# THEMIS Issue-Solution List: Janssen Epidemiology Analytics

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1. **List of issues - Every time you experienced an issue where you had to make a decision affecting data in the OMOP CDM, and there was no clear guidance.** 
   1. **Usage of type concept id’s**

Unclear in various scenarios. Also, not used enough in analyses due to Atlas cohort designer not requiring the user to consider them.

* 1. **Death records followed by healthcare utilization in claims data**

Should healthcare utilization after a potential death event nullify the death event? How much grace period time should be allowed?

* 1. **Month of birth not available in claims data**

Often, we get year of birth, but can we glean month of birth somehow?

* 1. **Deriving visit type when not explicitly available**

Visit type is not often conveyed explicitly in the data, or it is misclassified (OP drugs during an IP visit).

* 1. **Handling patient-reported drugs**

Patient-reported drugs are not verified drug exposures, how do we safely make use of this information?

* 1. **Handling different types of observation time in claims data (e.g. CPRD-HES)**

Different data sources within a data set may convey observation time differently.

* 1. **Pregnancies not explicitly stated in claims data; mother-child linkage not explicitly stated in claims data. Also: once obtained, where should they go?**

Claims data do not provide pregnancy information or mother-child linkages. They do sometimes provide family identifiers.

* 1. **In building CDMs, when should we utilize standard era or vocabulary logic?**
  2. **How best do we calculate Dose Era?**
  3. **How do handle granular cost versus total cost?**
  4. **If a cost multiplier table is available, should we use it to transform the cost amounts in the CDM COST table, or should this information be stored elsewhere? If stored elsewhere, how do we ensure users know about it?**
  5. **Is there consistency in using the RabbitInAHat tool to generate mappings and test case frameworks?**

1. **Solution list. - All the conventions you created and might be worth standardizing. (these correspond to the list numbers in Question 1)**
   1. We need more standard decision tree to help with the assignment of type concept id’s. Also, Atlas needs to be more proactive in preventing the misuse of type concept ids.
   2. We nullify death if utilization events occur > 30 days post death date. However, one open question: is this a good idea if death event is from a reputable source (e.g. Social Security Death Master File)? We do know that enrollment can end far after death.
   3. We use this algorithm:

if PERSON.YEAR\_OF\_BIRTH = YEAR(OBSERVATION\_PERIOD\_START\_DATE), then PERSON.MONTH\_OF\_BIRTH = MONTH( MIN (OBSERVATION\_PERIOD\_START\_DATE))

* 1. In some cases, we use RVNU\_CD and POS, but it would be nice to have some standard approaches.
  2. Erica Voss’s forum post (<http://forums.ohdsi.org/t/patient-reported-drugs-and-conditions/3152>) raises this question. The current options are to 1) move these records to OBSERVATION or 2) keep them in drug\_exposure but with use the proper drug\_type\_concept\_id.
  3. For CPRD-HES, we leveraged the cohort table to pre-populate other observation periods not captured in observation\_period
  4. We utilize the Pregnancy algorithm from Amy Matcho, Chris Knoll (destination: should be cohort, but unclear what cohort id to use). Once those are generated, we use the Mother-child linkage algorithm from Jamie Weaver, Jill Hardin, and Patrick Ryan (destination: fact-relationship).
  5. We have code snippets in the ETLs in the CDM Builder repo (<https://github.com/OHDSI/ETL-CDMBuilder>), but it would be great to have a separate Code Library repo where we store standard algorithms for building CDMs.
  6. Not sure of the OHDSI solution, hoping to discuss in THEMIS.
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1. **Concept list - All the concepts you have picked to represent certain data where you had ambiguous or unclear choices.**

JNJ source\_to\_concept\_maps can be found here: <https://github.com/OHDSI/ETL-CDMBuilder/tree/master/man/VOCABULARY_ADDITIONS>