The capture and recapture study for TB in China

China

2014-09-26 Bali
Background

- 2004: launch of Chinese Infectious Disease Reporting System (IDRS)- after SARS

- Characteristic of IDRS
  - Vertical from national to the lowest level (township)
  - 37 notifiable infectious diseases to be reported by law (now 39)
  - Web-based, real time, individual case-based reporting
By end 2012, web-based reporting covered 100% of CDCs, 98% of county and above hospitals and 95% of township level clinics. Up to 68,000 users (facilities).

Every day, about 25,000 infectious disease cases are reported.
Tuberculosis Information Management System

- Built in the national infectious disease surveillance system, is a sub-system of IDRS
- NTP guidelines ask for reporting of care-seeking information of all registered pulmonary TB cases
- Information on TB cases: registration, treatment management and outcome
- Information on NTP managerial activities: drugs, training, supervision, finance
Relationship between IDRS and TBIMS

China CDC
Reporting System of Tuberculosis in China
研究目的 Objectives

- 拟通过对研究地区的结核病专报系统、医院诊疗记录、医保等系统数据进行比较，对实施地区结核病发病水平及结核病专报的灵敏度进行估算，为地区规划的制订实施及现有专报系统的改进提供可靠依据。
- Through the study of comparison the data of TBIMS, TB hospital records, health insurance system, to estimate the sensitivity of TBIMS, and provide a reliable basis for the formulation of the implementation and improvement of the existing report system of area planning.
Prior to the implementation of the project, through the basic survey, the implementation of patient data area various medical and health institutions and can be used to verify the master project, to select the system data available.
<table>
<thead>
<tr>
<th><strong>是否</strong></th>
<th><strong>有健康档案</strong>，建立时间，健康档案中是否存在结核病相关记录</th>
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</thead>
<tbody>
<tr>
<td><strong>是否</strong></td>
<td>是否建立城镇居民医疗保险系统，建立时间</td>
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<td><strong>是否</strong></td>
<td>其他与肺结核患者相关的系统信息</td>
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<td><strong>医疗机构</strong></td>
<td>Medical institutions:</td>
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<td><strong>县级</strong></td>
<td>County-level</td>
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<td><strong>乡镇级</strong></td>
<td>The township level</td>
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<td><strong>个体诊所</strong></td>
<td>Individual clinics</td>
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个案数据的纳入
Collection of case data

在确定参照系统后，项目实施单位应首先确定进行研究的时段（通常为1自然年），将结核病专报系统和各参照系统数据分别整理导出

In determining the reference system, the project implementation unit should first determine the study period (usually 1 calendar year), and on the basis of the TB specific reporting system and the reference system are derived data collation.
个案数据的核实与验证
Verification and validation case data

1. 对于非医疗机构的个案记录，结核病患者的诊断原则上以结核病防治机构或正规医疗机构的最终诊断为依据，无相关诊断证明的，视为无效数据剔除；对于医疗机构门诊或影像科等只有初步诊断结果的可疑结核病患者，如经过确认在项目实施期间最终认定为结核病的，也可作为有效数据纳入；

1 for the case of non medical agency records, the principle of diagnosis of tuberculosis patients with a final diagnosis of tuberculosis prevention and control institutions or the formal medical institutions as the basis, no relevant certificate of diagnosis, regarded as invalid data rejection; in patients with suspected TB in outpatient department or image only preliminary diagnosis result, such as confirmed by the implementation period eventually identified as tuberculosis in the project, but also can be used as effective data into;
问题与挑战 Problems and challenges

◆ 除医保和医疗机构资料外，其他系统的资料完整性待确认；
◆ Except health insurance system and HIS, other system data registration are paper-based, no electronic information;
◆ And the HIS is not Unified system, the use of different system in different hospitals
◆ 核查工作需要多部门协调配合；
◆ The study requires multi sectoral coordination.
◆ Each area to carry out the work is diversity, for the study of the use of the system is not the same
◆ Exploring the research method is suitable for Chinese conditions, provide the implementation of the programme for local governments to carry out sensitivity studies
Thanks for your attention