



The Charybdis project – use of real-world data from multiple countries and opportunities for regulatory purpose

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AGENDA

- Why CHARYBDIS?
 - Aims & Methods
 - Data sources and main outputs
 - Final remarks and opportunities for regulatory purpose
-



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Why CHARYBDIS?

COVID-19 -> new disease -> need to understand its natural history

COVID-19 Patient trajectory

Presentation
of symptoms

Tested for
COVID-19

Tested positive or
diagnosed with
COVID-19

Hospitalization

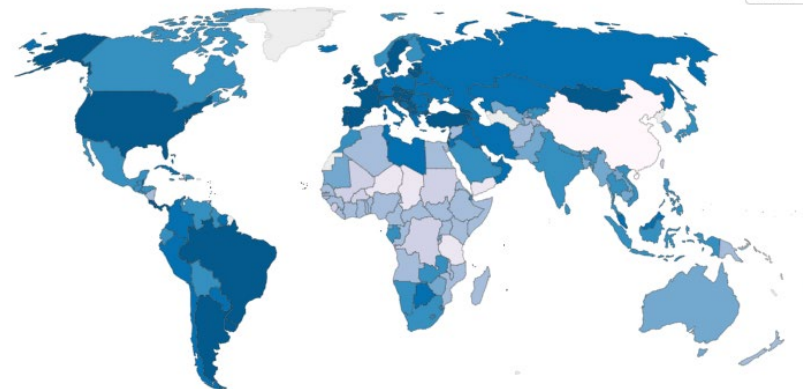
Hospitalization
requiring intensive
services

Death

Cumulative confirmed COVID-19 cases per million people, Nov 28, 2021
Due to limited testing, the number of confirmed cases is lower than the true number of infections.

Our World
in Data

World

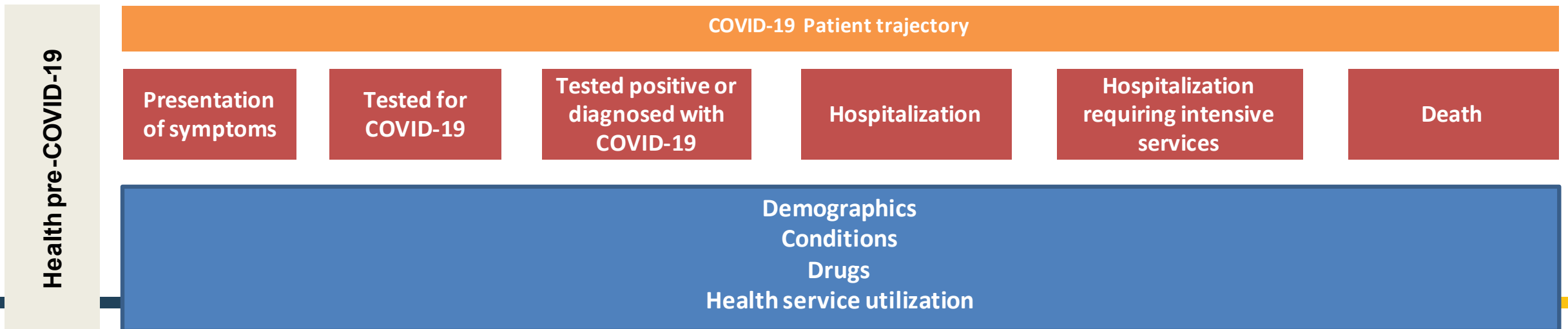


No data 0 100 500 1,000 5,000 10,000 50,000 100,000 500,000 1 million



Why CHARYBDIS?

- But many unanswered questions:
 - Who gets tested, infected and hospitalized?
 - Age and gender
 - Most frequent comorbidities
 - Treatment history
 - What are their symptoms and outcomes?
 - How different is COVID-19 from influenza?





OHDSI: a global pandemic requires a global response

OHDSI's Mission: To improve health by empowering a community to collaboratively generate the evidence that promotes better health decisions and better care



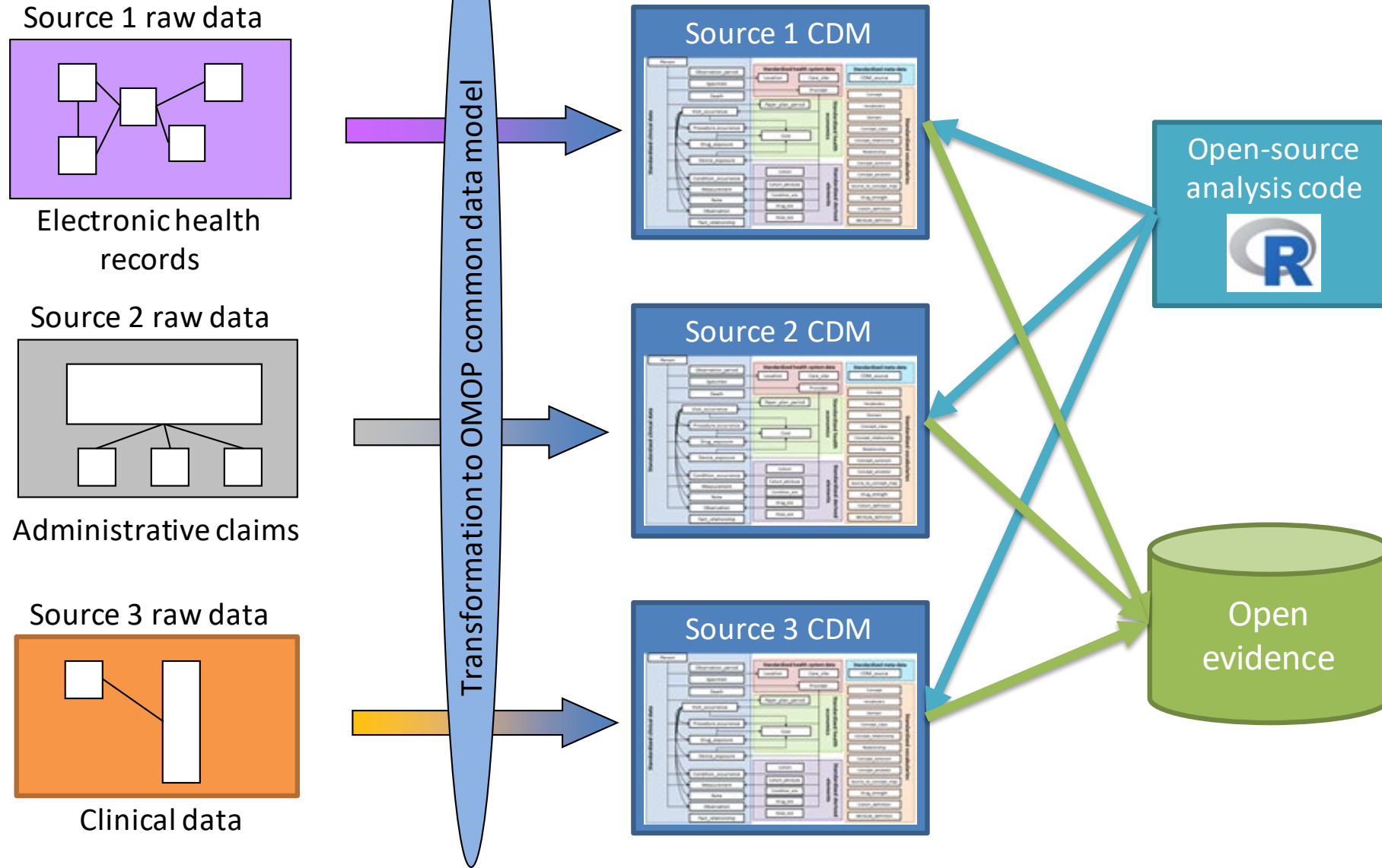
- OHDSI Collaborators:**
- 3,800 users
 - 25 workgroups
 - 152 databases
 - 18 countries
 - approx. 600M patient records

Stakeholders: academia, medical product industry, regulators, government, payers, technology providers, health systems, clinicians, patients

Disciplines: computer science, epidemiology, statistics, biomedical informatics, health policy, clinical sciences



Common data model to enable standardized analytics





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Characterizing Health Associated Risks, and Your Baseline Disease In SARS-COV-2 (CHARYBDIS)

- 1) Describe the baseline demographic, 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

FULL STUDY PROTOCOL AVAILABLE AT <https://github.com/ohdsi-studies/Covid19CharacterizationCharybdis>



CHARYBDIS – Target cohorts

COVID-19

- Persons **tested** for SARS-CoV-2
- Persons **tested positive** for SARS-CoV-2
- Persons with a **COVID-19 diagnosis** or a SARS-CoV-2 **positive test**
- Persons **hospitalized** with a COVID-19 diagnosis record or a SARS-CoV-2 positive test
- Persons hospitalized and requiring **intensive services** with a COVID-19 diagnosis record or a SARS-CoV-2 positive test

Influenza

- Persons with **Influenza** diagnosis or positive test 2017-2018
- Persons **hospitalized with influenza** diagnosis or positive test 2017-2018
- Persons hospitalized with influenza diagnosis or positive test and **requiring intensive services** 2017-2018

COHORT DEFINITIONS AVAILABLE AT:
<https://atlas.ohdsi.org/>



CHARYBDIS – Stratification factors

COVID-19 and...

- Asthma
- Cancer
- Cardiac Outcomes
- Chronic Kidney Disease
- COPD
- Elderly
- End-Stage Renal Disease
- Gender Differences
- Heart Disease
- Hepatitis C
- HIV infection
- Hypertension
- Immune Disorders
- Obesity
- Pediatrics
- Pregnant Women
- Tuberculosis
- Type 2 Diabetes
- Dementia
- Gender

... And more!

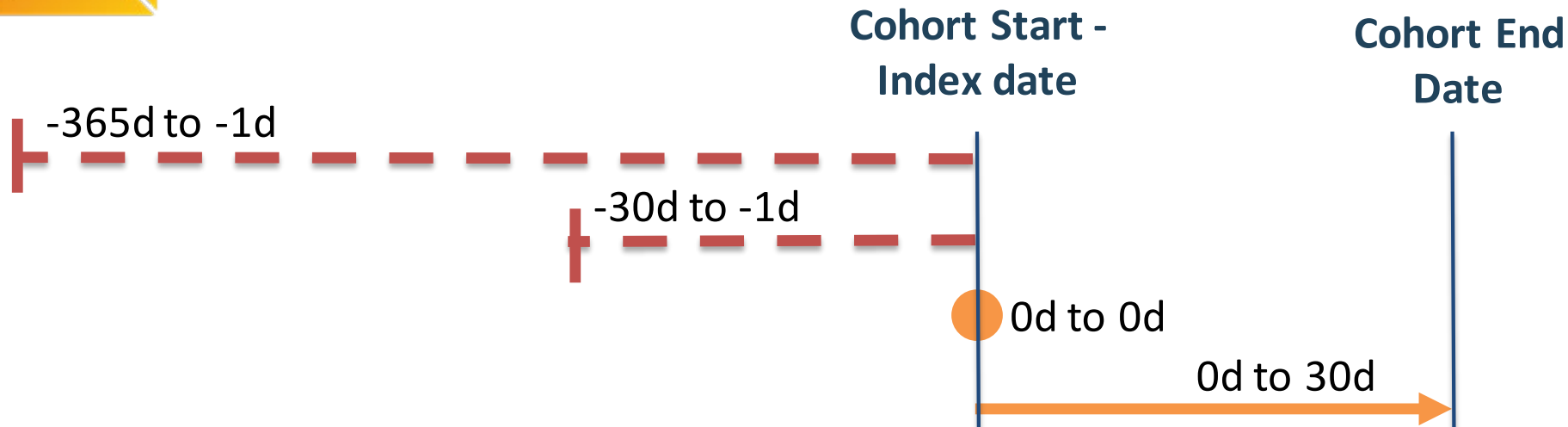


PHENOTYPE DEFINITIONS AVAILABLE AT:

<https://atlas.ohdsi.org/>



CHARYBDIS – Characterization framework



Pre-index characteristics:

- Sex
- Age group (5-year strata)
- Condition groups (SNOMED+ descendants)
- Drug groups (ATC/RxNorm + descendants)

Index and post-index characteristics:

- Condition groups (SNOMED+ descendants)
- Drug start groups (ATC/RxNorm + descendants)
- Symptoms
- Outcomes
- Procedural treatments

R package to run available at:

<https://github.com/ohdsi-studies/Covid19CharacterizationCharybdis>



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Snapshot of the CHARYBDIS Data Network



USA (13)	EUROPE (9, 6 countries)	ASIA-PACIFIC (3, 2 countries)
Columbia University (NY – EHR)	CPRD (UK – EHR)	HIRA (South Korea – Administrative Claims)
Department of Veterans Affairs (National – EHR)	IQVIA DA Germany (Germany – EHR)	DCMC (South Korea – EHR)
HealthVerity (Claims linked to diagnostic testing)	HM Hospitales (Spain – Hospital Billing)	Nanfang Hospital (China – EMR)
IQVIA Open Claims (National – Administrative Claims)	Hospital del Mar (Spain – EHR)	
IQVIA Hospital Charge Data (Hospital Billing)	IPCI (Netherlands – EHR)	
Optum EHR (National – EHR)	IQVIA LPD France (France – EHR)	
Optum SES (National – EHR linked to Socio-economic data)	IQVIA LPD Italy (Italy – EHR)	
Oregon Health 2 Sciences University (EHR)	SIDIAP (Spain – EHR)	
Premier (National – Hospital Billing)	SIDIAP-H (Spain – EHR Hospital linkage)	
Stanford University (CA – EHR)		
Tufts University (MA – EHR)		
University of Colorado Anschutz Medical Campus (CO – EHR)		
University of Washington Medicine COVID Research Dataset (WA – EHR)		



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University of Colorado Anschutz Medical Campus (CO – EHR)		
University of Washington Medicine COVID Research Dataset (WA – EHR)		

Together, OHDSI has studied:

- **>17.2m** persons tested for SAR-COV-2
- **>4.5m** persons diagnosed or tested positive for COVID-19
- **>890k** persons hospitalized with COVID-19



CHARYBDIS – Outputs

- >2,000 papers reviewed - literature review team
- 107 definitions of COVID-19 and conditions - phenotypes team
 - <https://atlas.ohdsi.org/#/cohortdefinitions>
- >100,000 variables x cohort x strata x database:
 - <https://data.ohdsi.org/Covid19CharacterizationCharybdis/>
- 16 scientific manuscripts
 - 7 papers published
 - 5 pre-prints to be published
 - 4 papers in preparation or recently submitted

<https://www.ohdsi.org/covid-19-updates/>





CHARYBDIS – Example of findings



medRxiv
THE PREPRINT SERVER FOR HEALTH SCIENCES



BMJ Yale

Deep phenotyping of 34,128 patients hospitalised with COVID-19 and a comparison with 81,596 influenza patients in America, Europe and Asia: an international network study

[Comments \(1\)](#)

Edward Burn, Seng Chan You, Anthony G. Sena, Kristin Kostka, Hamed Abedtash, Maria Tereza F. Abrahão, Amanda Alberga, Heba Alghoul, Osaid Alser, Thamer M Alshammari, Maria Aragon, Carlos Areia, Juan M. Banda, Jaehyeong Cho, Aedin C Culhane, Alexander Davydov, Frank J DeFalco, Talita Duarte-Salles, Scott DuVall, Thomas Falconer, Sergio Fernandez-Bertolin, Weihua Gao, Asieh Golozar, Jill Hardin, George Hripcsak, Vojtech Huser, Hokyun Jeon, Yonghua Jing, Chi Young Jung, Benjamin Skov Kaas-Hansen, Denys Kaduk, Seamus Kent, Yeesuk Kim, Spyros Kolovos, Jennifer C.E. Lane, Hyejin Lee, Kristine E Lynch, Rupa Makadia, Michael E. Matheny, Paras P. Mehta, Daniel R. Morales, Karthik Natarajan, Fredrik Nyberg, Anna Ostropolets, Rae Woong Park, Jimyung Park, Jose D. Posada, Albert Prats-Uribe, Gowtham Rao, Christian Reich, Yeunsook Rho, Peter Rijnbeek, Lisa M. Schilling, Martijn Schuemie, Nigam H. Shah, Azza Shoaibi, Seokyoung Song, Matthew Spotnitz, Marc A. Suchard, Joel N. Swerdel, David Vizcaya, Salvatore Volpe, Haini Wen, Andrew E. Williams, Belay B. Yimer, Lin Zhang, Oleg Zhuk, Daniel Prieto-Alhambra, Patrick Ryan
doi: <https://doi.org/10.1101/2020.04.22.20074336>

Posted on June 28, 2020

Article | [Open Access](#) | Published: 06 October 2020

Deep phenotyping of 34,128 adult patients hospitalised with COVID-19 in an international network study

Edward Burn, Seng Chan You, [...] Patrick Ryan

Nature Communications 11, Article number: 5009 (2020) | [Cite this article](#)

17k Accesses | 16 Citations | 456 Altmetric | [Metrics](#)

- COVID-19 is no flu
 - Healthier
 - Younger
 - Less history of medicines
 - Worse outcomes





CHARYBDIS – Example of findings



medRxiv



Cold Spring Harbor Laboratory

BMJ Yale

THE PREPRINT SERVER FOR HEALTH SCIENCES

[Comment on this paper](#)

Heterogeneity and temporal variation in the management of COVID-19: a multinational drug utilization study including 71,921 hospitalized patients from China, South Korea, Spain, and the United States of America

Albert Prats-Urbe, Anthony G. Sena, Lana Yin Hui Lai, Waheed-Ul-Rahman Ahmed, Heba Alghoul, Osaid Alser, Thamir M Alshammari, Carlos Areia, William Carter, Paula Casajust, Dalia Dawoud, Asieh Golozar, Jitendra Jonnagaddala, Paras P. Mehta, Mengchun Gong, Daniel R. Morales, Fredrik Nyberg, Jose D. Posada, Martina Recalde, Elena Roel, Karishma Shah, Nigam H. Shah, Lisa M. Schilling, Vignesh Subbian, David Vizcaya, Andrew Williams, Lin Zhang, Ying Zhang, Hong Zhu, Li Liu, Peter Rijnbeek, George Hripcsak, Jennifer CE Lane, Edward Burn, Christian Reich, Marc A. Suchard, Talita Duarte-Salles, Kristin Kostka, Patrick Ryan, Daniel Prieto-Alhambra

doi: <https://doi.org/10.1101/2020.09.15.20195545>

Posted on September 28, 2020

thebmj

covid-19

Research

Education

News & Views

Campaign

Research

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

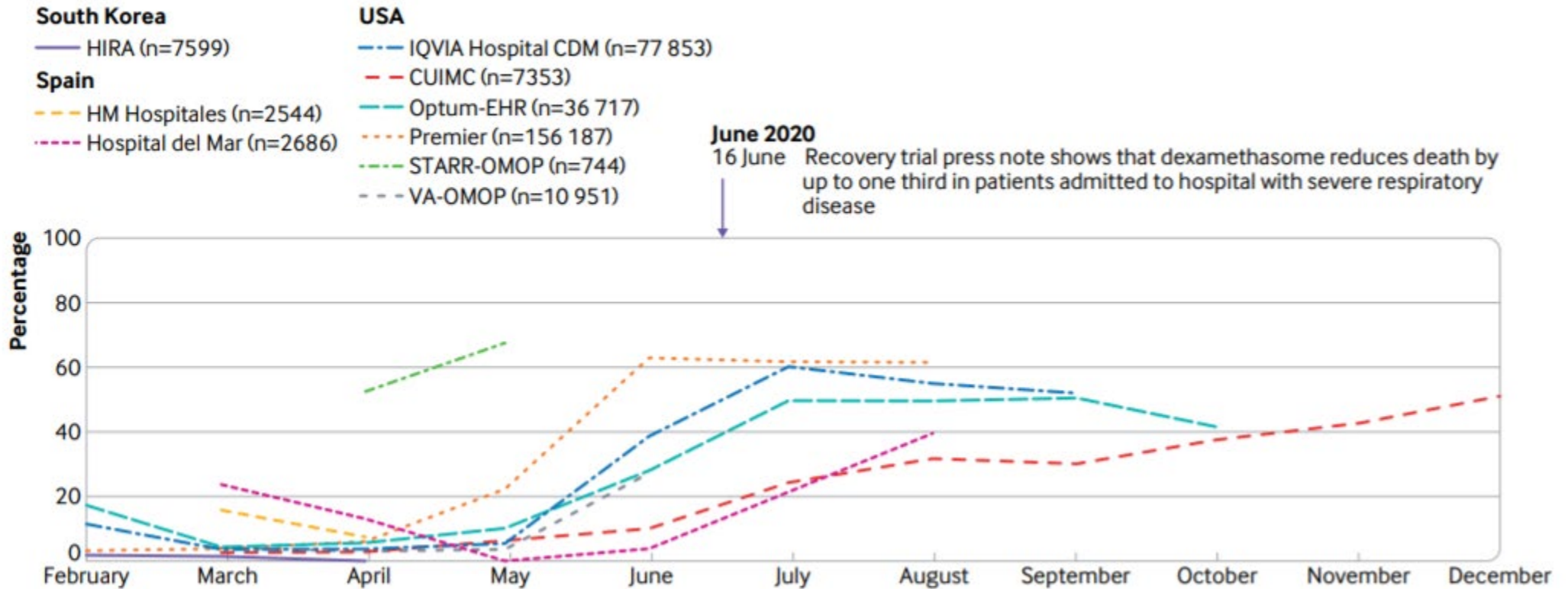
BMJ 2021 ; 373 doi: <https://doi.org/10.1136/bmj.n1038> (Published 11 May 2021)

Cite this as: BMJ 2021;373:n1038

- Geographical and temporal variation
- Hydroxychloroquine, azithromycin, lopinavir-ritonavir, and umifenovir -> most prescribed repurposed drugs
- Antithrombotics, antibiotics, H2 receptor antagonists, and corticosteroids -> most used adjunctive treatments.



The rise and fall of drugs for COVID-19 treatment - dexamethasone





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CHARYBDIS – Final remarks and opportunities for regulatory purpose

- Need of a global community to face a global problem
 - We were able to create the biggest COVID-19 Data Network in the world, and
 - to provide reliable and timely evidence to inform the pandemic
- Importance of leadership and international collaboration in science
 - 11 study leads, 130 co-authors, 25 data partners, hundreds of calls
- Value of the use of a common data model in RWD to provide comprehensive, valid and reliable evidence
 - Large sample size
 - Speed and quality
 - Heterogeneity of settings and data



CHARYBDIS – Final remarks and opportunities for regulatory purpose

- Open collaboration requires full transparency

- The project was approved by local ethics committees
- Protocol and analysis code: <https://github.com/ohdsi-studies/Covid19CharacterizationCharybdis>
- Phenotype definitions: <https://atlas.ohdsi.org/>
- Results (interactive R shiny application): <http://data.ohdsi.org/Covid19CharacterizationCHARYBDIS/>
- Manuscripts published as pre-prints while awaiting peer-review

➔ Generation of reliable and reproducible evidence

