

- + Record linkage of GPRD data to other NHS datasets
 - National – centrally held death data
 - Full hospitalisation record
 - Disease Registries
 - Socio-economic class and other census data to small area level
- + General Benefits
 - Validation of death and hospitalisations in GPRD
 - Extensive additional hospitalisation data
 - Bed days
 - Types of ward
 - More detailed disease coding
 - Procedural codes
 - Enablement of detailed pharmaco-economic research
 - Enablement of research into diseases managed in hospital or by hospital consultants in clinics or day care

External record linkage

GPRD has gained ethics, scientific and confidentiality approval to enable record linkage of GPRD data with other healthcare datasets via the patient's NHS number, sex, date of birth and postcode. The linkage is done by an external NHS group in a way that GPRD does not see the identifying details. The additional data is returned using the GPRD anonymised research level identifier.

Additional data within GPRD

Socioeconomic class to small area level will be provided within the normal GPRD as will hospitalisation and death data. This adds an additional level of validation to that already within GPRD.

Full hospitalisation record – outcomes and pharmaco-economics

Full hospitalisation data including length of stay, ward types, more extensive disease coding, and procedural coding will now be available as an add-on to GPRD. Further details can be provided against specific requests for data. Such data is invaluable for health outcomes and detailed pharmaco-economic work.

GPRD – Disease registry links

Many population based disease registries are maintained in the UK. Work is already on-going on linkage with those for cancer and cardiovascular disease. Such links will enable detailed research on many hospital only and day care use medications. The options for linkage are developing all the time. Request specific information on your clinical area.

Want to know more? email: info@gprd.com

General Practice Research Database

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