

IQVIA Medical Research Data - OMOP

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Data source

Human

Primary care medical records

Administrative details

Administrative details

Data source ID

1111143

Data source acronym

IMRD

Data holder

[IQVIA](#)

Data source type

Primary care medical records

Main financial support

Funding by own institution

Funding from industry or contract research

Care setting

Primary care – GP, community pharmacist level

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.iqvia.com/solutions/real-world-evidence/real-world-data-and-insights>

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Data source regions and languages

Data source countries

United Kingdom

United Kingdom (Northern Ireland)

Data source languages

English

Data source establishment

Data source established

01/01/1990

Data source time span

First collection: 01/01/1990

The date when data started to be collected or extracted.

Publications

Data source publications

[Rates of Antipsychotic Drug Prescribing Among People Living With Dementia During the COVID-19 Pandemic. AMA Psychiatry. 2023 Mar 1;80\(3\):211-219.](#)

[Can We Rely on Results From IQVIA Medical Research Data UK Converted to the Observational Medical Outcome Partnership Common Data Model?: A Validation Study Based on Prescribing Codeine in Children. Clin Pharmacol Ther. 2020 Apr;107\(4\):915-925.](#)

[Comparative Effectiveness and Safety Between Apixaban, Dabigatran, Edoxaban, and Rivaroxaban Among Patients With Atrial Fibrillation: A Multinational Population-Based Cohort Study. Ann Intern Med. 2022 Nov;175\(11\):1515-1524. doi: 10.7326/M22-0511. Epub 2022 Nov 1.](#)

Studies

List of studies that have been conducted using the data source

[Study of exposure and use patterns of alternatives to ranitidine-containing medicines in patients treated with ranitidine \(Ranitidine\)](#)

Incidence rates of morphea, systemic sclerosis and scleroderma

Incidence rates of Cutaneous T-Cell Lymphomas (CTCL) among patients with atopic dermatitis (AD)

Incidence rates of vulval ulceration following Comirnaty vaccine

Background incidence rates of Interstitial Lung Disease

Incidence rates of pemphigus and pemphigoid following COVID-19 vaccines

Incidence of phimosis and paraphimosis in patients treated with SGLT2 inhibitors

Association between exposure to GLP-1 receptor agonists and risk of suicide-related and self-harm-related events

Association between use of direct oral anticoagulants (DOACs) and increased risk of interstitial lung disease

Association between exposure to esomeprazole/omeprazole and risk of sexual dysfunction in men

Meningioma medroxyprogesterone feasibility assessment in the IDA Germany and IMRD UK databases

Drug utilisation and patient characterisation of statin usage

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.

No

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.

No

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

No

ICU admission

Is information on intensive care unit admission available?

No

Cause of death

Captured

Prescriptions of medicines

Captured

Prescriptions vocabulary

RxNorm

Dispensing of medicines

Captured

Dispensing vocabulary

other

RxNorm

Dispensing vocabulary, other

CVX

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

SNOMED

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

SNOMED

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?

No

Genetic data

Are data related to genotyping, genome sequencing available?

Not Captured

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

SNOMED, OMOP Extension, Free text

Patient-reported outcomes

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

No

Patient-generated data

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

Yes

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.

Yes

Unique identifier for persons

Are patients uniquely identified in the data source?

Yes

Diagnostic codes

Captured

Diagnosis / medical event vocabulary

SNOMED

Medicinal product information

Captured

Medicinal product information collected

Active ingredient(s)

Brand name

Route of administration

Strength

Medicinal product vocabulary

Other

RxNorm

If 'other,' what vocabulary is used?

CVX

Quality of life measurements

Captured

Quality of life measurements vocabulary

other

Quality of life measurements, other

SNOMED

Lifestyle factors

Captured

Lifestyle factors

Other

Tobacco use

Sociodemographic information

Captured

Sociodemographic information collected

Deprivation index

Ethnicity

Gender

Quantitative descriptors

Population Qualitative Data

Population age groups

Paediatric Population (< 18 years)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Elderly (\geq 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

23%

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)

General population, registered within the GP practice

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

Household

Population

Population size

5187327

Active population size

2160606

Population by age group

Age group	Population size	Active population size
Paediatric Population (< 18 years)	962340	422137

Age group	Populationsize	Active populationsize
Children (2 to < 12 years)	573100	242198
Adolescents (12 to < 18 years)	288285	157464
Adults (18 to < 46 years)	2402361	911881
Adults (46 to < 65 years)	915260	483207
Elderly (\geq 65 years)	907366	343381
Adults (65 to < 75 years)	343860	167366
Adults (75 to < 85 years)	311994	119469
Adults (85 years and over)	251512	56546

Median observation time

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

1717.00

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

2803.00

Data flows and management

Access and validation

Governance details

Documents or webpages that describe the overall governance of the data source and processes and procedures for data capture and management, data quality check and validation results (governing data access or utilisation for research purposes).

<https://www.iqvia.com/locations/united-kingdom/information-for-members-of-the-public/medical-research-data>

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?

No

Description of data collection

Non-identified patient records collected from patient management software used by GPs to document patients' clinical records

Event triggering registration

Event triggering registration of a person in the data source

Practice registration

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

Death

Emigration

Other

Practice deregistration

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

Practice transfer

Event triggering creation of a record in the data source

Physician encounter

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?

No

Data management specifications that apply for the data source

Data source refresh

Every 6 months

Informed consent for use of data for research

Not Required

Possibility of data validation

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

No

Data source preservation

Are records preserved in the data source indefinitely?

Yes

Approval for publication

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

Yes

Data source last refresh

01/12/2022

Common Data Model (CDM) mapping

CDM mapping

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

Yes

CDM Mappings**CDM name**

OMOP

CDM website

<https://www.ohdsi.org/Data-standardization/>

Data source ETL frequency

4,00 months

Data source ETL status

Completed