Person with cancer—comorbidities, Colinet defined comorbidities code N[N]

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# Person with cancer—comorbidities, Colinet defined comorbidities code N[N]

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Colinet comorbidities |
| METEOR identifier: | 432994 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 08/05/2014 |
| Definition: | Diseases or conditions present at diagnosis and defined as comorbidities relevant to non-small cell lung cancer by Colinet et al 2005, as represented by a code. |
| Data Element Concept: | [Person with cancer—comorbidities](https://meteor.aihw.gov.au/content/432991) |
| Value Domain: | [Colinet defined comorbidities code N[N]](https://meteor.aihw.gov.au/content/432983) |

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| Value domain attributes | | |
| Representational attributes | | |
| Representation class: | Code | |
| Data type: | Number | |
| Format: | N[N] | |
| Maximum character length: | 2 | |
|  | **Value** | **Meaning** |
| Permissible values: | 1 | Cardiovascular |
|  | 2 | Respiratory |
|  | 3 | Neoplastic |
|  | 4 | Renal insufficiency |
|  | 5 | Diabetes |
|  | 6 | Alcoholism |
|  | 7 | Tobacco consumption |
| Supplementary values: | 97 | Not applicable-no comorbidities present |
|  | 98 | Unknown whether comorbidities are present |
|  | 99 | Comorbidities are present but type not stated/inadequately described |

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| Collection and usage attributes | |
| Guide for use: | Record each comorbid condition, as defined by the Colinet criteria, present in the patient at the time of diagnosis for lung cancer.  The criteria were developed specifically for non-small cell lung cancer where comorbidities may be an important variable in treatment decisions and prognosis, however, record each comorbid condition for all lung cancers.  Colinet criteria for comorbidities  CODE 1   Cardiovascular  Defined as the presence of one or more of the following:   * congestive heart failure, * ischaemic cardiopathy with/without myocardial infarction, * severe valvular cardiopathy, * arrhythmia requiring chronic treatment, * history of cerebrovascular disease, * hypertension, and/or * peripheral vascular disease   CODE 2   Respiratory  Defined as the presence of one or more of the following:   * history of tuberculosis, * history of pleural effusion or pneumonia, * asthma, * pulmonary embolism, * chronic pulmonary insufficiency (as defined by a chronic hypoxemia less than 60 mmHg, and/or * chronic obstructive pulmonary disease (COPD) inducing a FEV1 less than 1.5l)   CODE 3   Neoplastic  Defined as a previous personal history of cancer excluding basal cell carcinoma of the skin and in situ carcinoma of the cervix.  CODE 4   Renal insufficiency  Defined as a creatinine clearance lower than 60 ml/min­.  CODE 5   Diabetes mellitus  Defined as diabetes treated with either oral hypoglycaemics or insulin.  CODE 6   Alcoholism  Defined as a daily consumption of:   * more than 80g of alcohol (8 standard drinks) for men * more than 40g of alcohol (4 standard drinks) for women   CODE 7   Tobacco consumption  Defined as a lifelong consumption of an equivalent of at least 100 cigarettes. |
| Comments: | The Colinet system provides criteria to define comorbidities and a scoring system whereby each comorbidity is weighted and assigned a score, then scores are added to provide the Simplified Comorbidity Score (SCS). For instance, Colinet et al. 2005 found that an SCS greater than 9 was found to be an independent prognostic factor of poor outcome in NSCLC (non-small-cell lung cancer).  For the purpose of this data item, record each comorbidity as defined by the Colinet criteria but do not score them. |

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| Source and reference attributes | |
| Submitting organisation: | Cancer Australia |
| Reference documents: | Colinet, B; Jacot, W et al 2005. A new simplified comorbidity score as a prognostic factor in non-small-cell lung cancer patients: description and comparison with the Charlson’s index. British Journal of Cancer 93:1098-1105 |

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| Data element attributes | |
| Collection and usage attributes | |
| Collection methods: | This information should be sought from the patient's medical record. |
| Comments: | Comorbidities may influence treatment decisions and patient outcomes; they may be used to adjust outcome statistics when evaluating patient survival and other outcomes.  Comorbidities are generally used with cancer patients to refer to conditions not related to the cancer, and in epidemiology to indicate the coexistence of two or more disease processes.  The presence of comorbidities in a patient may affect treatment decisions and be an important prognostic determinant. For example, they may be used to adjust outcome statistics when evaluating patient survival and other outcomes. |
| Source and reference attributes | |
| Submitting organisation: | Cancer Australia |
| Reference documents: | Colinet, B; Jacot, W et al 2005. A new simplified comorbidity score as a prognostic factor in non-small-cell lung cancer patients: description and comparison with the Charlson’s index. British Journal of Cancer 93:1098-1105 |
| Relational attributes | |
| Implementation in Data Set Specifications: | [Adolescent and young adult cancer (clinical) DSS](https://meteor.aihw.gov.au/content/432097)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 14/05/2015  [Adolescent and young adult cancer (clinical) NBPDS](https://meteor.aihw.gov.au/content/599629)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 14/05/2015  [Lung cancer (clinical) DSS](https://meteor.aihw.gov.au/content/430950)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 14/05/2015  [Lung cancer (clinical) NBPDS](https://meteor.aihw.gov.au/content/599613)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 14/05/2015 |