

Pilot study of the Spanish Rare Diseases Registries Research Network (SpainRDR)

Alonso V, Abaitua I, Zurriaga O, Astray J, Errezola M, Aldana-Espinal JM, Margolles MJ, Jiménez J, Palomar JA, Santana M, Ramalle-Gomarra E, Ramos JM, Arribas FE, Álamo R, Gutiérrez-Ávila G, Galmés A, García Ribes M, Navarro C, Ardanaz ME and Posada de la Paz M, on behalf of SpainRDR

Institute of Rare Diseases Research (IIER) - Consortium for Biomedical Research on Rare Diseases (CIBERER) - INSTITUTO DE SALUD CARLOS III, Madrid (Spain)

* valonso@isciii.es

AIMS

The development of a national Rare Diseases (RD) registry in Spain was launched in 2012 with the project SpainRDR, supported by the International Rare Diseases Research Consortium (IRDiRC)

SpainRDR includes two different strategies: patient registries addressed to patient outcome research and population-based registries addressed to epidemiologic research, health and social planning

The pilot study aims to detect the difficulties of developing the national and population-based RD registry

RESULTS

Data representing 80.2% of the Spanish population have been initially communicated to the central data repository during the pilot study. A total of 824,399 RD cases have been detected

As an example, RD show 26% congenital anomalies; 19% endocrine, nutritional and metabolic diseases; 13% blood and blood-forming organs; 10% diseases of the circulatory system

Practical problems detected in the pilot study have been discussed and fixed. Final patient recruitment has already started and it will include RD cases detected from 2010 to 2012

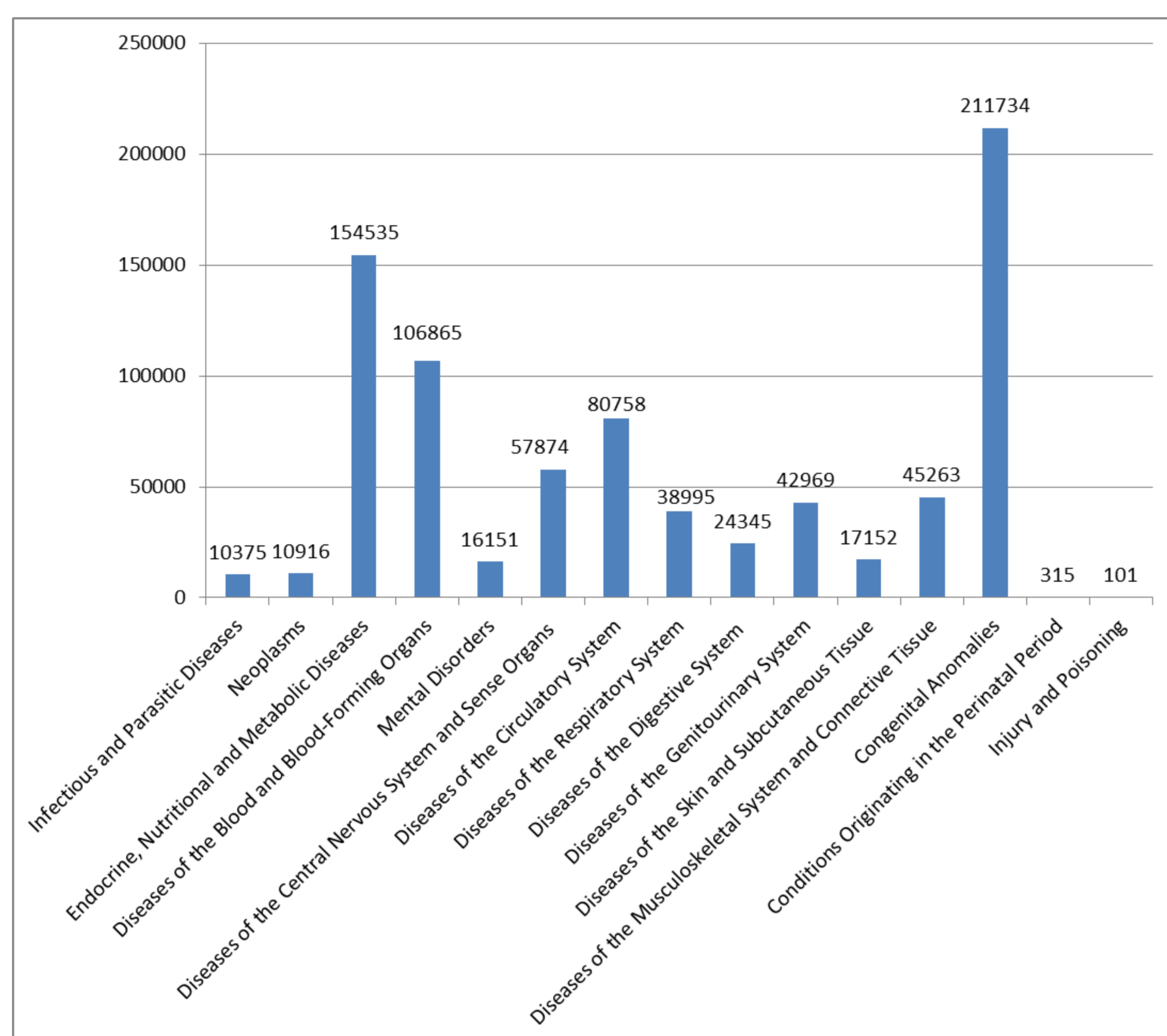


Figure 2. Number of RD cases by ICD chapter

METHODS

Both comprehensive RD lists and common data elements (CDE) have been defined and harmonized with other international strategies (EPIRARE, RD-CONNECT, NIH). CDEs mainly comprise variables related to personal identification data and RD definition

RD patient information was collected from regional health databases corresponding to 2010 and 2011: electronic hospital records (discharges basic minimum dataset), mortality registry, health insurance card databases, electronic primary care clinical records, chronic renal diseases registry, orphan drugs registry, newborn screening registry and tumor registry, among others

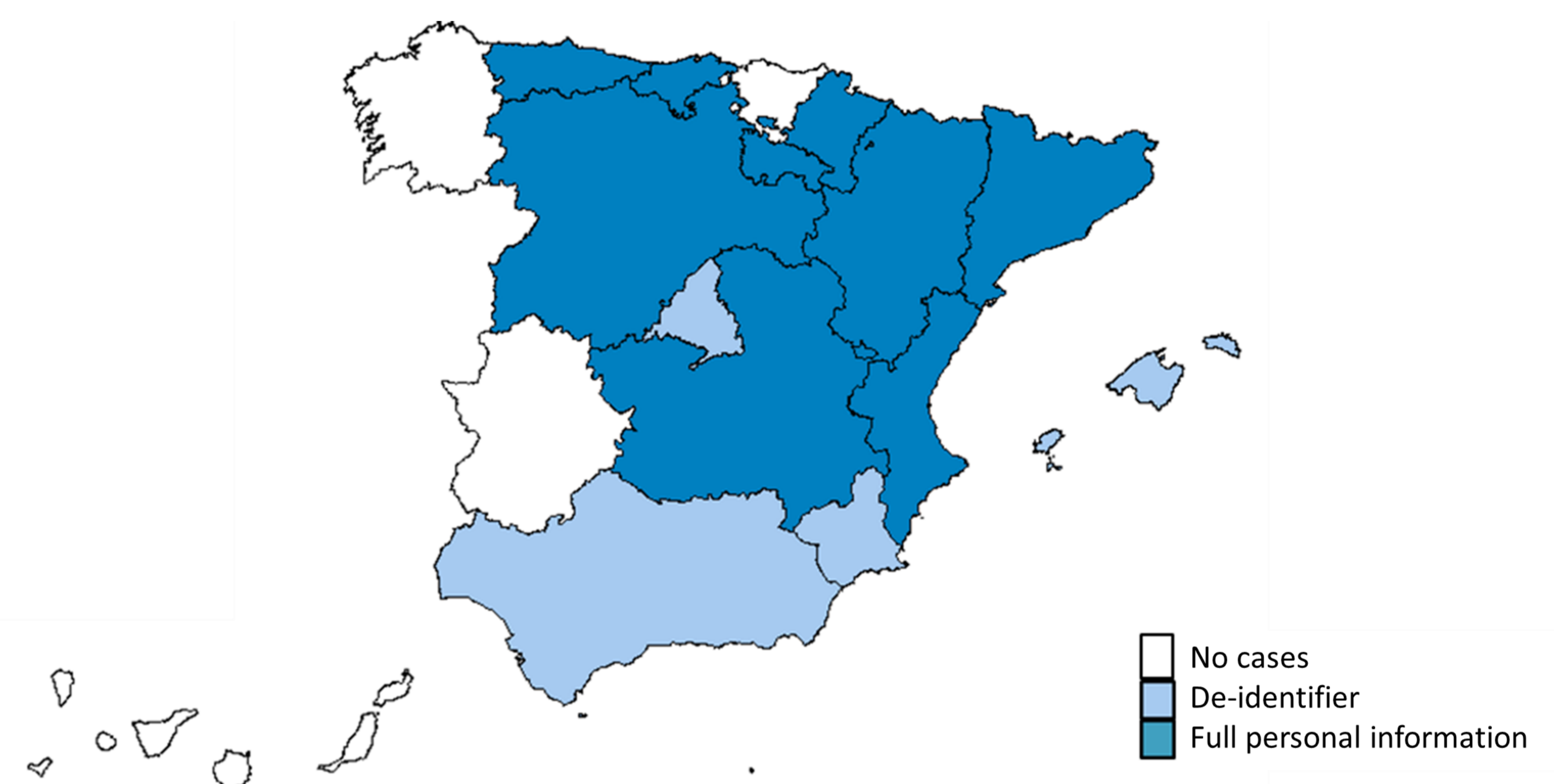


Figure 1. Participation of Regional Health Departments in the pilot study: types of reported cases to central repository

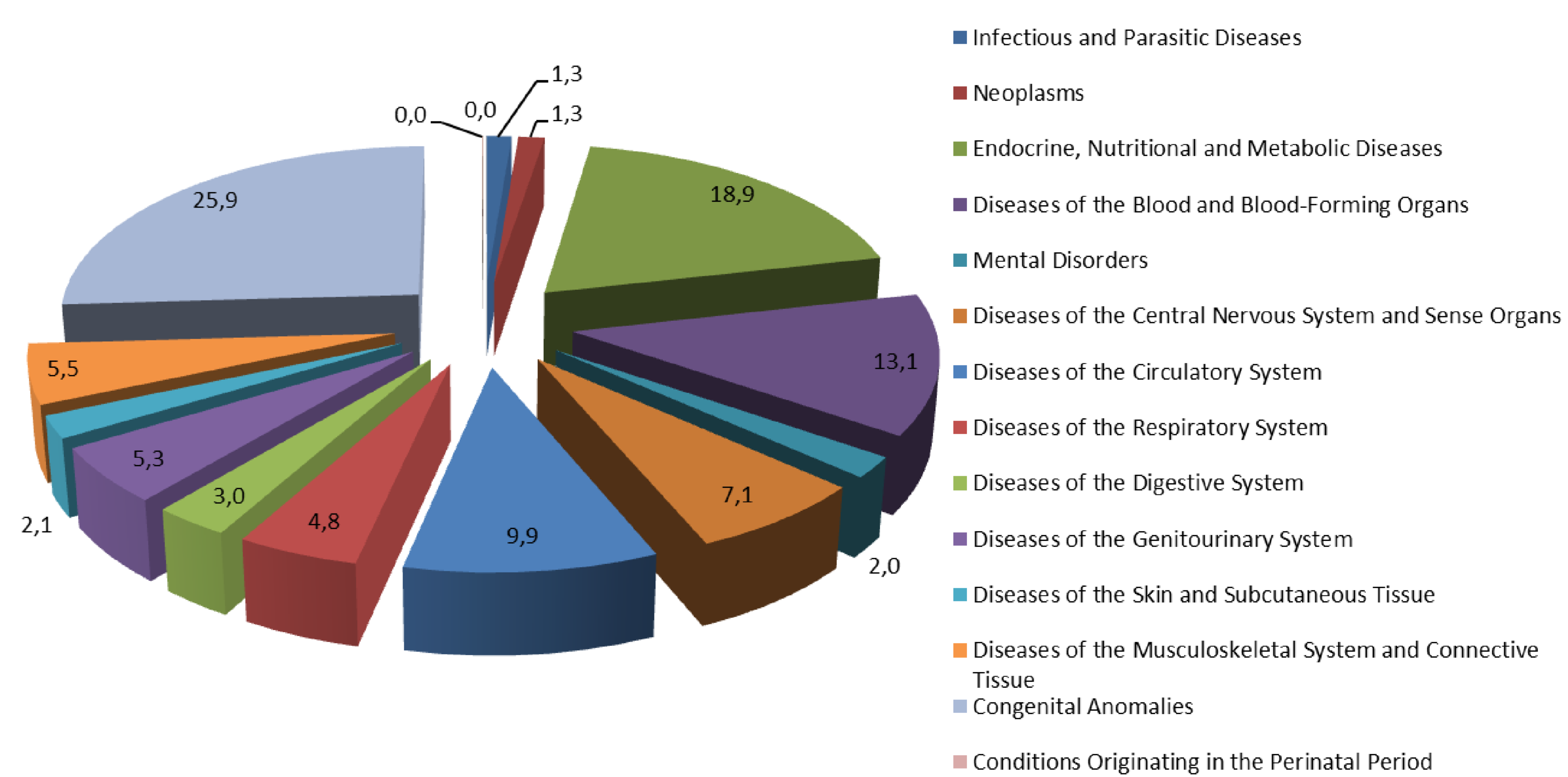


Figure 3. Percentage of RD cases by ICD chapter

CONCLUSIONS

In summary, National Institute of Rare Diseases Research and Regional Health Departments of Spain are working together towards a harmonized RD patient registration

The Spanish experience could be a model for other countries with complex political and administrative structures which, in order to carry out a national RD registry, will require the standardization of criteria, data harmonization and coordination between regions

Table 1. Example of RD detected and number of cases

RD	Cases	RD	Cases
ICHTHYOSIS CONGENITA	1114	WEGENER'S GRANULOMATOSIS	1004
OSTEOGENESIS IMPERFECTA	575	POLYARTERITIS NODOSA	3505
MARFAN'S SYNDROME	707	SJOGREN'S DISEASE	7550
AMYOTROPHIC LATERAL SCLEROSIS	2209	GIGANTISM AND ACROMEGALY	887
HUNTINGTON'S DISEASE	782	MYASTHENIA GRAVIS	387
POLYCYTHEMIA VERA	3381	IDIOPATHIC PULMONARY FIBROSIS	2891
MYCOSIS FUNGOIDES	2783	EHLERS-DANLOS SYNDROME	189
BEHÇET'S DISEASE	1167	GENERALIZED SCLERODERMA	3587