Databases available for pharmacoepidemiology researches in Japan (information obtained from survey answers as of August 2023)

Databases available for	pharmacoepidemiology researches in Japan (information obtained from survey answers as of August 2023)  Hospital-based												Insurance-based				Pharma	Oth	ers			
	NHO NCDA/MIA	4DIN	LDI	MID-NET Tokushukai MDV JMDC HCEVRWD NCD					NCD	NDB JMDC Cross Fact JammNet MDV DeSC IQVIA Claims dat							Cross Fact	IQVIA NPA data	NHWS PatientsMap			
Database organizer	National Hospital Organization	4DIN Ltd.	Life Data Initiative	Pharmaceuticals and Medical Devices	Tokushukai Information System	Medical Data Vision Co., Ltd.	JMDC.Inc	Real World Data, co.Ltd.,(JMDC	National Clinical Database	Ministry of Health, Labour and Welfare	JMDC.Inc	INTAGE Real World Inc.	JammNet	Medical Data Vision Co., Ltd.	DeSC Healthcare, Inc.	IQVIA Solutions Japan K.K.	INTAGE Real World Inc.	IQVIA Solutions Japan K.K.	Japan Medical Research Institute	JMDC.Inc	SSRI Cerner Enviza	Social Survey Research Information
Database name	National Hospital Organization Clinical Data Archives: NCDA/Medical Information Analytics: MIA	4DIN Research Network	Millennium Medical Record	Agency Medical Information Database Network (MID-NET)	Incorporated Tokushukai Medical Database	EBM Provider®	JMDC Hospital Database	Cornoration Group) RWD-DB	National Clinical Database	National Database of Health Insurance Claims and Specific Health Checkups of Japan	JMDC Payer database	Croaa Fact	JammNet database	EBM Provider®	DeSC database	IQVIA Claims data	Cross Fact	IQVIA NPA data	CO LTD.  NIHON CHOUZAI  Prescription  Database	JMDC Pharmacy Database	National Health and Wellness Survey	Co. I td PatientsMap
Contact information	700- dbproject@mail.hosp.	info@4din.com	contact@ldi.or.jp	wakaru- midnet@pmda.go.jp		ebm_sales@mdv.co.j	mdbhelp@jmdc.co.jp	solution@rwdata.co.jp	public@ncd-core.jp		mdbhelp@jmdc.co.jp	irw-info@intage.com	support@jamm- net.co.jp	ebm_sales@mdv.co p	.j rwe-psales@desc- hc.co.jp		irw-info@intage.com		soken- info@jpmedri.co.jp	mdbhelp@jmdc.co.jp	nhws@ssri.com	patientsmap@ssri.co m
Web site URL	https://nho.hosp.go.jp /cnt1-1_000070.html	https://4din.com/	https://www.ldi.or.jp/	https://www.pmda.go.j p/safety/mid- net/0001.html	https://www.tokushuka i- is.com/service/tmd.ph p	https://www.mdv.co.jp	https://www.phm- jmdc.com/	https://rwdata.co.jp/	https://www.ncd.or.jp/	https://www.mhlw.go.j p/stf/seisakunitsuite/b unya/kenkou iryou/iry ouhoken/resputo/ind	https://www.phm- jmdc.com/	https://www.intage- realworld.co.jp/	https://www.jamm- net.co.jp/	https://www.mdv.co.jj	https://desc- hc.co.jp/archives/publication	www.iqvia.co.jp	https://www.intage- realworld.co.jp/	www.iqvia.co.jp	https://www.jpmedri.c o.jp/	https://www.phm- jmdc.com/	https://www.ssri.com/ service/omnibus/nhw s/	https://www.ssri.com/ service/omnibus/patie ntsmap/
DOI of articles about the database	DOI:10.2147/CLEP.S 359072		https://doi.org/10.382 0/jjpe.27.3	10.1002/pds.4777、 10.1002/pds.4879			https://onlinelibrary.wil ey.com/doi/10.1002/j		https://www.ncd.or.jp/	<u>ex.html</u>	https://onlinelibrary.wi ey.com/doi/10.1002/j	None			10.31662/jmaj.2021- 0189		None					
Database Overview General description of the	Clinical database	Network to collect,	Millennial Medical	The medical	Tokushukai group is	Administrative	af2 367 A database of cases	Integrated database	Multidisciplinary	Database of health	Japan's largest	Database based on	An insurance claims	Health claims	A database of	Claims database	Pharmacy claims	Pharmacy claims	The database is	A dispensing	NHWS collects data	This is a survey
database	based on 70 NHO hospital information systems and 140 DPC/receipt data	deidentify and summarize various data from medical institutions	Record is the business followed by a Japanese law called "The Next Generation Medical Infrastructure Act" Our dataset is including DPC survey data, Claims data and data from electric medical records in Japan. By using unstructured text data and laboratory test results such as blood testfurine test, it is beneficial for identifying clinical outcome and also creating more detailed and accurate patient cohort for your study.	information Database network system for utilizing in safety assessment managed by PMDA under the Act on the Pharmaceuticals and Medical Devices Agency	comprised of over 70 hospitals in Japan, and the group manages the medical database with 14 million patients. Tokushukai works on research and Al development by using medical, management, and clinical data of the hospitals.	database for inpatient and outpatient consists of 485 acute (mainly considered as "advanced treatment hospitals") hospitals in Japan	sourced from receipts, electronic medical records (clinical laboratory values), and DPC survey data collected from more than 900 DPC/non-DPC hospitals nationwide. Includes abundant information on elderty and hospitalized patients.	of medical information such as electronic medical records, DPC data, and claims	registry platform initially developed by surgery related professional societies in Japan. Currently managing nationwide registries for various surgeries, interventions, pathology, as well as cancer registries. Also collects hospital based DPC / claims data which can be used together with the registry data for research.	insurance claims and specific health checkups for preparation, implementation, and evaluation of medical cost optimization plan	epidemiological database consisting of receipts, health checkup results, and subscriber registers from insurers nationwide. The database has excellent patient traceability (up to 17 years), and its population includes healthy people, making it possible to examine the prevalence and incidence of diseases. It is also linked to the PRO Panel, which enables direct approaches to patients through questionnaires and article distribution.	health insurance, include of all rezept(include dental rezept),except of Organ transplant patient and comment field for all patients.	database that utilizes the insurance system as well as limited date on the elderly.	database from inpatient, outpatient,	anonymized processed sinformation based on receipt data, annual medical checkup data, and enrollment information collected from multiple Employee Health Insurance, National Health Insurance, and Latter-Stage Elderly Healthcare System.	consists of 245 health insurance societies in Japan.	database contains extramural dispense records	database collecting dispense claims from 10,800 pharmacies nationwide. # of prescriptions: 169 million in 2022.	based on outpatient prescriptions from medical institutions, various surveys of patients, DTC (direct to consumer), and other sources. NIHON CHOUZA is Japan's second largest dispensing group, with a chain of 726 stores in Japan.	database that uses prescriptions and receipts from dispensing pharmacies across the country as its source.	from patients in 10 countries. The data includes more than 165 disease areas and provides a variety of metrics, such as prevalence, diagnosis and treatment rates and more than 10,000 other variables not mentioned here.	database of more than 38,000 clinical physicians in Japan, the United States, China, and the United Kingdom. It is possible to ascertain the medical treatment rate and the number
Data source DPC (Format 1) DPC (EF file) Medical claim Dental claim Pharmacy claim	Yes Yes Yes No No	Yes Yes Limited No No	Yes Yes Yes No No	Yes Yes Yes No No	Yes Yes Yes No	Yes Yes Yes No	Yes Yes Yes No No	Yes Yes Yes No No	Yes Yes No No	No No Yes Yes Yes	No No Yes Yes Yes	No Yes Yes Yes Yes	No No Yes Limited Yes	No No Yes No Yes	No No Yes Yes Yes	No No Yes Yes Yes	No No No No Vo Yes	No No No No Yes	No No No No No Yes	No No No No Yes		No No No No
Electronic medical chart Lab test results	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No Limited	Yes Yes	Yes Yes	No No	No No	No No	No No	No No	No No	No No	No No	No No	No No	No No	No No		No No
Ordering Health checkup Registry	Yes No	Limited No Limited	Yes No No	Yes No No	Yes Yes No	No No No	No No No	Yes Limited No	No No Yes	No Yes No	No Yes No	No Limited No	No No No	No Limited No	No Limited No	No Limited No	No No No	No No No	No No No	No No No		No No No
Others, notes	No No	Limited	Yes In category of [Datasource: electronic medical record], data from electric medical records include unstrucured text data such as patient note/clinical summary/summary on discharge/medical reference letter etc. (which are not include in stractured data)	No	No	Yes DPC (Dille) /DPC claims/blood test data 'Blood test data is limited to some hospitals	No No	No	No.	No No	Yes	Yes DPC Receipt	Yes DPC Receipt	Yes DPC claims and partially available ledger information	Yes Life-log of HL, QOL, WPAI, PSQI, number of steps, blood glucose level, blood pressure, and body weight data can be used in Employee Health Insurance (EHI) and National Health Insurance(NHI).	Yes DPC claims, partially subscriber ledger information	No No	No No	Yes Pharmaceutical delivery quantity, Patient Survey	No No	Yes PatienI-reported information	Yes Physician survey
Data collected from Others, notes	Medical institution	Medical institution	Medical institution	Medical institution	Medical institution	Medical institution	Medical institution	Medical institution	Medical institution	Others Insurance claims and	Health insurance association	Health insurance association Health insuarance	Health insurance association	Health insurance association	Health insurance association We deliver claim data	Health insurance association	Pharmacy	Pharmacy	Pharmacy	Pharmacy	****	Others Individual Physician
										special health checkups and specific health guidance data from al health insurance associations		association			which includes Employee Health Insurance (EHI), National Health Insurance(NHI) and Latter-Stage Elderly Healthcare System (LSEHS).							
Number of organizations  Data period  Starting year	140 2016	Refore 2000	2015	23	72	485	937 Before 2000	190 Before 2000	5600 2011	2009	285	172 2010	2006	162	280	245	3258	10800	726 2001	5600 2020	Refore 2000	2011
Starting year Latest year Notes	2016 2023 Starting year MIA : 2011	Before 2000 2023 By participating hospitals	2015 Data period is limited to all patients who are visited hospitals after July 2020 excluding those who refused to provide their medical information. Once a patient has visited a hospital, the patient's medical information from earlier periods can	2009 2023	2010 2023 The start timing depends on the hospital.	2008 2023 *Mainly from April 2010	Before 2000 2023	Before 2000 2023	2011 2022	2008 2023	2005 2023	2010 2023	2006 2023	2012 2023	2014 2022 the maximum data period is 8 years, and its minimum is 1 year.		2015 2023	2015 2023 Part of the data is available from April 2008.	2001 2023 Data up to the previous day can be provided	2020 2023	Before 2000 2022 Since 1998 (2008 for Japanese data). 2023 Data will be available in January, 2024.	2011 2023 Varies by survey area
Handling Anonymously	No	Yes	also be collected.	No		Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes		No
Processed Information Following the regulations on		Yes	Yes			Yes	Yes	Yes			Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes		
Anonymously Processed Information						<u> </u>						j	<u> </u>					<u> </u>				

					Hospital-based								Insurance-based					Pharms	acy-based		0	Others
	NHO NCDA/MIA	4DIN	LDI	MID-NET	Tokushukai	MDV	JMDC	HCEI/RWD	NCD	NDB	JMDC	Cross Fact	JammNet	MDV	DeSC	IQVIA Claims data	Cross Fact	IQVIA NPA data	Nihon-Chouzai	JMDC	NHWS	PatientsMap
Size Number of unique identifiers	500	821	158	605	1470	4425	3425	1410	2200	12000	1600	1071.3	214	860	1200	1557	3666	8917	2100	3276	200	37000
[approx., 10K people] Notes			The number of unique identifiers covers facilities that have become available for use from among the 62 contracted hospitals.	As of December,2022						Almost equal to total population in Japan		Health insurance membership approx 12.3 million			Person who is enrolled at least once during the data period.	Cumulative number of	Net number of patients since April 2015	The registrants are not fixed because patients who visit pharmacies are targeted.			2 million	Japan: 2,000, U.S.: 6,000, China: 12,000 U.K.: 1,000
Annual number of unique identifiers (latest year)	200	64			174	1211	848	334	200		1000	897		436	755	759	1239	3464	200	1888	3	2
[approx., 10K people] The latest year Notes	2021	2022			2022 Patients who have a basic medical payment record (Ministry of Health and Welfare Code A) in their account. Except dentistry. Reference: 2019 = 1.4 million	2022 April 2022-March 2023	2022	April 2022 - March 2023	2022		2023	January 2022 to December 2022 : Net number of patients approx 4.95 million		2022 April 2022-March 2023	2022	2022 Number of patients from April 2022 to March 2023	2022 August 2022 to July 2023	2022 / approx. 34,640,000	2022 April 2022 to March 2023	2022	2022  Japan Data: 30,000 (The data are processed processed ymagnification factor in accordance with the census data to make the data nationally representative.)	in e
	NCDA: 2.1% of Japanese population, MIA: approx. 17% of Japanese population	About 6.7% of Japanese population	4.2%.It covers 32 out of a total of 757hospitals with 400 beds or more in Japan.(according to the Medical Facility Dynamics Survey Hospital in 2020)			about 9.7% of Japanese population     about 27.5% of total number for acute hospitals						Covers 8.57% of the total population in Japan(total population in 2022)	approx 2% of insurance programs	about 3.5% of Japanese population	Coverage ratio is EHI 2.4% NHI 15.2% LSEHS 17.6% The denominator is number of members for each insurance.	Approx. 6.1% of the Japanese population	7% of annual prescription (Survey by Japan Pharmaceutical Association)		Approx. 2.0% of the estimated number of out-of-hospital prescriptions by the Japan Pharmaceutical Association			5.9% of total numbe of physicians in Japa
Annual N of outpatients (latest year) [approx., 10K	200	63			169	1166	861	320			840	492.4	192	436	593	756	1239		200	1888		
people] Annual N of inpatients (latest year) [approx., 10K people]	63	10			23	222	155	54			41	23.9	3	21	52	35				0		
Annual N of medicated diabetes patients (latest year) [approx., 10K people]		4			6.7	78	62	21			30	14.6	12	14	85	24	64		23	75		500
Definition		The number of patients with the disease of ICD10 E10-E14 (Exclude suspected cases) or the number of patients that a diabetes medicine was prescribed			2022. The number of outpatients who has the payment record of diabetes medications	Target disease: ICD10: E10-E14 (exclude suspected cases)     Target medication: ATC (EphMRA): A10     Condition for target patients: Target medication was prescribed in the same month as the diagnosis of the target disease.		Patients with ICD- 10:E10-E14 disease assignment (excluding suspected) and (and conditions) ATC:A10 drugs prescribed				ICD-10:E10-E14 and EphmraATC : A10	ICD10 : E10-E14 ATC : A10	Target disease: ICD10: E10-E14 (exclude suspected cases) Target medication ATC (EphMRA): A10 Condition for targe patients: Target medication was prescribed in the same month as the diagnosis of the target disease.	E10-E14 antidiabetic drug: ATC code A10	. 2022 - March 2023	Patients prescribed diabetes treatment		Patients prescribed diabetic medications			Number of chart- based patients prescribed any drug
Annual N of influenza diagnosed patients (latest		0.1			0.2	4.9	4	1.74			30	1.5	0.1	16	once. 0.4	26	16		3			0.8
year) [approx., 10K people]  Definition		The number of patients with the disease of ICD10 J10, J11 (Exclude suspected cases) or the number of patients that a Influenza medicine was prescribed			2022. The number of patients with ICD10=J09~J11 newly added to the name of the receipt disease. (no duplicates) (Not including suspected disease) Ex. 2019=80,000.	ICD10 : J10, J11		Patients assigned ICD-10:J09-J11 disease				ICD-10:J10-J11	ICD : J09,J10,J11	ICD10 : J10, J11	The disease is defined as below. Influenza: ICD-10 code J09, J10, J11 Influenza patient is defined as a person who is diagnosed as Influenza during 2022 at least once.	ICD-10 : J09,J10,J11	Patients prescribed anti-influenza drugs		Number of prescriptions for anti-influenza drugs			Number of patients documented in the medical record by th physician.
Number of patients followed ≥1 year [approx., 10K people]					56	1865	1457	799			1142	786.4	203	651	970	1199	700		145			
≥3 year [approx., 10K people] ≥5 year [approx., 10K						1194 733	859 476	556 368			775 440	504.5 312.5	176 160	451 306	640 350	821 543	398 258		100			
peoble] Median [approx., year] Notes					Patients who have a basic medical payment record (Ministry of Health and Welfare Code A) in both 2021 and 2019	2 Average		2.8 Median is calculated excluding patients with only one visit (average is about 4.9 years)				2.67	9.3 Up to 15 years	4 Average	3	3.3	1.6 Patients from Augus 2022 to July 2023	t	5 in annual number of Person ID: 200			
Age Distribution 0 - 14 years old [approx., %]	7	6.6	12		10	14.2	8.2	9.5			17	18.9	19	21.8	5.44	16	15	14.4	10.7	17	0	
15 - 64 years old [approx., %] 65 - 74 years old [approx.,	38 25	52.6 18.8	44 19		50 15	50.7 16.1	42.3 18.8	42.7 18.1			79 4	77.48 3.55	58 17	76 2.2	43.13 18.45	78 6	56 14	53.2 14	53.6 15.3	50 14	67 33	
%] 75 years old or older	30	22	25		25	19	30.7	29.7			0	0.06	6	0	32.98	0	15	18.4	20.3	19	# "	+
[approx., %] Notes		Age distribution of patients in the latest			We use the data (2020, Jan-Dec).			Age distribution of patients in the latest										Net patient based			Respondents are 18 or older	s
Prescriptions (data availability Dispensing (in-hospital)	Yes	Yes	Yes Limited		Yes Yes	Yes Yes	Yes Vae	No No	Yes	Yes Yes	Yes	Yes	Yes Yes	Yes Vae	Yes Vae	Yes	No Vee	No Ves	No Ves	No Yes	Limited	No No
Dispensing (out-of-hospital)  Date of prescription	Yes Yes	Yes Yes	Limited Yes	Yes	Yes Yes	Yes Yes	Yes Yes	No Yes	No No	Yes Yes	Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Limited Limited	No No
Date of dispending Dosage of prescription	Yes Yes	Limited Yes	Limited Yes	No Yes Yes	Yes	Yes Yes	Limited Yes	No Yes Yes	Yes Yes	Limited Yes	Yes Yes	Yes Yes	Yes Yes	No Yes	Yes Yes	Yes Yes	Yes Yes Yes	Yes Yes	Yes Yes	Yes Yes	Limited No Vec	No No
Days of supply Administration Injection	Yes Yes Yes	Yes Yes Yes	Yes Yes Yes	Yes Yes	Yes Yes Yes	Yes No Yes	Yes Limited Yes	Limited Yes	Yes No Yes	Yes No Yes	Yes Limited Yes	Yes Yes Yes	Yes Limited Yes	Yes No Yes	Yes Limited Yes	Yes Limited Yes	Yes Limited	Yes No Limited	Yes Yes Yes	Yes Limited Limited	Yes Limited Yes	No No No
Vaccine Drug master Any available master ATC (EphMRA) ATC (WHO) VJ code NHI drug price list code HOT code Reimbursement code	Limited  Yes  No  No  No  No  Yes  Yes  Yes	Limited  Yes  Yes  Yes  Yes  No  Yes  Yes  Yes	Yes Yes No Yes Yes Yes Yes Yes Yes Yes	Limited  Yes No Yes Yes Yes Yes Yes Yes	Yes  Yes  No  No  Yes  Yes  Yes  Yes  Yes  Yes	Yes Yes Yes Yes Yes Yes Yes Yes Yes	Limited  Yes Yes Yes Yes Yes No Yes	Limited  Yes Yes Yes Yes Yes Yes Yes Yes Yes No Yes	No No	Yes No No No No No Yes	Yes Yes Yes Yes Yes Yes Yes Yes No Yes	Yes Yes Limited Yes Yes No Yes	Yes Yes No Yes Yes Yes Yes Yes Yes Yes	No Yes Yes Yes Yes Yes Yes Yes Yes No Yes	No Yes Yes Yes Yes Yes Yes Yes Yes No	No Yes Yes Yes Yes Yes Yes Yes Yes Yes	Yes Yes Limited Yes Yes No	Yes Yes No No No Yes	Yes Yes No Yes No Yes No	Yes Yes Yes Yes Yes Yes Yes Yes Yes	Yes  No	No N
Hospital-original code Others	Yes No	Yes No	No Yes Ingredient Quantity	Yes	Yes	No Yes Titer	No No	Yes No		No No	No No	No No	No No	No Yes Titer	No Yes	No No	No No No	No No	No No	No No	No No	No No

Procedures (data availability)					Hospital-based								Insurance-based						Pharmacy-based			ers
Procedures (data availability)	NHO NCDA/MIA	4DIN	LDI	MID-NET	Tokushukai	MDV	JMDC	HCEI/RWD	NCD	NDB	JMDC	Cross Fact	JammNet	MDV	DeSC	IQVIA Claims data	Cross Fact	IQVIA NPA data	Nihon-Chouzai	JMDC	NHWS	PatientsMap
Procedure name	Yes	Yes	Yes	Yes		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	Limited	No
Date of procedure Procedure master	Yes	Yes	Yes	Yes		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	No
Any available master Reimbursement category,	Yes Yes	Yes Yes	Yes Yes	Yes Yes		Yes Yes	Yes Yes	Yes Yes	Yes No	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No	No No	No No	No	No No	No Limited
Reimbursement code Others	Yes No	Yes No	Yes No	Yes		Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No		No No	No No		No No	No No
Hospitalization (data availability Date of hospital admission	V) Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Limited	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	Limited	No
Date of hospital discharge Medication while	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Limited Yes	Limited Yes	Yes Yes	Yes Yes	Yes Yes	Limited Yes	Yes Yes	No No	No No	No No	No No	No No	No No
hospitalization Diagnosis (data availability)								<u> </u>		LL								<u> </u>				
Diagnosis name Suspicions diagnosis or not	Yes Yes	Yes Yes	Yes Yes	Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No No	No No	No No	No No	No No	No No
Diagnosis master				Ves									**********************			******************	No	No	No		No	
Any available master Standard diagnosis code	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	INO	No No	No	No No	No	No
(Reimbursement code) ICD10 code (2013)	Limited	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes		No	No	No	No	
ICD10 code (other than 2013)	Yes	No	No	Yes		Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	No	Yes		No	No	No	No	
Others Laboratory test (data availabilit	ty)	No	No			No	No	No	No	No		No	No	No	No	No		No	No	No	No	
Lab test (ordering) Lab test results	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	No	Yes	Yes	No	No	No	No	No	No	No	No	No
Any available test results Lab test for sample (e.g.,	Yes Yes	Yes Limited	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Limited	Yes Yes	No	No	No	No	No No	No No	No		No No	No	No	No No	No No
blood, urine, microbe Physiological test (e.g.,	No	Limited	Limited	No		No	Limited	Limited	Yes					No	No			No			No	No
respiratory function, brain waves, supersonic waves)		Limbo	Limitod				Limitod	Limitod	100						1.0						1.0	
Results of diagnostic imaging (e.g., report of	No	Limited	Limited	No		No	Limited	Limited	Limited					No	No			No			No	No
imaging interpretation) Genetic test (pathological	No	Limited	Limited	No		No	Limited	Limited	Yes					No	No			No			No	No
tissue) Others	No	No				No	No	No	No					No	No			No			No	No
Others, notes			Laboratory test result can be identified from structured data, while other laboratory test results can be identified from unstructured data. Continuous test results for each patient are available.																			
Lab test master Any available master	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No	No	No	No	No
Loinc code JLAC code	No Yes	No No	No No	No Yes	Yes	No Yes	No Yes	No Limited	No No	No No	No No	No No	No No		No No			No No			No No	No No
Reimbursement code Hospital-original code	Yes Yes	Yes Yes	Yes Limited	Yes Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes No	Yes No	Yes	Yes No	Yes No		No No			No No			No No	No No
Others Others, notes		No	No			No	No	Yes RWD proprietary master created based on JLAC10		No.	No No	No No	No No		No			No No			No	No
Demographic, Vital (data availa						L v		l v				.,,					<u> </u>					
Birth year Birth month	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Limited	Yes Yes	Limited Limited	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes No	No No	Yes Yes	Yes No	No No
Birth date Age	Yes Yes	Yes Yes	No Yes	Yes Yes	Yes Yes	No Yes	No Yes	No No	Yes Yes	No Limited	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No Yes	No No
Height Weight	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Limited Limited	Limited Limited	Limited Limited	Yes Yes	Yes Yes	No No	Limited Limited	No No	No No	No No	Limited Limited	No No	No No	No No	Limited Limited	No No	Yes Yes	No No
Blood pressure Insurers for patients	Yes	Limited	Yes	No	Limited	Limited	No	Limited	No	No	No	No	No	No	Limited	No	No	No	Limited	No	Limited	No
National health insurance Japan health insurance	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No No	Yes Yes	Limited Limited	No No	No No	Limited No	No No	Yes No	No No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Limited	No No
association Health insurance society	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Limited	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Limited	No
Mutual society of health insurance	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Limited	No	Yes	No	Yes	No	No	Yes	Yes	Yes	Yes	Limited	No
Late-stage medical care system for the elderly	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Limited	No	No	Limited	No	Yes	No	Yes	Yes	Yes	Yes	Limited	No
Data Access, Others Access to raw data via web	No.	Yes	No	No	1	Limited	Yes	Yes	No	l No	Yes	Yes	Yes	Limited	Yes	Yes	Yes	Limited	Yes	Yes	Limited	Yes
Access to riginal source data such as medical charts (e.g., outcome validation, additional data collection)	Yes	Limited	Limited	No	Yes	Limited	Limited	Limited	No	No No	No No	No No	No No	No	No	No	No	No	No	No No	Limited	No
Timing of data update	Daily	Monthly	Monthly		Daily	Monthly	Monthly		Annually	Monthly	Monthly	Monthly	Monthly	Monthly		Monthly	Monthly	Monthly	Daily	Weekly	Annually	Annually
Others, notes				every week at the earliest	3			3 months							The database is updated monthly, but the frequency of data provision from insurers is different, so the frequency of updating is not uniform.							Japan renews once a year. Other countries vary by region.
Latest data Common Data Model OMOP	Previous day  No plan	1 month ago No plan	2 months ago		No lag time	2 months ago Available	2 months ago	1 month ago	4 months ago		2 months ago No plan	2.5 months ago	3 months ago	3 months ago  Considering	7 months ago  No plan	3 months ago Available	1 months ago  No plan	1 months ago	Previous day	3 days ago	12 months ago	11 months ago  No plan
SS-MIX2	Available	Available				Considering	No plan No plan	Considering No plan	No plan No plan		No plan	No plan No plan	No plan No plan	Considering	No plan	No plan	No plan	Considering No plan	No plan No plan	No plan No plan	No plan No plan	No plan
Sentinel Publication Presentation	No plan	No plan 9	7			Considering  Many	No plan Many	No plan 16	No plan Many		No plan Many	No plan A few	No plan	Considering	No plan 79	No plan	No plan Many	No plan Many	No plan Many	No plan	No plan  The total of posters	No plan
Publication to peer review	12	38	4	Therapeutic		463		34	Many		620	A few			21		Many	4 (as of Aug., 2023)	Many		and manuscripts is more than 1,600 The total of posters	
journal		-5	·	Innovation & Regulatory Science, CLINICAL PHARMACOLOGY & THERAPEUTICS, etc.		*Total number of publications including peer review		j.	,								,	(			and manuscripts is more than 1,600	