Experiences from the OHDSI international data network

Panel Discussion

Peter Rijnbeek – Erasmus University, Netherlands
Rae Woong Park – Ajou University, South Korea
Parsa Mirhaji – Einstein College, USA
Paul Biondich – OpenMRS, USA
Christian Reich – IMS, USA

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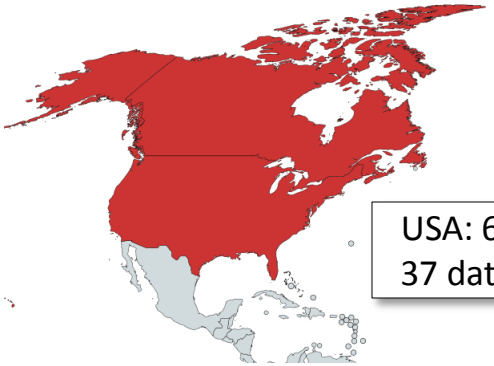
Worldwide OHDSI Network

Total: 655M
51 databases

Canada: 2.3M
1 database



USA: 602.5M
37 databases

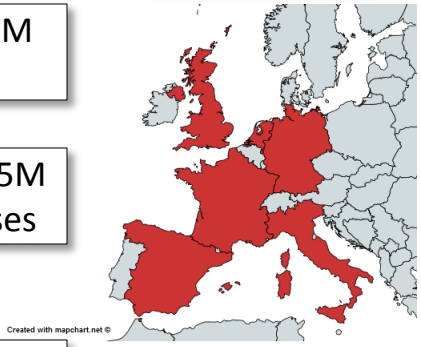
Japan: 2.9M
1 database

Sourth Korea: 2.4M
1 database

Taiwan: 2.0M
1 database

UK: 21.6M
2 databases

Netherlands: 2.0M
1 database



Germany: 12.9M
3 databases

France: 2.5M
2 databases

Italy: 4.0M
1 database

Spain: 4k
1 database

OHDSI – Benefit for Each Collaborator

Nobody can do it all alone!

Standardization of Data and Analytics

- OMOP Common Data Model and Standard Vocabularies
- Standardized (=repeatable) Queries
- Standardized Tools
- Standardized Methods

Access to Collaborators

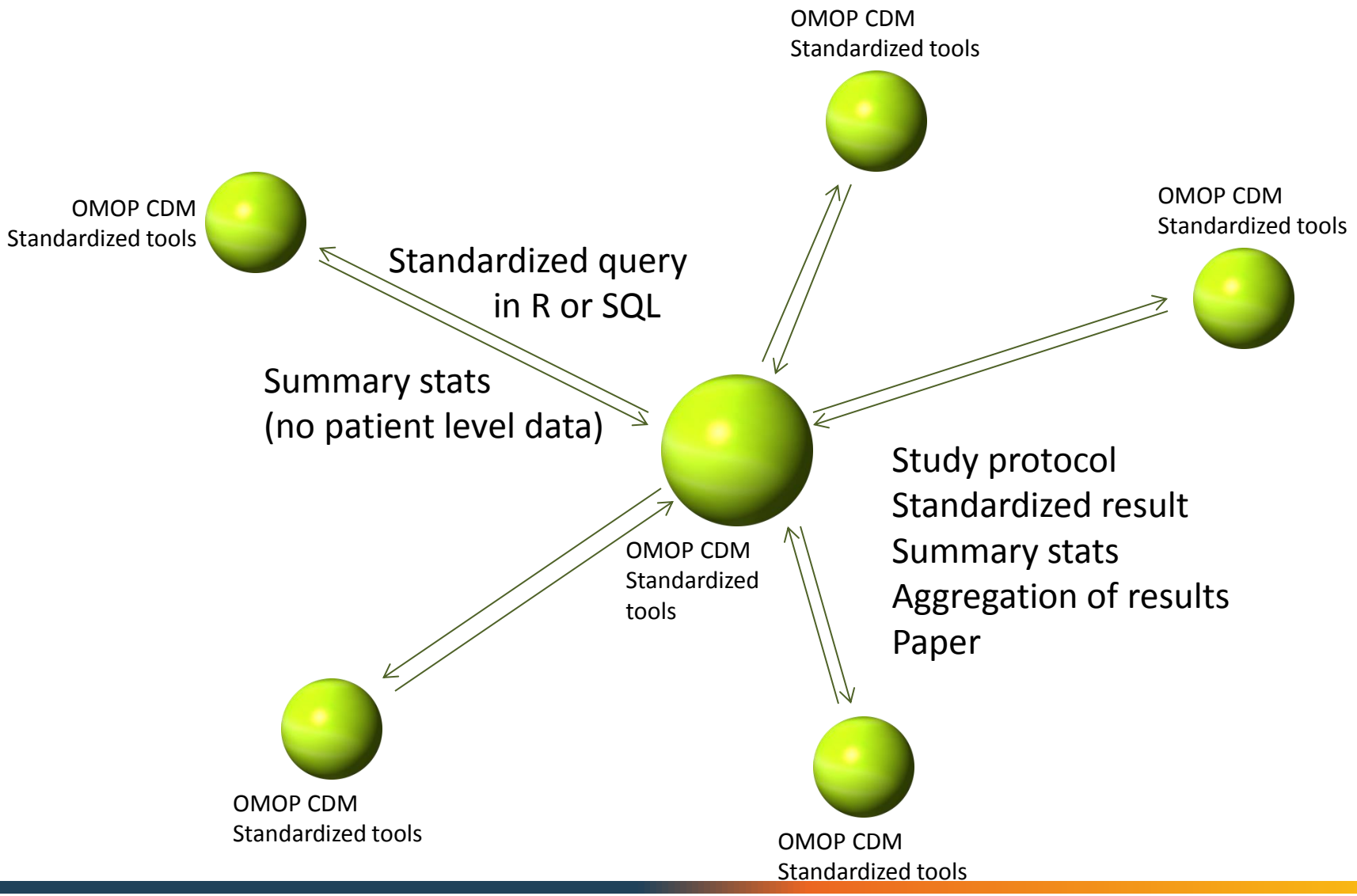
- Statisticians
- Clinical Researchers
- Software developers
- Infrastructure experts

OHDSI Network Effect

- Network effect:
  - Cost proportional to number of nodes
  - Benefit proportional to square of number of nodes
    - Benefit from joining
    - Benefit from other nodes

- Network effect possible through
  - Interoperability
  - Standardization
  - Open Source

The Network in Action



Panel Discussion

1. What was your motivation for joining the OHDSI community and adopting the OMOP common data model?
2. What value do you anticipate receiving by participating in the OHDSI network moving forward?
3. How can we make it better?

Panelists:

- **Rae Woong Park**, MD, PhD, Professor, Ajou University School of Medicine, South Korea
- **Peter Rijnbeek**, PhD Assistant Professor, Erasmus Medical Center
- **Parsa Mirhaji**, MD, PhD, Director of Clinical Research Informatics at Montefiore Healthcare System, Albert Einstein College of Medicine
- **Paul Biondich**, MD, Founder and President, OpenMRS