

# Belgian Cystic Fibrosis Registry

**First published:** 06/05/2024

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Data source

Human

Other

## Administrative details

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#### Data source ID

1000000123

#### Data source acronym

BCFR

#### Data holder

[Sciensano](#)

#### Data source type

Other

#### Data source type, other

Registry data

## Main financial support

National, regional, or municipal public funding

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## 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

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## Data source website

[Health Information Portal: Belgian Cystic Fibrosis Registry](#)

## Contact details

Sciensano BCFR team [Geraldine.Daneau@sciensano.be](mailto:Geraldine.Daneau@sciensano.be)

Main

[Geraldine.Daneau@sciensano.be](mailto:Geraldine.Daneau@sciensano.be)

## Data source regions and languages

### Data source countries

Belgium

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### Data source languages

Dutch

English

French

## Data source establishment

## **Data source time span**

**First collection:** 01/01/1998

The date when data started to be collected or extracted.

## **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

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### **Disease details**

Cystic fibrosis

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### **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

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

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

Yes

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### **Hospital admission and/or discharge**

No

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## ICU admission

Is information on intensive care unit admission available?

No

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## Cause of death

Not Captured

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## Prescriptions of medicines

Captured

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## Dispensing of medicines

Not Captured

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## 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)].

Yes

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## Contraception

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

No

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## Indication for use

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

Not Captured

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## Medical devices

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

Yes

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## Administration of vaccines

No

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## Procedures

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

Captured

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## 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.

No

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## Clinical measurements

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

Yes

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## Genetic data

Are data related to genotyping, genome sequencing available?

Captured

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## 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.

Not Captured

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## Patient-reported outcomes

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

No

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### **Patient-generated data**

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

No

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### **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

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### **Unique identifier for persons**

Are patients uniquely identified in the data source?

Yes

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### **Diagnostic codes**

Not Captured

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### **Medicinal product information**

Not Captured

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### **Quality of life measurements**

Not Captured

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### **Lifestyle factors**

Not Captured

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### **Sociodemographic information**

Captured

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## **Sociodemographic information collected**

Age

Education level

Gender

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)

Adult and elderly population ( $\geq 18$  years)

Adults (18 to < 65 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)

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**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)**

By collecting data on almost all the patients with CF cared for in Belgium, the Belgian Cystic Fibrosis registry (BCFR) gives a good and quite complete picture of the epidemiology of the disease and the evolution of the health status of the patients. Every year, the 7 CF reference centres collect demographic, clinical and social data from the patients they care for after having received their consent. The centres receive from Sciensano a feedback report comparing the results in their centre with those of the other centres. They can share their experiences in order to improve the quality of care in their centre. This method to optimize the care to the patients is called peer learning via benchmarking. The consolidated national results are published in an annual report.

## **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).

[Terms of data access - URL](#)

#### **Biospecimen access**

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

No

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#### **Access to subject details**



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

No

## 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

Yearly

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### Informed consent for use of data for research

Required for general use

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### Possibility of data validation

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

Yes

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### Data source preservation

Are records preserved in the data source indefinitely?

No

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### Approval for publication

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

Yes

## Common Data Model (CDM) mapping

## **CDM mapping**

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

No