

CHAPTER

Characterization of Health by OHDSI AP chapter to identify Temporal Effect of the Pandemic

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Background

- The impact of COVID-19 on the healthcare system is substantial
- Resilience of healthcare system would vary across systems, regions, and countries.
- The COVID-19 pandemic can increase or decrease certain healthcare uses or conditions, but the effect would vary across time points.
- Systematic assessment of temporal pattern of healthcare use for diverse conditions is required.



Background: Previous OHDSI work

- CHARYBDIS: Characterizing Health Associated Risks, and Your Baseline Disease In SARS-COV-2
 - 1) Describe the baseline demographics, clinical characteristics, treatments, symptoms and outcomes of interest among individuals with COVID-19 overall and stratified by sex, age and specific comorbidities
 - 2) Describe characteristics and outcomes of influenza patients between
 September 2017 and April 2018 compared to the COVID-19 population

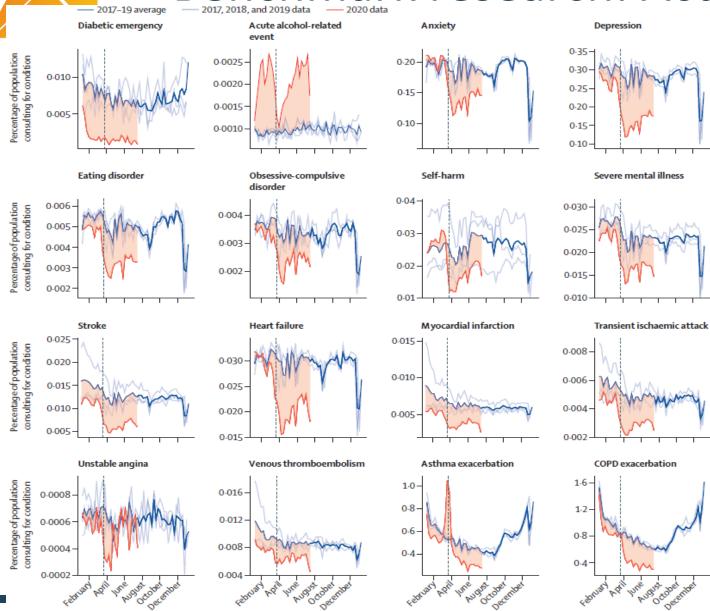


Aims

- Identification of the temporal change in healthcare use across the preand post-COVID-19 era including:
 - The incidence of certain conditions (e.g. hypertension)
 - The prevalence of certain conditions (e.g. hypertension)
 - Use of certain care/services (e.g. prescribing antihypertensive drugs)

- Identification of temporal causality between COVID-19 and epidemiological changes of target diseases
 - Does COVID-19 change the incidence, prevalence of certain conditions or treatment pattern of diseases?
 - If so, would it have an impact on future burden of healthcare system?

Benchmark research: Acute effect of COVID-19



- Data source: UK CPRD (13% of UK population)
- Method: Interrupted timeseries analysis
- Target: Condition
 - Diabetic emergency
 - Mental health conditions
 - Acute respiratory events
 - Acute cardiovascular events
 - Acute alcohol-related event



Benchmark research: Trends in the treatments for COVID-19

RESEARCH



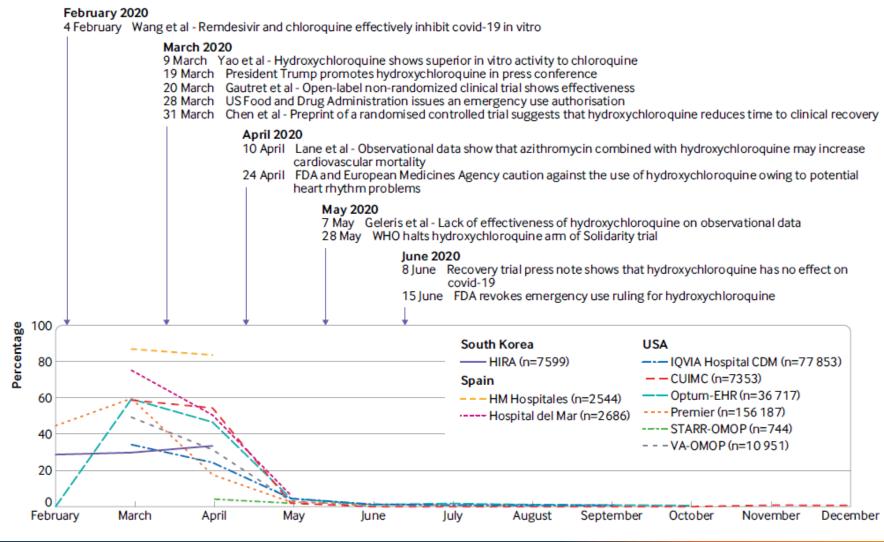


Use of repurposed and adjuvant drugs in hospital patients with covid-19: multinational network cohort study

Albert Prats-Uribe, ¹ Anthony G Sena, ^{2,3} Lana Yin Hui Lai, ⁴ Waheed-Ul-Rahman Ahmed, ^{5,6} Heba Alghoul, ⁷ Osaid Alser, ⁸ Thamir M Alshammari, ⁹ Carlos Areia, ¹⁰ William Carter, ¹¹ Paula Casajust, ¹² Dalia Dawoud, ^{13,14} Asieh Golozar, ^{15,16} Jitendra Jonnagaddala, ¹⁷ Paras P Mehta, ¹⁸ Mengchun Gong, ¹⁹ Daniel R Morales, ^{20,21} Fredrik Nyberg, ²² Jose D Posada, ²³ Martina Recalde, ^{24,25} Elena Roel, ^{24,25} Karishma Shah, ⁵ Nigam H Shah, ²³ Lisa M Schilling, ¹¹ Vignesh Subbian, ²⁶ David Vizcaya, ²⁷ Lin Zhang, ^{28,29} Ying Zhang, ¹⁹ Hong Zhu, ³⁰ Li Liu, ³⁰ Jaehyeong Cho, ³¹ Kristine E Lynch, ³² Michael E Matheny, ^{33,34} Seng Chan You, ³⁵ Peter R Rijnbeek, ³ George Hripcsak, ³⁶ Jennifer CE Lane, ⁵ Edward Burn, ^{1,24} Christian Reich, ³⁷ Marc A Suchard, ³⁸ Talita Duarte-Salles, ²⁴ Kristin Kostka, ^{37,39} Patrick B Ryan, ^{2,40} Daniel Prieto-Alhambra¹



Benchmark research: Trends in the treatments for COVID-19



- Data source: OHDSI network
- Method: Calculating numbers
- Target: treatments for COVID-19 including hydroxychloroquine



Analytic Plan

- The number of incidence, prevalence, and the counts will be aggregated for digital phenotypes (aka. Cohort) monthly before and after COVID-19
- Later, the temporal pattern can be analyzed by using statistical methods such as interrupted times series regression



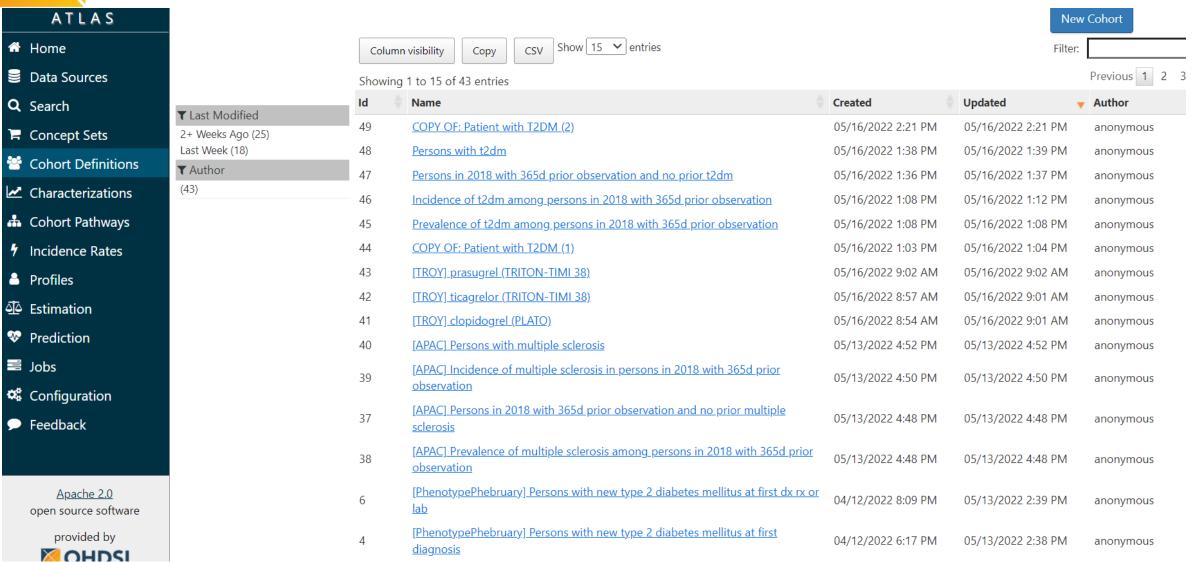
(hidden?) Aims

- Bring more researchers to OHDSI (esp. those in APAC region)
- Let them lead OHDSI studies

Chapter	Leader	Topic
Austrailia	Nicole	Residential care/Nursing home care: Visit categories
Japan	Eri Matsuki; Prof Hiramatsu	Hematologic disease
Korea	Chan; Yongjae Lee	Cardiovascular disease
Singapore	Yizhi, Mornin	Diabetes
US	Asieh	Cancer
Korea	Jaehwa Jung	Allergic disease in children



Dedicated ATLAS for this study on GCP





Heritage of Phenotype Phebruary

28 Days, 28 Phenotypes

Phenotype Phebruary

forums.ohdsi.org

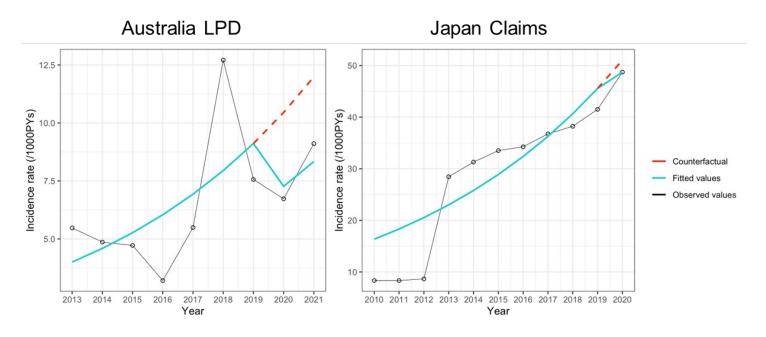
Join The Conversations!

- Feb. 1 Type 2 Diabetes Mellitus
- Feb. 2 Type 1 Diabetes Mellitus
- Feb. 3 Atrial Fibrillation
- Feb. 4 Multiple Myeloma
- Feb. 5 · Alzheimer's Disease
- Feb. 6 Hemorrhagic Events
- Feb. 7 · Neutropenia
- Feb. 8 Kidney Stones
- Feb. 9 Delirium
- Feb. 10 · Systemic Lupus Erythematosus
- Feb. 11 Suicide Attempts
- Feb. 12 Parkinson's Disease and Parkinsonism
- Feb. 13 · Attention Deficit Hyperactivity Disorder
- Feb. 14 · Hypertension (Video Description)
- Feb. 15 · Acute Myocardial Infarction
- Feb. 16 Heart Failure
- Feb. 17 Cardiomyopathy
- Feb. 18 · Multiple Sclerosis
- Feb. 19 Triple Negative Breast Cancer
- Feb. 20 Pulmonary Hypertension
- Feb. 21 Prostate Cancer
- Feb. 22 HIV
- Feb. 23 · Hidradenitis Suppurativa
- Feb. 24 · Anaphylaxis
- Feb. 25 · Depression
- Feb. 26 Non-Small-Cell Lung Cancer
- Feb. 27 <u>Drug-Induced Liver Injury</u>
- Feb. 28 · Severe Visual Impairment And Blindness
- Bonus Acute Kidney Injury



The results from the pilot study: CHAPTER-DM

led by Singaporean team (Yizhi Dong, Mornin Feng Mengling)

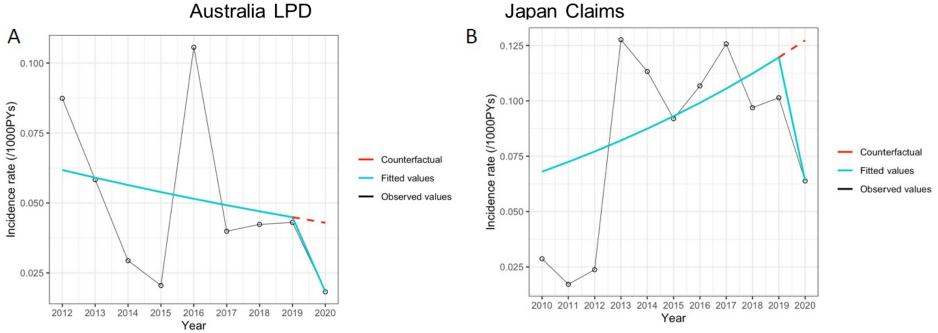


- Sharp decline in the incidence of DM in the Australia LPD in 2020
 - Less evident in the Japan claims
- Rebound of DM incidence in 2021 in the Australia LPD



The results from the pilot study: CHAPTER-Hematology

led by Japanese team (Eri Matsuki)

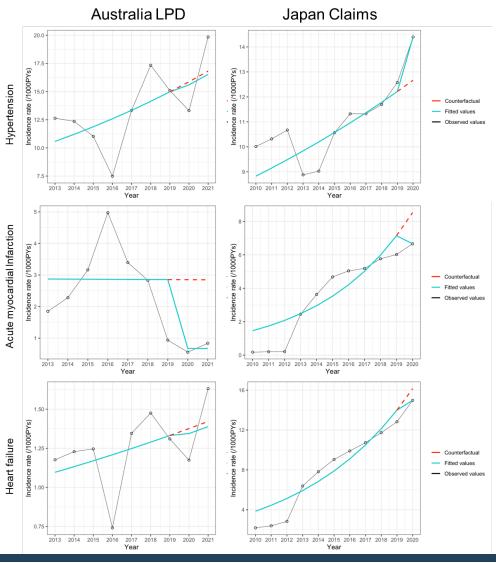


 Sharp decline in the incidence of multiple myeloma in both Australia and Japan



The results from the pilot study: CHAPTER-CVD

led by Korean team (Seng Chan You)



- Sharp decline in the incidence of hypertension, AMI, and HF in the Australia LPD in 2020
 - This trend is less evident in the Japan claims
- Rebound of incidence of cardiovascular diseases in 2021 in the Australia LPD



Plans

- Create the skeleton package for CHAPTER study
 - Based on CohortIncidence Package
 - https://github.com/OHDSI/CohortIncidence
 - Need to modify the package to calculate monthly incidence
- Bring more researchers and let them create more cohorts of interest
- Call for data partners

Thanks to the OHDSI and IQVIA team for coordinating this project



