

# Data source heterogeneity in multi-database pharmacoepidemiologic studies: a scoping review (DIVERSE)

**First published:** 04/03/2021

**Last updated:** 02/07/2024

Study

Ongoing

## Administrative details

### PURI

<https://redirect.ema.europa.eu/resource/49419>

### EU PAS number

EUPAS39757

### Study ID

49419

### DARWIN EU® study

No

### Study countries

Italy

Netherlands

United Kingdom (Northern Ireland)

### Study description

Multi-database studies (MDS) are increasingly performed in pharmacoepidemiologic research. A MDS is as a study using at least two healthcare databases, which are not linked with each other at an individual person level, either because they cover and capture information on different individuals, or because, even if populations overlap, local regulations forbid record linkage. In a MDS, analyses are carried out in parallel across each data source applying a common study protocol. Regulatory authorities often require data

from multiple data sources to be used in a single study, to enhance the generalizability of results or to obtain sufficient sample size when the exposure and/or outcome is rare. MDS pose a number of challenges, including how to manage heterogeneity between the different included data sources. Despite calls for the implementation of strategies to improve replicability, increase transparency and reduce bias in MDS, and despite general recommendations to assess the comparability of data sources in MDS, to our knowledge, there is currently no guidance for how database heterogeneity should be evaluated or even identified and recorded. This scoping review is intended to inform the development of guidelines for the identification, collection and reporting of heterogeneity in MDS, and to identify areas for further research. This activity is the Objective 1 of the DIVERSE project, of the Database Special Interest Group of the International Society for Pharmacoepidemiology (ISPE).

## Study status

Ongoing

## Research institution and networks

### Institutions

#### Agenzia regionale di sanità della Toscana (ARS)

Italy

**First published:** 01/02/2024

Last updated

12/03/2024

Institution

EU Institution/Body/Agency

ENCePP partner

#### Division of Pharmacoepidemiology & Clinical Pharmacology (PECP), Utrecht Institute for Pharmaceutical Sciences (UIPS), Utrecht University

Netherlands

**First published:** 01/03/2010

Last updated

23/05/2024

Institution

Educational Institution

ENCePP partner

## Contact details

### Study institution contact

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Study contact

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### Primary lead investigator

Rosa Gini

Primary lead investigator

## Study timelines

### Date when funding contract was signed

Planned:

24/12/2020

Actual:

24/12/2020

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### Study start date

Planned:

01/01/2021

Actual:

01/01/2021

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### Date of final study report

Planned:

31/12/2023

## Sources of funding

- Other

## More details on funding

International Society for Pharmacoepidemiology (ISPE)

## Study protocol

[DIVERSE\\_protocol\\_v1.0.pdf](#)(280.14 KB)

## Regulatory

**Was the study required by a regulatory body?**

No

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**Is the study required by a Risk Management Plan (RMP)?**

Not applicable

## Methodological aspects

### Study type

#### Study type list

**Study type:**

Not applicable

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**Main study objective:**

To list and summarize existing tools and recommendations for the collection and reporting of heterogeneity in data sources used in MDS, in particular listing and classifying existing descriptors of such heterogeneity. A secondary objective is to describe how heterogeneity is leveraged to improve the quality of the evidence generated in a MDS and to assist its interpretation.

### Population studied

**Age groups**

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)

Adults (65 to < 75 years)

Adults (75 to < 85 years)

Adults (85 years and over)

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**Estimated number of subjects**

0

### Study design details

## Data analysis plan

Articles will be identified through searches in PubMed and Embase and by expert knowledge of relevant literature. The sensitivity of the search will be validated against a set of relevant papers identified by experts in the working group. Articles will be screened on title and abstract in duplicate using a standard screening tool and will be included if they contain recommendations or guidelines for the collection and reporting of (heterogeneity of) data sources, report tools to describe data sources or provide descriptions of multiple data sources within a network. Information will be collected from the selected articles using a data extraction tool, applied in duplicate by two independent researchers. Extracted information will be analysed in accordance with recommendations in the JBI Manual for Evidence Synthesis, and will follow the Arksey and O'Malley framework for collating and summarizing results in a narrative review. Counts of different types of articles will be provided.

## Documents

### Study, other information

[DIVERSE\\_selection\\_tool\\_fulltext\\_final\\_pdf.pdf](#)(123.13 KB)

[DIVERSE\\_selection\\_tool\\_TIAB\\_final\\_pdf.pdf](#)(93.35 KB)

[poster\\_DIVERSE\\_rev.pdf](#)(370.01 KB)

[Report on DIVERSE Task 1a2\\_v1.1.pdf](#)(1.02 MB)

[Report on DIVERSE Task 1a4\\_v1.11.pdf](#)(1.54 MB)

## Data management

## Data sources

### Data sources (types)

[Other](#)

[Published literature](#)

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### Data sources (types), other

Electronic medical literature databases: PubMed and Embase

## Use of a Common Data Model (CDM)

### CDM mapping

No

## Data quality specifications

**Check conformance**

Unknown

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**Check completeness**

Unknown

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**Check stability**

Unknown

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**Check logical consistency**

Unknown

**Data characterisation**

**Data characterisation conducted**

No