

CODING

What is Coding

- Taking a reported term and assigning it a standard medical term / drug name
- Drug coding
- Disease / event coding

Why Coding?

- Data can be collectively analysed and reported
- Standardised reporting for regulators

Dictionaries Used

- AE/Disease terms
 - MedDRA
 - WHOART
- Drug terms
 - WHODDE
 - Local dictionaries

How to Code

- **Accurate**
 - >Coding to the closest possible term
- **Consistent**
 - >Similar reported terms are all coded the same way
- No under / over coding

Accuracy

- It is possible to be accurate without being consistent
- (each reported term appears to be coded correctly when viewed by itself, but when grouped with like reported terms the coding differs among the like terms).

Consistency

- Likewise, it is possible to be consistent in coding but be inaccurate (like terms are all coded to the same dictionary entry, but the chosen dictionary entry is not the best possible choice).

Examples

Accuracy without Consistency

<u>Reported Term</u>		<u>MedDRA LLT</u>
SKIN LESIONS DUE TO PORPHYRIA	->	PORPHYRIA
SKIN LESIONS CAUSED BY PORPHYRIA	->	SKIN LESION

<u>Reported Term</u>		<u>MedDRA LLT</u>
FACIAL HEAT	->	FEELING HOT
FACIAL HEATING	->	FEELING OF WARMTH FACIAL
FACE HOT	->	FEELING HOT
HOT FACE	->	FEELING OF WARMTH FACIAL

Examples

Consistency without Accuracy

<u>Reported Term</u>		<u>MedDRA LLT</u>
ENDOMETRIAL STROMAL TUMOR	->	ENDOMETRIAL STROMAL SARCOMA
ENDOMETRIAL STROMAL TUMOUR	->	ENDOMETRIAL STROMAL SARCOMA

- The coding for both is inaccurate, however, because a sarcoma is a very specific type of tumour and one cannot arbitrarily assume that the tumours being reported are in fact sarcomas. ENDOMETRIAL NEOPLASM NOS would be a better choice for these two terms (better to select a less specific but correct term than a more specific but incorrect term like ENDOMETRIAL STROMAL SARCOMA).

Under coding

- **Coding to a general (less specific) LLT when a much more specific LLT is available**
 - >Coder with less experience
 - >auto coding

Under coding

- *INCREASE OF DIASTOLIC BLOOD PRESSURE*
- to the LLT of:
- *BLOOD PRESSURE INCREASED*

- ***BLOOD PRESSURE DIASTOLIC INCREASED***

BLOOD PRESSURE INCREASING, NO RESPONSE TO MEDS

LLT	PT	SOC
CHANGE IN BLOOD PRESSURE	BLOOD PRESSURE FLUCTUATION	VASCULAR DISORDERS
BLOOD PRESSURE INCREASED	BLOOD PRESSURE INCREASED	INVESTIGATIONS
BLOOD PRESSURE INCREASED REFRACTORY	HYPERTENSION	VASCULAR DISORDERS

Under Coding

- **Coding to an LLT that ignores unique information contained within the reported term**
- *CORONARY ATHEROSCLEROSIS WITH RECURRENT ANGINA PECTORIS*
to the LLT of:
CORONARY ATHEROSCLEROSIS
Rather than requesting site to split

Over coding

- **Coding to an LLT that is contains more information than is contained in the reported term (i.e. adding information to the reported term)**
 - > Coder with less experience

PNEUMONIA LEFT LOBE

to the LLT of:

- *LOBAR PNEUMONIA*

under the mistaken belief that *LOBE* and *LOBAR* are synonymous. Lobar pneumonia, however, is a specific type of pneumonia

EXCESSIVE SUDATION

???was a misspelling of *SEDATION* and code it erroneously to the LLT of:

- *SEDATION EXCESSIVE*

In fact, *sudation* is defined in Dorland's as "*sweating*," meaning the reported term should be coded instead to the LLT of:

- *EXCESS SWEATING*

MedDRA

highly specific

- Many many LLT

LLT	PT	SOC
BLOOD PRESSURE HIGH	HYPERTENSION	VASCULAR DISORDERS
BLOOD PRESSURE INCREASED	BLOOD PRESSURE INCREASED	INVESTIGATIONS

- will cause them to be classified simply as investigations.

In summary

- For now – leave it to the specialists
 - >Check their coding
 - >Reconcile on verbatim
 - >Auto-load in separate panel
- Long term - inhouse
 - >medical background
 - >Trained
 - >Follow strict coding conventions
 - >Clindex to code within