

Health Search/IQVIA Health Longitudinal Patient Database

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Data source

Primary care medical records

Administrative details

Administrative details

PURI

<https://redirect.ema.europa.eu/resource/6874>

Data source ID

6874

Data source acronym

LPD

Data holder

[IQVIA Solutions Italy srl](#)

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.healthsearch.it>

Contact details

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Data source regions and languages

Data source countries

Italy

Data source languages

Italian

Data source regions

Abruzzo

Basilicata

Calabria

Campania

Emilia-Romagna

Lazio

Liguria

Lombardia

Marche

Molise

Piemonte

Puglia

Toscana

Umbria

Veneto

Friuli Venezia Giulia

Sardegna

Sicilia

Trentino-Alto Adige
Valle d'Aosta

Data source establishment

Data source established

01/01/2004

Data source time span

First collection: 01/01/2004

The date when data started to be collected or extracted.

Publications

Data source publications

Baan EJ, de Roos EW, Engelkes M, de Ridder M, Pedersen L, Berencsi K, Prieto-Alhambra D, Lapi F, Van Dyke MK, Rijnbeek P, Brusselle GG, Verhamme KMC. Characterization of Asthma by Age of Onset: A Multi-Database Cohort Study. *J Allergy Clin Immunol Pract* . 2022 Jul;10(7):1825-1834.e8.

Vetrano DL, Zucchelli A, Onder G, Fratiglioni L, Calderón-Larrañaga A, Marengoni A, Marconi E, Cricelli I, Lora Aprile P, Bernabei R, Cricelli C, Lapi F. Frailty detection among primary care older patients through the Primary Care Frailty Index (PC-FI). *Sci Rep* . 2023 Mar 2;13(1):3543.

Lapi F, Domnich A, Marconi E, Rossi A, Cricelli C. Adjuvanted versus non-adjuvanted standard-dose influenza vaccines in preventing all-cause hospitalizations in the elderly: a cohort study with nested case-control analyses over 18 influenza seasons. *Expert Rev Vaccines*. 2022 Nov;21(11):1647-1653.

Perera G, Rijnbeek PR, Alexander M, Ansell D, Avillach P, Duarte-Salles T, Gordon MF, Lapi F, Mayer MA, Pasqua A, Pedersen L, van Der Lei J, Visser PJ, Stewart R. Vascular and metabolic risk factor differences prior to dementia diagnosis: a multidatabase case-control study using European electronic health records. *BMJ Open* . 2020 Nov 14;10(11):e038753.

Trifirò G, Mokhles MM, Dieleman JP, van Soest EM, Verhamme K, Mazzaglia G, Herings R, de Luise C, Ross D, Brusselle G, Colao A, Haverkamp W, Schade R, van Camp G, Zanettini R, Sturkenboom MC. Risk of cardiac valve regurgitation with dopamine agonist use in Parkinson's disease and hyperprolactinaemia: a multi-country, nested case-control study. *Drug Saf*. 2012 Feb 135(2):159-71

Studies

List of studies that have been conducted using the data source

A multi-database cohort study to assess the incidence rates of colorectal hyperplasia among hypertensive patients

Risk of cardiac valve disorders associated with the use of biphosphonates (Cardiac valve disorders and biphosphonate use)

Arrhythmogenic Potential of Drugs (ARITMO) project

Safety Evaluation of Adverse Reactions in Diabetes - Drug utilisation studies (SAFEGUARD)

Safety Evaluation of Adverse Reactions in Diabetes - Comparative studies (SAFEGUARD)

Identification of type 2 diabetes cases in a set of databases participating to the EMIF project

European Program of Post-Authorization Safety Studies for Protelos®/Osseor® through EU-ADR Alliance

Estimating prevalence and incidence of acute myocardial infarction in a set of heterogeneous sources of observational health data collaborating in the EMIF Platform

Multinational database cohort study to assess RMP specified safety outcomes in association with indacaterol/glycopyrronium bromide in Europe

Multinational, multi-database cohort study to assess adverse cardiovascular and cerebrovascular outcomes and mortality in association with inhaled NVA237 in Europe (NVA237 PASS)

Multinational, multi-database drug utilization study of inhaled NVA237 in Europe (NVA237 DUS)

Multinational, multi-database drug utilization study of indacaterol/glycopyrronium bromide in Europe

Safety and Incidence of Side Effects in a Cohort of Postmenopausal Women Prescribed Ospemifene Relative to Patients Diagnosed with but not Treated for Vulvar and Vaginal Atrophy (VVA) and Patients on Selective Oestrogen Receptor Modulators (SERMs) for Oestrogen-deficiency Conditions or Breast Cancer Prevention – A Post-Authorisation Safety Study

An Observational Post-Authorisation Safety Study of Lesinurad Patients (SATURATES)

Drug Utilization Study (DUS) and post authorization safety study (PASS) on the fixed combination Tramadol-Dexketoprofen (DKP-TRAM)

Post Conditional Approval Active Surveillance Study Among Individuals in Europe Receiving the Pfizer-BioNTech Coronavirus Disease 2019 (COVID-19) Vaccine

Non-interventional post-authorization multi-database safety study to characterize the risk of angioedema and other specific safety events of interest in association with use of Entresto® (sacubitril/valsartan) in adult patients with heart failure

Non-interventional post-authorization multi-database safety study to assess the risk of myotoxicity, hepatotoxicity and acute pancreatitis in statin-exposed heart failure patients with or without concomitant use of sacubitril/valsartan (Entresto®)

Immunological adverse effects of immune checkpoint inhibitors (ICIMMUN)

How many and who are patients with heart failure eligible to SGLT2 inhibitors? Responses from the combination of administrative healthcare and primary care databases

A methodology to assess the population size and estimate the needed resources for new licensed medications by combining clinical and administrative databases: The example of glycated haemoglobin in type 2 diabetes

Chronic Kidney Disease Eligible for SGLT2 Inhibitors Through the Integration of Italian Administrative and Primary Care Data

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.

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?

No

Cause of death

Captured

Cause of death vocabulary

Not coded (Free text)

Prescriptions of medicines

Captured

Prescriptions vocabulary

ATC

other

Dispensing of medicines

Not Captured

Advance 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-9-CM

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

Other

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?

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

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?

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

Diagnosis / medical event vocabulary

ICD-9-CM

Medicinal product information

Captured

Medicinal product information collected

Brand name

Formulation

Strength

Package size

Dose

Medicinal product vocabulary

ATC

AIC

Quality of life measurements

Not Captured

Lifestyle factors

Captured

Lifestyle factors

Tobacco use

Alcohol use

Frequency of exercise

Other

Sociodemographic information

Captured

Sociodemographic information collected

Age

Gender

Country of origin

Quantitative descriptors

Population Qualitative Data

Population age groups

Paediatric Population (< 18 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

Approximately 2.2-2.3% of the Italian population aged 14 years and older.

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)

LPD includes patients' records of a group of over 1000 general practitioners homogeneously distributed across Italy. Data about patients visiting paediatricians are not available as well as data on patients institutionalized in nursing homes.

Population

Population size

2581629

Active population

Active population size

1103204

Median observation time

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

11.00

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

19.00

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?

No

Description of data collection

The LPD contains data from computer-based patient records routinely collected from approximately 1000 general practitioners (GPs) homogeneously distributed across Italy and included in the Health Search Network. All the GPs are users of the same electronic health record software.

Data holder: IQVIA Solutions Italy srl & Società Italiana di Medicina Generale e delle Cure Primarie (SIMG)

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

The patient needs to visit a general practitioner included in the Health Search Network.

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

Death
Other

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

End of registration with GP, death of the GP or leaving the Health Search Network, followed by a new registration to another GP not included in the Health Search Network.

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

Other

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

Approval for publication

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

Yes

Informed consent, other

Analysis plan and aggregated results can be shared with external partner. Person-level data cannot be shared and externalized.

Data source last refresh

31/05/2023

Common Data Model (CDM) mapping

CDM mapping

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

Yes

CDM Mappings**CDM name**

OMOP

CDM website

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

Data source ETL CDM version

5.3

Data source ETL frequency

12,00 months

Data source ETL status

Completed

Data source ETL specifications (link)

<https://portal.ehden.eu/login?ref=summary>