# European registry and network for intoxication type metabolic diseases

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## Administrative details

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#### PURI

https://redirect.ema.europa.eu/resource/46312

#### Data source ID

46312

#### Data source acronym

E-IMD

#### Data holder

European registry and network for Intoxication type Metabolic Diseases (E-IMD)

#### Data source type

Disease registry

Other

#### Data source type, other

Post-authorisation safety studies (PASS) database

#### Main financial support

European public funding

#### **Care setting**

Hospital inpatient care Hospital outpatient care Primary care – specialist level (e.g. paediatricians) Secondary care – specialist level (ambulatory)

#### **Data source qualification**

If the data source has successfully undergone a formal qualification process (e.g., from the EMA, ISO or other certifications), this should be described.

No

#### Data source website

https://www.eimd-registry.org/

## **Contact details**

Stefan Kölker

Main

stefan.koelker@med.uni-heidelberg.de

### Data source regions and languages

#### **Data source countries**

Austria

Belgium

Croatia

Czechia

Denmark

France

Germany

Hungary

Italy

Netherlands

Poland

Portugal

Spain

Switzerland

Taiwan

United Kingdom

**United States** 

#### **Data source languages**

English

## Data source establishment

#### Data source established

14/06/2011

#### Data source time span

**First collection:** 14/06/2011

The date when data started to be collected or extracted.

## **Publications**

## Data source publications

Early prediction of phenotypic severity in Citrullinemia Type 1

From genotype to phenotype: Early prediction of disease severity in argininosuccinic aciduria

Networking Across Borders for Individuals with Organic Acidurias and Urea Cycle Disorders: The E-IMD Consortium

The phenotypic spectrum of organic acidurias and urea cycle disorders. Part 1: the initial presentation

The phenotypic spectrum of organic acidurias and urea cycle disorders. Part 2: the evolving clinical phenotype

## Studies

# List of studies that have been conducted using the data source

Survey on the collection of data on adverse events related to medicinal products through registries

Analysis of patients with arginase 1 deficiency treated with Loargys in standard clinical care enrolled in a European, non-interventional, multicentre registry

A European, non-interventional, multicentre, registry-based post-authorisation safety study to evaluate the long-term safety of Loargys treatment in arginase 1 deficiency patients in standard clinical care

## Data elements collected

The data source contains the following information

#### **Disease information**

Does the data source collect information with a focus on a specific disease? This might be a patient registry or other similar initiatives.

Yes

#### **Disease details (other)**

Organic acidurias: Methylmalonic aciduria, Propionic aciduria, Isovaleric aciduria, Glutaric aciduria type 1 Urea cycle defects: N-Acetylglutamate synthase deficiency, Carbamylphosphate synthetase 1 deficiency, Ornithine transcarbamylase deficiency, Citrullinemia type 1 / Argininosuccinate synthetase deficiency, Argininosuccinate lyase deficiency, Arginase 1 deficiency, Hyperornithinemia-hyperammonemia-homocitrullinuria (HHH) syndrome / mitochondrial ornithine transporter 1 deficiency

#### **Rare diseases**

Are rare diseases captured? In the European Union a rare disease is one that affects no more than 5 people in 10,000.

Yes

#### **Pregnancy and/or neonates**

Does the data source collect information on pregnant women and/or neonatal subpopulation (under 28 days of age)?

Yes

#### Hospital admission and/or discharge

Yes

#### **ICU** admission

Is information on intensive care unit admission available?

Yes

#### **Cause of death**

Captured

#### Cause of death vocabulary

ICD-10

#### **Prescriptions of medicines**

Captured

#### **Dispensing of medicines**

Not Captured

#### Advanced therapy medicinal products (ATMP)

Is information on advanced therapy medicinal products included? A medicinal product for human use that is either a gene therapy medicinal product, a somatic cell therapy product or a tissue engineered products as defined in Regulation (EC) No 1394/2007 [Reg (EC) No 1394/2007 Art 1(1)].

No

#### Contraception

Is information on the use of any type of contraception (oral, injectable, devices etc.) available?

Yes

#### Indication for use

Does the data source capture information on the therapeutic indication for the use of medicinal products?

Captured

#### Indication vocabulary

ICD-10

**Medical devices** 

Is information on medicinal devices (e.g., pens, syringes, inhalers) available?

Yes

#### Administration of vaccines

Yes

#### Procedures

Does the data source capture information on procedures (e.g., diagnostic tests, therapeutic, surgical interventions)?

#### Captured

#### **Procedures vocabulary**

ICD-10

#### Healthcare provider

Is information on the person providing healthcare (e.g., physician, pharmacist, specialist) available? The healthcare provider refers to individual health professionals or a health facility organisation licensed to provide health care diagnosis and treatment services including medication, surgery and medical devices.

Yes

#### **Clinical measurements**

Is information on clinical measurements (e.g., BMI, blood pressure, height) available?

Yes

#### **Genetic data**

Are data related to genotyping, genome sequencing available?

Captured

#### Genetic data vocabulary

Other

#### Genetic data vocabulary, other

Not coded (free text)

#### **Biomarker data**

Does the data source capture biomarker information? The term "biomarker" refers to a broad subcategory of medical signs ( objective indications of medical state observed from outside the patient), which can be measured accurately and reproducibly. For example, haematological assays, infectious disease markers or metabolomic biomarkers.

Captured

#### **Biomarker data vocabulary**

Other

#### Biomarker vocabulary, other

Not coded (free text)

#### **Patient-reported outcomes**

Is information on patient-reported outcomes (e.g., quality of life) available?

Yes

#### **Patient-generated data**

Is patient-generated information (e.g., from wearable devices) available?

No

#### Units of healthcare utilisation

Are units of healthcare utilisation (e.g., number of visits to GP per year, number of hospital days) available or can they be derived? Units of healthcare utilisation refer to the quantification of the use of services for the purpose of preventing or curing health problems.

No

#### Unique identifier for persons

Are patients uniquely identified in the data source?

Yes

#### **Diagnostic codes**

Captured

#### Diagnosis / medical event vocabulary

ICD-10

#### **Medicinal product information**

Captured

#### Medicinal product information collected

Active ingredient(s)

Dosage regime

Dose

Route of administration

#### **Medicinal product vocabulary**

Not coded (Free text)

#### **Quality of life measurements**

Captured

#### **Quality of life measurements vocabulary**

other

WHOQOL

#### Quality of life measurements, other

PedsQoL

#### Lifestyle factors

Not Captured

#### Sociodemographic information

Captured

#### Sociodemographic information collected

Age Country of origin Education level Ethnicity Gender Marital status

Socioeconomic status

## Quantitative descriptors

## Population Qualitative Data

#### Population age groups

Paediatric Population (< 18 years) Preterm newborn infants (0 – 27 days) Term newborn infants (0 – 27 days) Infants and toddlers (28 days – 23 months) Children (2 to < 12 years) Adolescents (12 to < 18 years) Adults (18 to < 46 years) Adults (46 to < 65 years) Elderly (≥ 65 years) Adults (65 to < 75 years) Adults (75 to < 85 years) Adults (85 years and over)

## Estimated percentage of the population covered by the data source in the catchment area

We estimate 89.6% of the population in 28 EU MS according to Eurostat 2013 (see also doi: 10.1007/8904 2015 408)

### Description of the population covered by the data source in the catchment area whose data are not collected (e.g., people who are registered only for private care)

Regional sub-set - E-IMD members are metabolic specialist centres with varying degrees of coverage of the respective countries.

## Family linkage

#### Family linkage available in the data source permanently or can be created on an ad hoc basis

Permanently

#### Family linkage available between the following persons

Father-child Mother-child Sibling

## Population

#### **Population size**

1435

#### Active population size

1435

## Population by age group

Age group	Population size	Active population size
Paediatric Population (< 18 years)	1046	1046
Preterm newborn infants (0 – 27 days)	19	19
Term newborn infants (0 – 27 days)	19	19
Infants and toddlers (28 days – 23 months)	132	132
Children (2 to < 12 years)	603	603
Adolescents (12 to < 18 years)	292	292
Adults (18 to < 46 years)	361	361
Adults (46 to < 65 years)	22	22
Elderly (≥ 65 years)	6	6
Adults (65 to < 75 years)	3	3
Adults (75 to < 85 years)	3	3
Adults (85 years and over)	0	0

## Median observation time

## Median time (years) between first and last available records for unique individuals captured in the data source

4.96

Median time (years) between first and last available records for unique active individuals (alive and currently registered) capt

4.96

## Data flows and management

## Access and validation

#### **Biospecimen access**

Are biospecimens available in the data source (e.g., tissue samples)?

No

#### Access to subject details

Can individual patients/practitioners/practices included in the data source be contacted?

Yes

#### **Description of data collection**

Observational clinical data from regular patient care is entered into a webbased registry.

## Event triggering registration

#### Event triggering registration of a person in the data source

Other

#### Event triggering registration of a person in the data source, other

Enrollment by the treating health care provider. Patient has to be affected by target disease and sign an informed consent (parents/legal guardians in case of underage patients).

Event triggering de-registration of a person in the data source Death Loss to follow up Other

#### Event triggering de-registration of a person in the data source, other

Patient withdrawing consent.

#### Event triggering creation of a record in the data source

Visist are created according to the regular follow-up of a patient as decided by the treating physician.

## Data source linkage

#### Linkage

Is the data source described created by the linkage of other data sources (prelinked data source) and/or can the data source be linked to other data source on an ad-hoc basis?

Yes

#### Linkage description, possible linkage

In case of UCDC the linkage strategy was deterministic since the samples are strictly geographically seperated. In case of E-HOD / U-IMD the process would be deterministic due to overlapping consortia with local ID code lists.

## Linked data sources

#### Pre linked

Is the data source described created by the linkage of other data sources?

No

#### Data source, other

Data source could in principle be linked to other data sources, provided a linkage mechanism (e.g. Spider) exists and is legally and technically feasible. The data source was succesfully merged to the UCDC dataset (doi: 10.1002/jimd.12031). Data source can also be merged with E-HOD (https://www.ehod-registry.org/) and U-IMD (https://u-imd-registry.org/). Other data source would need previous evaluation.

#### Linkage strategy

Deterministic

#### Linkage variable

Personal identifier.

#### Linkage completeness

Complete for the above mentioned.

# Data management specifications that apply for the data source

#### Data source refresh

Yearly

#### Informed consent for use of data for research

Required for all studies

#### Possibility of data validation

Can validity of the data in the data source be verified (e.g., access to original medical charts)?

Yes

#### **Data source preservation**

Are records preserved in the data source indefinitely?

No

#### Data source preservation length (years)

10 years

#### **Approval for publication**

Is an approval needed for publishing the results of a study using the data source?

Yes

#### Data source last refresh

30/05/2023

## Common Data Model (CDM) mapping

#### **CDM** mapping

Has the data source been converted (ETL-ed) to a common data model?

Yes

#### **CDM Mappings**

EU CDE

#### Data source ETL specifications (link)

https://eu-rd-platform.jrc.ec.europa.eu/set-of-common-data-elements\_en

#### CDM name (other)

ICD10 Codes