



The COVID-19 & Cancer Consortium

Jeremy Warner MD, MS, FAMIA, FASCO

OHDSI Collaborator Meeting

April 7th, 2020



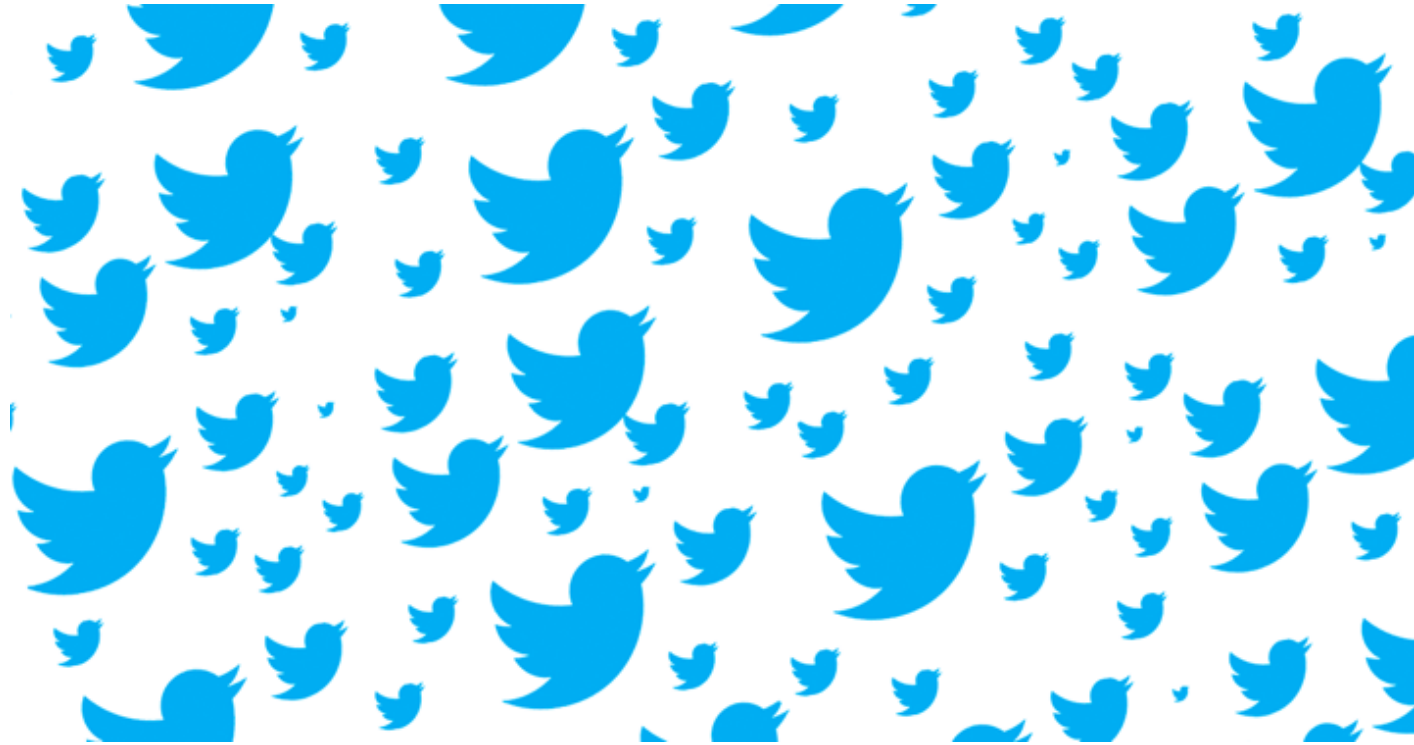
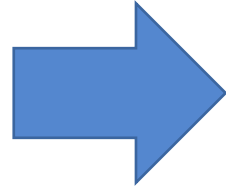
Origins



#covid19nCancer
~3/16



Aakash Desai



#CCC19
[Symplur](#)
@COVID19nCCC
>300 followers as of today

Climate Change & Consciousness Conference Livestream 20 – 26 April 2019



We are creating and offering our online spiritual resources to people around the world at this time, free of charge. However, until further notice we have also suspended our residential workshops and events, which we rely on for 80% of our income. We know that many people are facing challenging situations at the moment. [If you feel passionate and are able to make a donation to help the Findhorn Foundation](#) to support people around the world, it would be a real blessing. Thank you.

[Freely Available to View Here](#)

Climate Change & Consciousness Conference



[Findhorn Live Contact](#)

Technical support for paying live stream customers

Email*

Type your email

Describe technical issue*

Please mention: the event you have booked and the specific tech issue you need help with



The COVID-19 & Cancer Consortium

[HOME](#)

[FAQS](#)

[COLLABORATORS](#)

[COVID19NCANCER](#)

[PUBLICATIONS](#)

[RESOURCES](#)

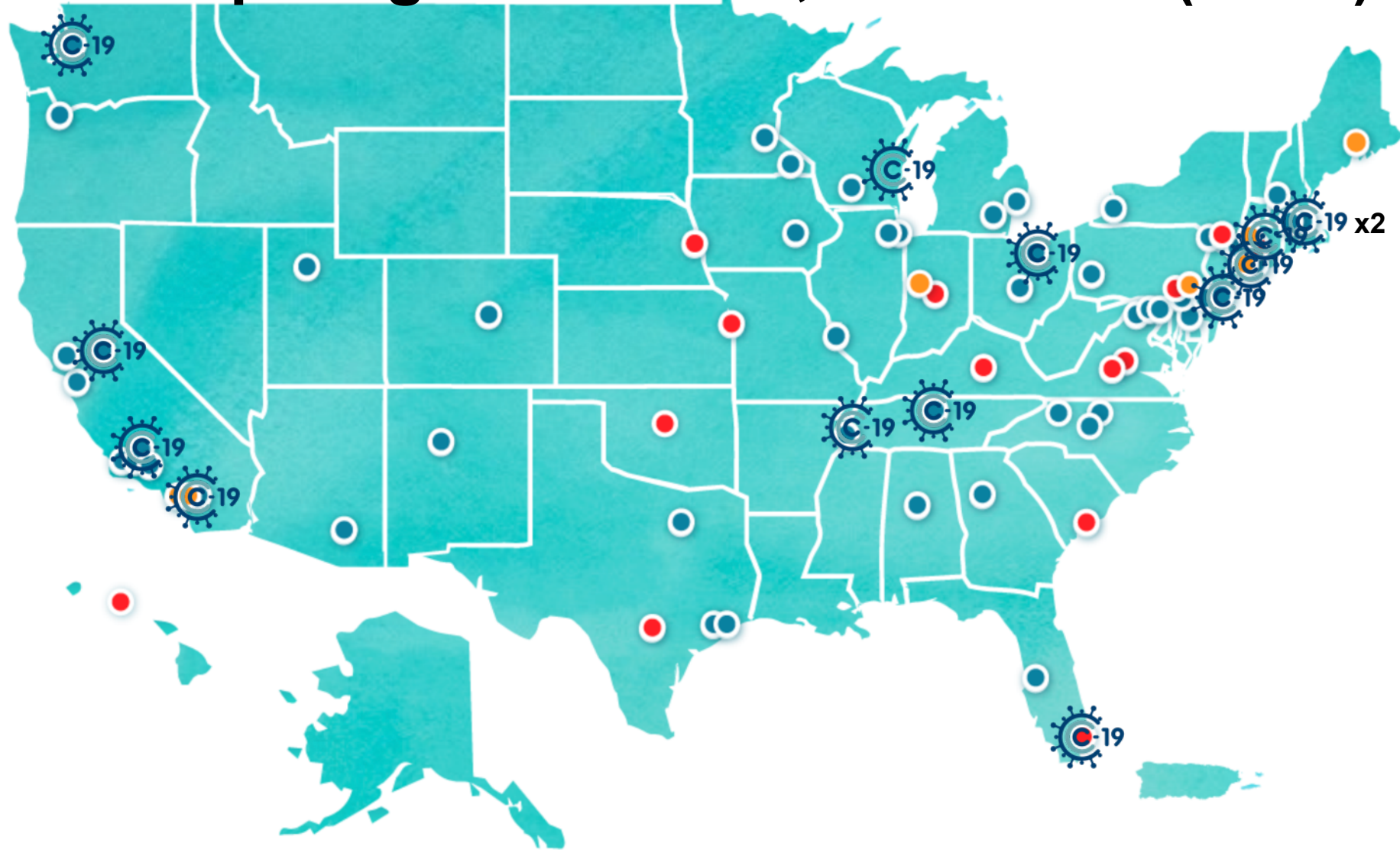
[OTHER EFFORTS](#)

THE COVID-19 AND CANCER CONSORTIUM

Please click the button below to report on a cancer patient with COVID-19. See below for eligibility.

[ACCESS THE SURVEY](#)

Participating Institutions, March 17th (N=14)



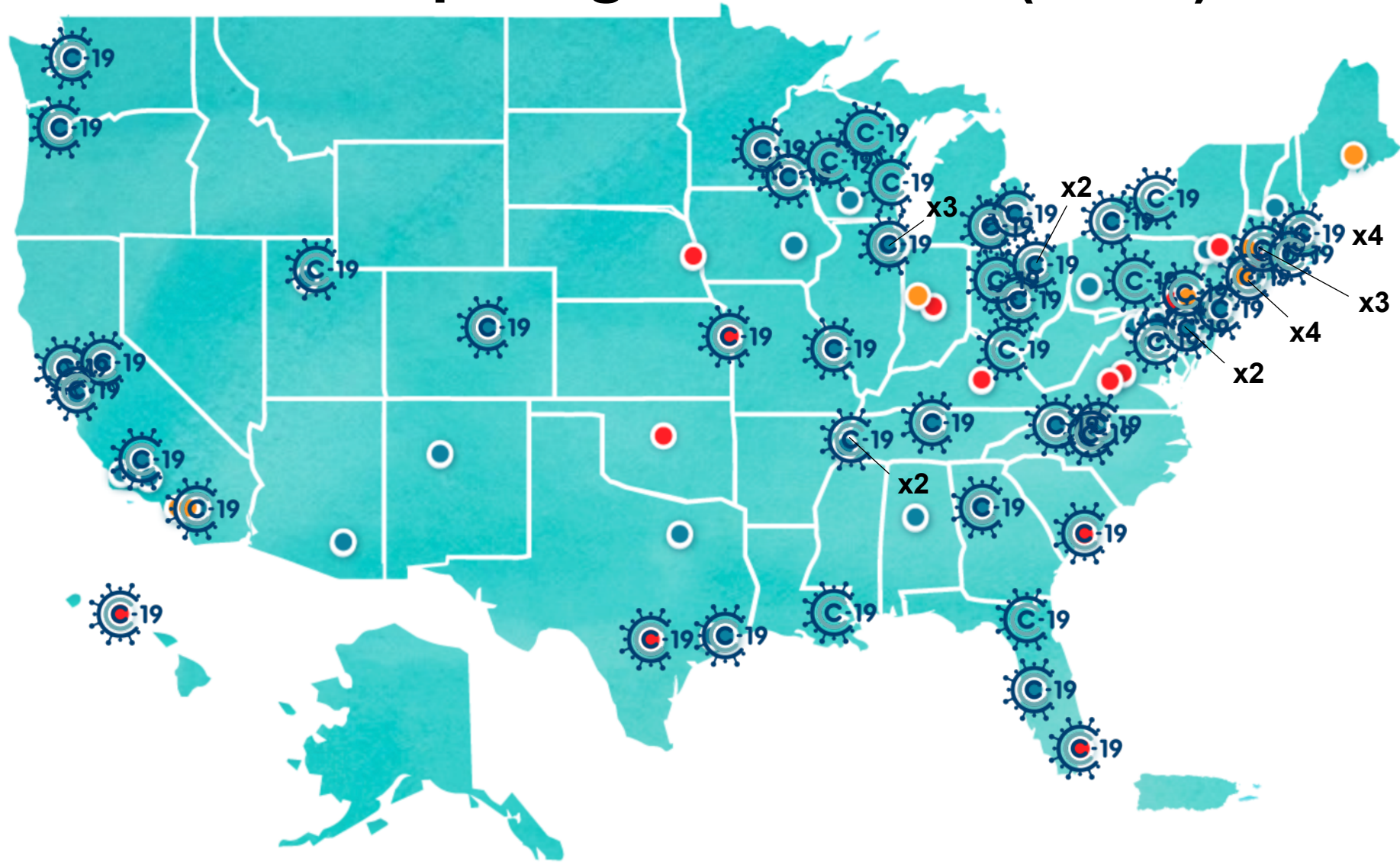
● CANCER CENTER

● COMPREHENSIVE CANCER CENTER

● BASIC LABORATORY

Participating Institutions (N=62)

April 3rd



 CANCER CENTER

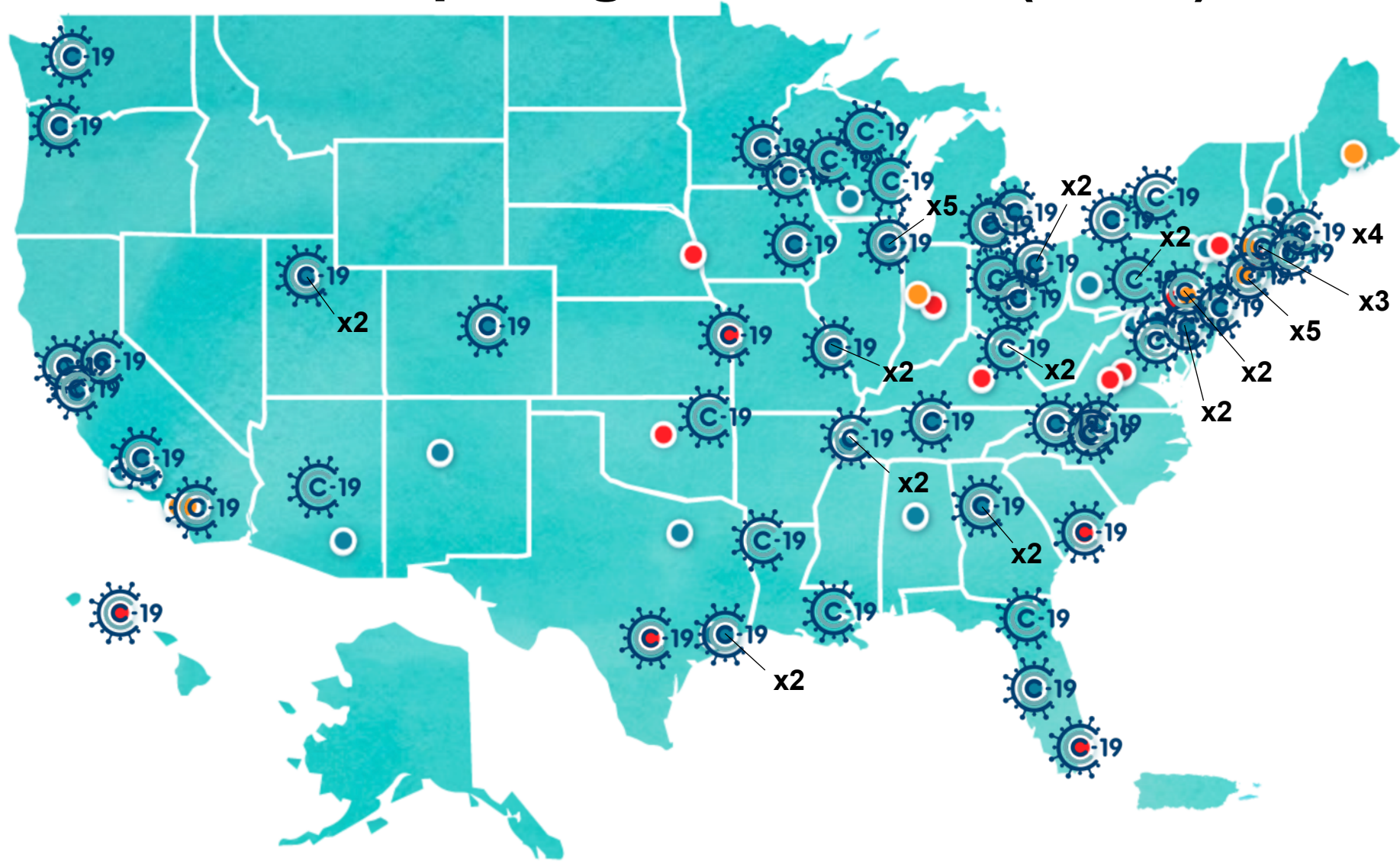
 COMPREHENSIVE CANCER CENTER

 BASIC LABORATORY

Adapted from NCI

Participating Institutions (N=72)

April 7th



 **CANCER CENTER**

 **COMPREHENSIVE CANCER CENTER**

 **BASIC LABORATORY**

Steering Committee

Jeremy L. Warner, MD, MS, FAMIA,
FASCO



(Vanderbilt University Medical Center/Vanderbilt-Ingram
Cancer Center)

Brian I. Rini, MD, FACP, FASCO



(Vanderbilt University Medical Center/Vanderbilt-Ingram
Cancer Center)

Gary H. Lyman, MD, MPH, FASCO,
FRCP



(University of Washington/Seattle Cancer Care
Alliance/Fred Hutch)

Corrie A. Painter, PhD



Count Me In

Nicole M. Kuderer, MD



(University of Washington/Seattle Cancer Care
Alliance/Fred Hutch)

Petros Grivas, MD, PhD



(University of Washington/Seattle Cancer Care
Alliance/Fred Hutch)

Mike Thompson, MD, PhD, FASCO



(Aurora Health Care)

Solange Peters, MD, PhD



Lausanne/ESMO

Gilberto de Lima Lopes Jr., MD, MBA,
FAMS, FASCO



(University of Miami/Sylvester Comprehensive Cancer
Center)

Toni Choueiri, MD



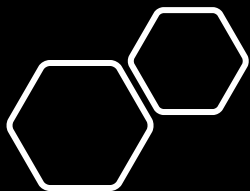
Harvard Medical School, Dana Farber Cancer
Institute

Dimpy P. Shah, Ph.D



University of Texas Health San Antonio MD
Anderson, Mays Cancer Center





Mission Statement



The driving goal of the consortium is to collect prospective, granular, uniformly organized information on cancer patients infected with COVID-19 at scale and as rapidly as possible.



**We have a very large and
active community of users
for an electronic data
capture system called**



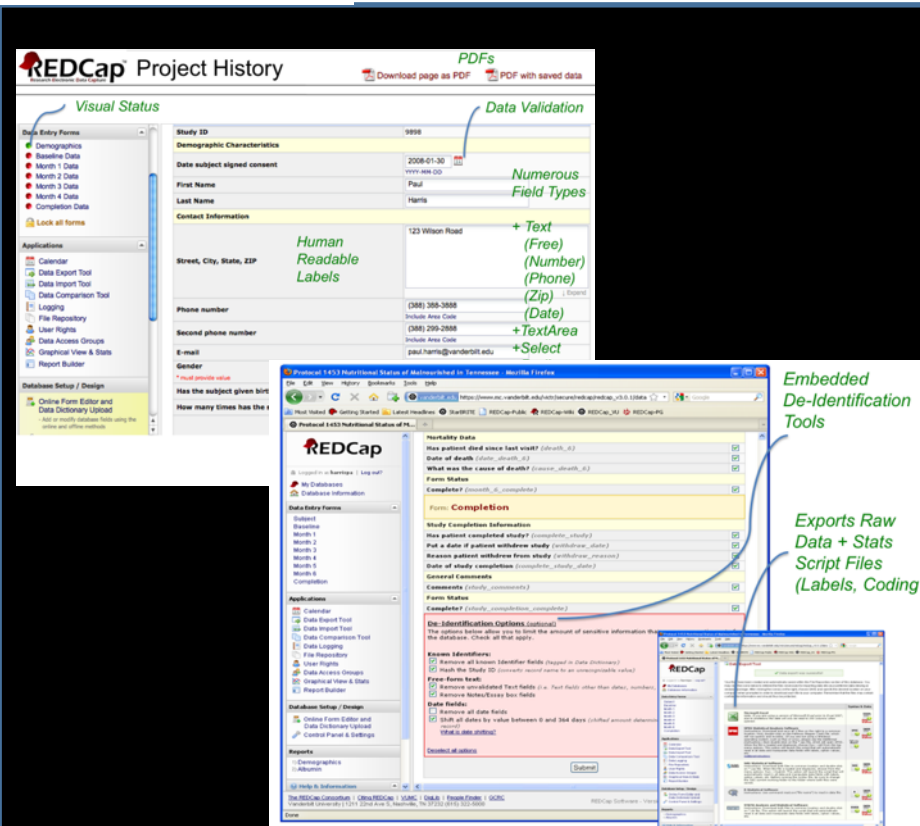


Map of REDCap Consortium Partners



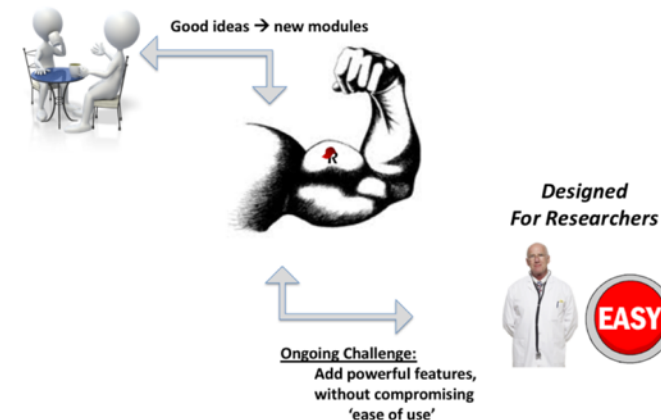
Summary:

- Data Planning (“easy way to do the right thing” with data capture, management, audits, security)
- Data Collection (researcher, provider, participant, patient)
- Data Export (all major statistical packages)
- Data Import (file or via API)
- Data Integration (API services)
- Consortium-wide REDCap library of shared instruments (e.g. validated scales, PROs)
- Consortium-wide repository of REDCap “plugins” to extend user interface and functionality
- Offline App Version (iOS, Android)
- Text/Audio/Video capabilities
- Multi-modal (web, SMS, phone)
- RCT features – randomization, data query workflow
- Document Repository
- E-consent (new)
- MyCap Integration (new)
- **EHR Interoperability - via FHIR (new)**



The screenshot displays the REDCap Project History interface. It includes a sidebar with navigation options like 'Visual Status', 'Data Validation', 'Human Readable Labels', and 'Embedded De-identification Tools'. The main area shows a table of project history with columns for Study ID, Date subject signed consent, First Name, Last Name, Contact Information, and Phone number. Annotations highlight specific features: 'Visual Status' for the sidebar, 'Data Validation' for the top right, 'Human Readable Labels' for the contact information, 'Embedded De-identification Tools' for the bottom right, and 'Exports Raw Data + Stats Script Files (Labels, Coding)' for the bottom left.

User-Driven Development/Prioritization



REDCap Survey – current status

COVID-19 and Cancer Consortium (CCC19) Registry v2

[Project Home](#) [Project Setup](#) [Online Designer](#) [Data Dictionary](#) [Codebook](#)

[Create snapshot of instruments](#)

[VIDEO: How to use this page](#)

Last snapshot: never [?](#)

The Online Designer will allow you to make project modifications to fields and data collection instruments very easily using only your web browser. NOTE: While in development status, all field changes will take effect immediately in real time.

Data Collection Instruments		Survey options:		Add new instrument:		
		Survey Queue	Survey Login	Create	a new instrument from scratch	
		Survey Notifications		Import	a new instrument from the official REDCap Shared Library ?	
		Upload or download Auto Invitations		Upload	instrument ZIP file from another project/user or external libraries ?	
Instrument name		Fields	View PDF	Enabled as survey	Instrument actions	Survey-related options
Screening form		12			Choose action	Survey settings + Automated Invitations
Patient Demographics		86			Choose action	Survey settings + Automated Invitations
COVID-19 details		71			Choose action	Survey settings + Automated Invitations
Cancer details		42			Choose action	Survey settings + Automated Invitations
Respondent details		7			Choose action	Survey settings + Automated Invitations
Follow-up		49			Choose action	Survey settings + Automated Invitations



Steph Duda
TY!!!!!!!!!!!!

Data Collection Schema

Patient Demographics and Predisposing Conditions

- Age, gender, race/ethnicity
- ECOG
- Smoking status
- Surgical and medical history
- Concomitant medications

COVID-19 Initial Course of Illness

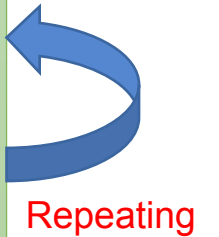
- Timing
- Presenting symptoms
- Presenting labs
- Diagnostic testing
- Initial severity of illness
- Co-infections
- Complications
- Treatments including trials
- Clinical status

Cancer Details

- Cancer type, stage, status
- Treatment details: recency, modality, context, irAEs
- Transplant & cellular therapy details
- History of cardiopulmonary toxic treatment

COVID-19 follow-up & Outcomes

- Interval severity of illness
- Co-infections
- Complications
- Treatments including trials
- Interval clinical status
- Final status
- Effects on anti-cancer treatment plans



Mapping to standards from (almost) the get-go

Terminology bindings

Encoding	Number of variables
ATC	12
HemOnc	8
NAACCR	1
NCIT	2
PHIN VADS	2
SNOMED	16
Y/N/UNK	30
Direct entry	41
Custom	57

Mapping to standards from (almost) the get-go

Field Label

☒ Use the Rich Text Editor ?

Paragraph

B *I*

Significant comorbidities.

Check all that apply. If you do not know specific diagnoses, ok to choose the "NOS" categories (e.g., Pulmonary disease, NOS).

Immune suppression is defined as outpatient use of prednisone (10mg/d or greater), use of chemotherapy, use of vasopressor,

Choices (one choice per line) [Copy existing choices](#)

38013005, Immune suppression (see definition)
19829001, Pulmonary disease, NOS
195967001, Asthma
13645005, COPD/Emphysema
78275009, Obstructive sleep apnea
59282003, Pulmonary embolism
84004001, Radiation pneumonitis

[How do I manually code the choices?](#)

Action Tags / Field Annotation (optional)

Terminology: SNOMED

Field Label

☒ Use the Rich Text Editor ?

Paragraph

B *I*

Which anticoagulants were used? [Check all that apply.](#)

Choices (one choice per line) [Copy existing choices](#)

B01AA, Vitamin K antagonists (e.g., warfarin)
B01AB, Low-molecular weight heparin (LMWH)
B01AB01, Unfractionated heparin
B01AE, Direct thrombin inhibitors (e.g., argatroban)
B01AF, Direct factor Xa inhibitors (e.g., apixaban)
B01AX05, Fondaparinux
UNK, Unknown

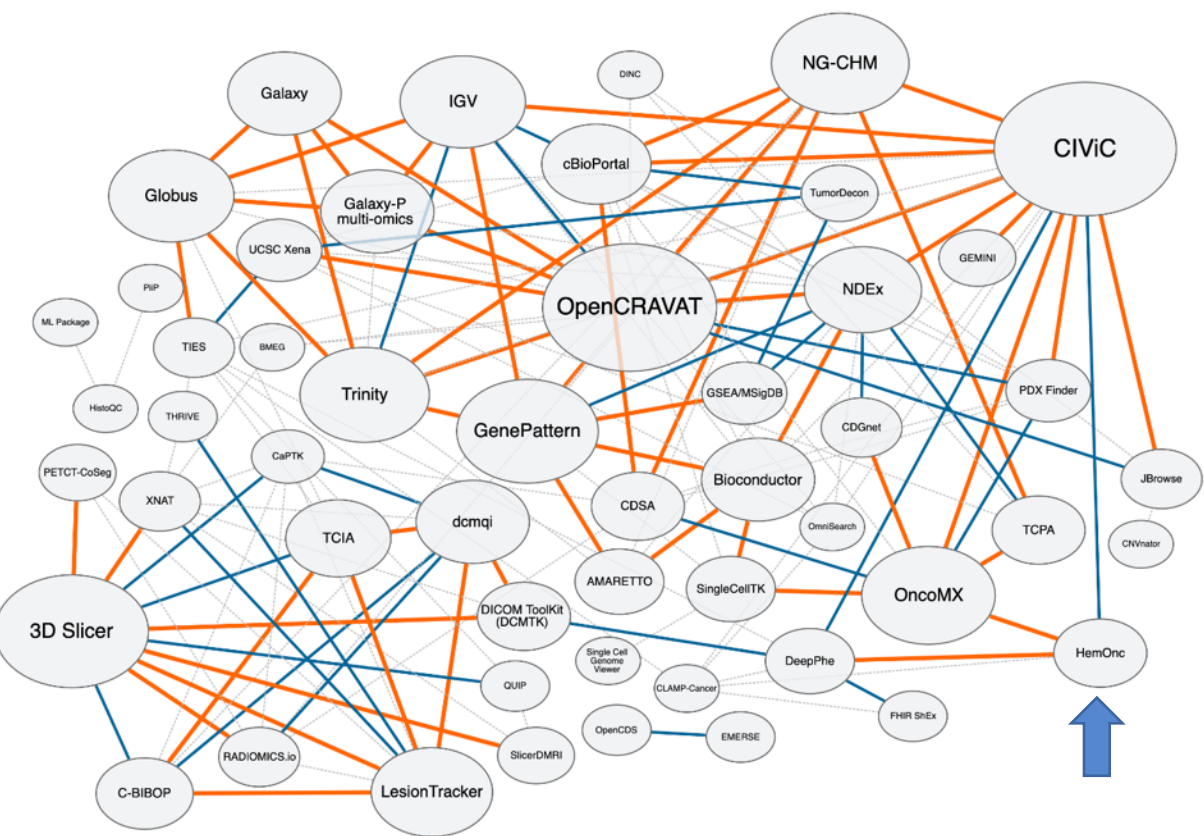
[How do I manually code the choices?](#)

Action Tags / Field Annotation (optional)

Terminology: ATC

Learn about **@ Action Tags** or [using Field Annotation](#)

Shameless plug for HemOnc (U01 CA231840)



<https://hemonc.org/wiki/Ontology>

Field Label

Use the Rich Text Editor ?

Paragraph

B

I

A

↶

↷

Anti-cancer treatment modality. Check all that apply. For example, if a patient is receiving concurrent chemoradiation, check cytotoxic chemotherapy and radiotherapy.

Choices (one choice per line) [Copy existing choices](#)

685, Cytotoxic chemotherapy

694, Immunotherapy

58229, Targeted therapy

691, Endocrine therapy

695, Radiotherapy

14051, Surgery

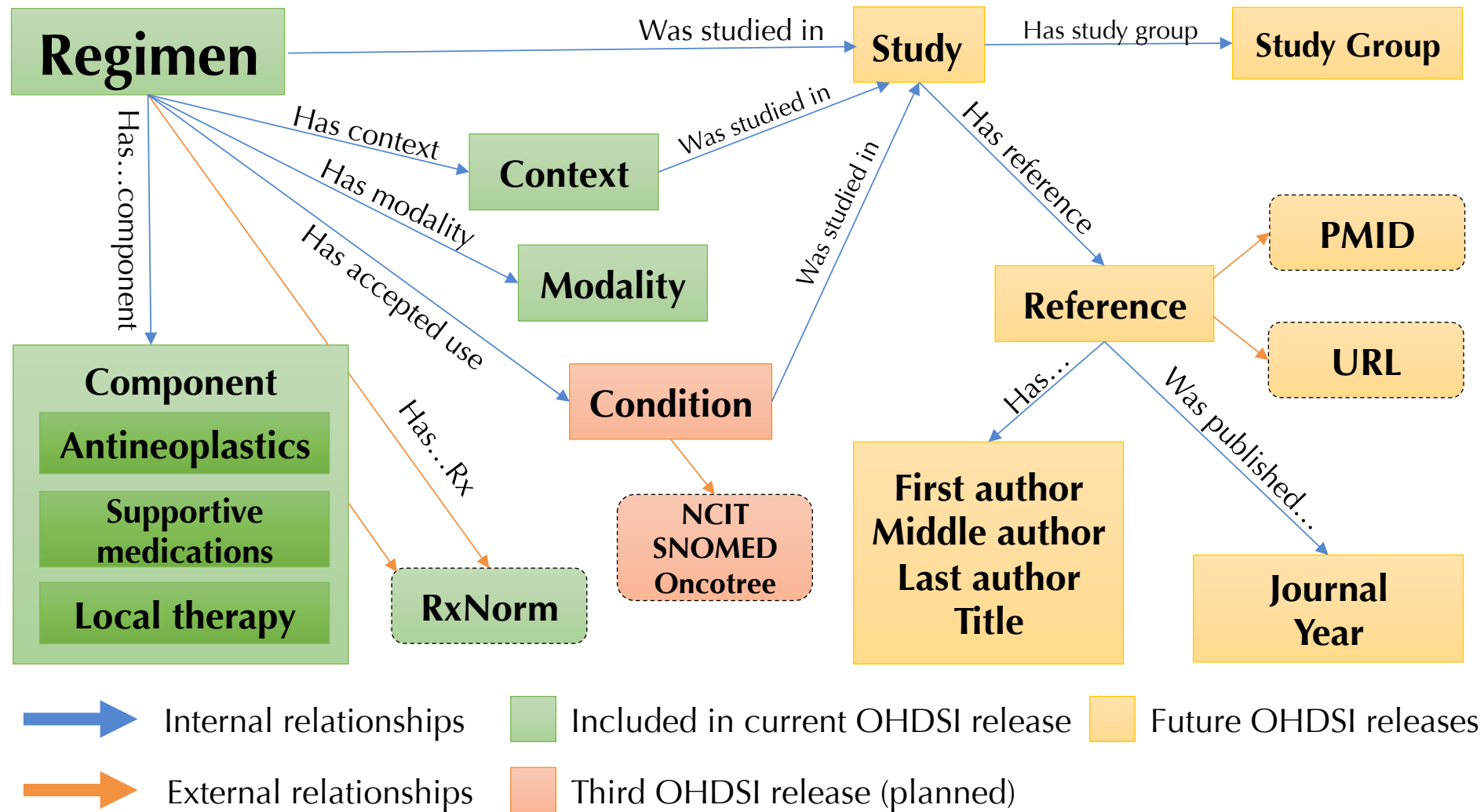
45186, Transplant/Cellular therapy

[How do I manually code the choices?](#)

Action Tags / Field Annotation (optional)

Terminology: HemOnc

Learn about @ Action Tags or [using Field Annotation](#)



HemOnc Regimen Model (simplified)



Episodes

- **Disease and treatment abstractions** are modeled as episodes
- **Disease abstractions include:** first occurrence, remissions, relapses, and end of life event.
- **Treatment abstractions include:** treatment course, treatment regimen, and treatment cycle.
- These **abstractions may be derived** algorithmically pre- or post-ETL or extracted from the source data directly.
 - In addition to the regular OMOP type concept ID, we propose to store **references to the derivation algorithms** in the vocabulary.



Advantages of Using Episodes

- Supports levels of abstraction that are **clinically** and **analytically relevant**
- Supports **explicit connection between a disease/treatment abstraction** and **lower level events** (conditions, procedures, drugs) that are linked to this abstraction
- **Persists provenance of episode derivation** (e.g. directly from source data, algorithmically)
- Is **generalisable** to:
 - abstraction of **other chronic diseases**
 - Representation of **episode of care**



EPISODE and EPISODE EVENT Tables

Field	Required	Type	Description
episode_id	yes	integer	A unique identifier for each Episode.
person_id	yes	integer	A foreign key identifier to the Person who is undergoing the Episode. The demographic details of that Person are stored in the PERSON table.
episode_concept_id	yes	integer	A foreign key that refers to a standard Episode Concept identifier in the Standardized Vocabularies. Examples of an Episode Concept can be: Treatment Regimen, Treatment Cycle, Disease First Occurrence, Remission, Relapse, Episode of Care
episode_start_datetime	yes	date	The date and time on which the Episode was started.
episode_end_datetime	yes	date	The date and time on which the Episode was ended.
episode_parent_id	no	integer	A foreign key that refers to a parent Episode entry representing an entire episode if the episode spans multiple cycles.
episode_number	no	integer	An ordinal count for an Episode that spans multiple times
episode_object_concept_id	yes	integer	A foreign key that refers to a concept identifier in the Standardized Vocabularies describing disease, treatment, or other abstraction that the episode describes. For example, 'Breast Carcinoma' or 'Chemotherapy'.
episode_type_concept_id	yes	integer	A foreign key that refers to a standard Episode Type Concept identifier in the Standardized Vocabularies reflecting the provenance of the episode derivation. It may reference a derivation algorithm, sources such as cancer registry, EMR, etc.
episode_source_value	no	varchar(50)	The source code for the Episode as it appears in the source data. This code is mapped to a standard episode Concept in the Standardized Vocabularies and the original code is, stored here for reference.
episode_source_concept_id	no	integer	A foreign key to a Episode Concept that refers to the code used in the source.

Field	Required	Type	Description
episode_id	yes	integer	A foreign key identifier to the Episode that the Episode Event belongs to.
event_id	Yes	integer	A foreign key identifier to the underlying event (condition, procedure, measurement, etc.) record in a respective table for which an episode is recorded.
event_table_concept_id	yes	integer	A foreign key identifier to the standardized concept corresponding to the table (condition_occurrence, procedure_occurrence, etc.) where the underlying event is stored.



Example of a Treatment Episode record

EPISODE	
Field	Content
episode_id	9900850
person_id	John Smith
episode_concept_id	Treatment Regimen
episode_start_datetime	August 1, 1996
episode_end_datetime	November 18, 1996
episode_parent_id	
episode_number	
episode_object_concept_id	Chemotherapy Treatment
episode_type_concept_id	Cancer Registry
episode_source_value	Chemotherapy
episode_source_concept_id	C25 (NAACCR ID)

EPISODE	
Field	Content
episode_id	9900851
person_id	John Smith
episode_concept_id	Treatment Cycle
episode_start_datetime	August 1, 1996
episode_end_datetime	August 28, 1996
episode_parent_id	9900850
episode_number	1
episode_object_concept_id	Chemotherapy Treatment
episode_type_concept_id	EMR
episode_source_value	PACLITAXEL + CARBOPLATIN
episode_source_concept_id	

EPISODE	
Field	Content
episode_id	9900852
person_id	John Smith
episode_concept_id	Treatment Cycle
episode_start_datetime	October 15, 1996
episode_end_datetime	November 18, 1996
episode_parent_id	9900850
episode_number	2
episode_object_concept_id	Chemotherapy Treatment
episode_type_concept_id	EMR
episode_source_value	PACLITAXEL + CARBOPLATIN
episode_source_concept_id	

EPISODE_EVENT			
Field	Content		
episode_id	9900851	9900851	9900851
event_id	9900145	9900146	9900147
event_domain_id	drug_exposure	drug_exposure	drug_exposure

DRUG_EXPOSURE	
Field	Content
drug_exposure_id	9900145
person_id	John Smith
drug_concept_id	Cyclophosphamide
drug_exposure_start_datetime	August 1, 1996
drug_exposure_end_datetime	August 1, 1996
drug_exposure_type_concept_id	EMR
drug_exposure_source_value	Cyclophosphamide 1000 MG Injection

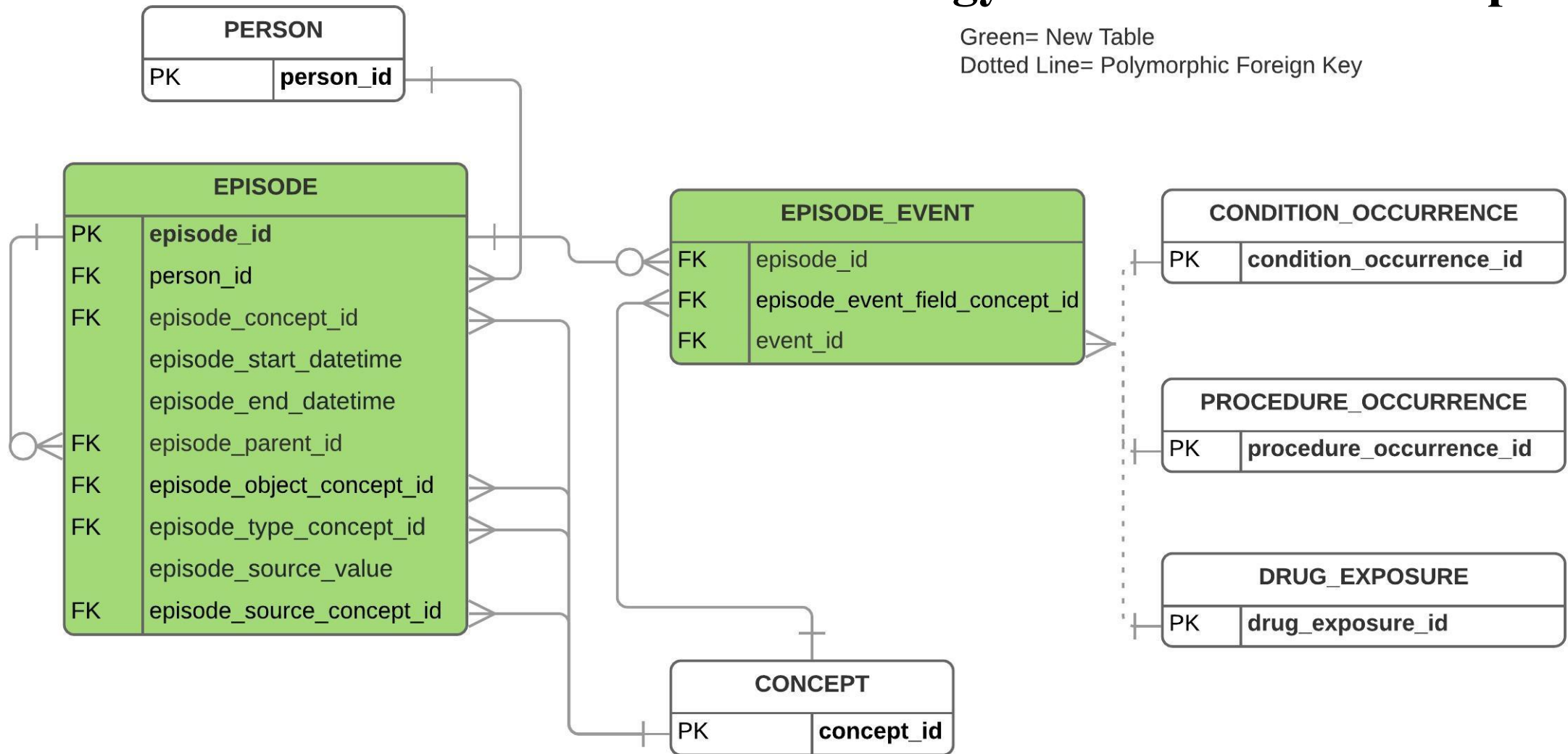
DRUG_EXPOSURE	
Field	Content
drug_exposure_id	9900146
person_id	John Smith
drug_concept_id	Doxorubicin hydrochloride
drug_exposure_start_datetime	August 4, 1996
drug_exposure_end_datetime	August 4, 1996
drug_exposure_type_concept_id	EMR
drug_exposure_source_value	Doxorubicin Hydrochloride 50 MG Injection

DRUG_EXPOSURE	
Field	Content
drug_exposure_id	9900147
person_id	John Smith
drug_concept_id	Dexamethasone acetate
drug_exposure_start_datetime	August 7, 1996
drug_exposure_end_datetime	August 7, 1996
drug_exposure_type_concept_id	EMR
drug_exposure_source_value	Dexamethasone acetate 8 MG/ML Injectable

Oncology CDM Extension Proposal

Green= New Table

Dotted Line= Polymorphic Foreign Key



<https://doi.org/10.1016/j.jbi.2019.103239>



OHDSI
OBSERVATIONAL HEALTH DATA SCIENCES AND INFORMATICS



pcorNet
The National Patient-Centered Clinical Research Network



REDCap
Research Electronic Data Capture

CDP/CDIS

Surveys are good;
EMR extracts are
better!

Acknowledgments (130+ participants)



- Aurora Health Care
- Brown University
- City of Hope
- Cleveland Clinic
- Columbia University/New York Presbyterian
- Dana-Farber Cancer Institute
- Duke University
- Einstein Medical Center
- Emory University/Winship Cancer Institute
- Fred Hutchinson Cancer Research Center/University of Washington/Seattle Cancer Care Alliance
- Gundersen Health System
- Hartford HealthCare Cancer Institute
- Houston Methodist Cancer Center
- Inova Schar Cancer Institute
- Intermountain Healthcare
- Johns Hopkins University
- Karmanos Cancer Institute
- Loyola University Medical Center
- LSU Health Sciences Center
- Massachusetts General Hospital
- Mayo Clinic, Rochester
- Mays Cancer Center at UT Health San Antonio
- MD Anderson Cancer Center
- Medical University of South Carolina/Hollings Cancer Center
- Moffitt Cancer Center
- Mount Sinai/Tisch Cancer Institute
- Northwell Health
- Northwestern University/Lurie Cancer Center
- NYU Langone Health/Perlmutter Cancer Center
- Oregon Health & Sciences University/Knight Cancer Institute
- Penn State Cancer Institute
- Roswell Park Comprehensive Cancer Center
- Rutgers Cancer Institute of New Jersey
- SSM Health Cancer Care
- Stanford University
- St. Elizabeth Healthcare
- The Ohio State University/The James
- University Hospitals, Cleveland
- University of California, Davis
- University of California, San Diego
- University of California, San Francisco
- University of Chicago
- University of Colorado Cancer Center
- University of Connecticut
- University of Kansas
- University of Maryland
- University of Miami/Sylvester Comprehensive Cancer Center
- University of Michigan/Rogel Cancer Center
- University of Minnesota/Masonic Cancer Center
- University of North Carolina/Lineberger Comprehensive Cancer Center
- University of Rochester Medical Center
- Vanderbilt University Medical Center/Vanderbilt-Ingram Cancer Center
- Washington University in St. Louis/Siteman Cancer Center
- West Cancer Center
- Yale New Haven Health/Smiley Cancer

