

Reco(r)ding of Lifestyle Variables in CPRD Aurum Compared With GOLD

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BACKGROUND

- In England, many primary care practices have migrated from VISION to EMIS software. In 2017, Clinical Practice Research Datalink (CPRD) launched Aurum, incorporating some of these migrating practices from GOLD and new practices using EMIS.
- Studies using Aurum data are ongoing.^{1,2} Code lists and algorithms to define variables are being adapted from previous experience in GOLD studies.

DISCLOSURES:

RTI Health Solutions receives institutional funding for projects from public and private entities.

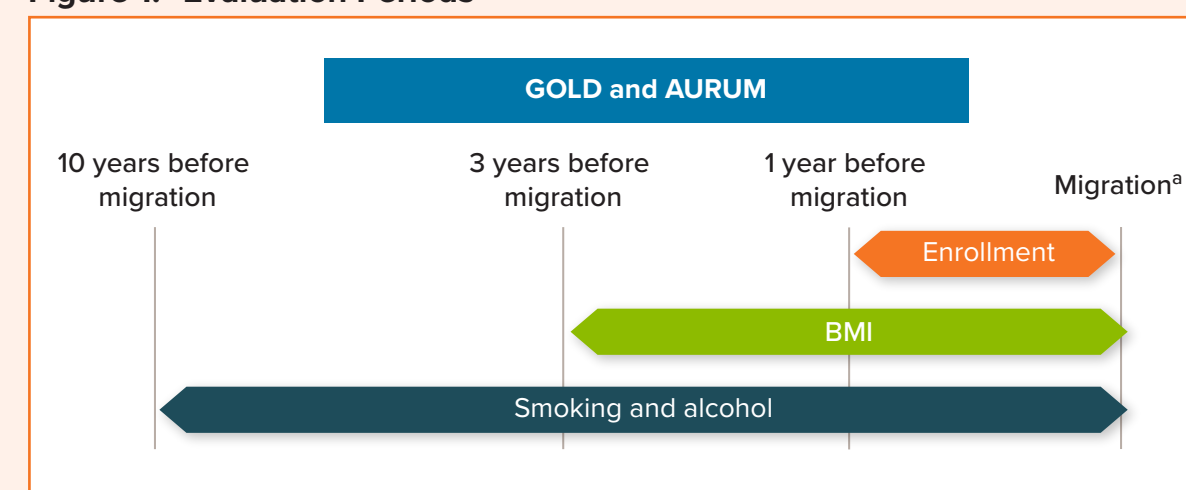
OBJECTIVE

- To compare the recording of lifestyle variables (alcohol consumption, smoking status, and body mass index [BMI]) in GOLD and Aurum before migration and check the validity of the new algorithms in Aurum.

METHODS

- Among practices migrating from GOLD to Aurum, 7 were randomly selected, and adult patients registered in the practice at least 1 year before the last collection date or migration date for GOLD were included (Figure 1).
 - Smoking status, BMI, and alcohol consumption were defined in GOLD through entity types and Read codes, and the algorithm was adapted to Aurum using SNOMED codes and values and units of measurement.
 - Smoking status was defined as current, former, never, or missing.
 - Alcohol consumption was defined as nondrinker, former drinker, low-to-moderate amount (≤ 6 units/day) drinker, high amount (≥ 7 units/day) drinker, drinker of unknown amount, or missing.
 - Body mass index was defined as underweight, normal weight, overweight, obese, or missing.

Figure 1. Evaluation Periods



^a Practices' migration date (minimum = 26 March 2014, maximum = 15 July 2018).

RESULTS

- A total of 40,196 adults in GOLD and 40,706 adults in Aurum were included in this study. The median age was 49 years, and approximately 50% of included adults were females in both data sources.
- The percentage of patients who had information on smoking status was 95.5% of patients in GOLD versus 95.6% in Aurum, for alcohol consumption was 67.9% in GOLD versus 68.4% in Aurum, and for BMI was 55.2% in GOLD versus 56% in Aurum.
- Among those patients with information, the distributions of smoking status, alcohol consumption, and BMI were very similar in GOLD compared with Aurum (Figure 2).

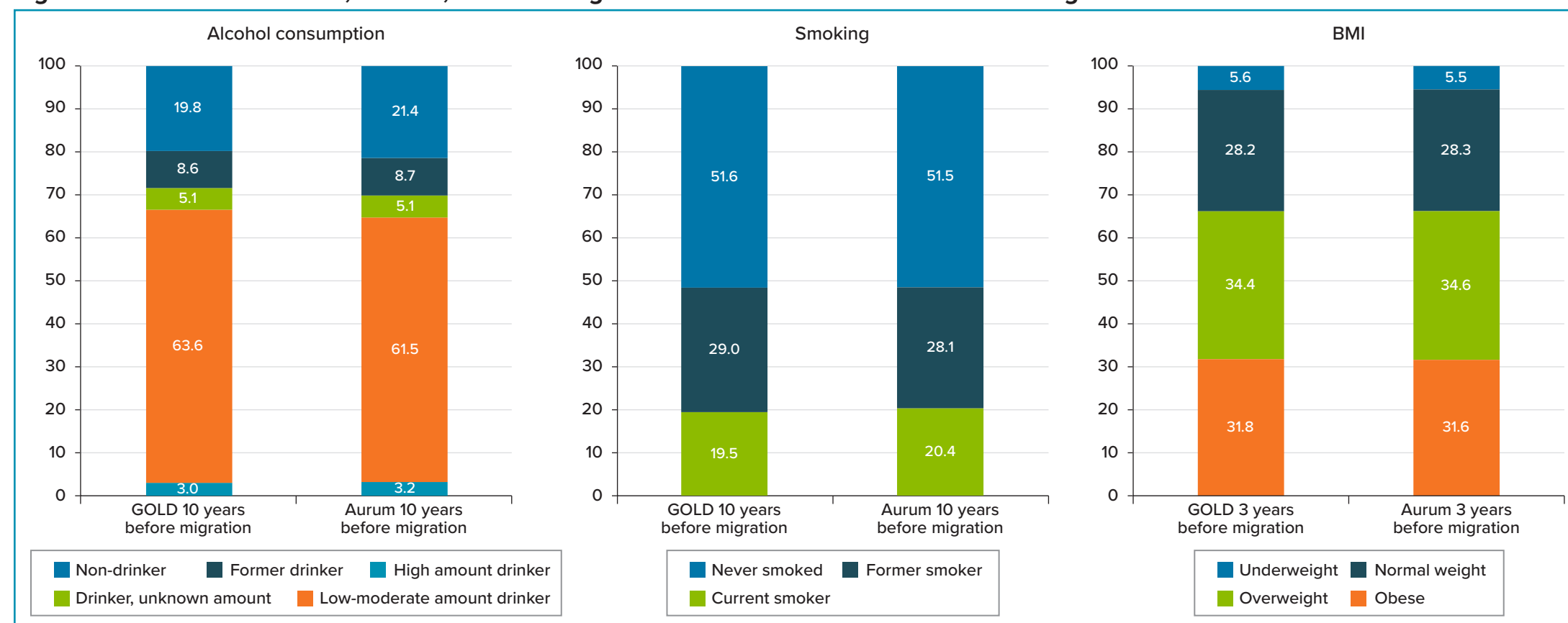
LIMITATIONS

- Comparison of lifestyle variables in Aurum before and after migration could not be performed due to the lack of follow-up data after migration.

CONCLUSIONS

- Adaptation of CPRD algorithms from GOLD to Aurum showed that the distribution of lifestyle variables in GOLD and Aurum was very similar and in line with population distribution in the United Kingdom.

Figure 2. Distributions of BMI, Alcohol, and Smoking Status in GOLD Versus Aurum Before Migration



REFERENCES

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