

W14

The potential of The Copenhagen Primary Care Laboratory (CopLab) Database. Participate in the brainstorm

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Background & Aims: Routinely ordered blood tests, electrocardiograms, echocardiographs, lung functions tests and home blood pressure measurements in general practice support GPs in diagnosing and treating their patients. These analyses also document important physiological and pathophysiological relations. There is a need for research databases to explore associations between these parameters, concurrent comorbidities, and future disease outcomes.

Method: The Copenhagen General Practitioners' Laboratory was the main laboratory serving GPs in the Copenhagen area, covering approximately 1.2 million inhabitants up until 2015. Services included a broad range of biochemical analyses as well as several cardiac and lung function tests. All analytical results since July 1, 2000 were registered. The Copenhagen Primary Care Laboratory (CopLab) database contains all results from these analyses (e.g. 176.000.000 blood test results) from 2000 to 2015 requested by GPs. These data can be merged at a person level with the extensive Danish health registers.

Results: The general type of research question that can be answered by the CopLab database is whether certain laboratory values are associated with an increased risk of certain future disease outcomes, however, the way the data are obtained, the dynamic.

Background: population, the sheer amount of data, calls for a carefully considered analytical approach. The workshop will review the data and methodological issues behind the construction and analysis of the CopLab database as well as give examples of its use to inspire peers for collaboration.

Conclusions: We will invite the participants to a brain storm about how to use this vast primary care research resource to the benefit of patients in order to 1) describe the emergence of new risk factors or disease indicators, 2) describe the prevalence and incidence of disease, and 3) relate morbidity, mortality, and the use of health services to these risk factors and/or indicators

