

## OBJECTIVE

- Develop and validate an ICD-10-CM-based algorithm to identify lymphoma with a positive predictive value (PPV) of at least 80% ( $\pm 10\%$ ) to support studies of drug safety

## BACKGROUND

- >77,000 new non-Hodgkin (NHL) and 8,400 Hodgkin lymphoma (HL) cases diagnosed in the US each year
- More than 60 histologic subtypes of lymphoma
- Lymphoma is generally diagnosed in the outpatient setting with enlarged lymph nodes as the most common symptom
- Most lymphoma cases definitively diagnosed through biopsy or flow cytometry
- Majority of cases will have imaging studies (e.g. CT, MRI, PET scans) to aid in diagnosis and determine extent of disease

## METHODS

### Data Source and Study Population

- Four Sentinel Data Partners (3 national insurers, 1 integrated healthcare system) contributed data
- Eligible participants were aged  $\geq 15$  years and enrolled for  $\geq 12$  months before diagnosis

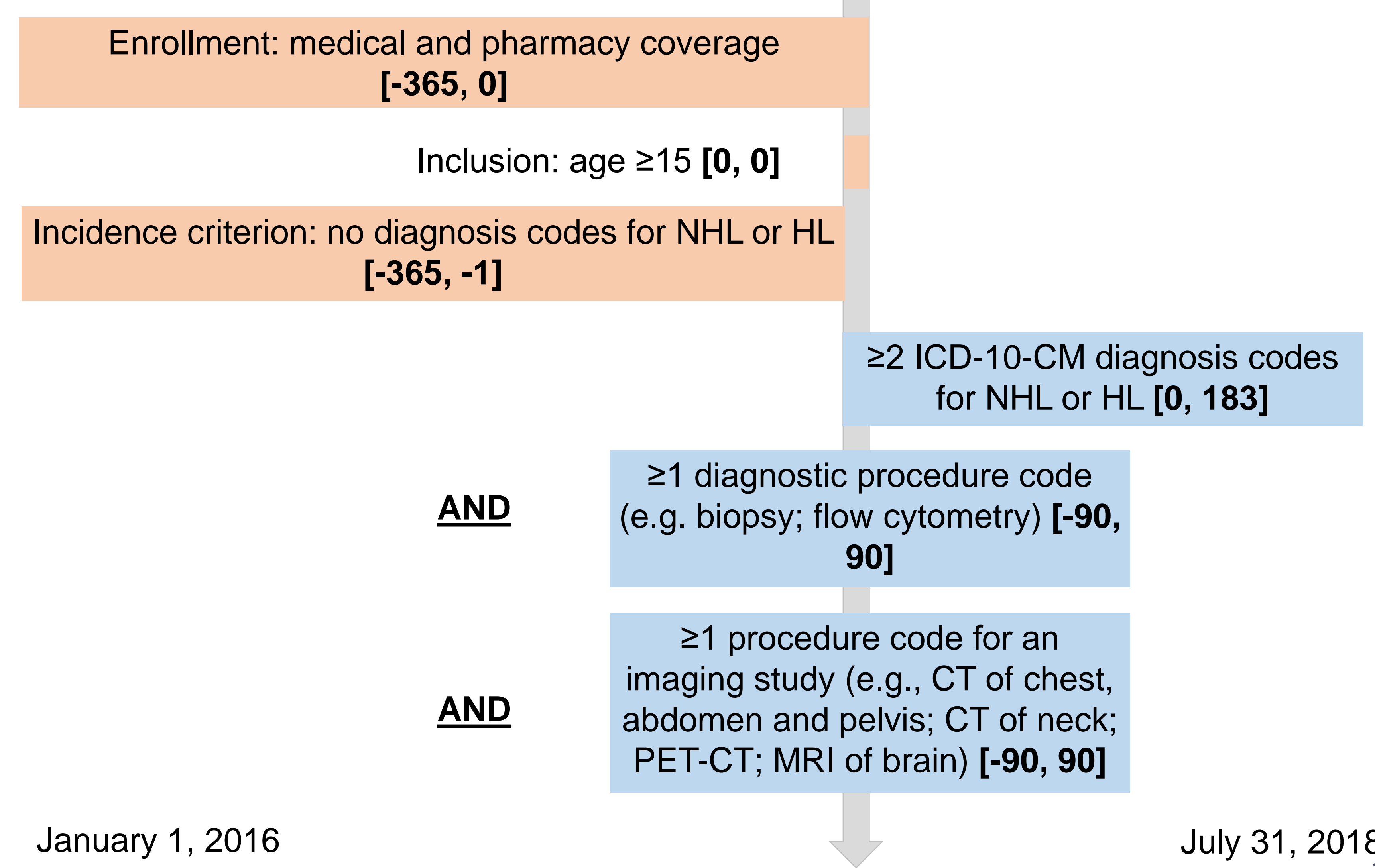
### Algorithm Development and Evaluation

- Three component algorithm: 2 lymphoma-related diagnosis codes within 183 days,  $\geq 1$  diagnostic procedure and  $\geq 1$  relevant imaging code  $\pm 90$  days from first diagnosis (Figure 1)
- De-identified, patient-level claims data were extracted for 211 of the 8723 patients identified by the algorithm and reviewed by two oncologists to select encounters for chart retrieval
- 134 full charts from algorithm-positive cases were abstracted and adjudicated with data from -30 to +90 days from selected encounter date
- Subtype data (NHL vs HL) explored
- Definite and Probable cases considered true positives for calculation of the Positive Predictive Value (PPV)

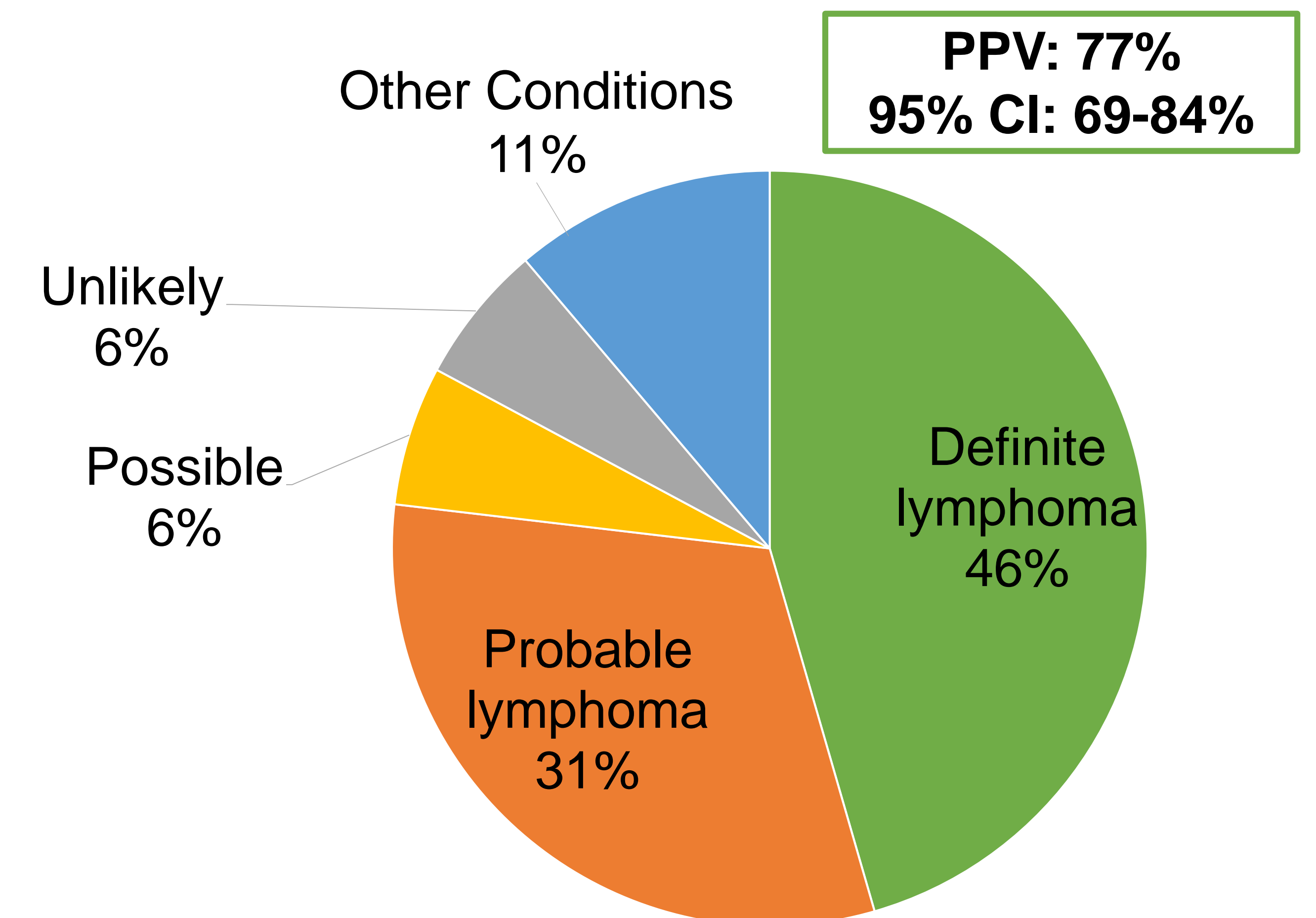
## RESULTS

### 1 Design Diagram

Index: first diagnosis date of NHL or HL



### 2 Chart Adjudication Results (N = 134)



Cases judged as definite or probable lymphoma were considered true positives. Other conditions (N=15) included other cancers (80%) and non-malignant conditions (20%)

### 3 Demographic Characteristics by Chart Adjudication Status

	Overall	Final Adjudicated Case Status					Subtype		
		Definite	Probable	Possible	No evidence	Other condition	NHL	HL	Non-case
<b>Total N (%)</b>	134	61 (46%)	42 (31%)	8 (6%)	8 (6%)	15 (11%)	92 (69%)	11 (8%)	31 (23%)
<b>Age, years</b>									
Mean	62.2	62.4	63.7	70	52.6	58.1	65.7	39.7	59.8
Median	65.5	65	66.5	67.5	62	66	67	34	66
Range	17-94	21-85	17-83	49-94	18-79	18-90	17-85	17-72	18-94
<b>Sex, N (%)</b>									
Male	69 (52%)	36 (59%)	21 (50%)	4 (50%)	0	8 (53%)	54 (59%)	3 (27%)	12 (39%)
Female	64 (48%)	25 (41%)	20 (48%)	4 (50%)	8 (100%)	7 (47%)	37 (40%)	8 (73%)	19 (61%)
Missing	1 (<1%)	0	1 (2%)	0	0	0	1 (1%)	0	0

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## DISCUSSION

### Strengths

- This project updates prior Sentinel work to develop an algorithm using ICD-10 codes
- Inclusion of data from both national insurers and an integrated delivery system enhanced generalizability of the results

### Limitations

- Chart reviews limited to one encounter
- Future iterations may add steps to further rule out non-lymphoma malignancies

### Conclusions

- An ICD-10-based algorithm including both diagnosis and procedure codes can identify lymphoma cases from health claims data with reasonable accuracy
- Subtype (NHL or HL) correctly determined for most cases