatie PICU's waren behandeld dan meer gestorven

→ survival now&here better than then&there

Indirectly comparing PICUs/countries

Populatie & periode	SMR-NL2008 [95%BI]
USA 1984	0,48 [0,41-0,56]*
Australië/NZ(UK) 1997	0,85 [0,72-1,01]
Australië/NZ 2006	0,92 [0,77-1,08]
Australië/NZ 2008	0,78 [0,66-0,92]*
	USA 1984 Australië/NZ(UK) 1997 Australië/NZ 2006

Direct international comparisons

NL - UK(partly) – Aus/NZ PICE – PICANet – ANZPIC 2008

sources: publical available reports

PICANet: Paediatric Intensive Care Audit Network National Report 2006–2008 (published August 2009):Universities of Leeds and Leicester. ISBN 9780853162834

ANZPIC: Report of the Australian and New Zealand Paediatric Intensive Care Registry 2008 (published March 2010): ISBN 1876980699

similarities PICANet, ANZPIC & PICE

- Quality Control: local, central site visits (audits)
- Explicit dataset, definitions, toelichtingen
- Inclusion: all consecutive admissions PICU
- SMR based upon PIM2 (recalibrated)
- ANZPIC & PICE: diagnostic classification

differences PICANet, ANZPIC & PICE: Reports

- PICE: not explicit missings per variable
- Admissions to PICU
 - PICE report since 2006 selection on discharge
 - PICANet not all picus?
 - PICANet en ANZPIC also presenting <16yrs on adult-IC (apart)
- PICANet continuing 3-year reporting
- PICANet & ANZPIC: publicly reporting individual picu's

Percentage admissions in the three registries in 2008

	PICE	ANZPIC	PICANet
Sexe (male)	57	58	58
Neonates	12	10	16
Urgent/Unplanned	57	58	2006-08: 59
LoS >=1week	19	11	16
>4wk (% of all 'beddays')	3 (33)	Surv: 1 (20)	-?-

Percentage admissions according to source of adm in NL&Aus 2008

	PICE	ANZPIC	PICANet
Source			
	2.4	40	
OT (operation room)	34	48	
inpatient ward	24	16	
ED	11	14	
Directly	9	21	
other ICU	6	1	

Percentage Diagnoses in NL&Aus in 2008

	PICE	ANZPIC	PICANet
Diagnostic groups			
Post Procedure (excl. cardio)	29	28	
Cardiovasculair (incl. surgery)	21	25	
Respiratoir	20	21	
Neurological	8	7	
Trauma	6	6	

Percentage admissions NL, Aus, UK in 2008

	PICE	ANZPIC	PICANet
Mortality in PICU	3,2	3,0	4,5
PIM2 risk-groups			
<0,01	45		16
0,01-<0,05	40		51
0,05-<0,15	10		27
0,15-<0,30	3		5
>=0,30	2		2

PICE 10 jaar "Kwaliteit Nederlandse ICK"

Samenvatting internationaal perspectief PICE

- Uitkomst vergelijkbaar maar niet gelijk
- Verschillen in wijze van rapporteren
- Opzet registratie grote gelijkenis
- Zorg voor heldere en gelijke definities
- Gebruik Internationale modellen: PIM2
- Populatie overeenkomsten:
 - sexe, urgentie, diagnose, hoog risico
- Overleving op Nederlandse ICK gelijk of groter

Symposium 10 jaar PICE



emma kinderziekenhuis AMC

VU medisch centrum





Dank aan allen betrokken bij de PICE



LEIDS UNIVERSITAIR MEDISCH CENTRUM







