Implementing a drug prescription network to evaluate **EPH182** psychiatric polypharmacy using data from IADB.nl

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Cardiovascul

INTRODUCTION

Chronic psychiatric disorders lead to polypharmacy



Source of data and pre-processing steps

Prescription registry from https://IADB.nl/					Cleaning the DDD		Groupina by ATC le		
ID	ATC	DDD	Date	Period			e : e e e e e e e e e e e e e e e e e e		
РI		1	2018-01-0	15	DDD	Period	Alimentary &	Blood	









Sirois, C., Tannenbaum, C., Gagnon, ME. et al. Monitori erapy, Drugs Ther Perspect 32, 257-264 (2016

Polypharmacy is a complex and interlinked medication use



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P1	G02BA03	1800	2018-01-01	1800		L		Dermato- logicals	Genito- urinary	Systemic Hormonal
P1	B03BA03	0.8	2018-01-01	13	F	Ratio = DDE	D/Period	Anti-	Anti-	Musculo-
P2	A07FC02	07	2018-01-01	12		¥		mectives	neoplastic	Skeletal
P2	B03BA03	100	2018-01-01	5	DDD > 1? Yes No			Anti- parasitic	Respiratory	Sensory
							Others	Anesthetic	Analgesics	
PN	A11CC05	0.9	2022-12-31	10	DDD =	= Ratio	Keep DDD	Anti- epileptics	Anti- parkinsons	Other Neuro Drugs
Incl	ucion									- 3 -
- Aged 18–65 years old			Filter	Filter DDD between {0.1, 10}		Anti- psychotics	Anxiolytics	Hypnotics		
- Data from 2018 to 2022				_			Anti- depressants	Psycho- stimulants	Anti- dementia	

Determining relative importance of each medications





What can a network-based approach offer?

Cavallo (2013)	Bazzoni (2015)	Askar (2021)
 Complement inferential statistics in pharmacoepidemiology Extract and isolate co-prescription for detailed analysis Demonstrate that high connections only occur in a few medications Evaluate physician's prescription habit 	 Highlight dynamic changes in medication uses Reflect changes in physician's prescription habit Display the co-prescription trends of selected medications Extract and isolate distinct clusters in a network 	 Observe the influence of multiple drugs using centrality measures Suggest centrality measures for variable selection Identify clusters of patients with similar co-prescription patterns Detect topological differences by comparing different networks
Future Direction Encourage network science application for public health evaluation	Future Direction Evaluate medicine prescription and expenditure using a network-based approach	Future Direction Apply network analysis in social pharmacy and pharmacoepidemiology

angoni A, Tettamanti M, Franchi C, Pasina L, Djade CD, Fortino I, Bortolotti A, Merlino L, Nobili A. The drug prescription network: A system-level view

ano S. Boccia G. De Caro F. De Santis M. Capunzo M. Network analysis of drug prescriptions. Pharmacoepidemiology and drug safety. 2013 Feb:22(2):13(

Network centrality as a score for each medication

Network Measures Top	ology analysis	Node measures	Centrality		Figenvector centrality
Modularity ana Networks com N-partite networks	alysis nparison vorks	lge measures Edge thickness obal description Number of node Density Assortativity	Lego-networks	 Degree centrality Betweenness centra Closeness centrality 	lity
Evaluating Medication in	DPN	O	perational Definition		
Highest Eigenvector centrality	hest Closeness centrality F	Cer Indic netw	ntrality cates how influential a medication vork	on is in a $\sum_{i=1}^{\lambda c_i} c_i$	$= \sum_{j \neq i} v_{j,i} \cdot c_j$ $= 1$
Highest Out-degree centrality	Highest Degree centrality and Betweenness centrality	Heat to his	envector Centrality sures how well-connected a me ghly co-prescribed medication	edication is $c_i^{i\in N}$: Associated eigenvalue : Eigenvector centrality of node <i>i</i>

Seven medication	ns had a hig	Madiantian Group	N Claims	Eigenvector Centrality		Dose	
relative importa	nce		Medication Group	2018 - 2022	Mean [95% CI]		Mean [SD]
Alimentary and metabolism	1 		Alimentary and metabolism	11,512,424	0.2074 [0.2066,	0.2081]	0.60 [0.33]
Cardiovascular ·····			Cardiovascular	9,778,030	0.1914 [0.1901,	0.1926]	0.54 [0.31]
Respiratory			Respiratory	5,492,900	0.0895 [0.0890,	0.0899]	0.66 [0.33]
Antidepressants			Antidepressants	6,108,776	0.0894 [0.0891,	0.0896]	0.54 [0.31]
Blood	···{·····-		Blood	2,908,944	0.0827 [0.0821,	0.0833]	0.69 [0.39]
Analgesics	· · 4-		Analgesics	2,557,528	0.0499 [0.0494,	0.0504]	0.42 [0.26]
Anxiolytics			Anxiolytics	2,644,309	0.0443 [0.0438,	0.0449]	0.46 [0.29]
Dermatologicals	+						
Musculoskeletal ······				Stron	ath		
Systemic hormonal				Stien	gui		
Antipsychotics ·····-	H		- Network analysi	sisacomr	lomontarya	nnroa	ch to the
Genitourinary	· · · · · · · · · · · · · · · · · · ·			of inform		ppioa	
Hypnotics and sedatives			DDN is provenue		lita statistics		4
Antiepileptics ···-	1 			seiulas a u	,	Unand	J
Systemic anti-infectives			variable selectio	onstrategy	,		
Antineoplastics ···							
Other nervous system drugs							
Antiparkinson				Limita	ition		
Psychostimulants							
Sensory	····		- IADB.nl provides	s prescript	ion registry d	lata, n	ot drug
Antiparasitics			administration r	or diagnos	sis		
Anesthetic			- We need a way t	o standaro	dize DDD whe	en excl	luding
Others			the record				
Antidementia	····		- Constructing a l	DPN is com	putationally	exper	nsive
	0.05 0.10	0.15 0.20					

Future Direction

- Extract entries with high eigenvector centrality to assess individual patient's period of use
- Formulate a bipartite network to link medication with diagnosis or prescribing habits



 $v_{j,i}$: Connection from j to i

Askar M. Cañadas RN, Svendsen K, An introduction to network analysis for

RESEARCH QUESTION

What does eigenvector centrality tell us about polypharmacy in patients with psychiatric disorders?





DPN is a complementary approach to the general practice of inferential statistics



Network analysis methodology is a powerful tool to address highly connected data



More studies incorporating network analysis of medication uses are encouraged



Groningen Research Institute of Pharmacy PharmacoTherapy, -Epidemiology & -Economics