



Atti del convegno

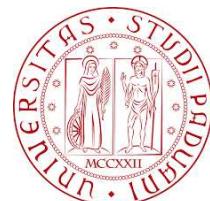
editors Giovanni Casiraghi & Marco Pradella

Armonizzazione e semantica del laboratorio nelle Sepsi ICA *Marco Pradella*
Il documento sulle Sepsi di Regione Lombardia *Maristella Moscheni*
Il sistema di sorveglianza di Regione Puglia *Viviana Vitale*
La prevenzione del rischio infettivo a garanzia della qualità dell'assistenza:
"Sistema di Monitoraggio delle azioni regionali di controllo delle Infezioni Correlate
all'Assistenza (SIMON)" *Paola M. Placanica*
Risvolti organizzativi correlati alle Sepsi ICA *Luca Fabbri - Annibale Raglio*
Infezioni delle vie urinarie *Fabio Manoni*
La risposta di una microbiologia alle calamità naturali *Vittorio Sambri*
Equità verticale, ICT e Sistemi Sanitari. Alcune applicazioni in Sanità *Fabrizio Clemente*
"La sfida ICA Sepsi: collaborazione tra medicina di laboratorio e clinica"
Graziella Bonetti, Andrea Patroni
Sepsi, ICA e Infezioni Ossee *Tudor Draghici*
"Progetto Pedianet" *Elisa Barbieri*
Stewardship e TDM antimicrobici, due facce della stessa medaglia? *Ines Bianco, Antonio Conti*
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3.3.2023" *Giovanni Casiraghi*
Reti collaborative microbiologiche: i POCT e gli obblighi
legali (malattie sottoposte a denunce) *Giovanni Casiraghi*
Poster Marco Toni NewMicro2024 - ECMU e IVU *Graziella Bonetti*



«progetto Pedianet»: L'informatica in Pediatra

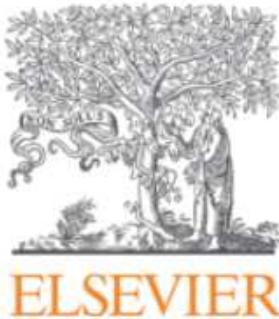
Elisa Barbieri



Dipartimento di Salute Donna e Bambino,
Università degli studi di Padova



The Pedianet network...where all started



The Lancet

Volume 355, Issue 9215, 6 May 2000, Pages 1613-1614



Research Letters

Active monitoring of adverse drug reactions in children

Francesca Menniti-Ippolito MSc^a ♂✉, Roberto Raschetti Msc^a, Roberto Da Cas Msc^a,
Carlo Giaquinto MD^b, Luigi Cantarutti MD^c,
for the Italian Paediatric Pharmacosurveillance Multicenter Group

The Pedianet network through the years



In March, 1996, the project was presented to 32 family paediatricians practising in the Veneto Region, who volunteered to participate. They represented 8% of all family paediatricians in the region's health service. 29 agreed to participate in the study and were trained accordingly.

Each week (from April, 1996 to March, 1997) the participating paediatricians sent, by modem, a detailed electronic report of each observed ADR to the National Institute of Public Health (Istituto Superiore di Sanità) in Rome, where data were analysed and reported back to the doctors. To calculate the incidence of ADRs by prescription, for nine of the paediatricians in the Padova province of Veneto, we retrieved from their databases all prescriptions reimbursable by the health service issued during the study period. We calculated incidence per 1000 defined daily doses of drugs causing ADRs. These doctors observed more than 50% of the ADRs reported for the reimbursable prescriptions. Each ADR was assessed according to available information about known drug side-effects—technical reports from pharmaceutical companies and commercial databases (Micromedex).

About 24 000 children were enrolled on the lists of the 29 paediatricians. We analysed 244 reports that included 388 events, with a suspected correlation with 266 prescriptions of 73 different substances.

The Pedianet network throught the years



Incidence of Mucocutaneous Reactions in Children Treated With Niflumic Acid, Other Nonsteroidal Antiinflammatory Drugs, or Nonopioid Analgesics

Miriam Sturkenboom, Alfredo Nicolosi, Luigi Cantarutti, Salvatore Mannino, Gino Picelli, Antonio Scamarcia, Carlo Giaquinto and for the NSAIDs Paediatric Research Group

Pediatrics 2005;116:26-33; originally published online Jun 1, 2005;



IDENTIFYING POTENTIALLY DRUG-INDUCED ACUTE LIVER INJURY IN CHILDREN USING A MULTINATIONAL HEALTHCARE DATABASE NETWORK

C. Ferrajolo,^{1,2} P.M. Coloma,¹ K.M.C. Verhamme,¹ M.J. Schuemie,¹ R. Gini,³ R. Herings,⁴ G. Mazzaglia,⁵ G. Picelli,⁶ C. Giaquinto,⁷ L. Scotti,⁸ P. Avillach,⁹ L. Pedersen,¹⁰ F. Rossi,² A. Capuano,² J. van der Lei,¹ G. Trifirò,^{1,11} and M.C.J.M. Sturkenboom,^{1,12} on behalf of EU-ADR consortium.

Erasmus MC
Cazfus

> Eur Ann Allergy Clin Immunol. 2003 Feb;35(2):47-51.

Asthma prevalence and drug prescription in asthmatic children

A Barbato¹, C Panizzolo, L Biserna, L Cantarutti, C Giaquinto, F Frati, F Marcucci, C Monciotti, R Testi, P di Blasi, M C J M Sturkenboom;
Pedianet Family Pediatricians Asthma Study Group (F-PASG)

Affiliations – collapse

Affiliation

¹ Dept of Pediatrics, University of Padova, Italy.

The Pedianet network through the years



- Potential new signals of adverse events, lying the background for more investigation though formal epidemiological studies
- Allowed for investigating diseases which are not dealt in the hospital setting

Electronic health record complement traditional spontaneous reporting systems also for signal detection and strengthening

Electronic health record complement the information on the disease burden and management non needing severe or urgent care

The Pedianet network through the years



**From database studies to
primary data collection studies**

The Pedianet network through the years



Rotavirus Gastro-enteritis Epidemiology and Viral Types in Europe Accounting for Losses in Public Health and Society (REVEAL) Study

Prospective multicentre observational study 7 European regions

Study population:

- children <5 years of age
- living in the defined study area
- meeting the case definition of acute gastroenteritis
- informed consent obtained

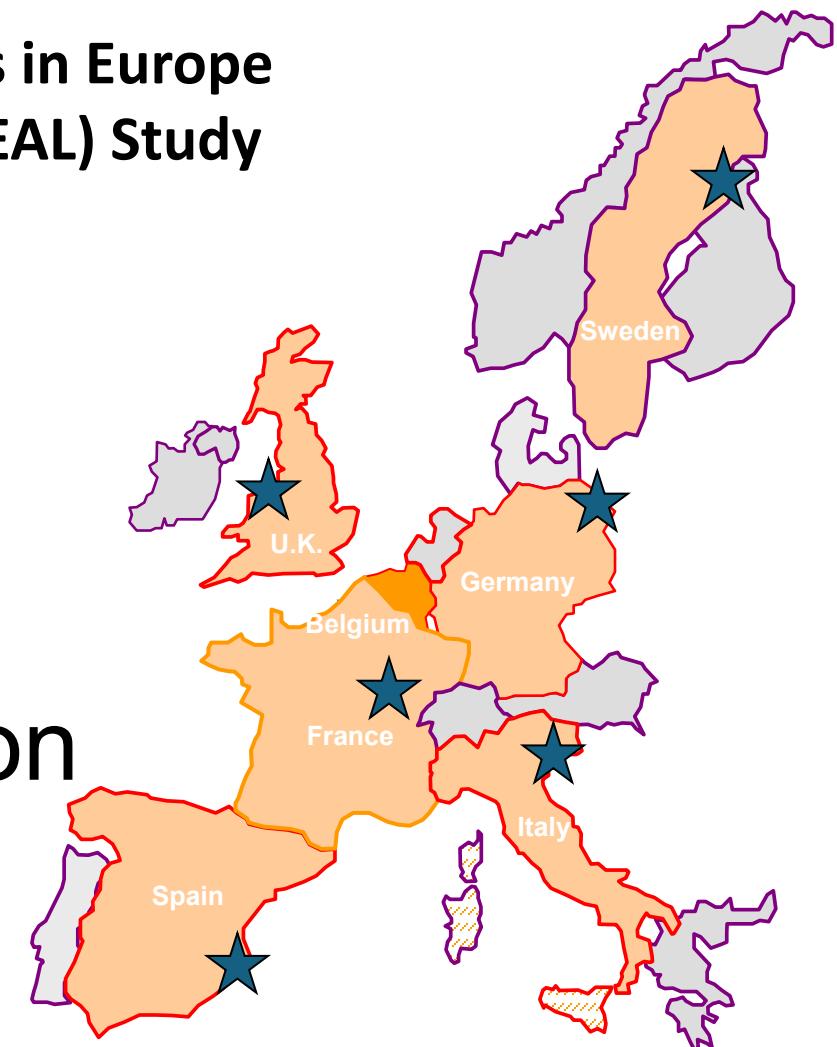
Study period:

Oct 1, 2004 – Sept 30, 2005

3 Settings

- all Hospitals in study area ($n_{total} = 12$)
- all Emergency Room in study area ($n_{total} = 16$)
- sample of GPs and/or Pediatricians ($n_{total} = 139$)

Samples collection



REVEAL study

The Pedianet network throught the years



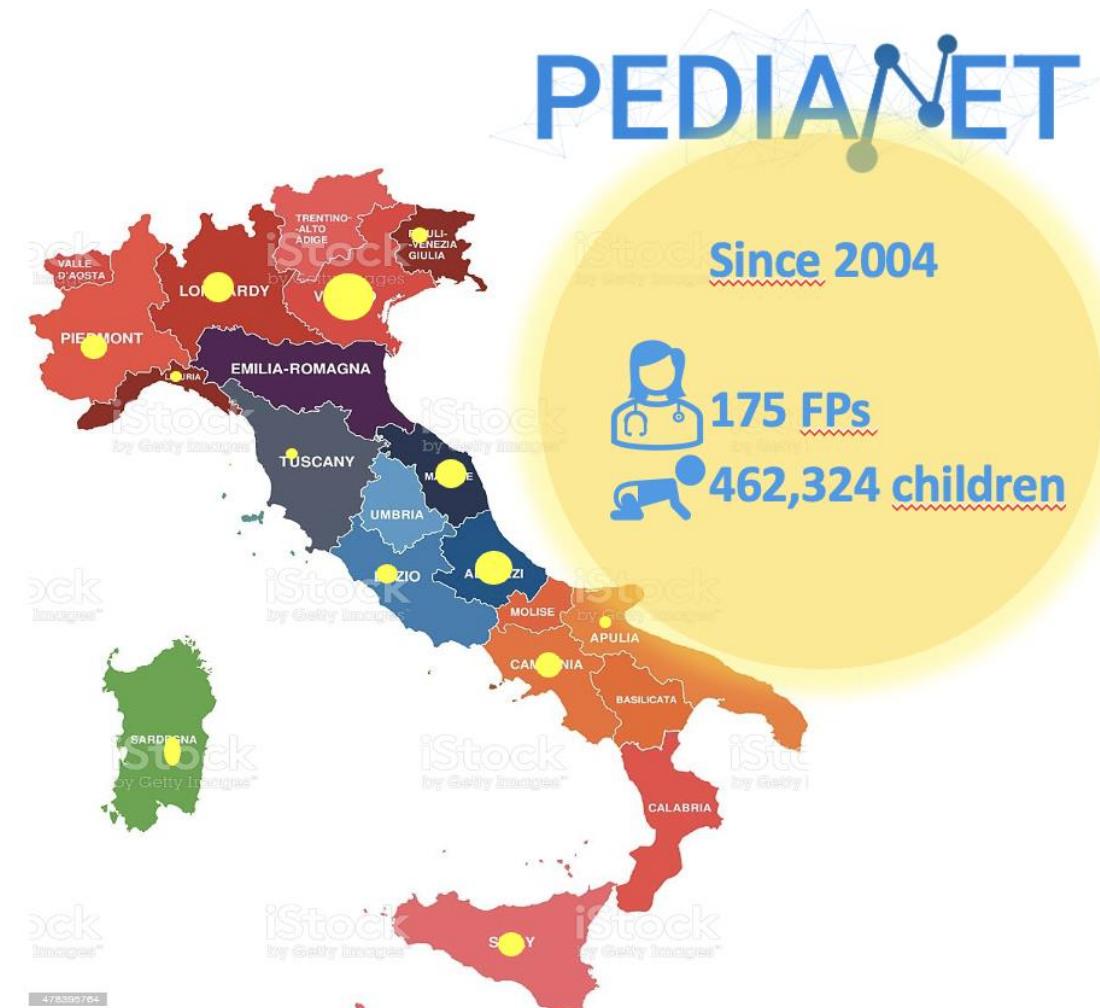
Rotavirus Gastro-enteritis Epidemiology and Viral Types in Europe Accounting for Losses in Public Health and Society (REVEAL) Study

- A prospective cohort study including primary care and hospital is feasible.
- A well-designed study will allow to address several epidemiological, clinical and health economic issues
- A common protocol can be used to compare different European settings
- The Organization of the Italian Health Care System allows the conduct of complex integrated prospective studies

The Pedianet network now

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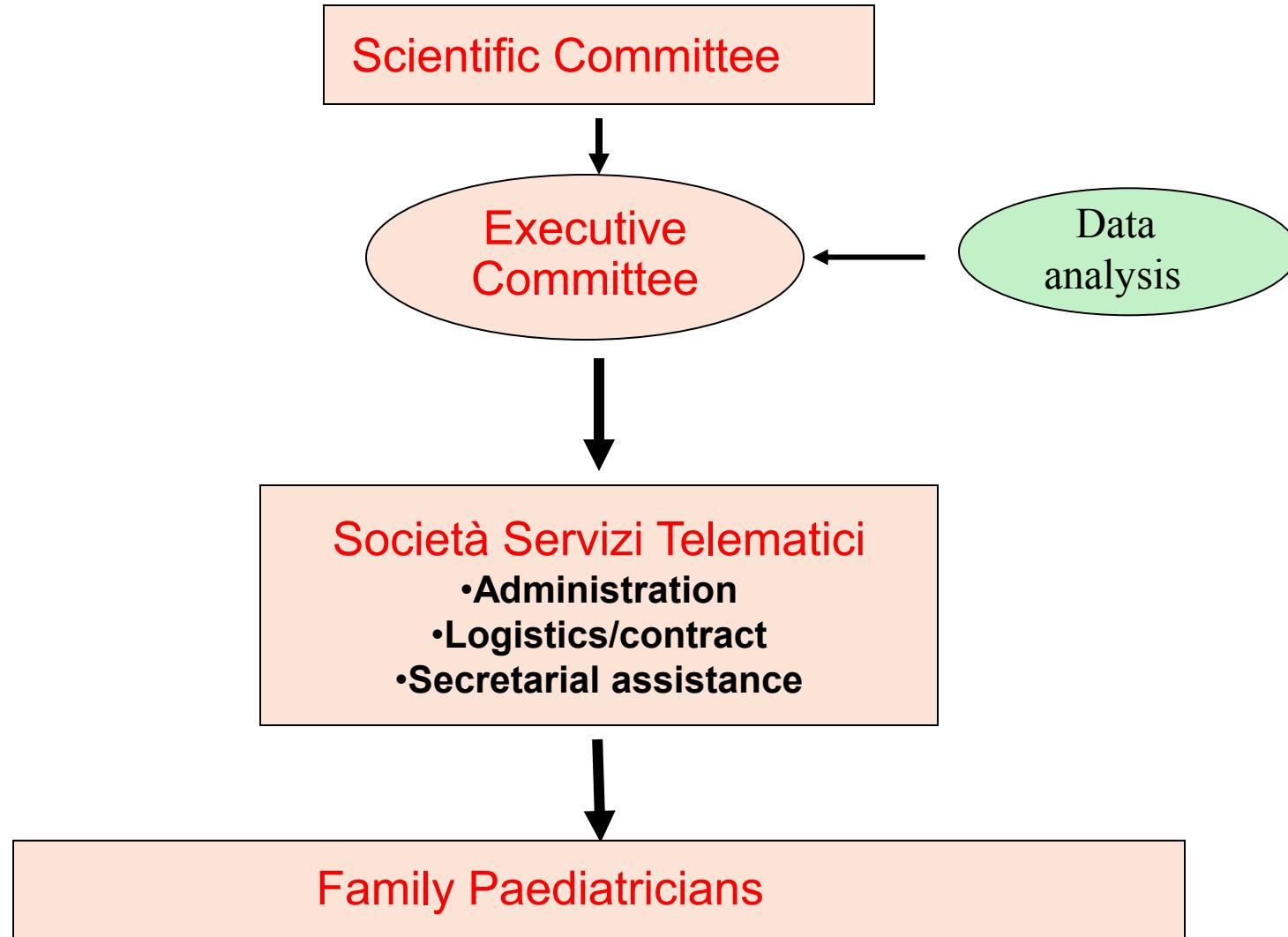
- An organised network of around 200 family pediatricians (FPs) in Italy to collect information to be used for clinical and epidemiological research;
- All paediatricians use the same software (Junior Bit) in their professional practice
- Anonymous information required for research is collected



3% of the Italian pediatric population

Management Structure

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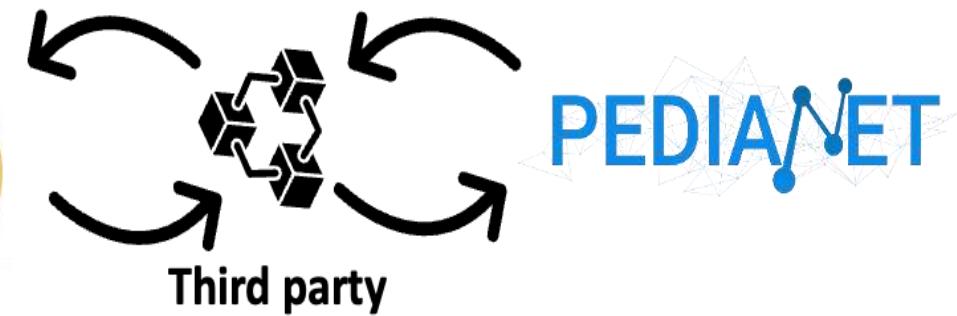
The Pedianet Database



Give **explicit consent** for processing the anonymized data for statistical and research purposes

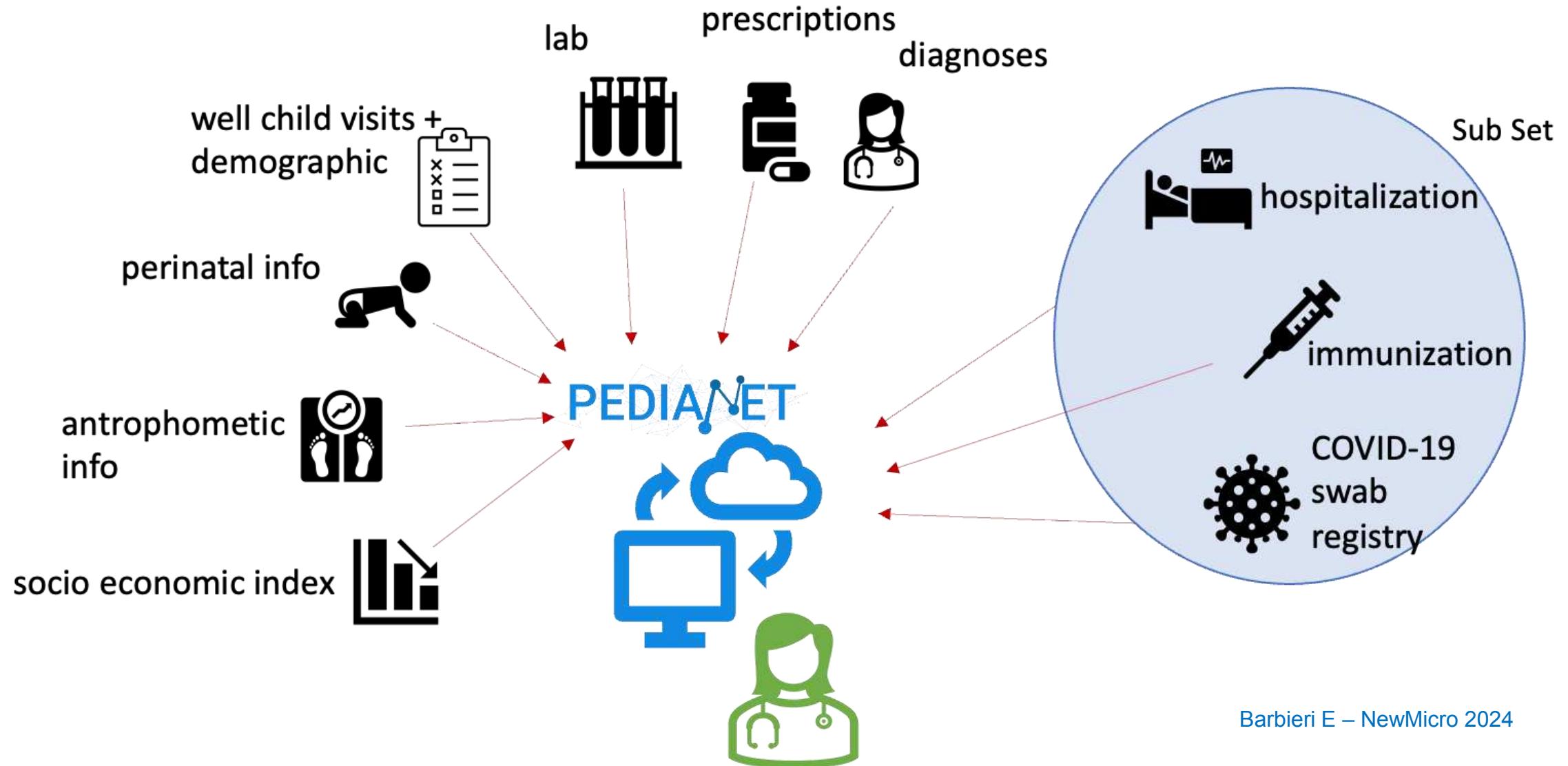
FP = Data controller

Data is present in the FPs cloud management software

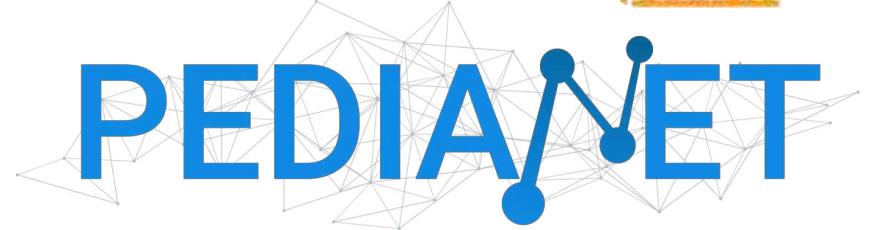


To guarantee a greater and safer protection, the information, **does not flow directly into the Pedianet database**, but it passes through a third-party cloud database where it is appropriately anonymized before being transferred to the Pedianet database

The Pedianet Database



The Pedianet Database: some numbers for 2011-2021



- 310000 children visited at least once by a family paediatrician
- 6,800,000 visits
- 2,070,000 diagnosis reported in ICD9CM codes (75% of the total) and/or free text
- 1,900,000 auxologic measurements
- 3,500,000 drug prescriptions (27% with dosing info)
- 1,400,000 specialist referrals
- 62,000 hospital admission (in Veneto region, from 2017 onwards additional hospitalization info has been made available)

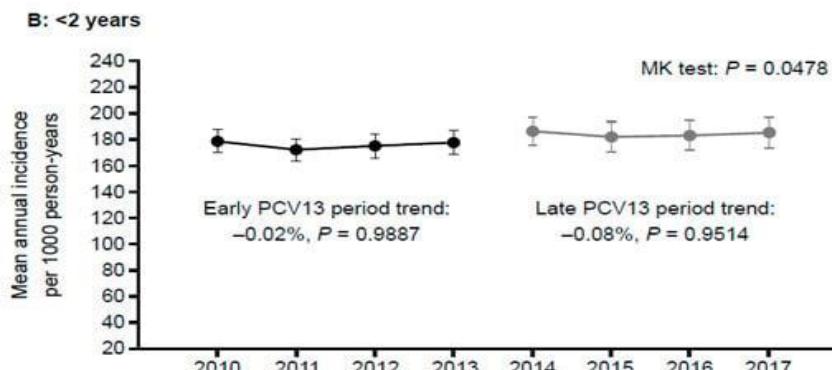
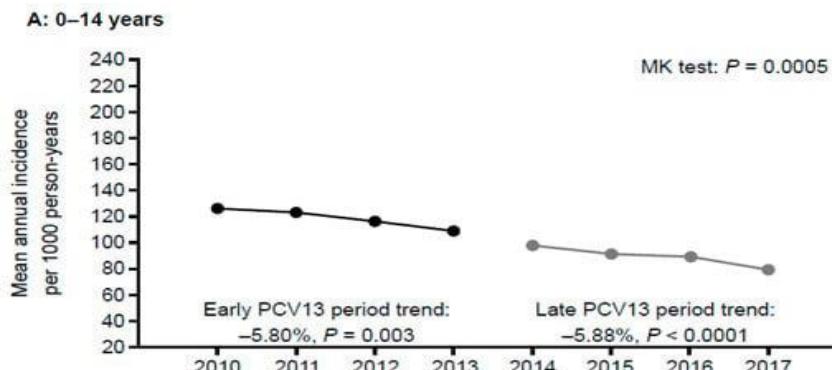
Potential: from research...

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- Dataset Pedianet (20 years)

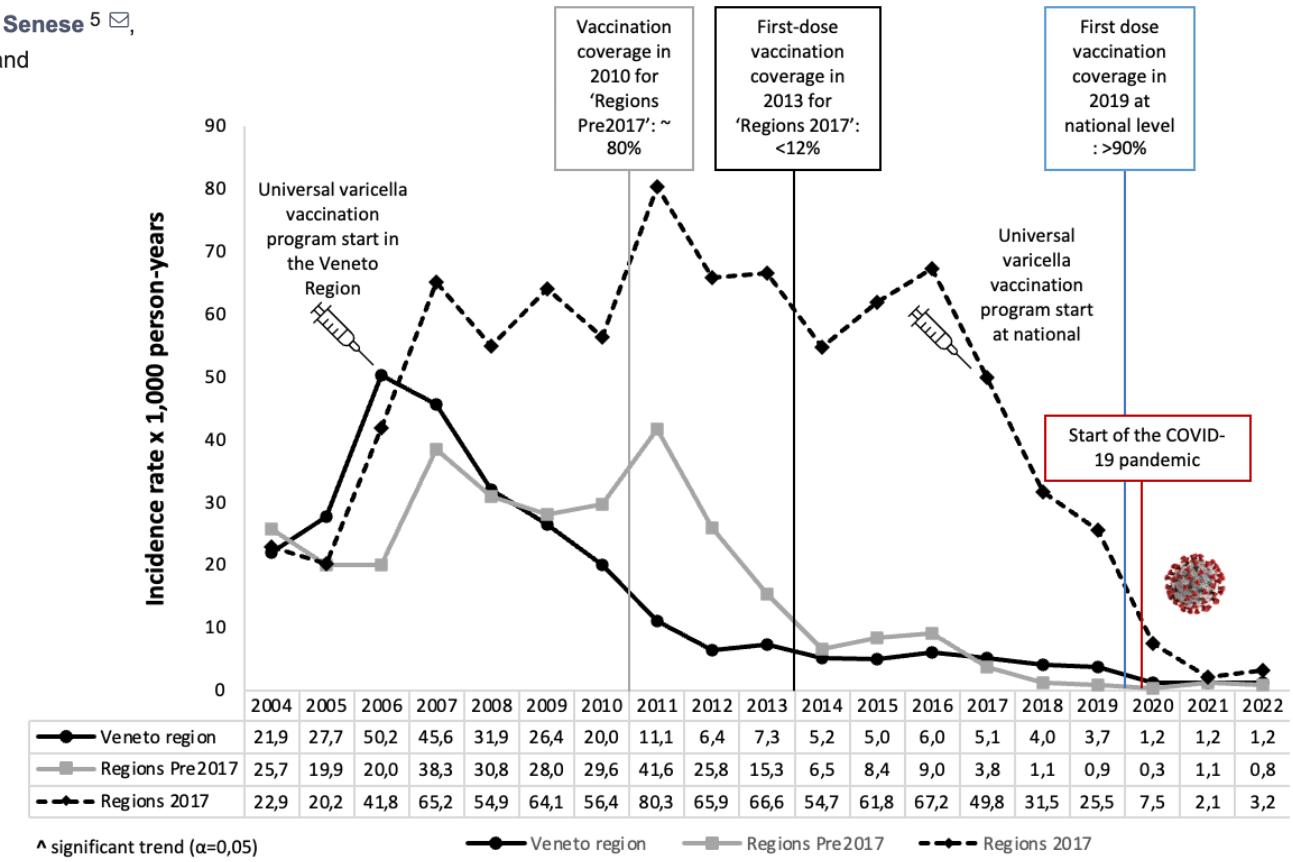
A Retrospective Database Analysis to Estimate the Burden of Acute Otitis Media in Children Aged <15 Years in the Veneto Region (Italy)

by Elisa Barbieri 1,* , Gloria Porcu 2,3 , Tianyan Hu 4 , Tanaz Petigara 4 , Francesca Senese 5 , Gian Marco Prandi 5 , Antonio Scamarcia 6 , Luigi Cantarutti 6 , Anna Cantarutti 2,3  and Carlo Giaquinto 1,6 



Trend analysis

20 years of Varicella epidemiology currently under review



Potential: to more research...



- Dataset Pedianet (18 years)
- Prospective studies

Primary care Prospective studies

Rapid point of care test

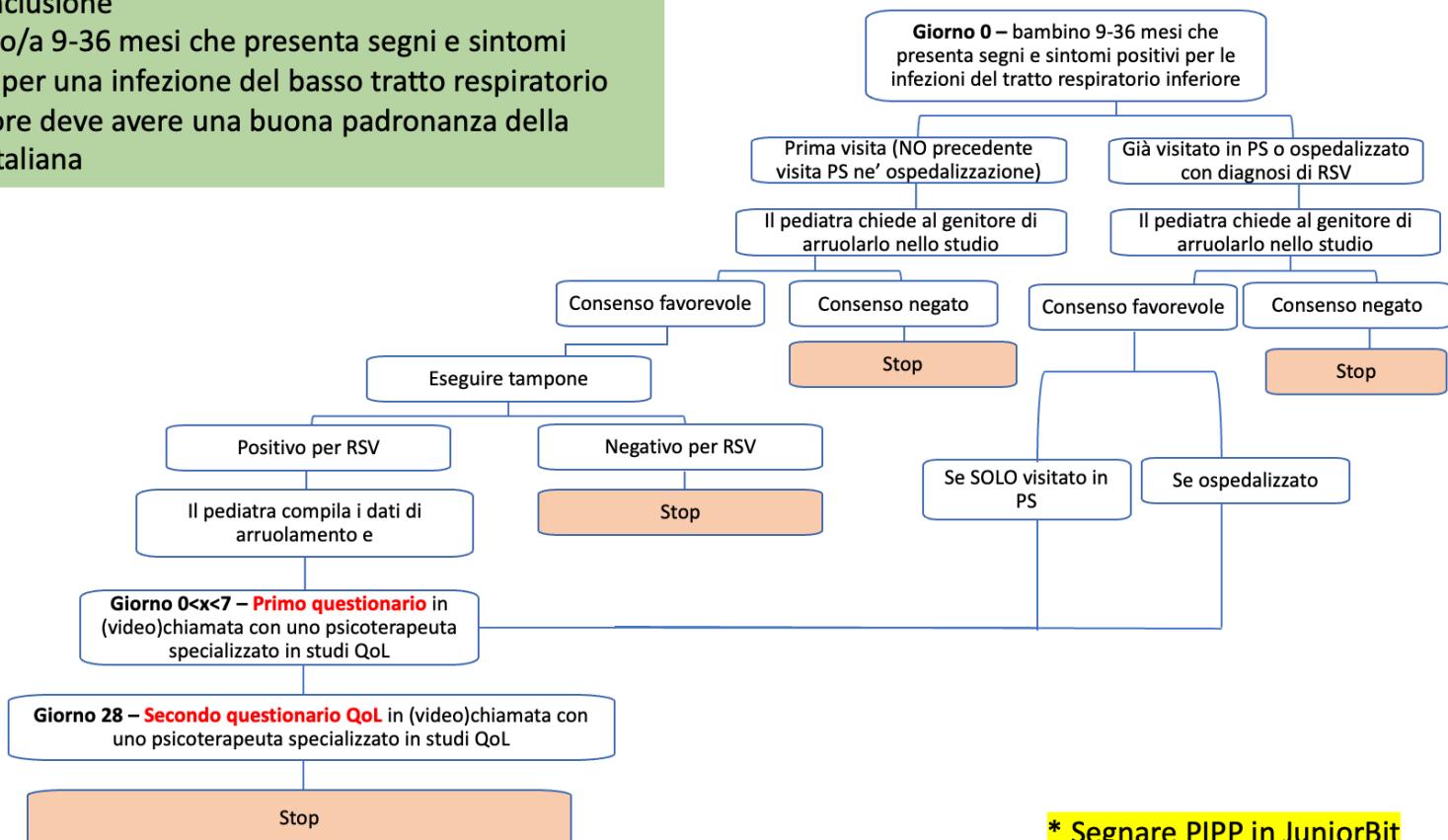
FP enrolling the patients

Clinical and demographic info
already in the software → time
saved to data collection

Criteri di inclusione

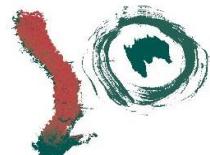
- bambino/a 9-36 mesi che presenta segni e sintomi positivi per una infezione del basso tratto respiratorio
- il genitore deve avere una buona padronanza della lingua italiana

Clinical outcomes following RSV infection in the toddler population (9-36 months of age) enrolled in the EVOLUTE study - StorIT study



Potential: to even more research...

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IDIAP
Jordi Gol



VAC4EU



UMC Utrecht



Drug Safety Research Unit
DSRU

PHARMO

netherlands
pharmacovigilance
centre lareb



EUROPEAN MEDICINES AGENCY



UiO : University of Oslo



AARHUS
UNIVERSITY

Potential: to even more research...



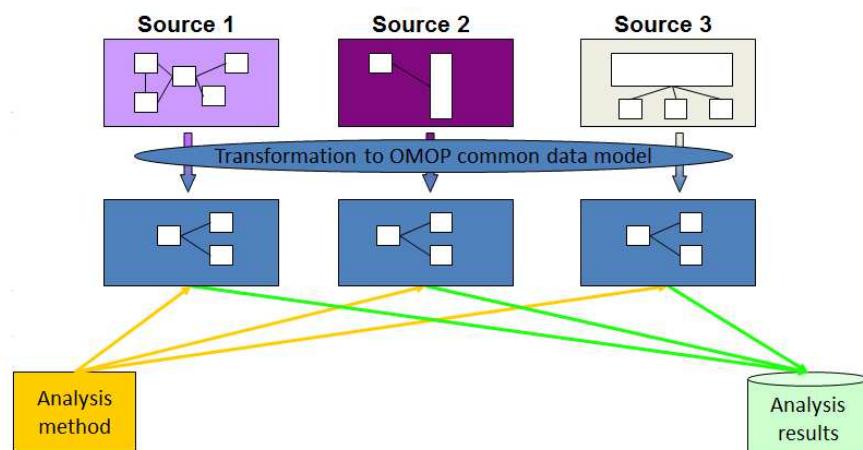
A common data model (CDM) aims to achieve both syntactic or semantic operability.

SYNTACTIC operability -> standard grammar

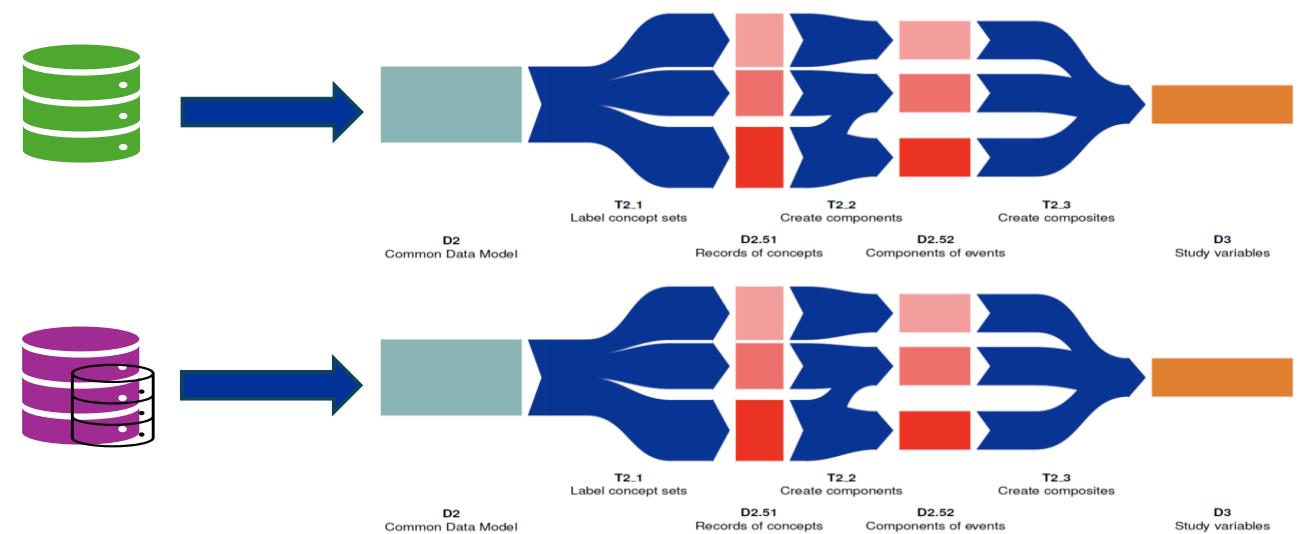
Multidatabase analysis

SEMANTIC operability -> standard vocabulary

Transformation to OMOP CDM –
syntactically and semantically



Transformation to CONCEPTION CDM –
the federated approach (semantically similar)



Potential: to public health tool....



- Dataset Pedianet (18 years)
- Prospective studies
- Near-real world data

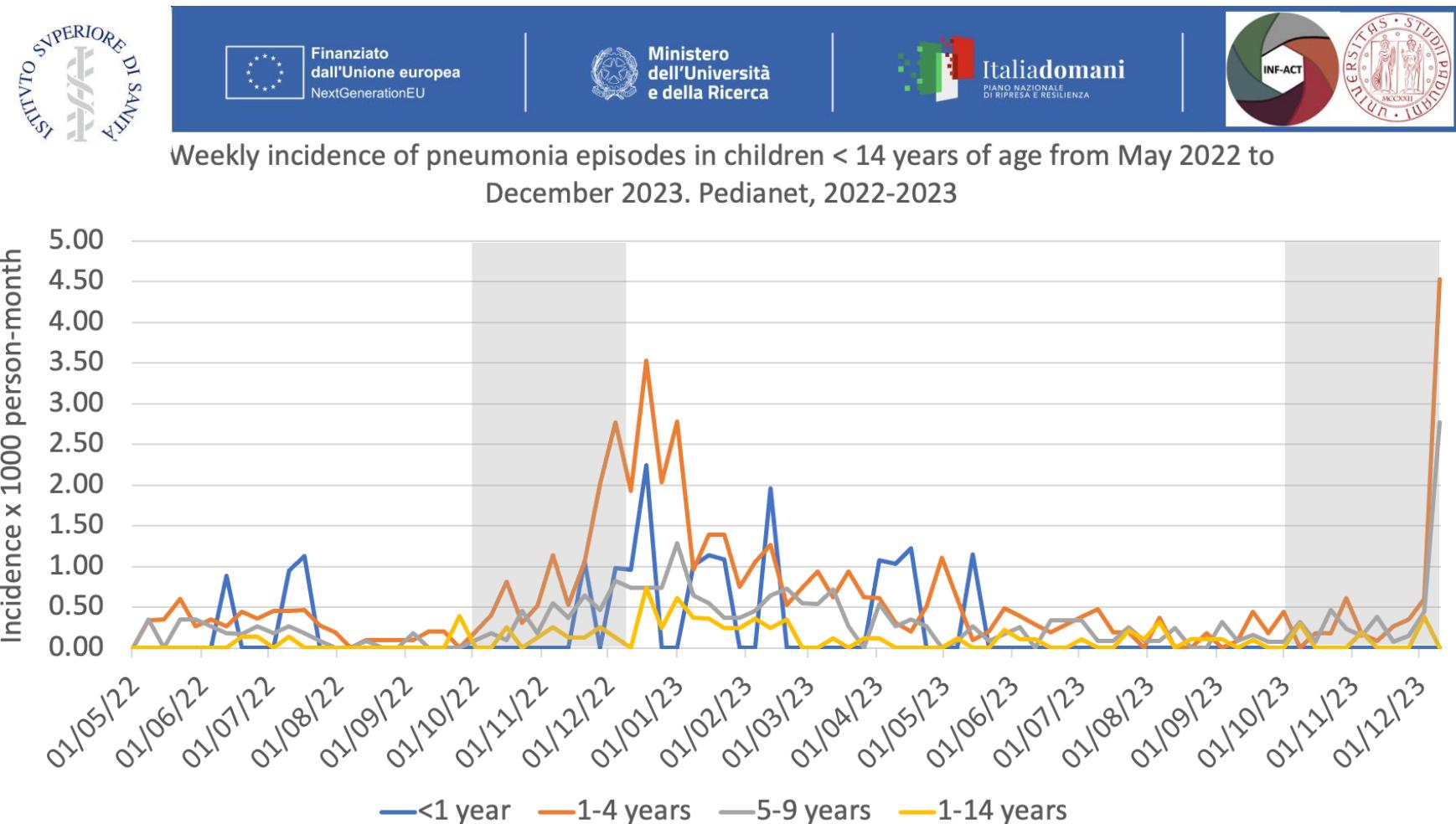
Suveillance studies

Overcoming
misdetection of
spontaneous
surveillance systems

+

Rapid data to info

Data presented on 15th December 2023



Potential: to health outcomes evaluation tool..



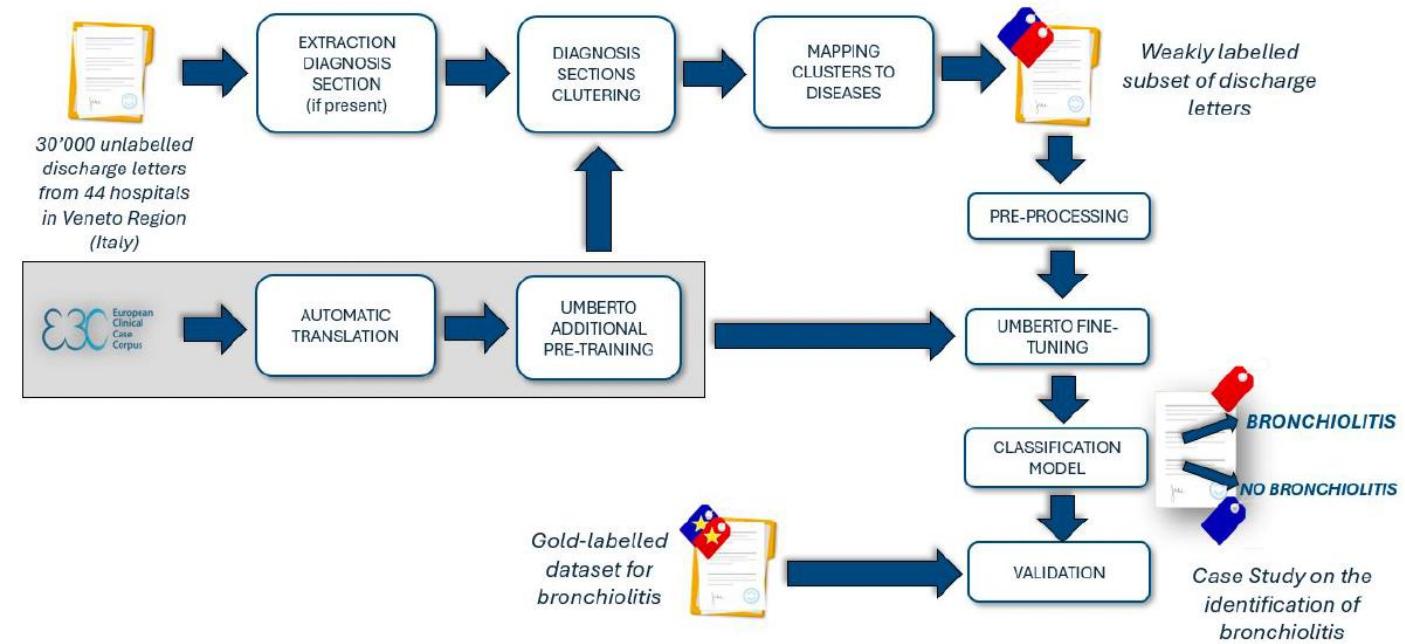
- Dataset Pedianet (18 years)
- Pedianet prospective studies
- Near-real world data
- Access to clinical notes in free text

Diagnosis validation studies

Overcome only-coded diagnosis analysis and inform on estimation adjustment

Weakly-supervised diagnosis identification from Italian discharge letters

Vittorio Torri, Elisa Barbieri, Anna Cantarutti, Carlo Giacquinto, Francesca Ieva



Potential: to clinical support tool...



- **Dataset Pedianet (18 years)**
- **Pedianet prospective studies**
- **Near-real world data**
- **Access to clinical notes in free text**
- **Software as its core**

Clinical diagnosis and treatment supporting tool

The screenshot displays the Miopediatra software interface, which serves as a clinical support tool. At the top, there is a navigation bar with icons for Agenda, Rubrica, Privacy BOX, and other clinical modules like Farmaci prescritti, Referti specialistica, Prescrizione, Bilanci, Misure, Vaccinazioni, Anamnesi, Contatti, Stampe, Ricoveri, Anagrafica, Neuro sviluppo, Allegati, Piani terapeutici, and Linee Guida CAPO. Below the navigation bar, a patient profile for "Miopediatra Antonio" is shown, including birth date (M 15/03/15), age (9a 6m 8g), C.F. (MPDNTN15C15G224W), and phone number (Tel. 3880483577). A note from the contact log states: "1 contatto dal 23/09/2024" and "OMA - Otite media acuta". To the right, a detailed contact form shows the date (23/09/2024), time (16:41), location (Ambulatorio), reason (Leggera/Nulla), symptoms, diagnosis ("OMA - Otite media acuta"), and a note about the antibiotic calculator ("apri calcolatore per la dose di antibiotico"). A red box highlights the "Linee Guida CAPO" icon in the navigation bar, and another red box highlights the "apri calcolatore per la dose di antibiotico" button in the contact details. A yellow circle with a green border and a yellow robot icon labeled "CAPO" is also visible.

The future: lessons from the hospital setting



- Alert for specific **microbiological findings** → promptly act starting/changing or stopping the antimicrobial treatment + early detection of epidemic (i.e. pertussis)

The screenshot shows a software application window titled "Messaggi per [REDACTED]". The main area displays a table of messages with columns: Sender, Subject, Date, Type, and Confirmed. Most messages are from "ADMIN" with subject "Messaggio Alert Mercurio" and type "CONFIRM", with the last one being dated 25/09/24 at 20.48. The "Confirmed" column contains several red "X" marks. There are two checkboxes in the header row for "Show old messages" and "Attiva cancellazione automatica". Below the table, there are tabs for "Messaggi" and "Note", with "Messaggi" selected. A message preview at the bottom shows: "25/09/2024 20:48- evento: MIC_AO_2024058553- paz: 50852469 9008058553 del 24/09/2024 - Sangue da via bianca - Emocultura da via bianca positiva - Esame microscopico: Gram positivi tipo s". At the bottom right is a blue "Chiudi" button.

Sender	Subject	Date	Type	Confirmed
ADMIN	Messaggio Alert Mercurio	26/09/24 16.16	CONFIRM	
ADMIN	Messaggio Alert Mercurio	26/09/24 16.16	CONFIRM	
ADMIN	Messaggio Alert Mercurio	26/09/24 13.36	CONFIRM	
ADMIN	Messaggio Alert Mercurio	26/09/24 13.36	CONFIRM	
ADMIN	Messaggio Alert Mercurio	26/09/24 12.48	CONFIRM	
ADMIN	Messaggio Alert Mercurio	26/09/24 12.48	CONFIRM	
ADMIN	Messaggio Alert Mercurio	25/09/24 20.48	CONFIRM	

The future: lessons from the hospital setting

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Galileo

X

ATTENZIONE: il tuo paziente è in terapia antibiotica da più di 5 giorni. Ha veramente bisogno di continuare il trattamento?

OK

- Alert for specific **microbiological findings** → promptly act starting/changing or stopping the antimicrobial treatment
- Alert for specific **antibiotic extended duration** → (or not first line molecule prescription) reduce broad spectrum prescriptions

Questions?

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