Observational Pharmaco-Epidemiology Research & Analysis Cohort

First published: 25/11/2026

Last updated: 25/11/2026

Data source | Human | Primary care medical records | Specialist ambulatory care records

Administrative details

Administrative details

Data source ID

1000001114

Data source acronym

OPERA Cohort

Data holder

Epividian, Inc.

Data source type

Primary care medical records

Specialist ambulatory care records

Main financial support

Funding from industry or contract research

National, regional, or municipal public funding

Care setting

Primary care – GP, community pharmacist level

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

Description of the qualification

undefined

Data source website

www.epividian.com

Contact details

Gregory Fusco gregory.fusco@epividian.com

Main

gregory.fusco@epividian.com

Charlotte Armstrong charli.armstrong@epividian.com

Alternate

charli.armstrong@epividian.com

Data source regions and languages

Data source countries

United States

United States Minor Outlying Islands

Data source languages

English

Data source establishment

Data source established

01/10/2013

Data source time span

First collection: 01/10/2013

The date when data started to be collected or extracted.

Publications

Data source publications

Early Detection of Reverse Transcriptase Activity in Plasma of Neonates Infected With HIV-1: A Comparative Analysis With RNA-Based and DNA-Based Testing Using Polymerase Chain Reaction

Long-Term HIV/AIDS Survival Estimation in the Highly Active Antiretroviral Therapy Era

Disease progression in HIV-infected patients treated with stavudine vs. zidovudine

Predictors of trend in CD4-positive T-cell count and mortality among HIV-1-infected individuals with virological failure to all three antiretroviral-drug classes

HIV-Associated Thrombotic Microangiopathy in the Era of Highly Active Antiretroviral Therapy: An Observational Study

Effect of Persistent Moderate Viremia on Disease Progression During HIV Therapy

Estimating the proportion of patients infected with HIV who will die of comorbid diseases

Virologic Effectiveness of Abacavir/Lamivudine with Darunavir/Ritonavir Versus Other Protease Inhibitors in Treatment-Experienced HIV-Infected Patients in Clinical Practice

Psychiatric Symptoms in Patients Receiving Dolutegravir

A threshold trajectory was revealed by isolating the effects of hemoglobin rate of rise in anemia of chronic kidney disease

Studies

No information provided.

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

HIV infection

Hepatitis B

Hepatitis C

Hepatitis D

Disease details (other)

All diagnoses

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)?

No

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

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?

Not Captured

Medical devices

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

No

Administration of vaccines

Yes

Procedures

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

Captured

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

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

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.

Yes

Unique identifier for persons

Are patients uniquely identified in the data source?

Yes

Diagnostic codes

Captured

Medicinal product information

Captured

Quality of life measurements

Not Captured

Lifestyle factors

Captured

Sociodemographic information

Captured

Quantitative descriptors

Population Qualitative Data

Population age groups

Adult and elderly population (≥18 years)

Adults (18 to < 65 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)

Population

Population size

1.103.399

Active population size

441.599

Population by age group

Age group	Population size	Active population size
Adult and elderly population (≥18 years)	1.103.399	441.599

Median observation time

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

3,20

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

4,90

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

Clinical information is originally compiled into separate Clinical Health Outcomes Reporting and Utilization Service (CHORUS™) databases for each clinic. This protected health information (PHI) is used in the creation of the CHORUS™ analytics and reporting used by each practice and its providers as part of Quality Improvement activities in an effort to improve care of patients. The data collection occurs via a secure and encrypted connection as part of Epividian’s privacy and security policies and systems, which are routinely

reviewed by a third-party privacy and security advisory organisation.

Subsequently, the clinical data in each CHORUS™ database is de-identified and aggregated into the OPERA® database following the United States guidelines of the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health (HITECH) Act. Further, Epividian has received HITRUST certification. HITRUST certification is based on the HITRUST Common Security Framework (CSF), which organizations use to assess and demonstrate cybersecurity and compliance for protecting sensitive data like PHI.

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

Loss to follow up

Practice deregistration

Event triggering creation of a record in the data source

Practice registration triggers the creation of a record in the data source.

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

Monthly

Informed consent for use of data for research

Waiver

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?

Yes

Data source preservation length (years)

15 years

Approval for publication

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

Yes

Data source last refresh

09/09/2026

Common Data Model (CDM) mapping

CDM mapping

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

No