

European Network of Cancer Registries

ENCR Workshop on Software and AI Tools for CRS Oncological clinical minimum data set and its mapping to the OMOP Common Data Model

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EURACAN registry



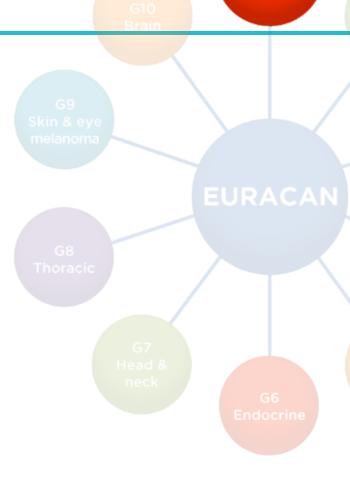
- 1. Sarcomas
- 2. Head & neck cancers
- 3. Rare thoracic cancers
- 4. Digestive rare cancers
- 5. Neuroendocrine tumours
- 6. Endocrine gland tumours
- 7. Central nervous system tumours
- 8. Rare female genital cancers
- 9. Rare urological and male genital tumours
- 10. Rare skin cancers & non-cutaneous melanoma





Minimum dataset

- ✓ To help describe the natural history
- ✓ To evaluate factors that influence prognosis (e.g. mortality, survival, progression free survival and treatment response
- ✓ To assess treatments effectiveness (systemic, radiotherapy, surgery, target therapy, immunotherapy and possible combinations)
- ✓ To measure indicators of quality of care (diagnostic and staging procedures, treatment strategies, follow-up etc.)



G1 Sarcoma





IDEA4RC



IDEA4RC Goal

To establish a **Data Space for rare cancers** that will make possible the secondary use of existing multisource health data (cancer registry data, national registries, data from biobanks etc.) across EU healthcare systems leveraging emerging interoperability technologies and AI approaches.





Observational Medical Outcomes Partnership (OMOP) Oncology Common Data Model

Open-source process

- Join the collaborative
- Propose a study to the open collaborative
- Write protocol
 http://www.ohdsi.org/web/wiki/doku.php?id=research:studies
- Code it, run it locally, debug it (minimize other's work)
- Publish it: https://github.com/ohdsi
- Each node voluntarily executes on their CDM
- Centrally share results
- Collaboratively explore results and jointly publish findings







IDEA4RC model data elements

Minimum data set

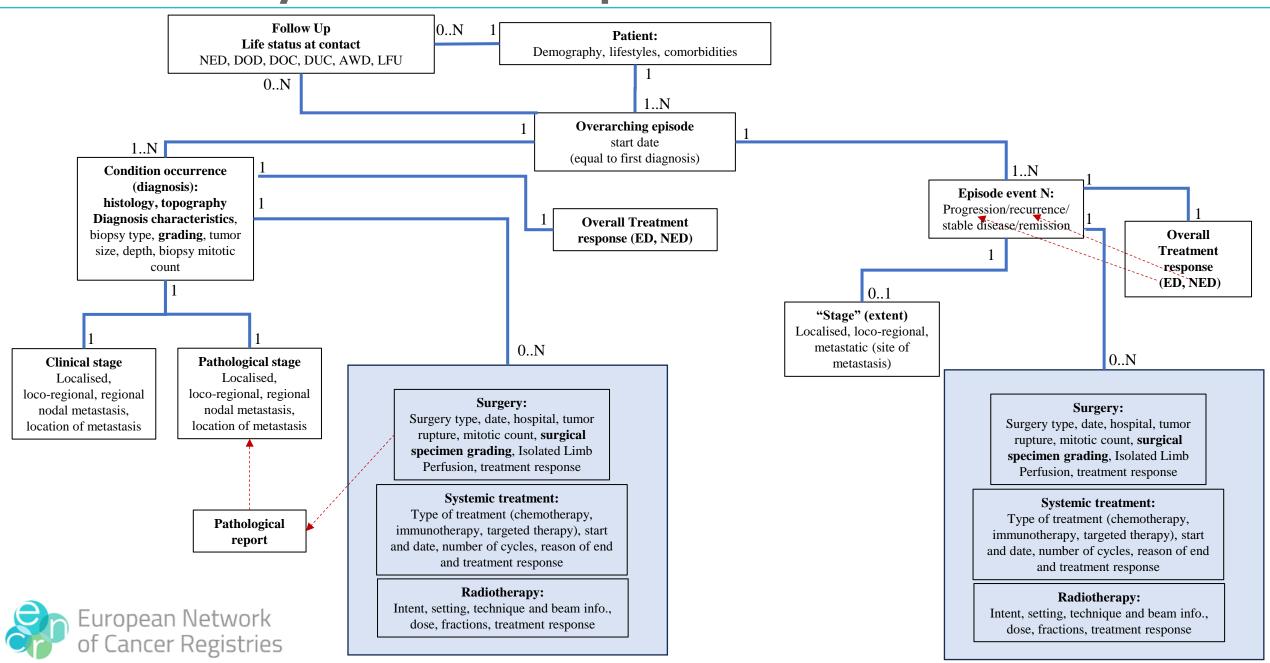
- Patient: demography, lifestyles, comorbidity, previous cancer
- Overarching episode:
 - CONDITION OCCURRENCE (diagnosis) and cancer diagnosis characteristics (histology, topography, biopsy type, grading, tumor size, depth, biopsy mitotic count)
 - CLINICAL STAGE, PATHOLOGICAL STAGE (Localised, loco-regional, regional nodal metastasis, location of metastasis)
 - CANCER TREATMENT (surgery, systemic treatment, radiotherapy) with TREATMENT RESPONSE
 - EPISODE EVENT (Progression/Recurrence/Stable disease/Remission)
- Patient Follow up with Life status at last contact







IDEA4RC Entity and Relationships Model



Minimum dataset vs OMOP

- Every variable of the minimum data set is mapped to OMOP
- Only a <u>few differences</u> in the IDEA4RC model: treatment is slightly different to enhance interoperability
- The OMOP oncology model is a <u>work in progress</u>, the OHDSI Oncology Workgroup is refining all the terminology and updating Vocabularies



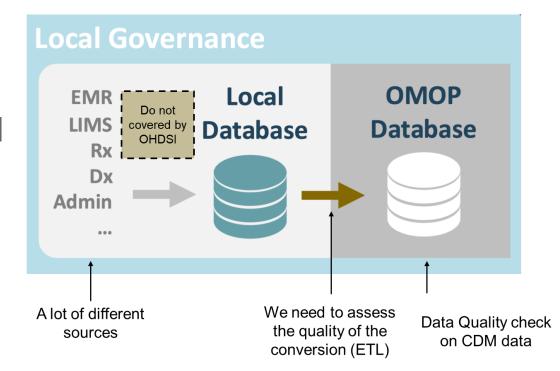






Tips and tricks with OMOP mapping

- We need a <u>repository</u> to collect concept codes not present at the moment in OMOP Vocabularies
- <u>Custom concepts</u> to input our data in the model
- <u>Data quality assessment</u> of both the source database and the OMOP one, to validate the quality of the ETL (Extract, Transform and Load) process
- Study specific data quality checks









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Thank you for your attention!



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