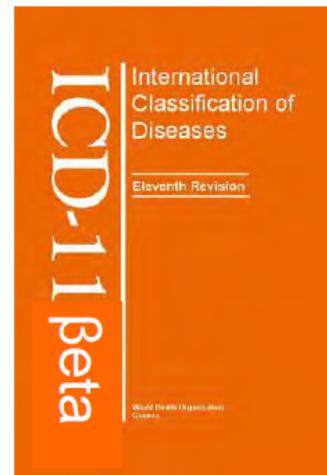


ICD is the **international standard** to measure health & health services

- Mortality Statistics
- Morbidity Statistics
- Health Care Costs
- **Progress towards MDGs**



## ICD-11 Stand bei der WHO und Aktivitäten in Deutschland

Albrecht Zaiß (Freiburg), Ulrich Vogel (DIMDI, Köln)

## WHO ICD-Revision Site

العربي 中文 English Français Русский Español

World Health Organization

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### Classifications

- Family of International Classifications
- Family of International Classifications network
- Classification of Diseases (ICD)
- Classification of Functioning, Disability and Health (ICF)
- Classification of Health Interventions (CHI)
- Frequently asked questions

## The International Classification of Diseases 11th Revision is due by 2018

**2018**

**2012**

**ICD-11**

International Classification of Diseases

Eleventh Revision

World Health Organization

### Participate in the ICD Revision

Beta phase participants will have the opportunity to:

- Make **Comments**
- Make **Proposals**
- Propose **definitions** of diseases in a structured way
- Participate in **Field Trials**
- Assist in **translating** ICD into other languages

Video invitation to participate

Frequently Asked Questions About ICD-11

ICD Information Sheet

ICD Revision Information Notes

ICD-11 Browser for browsing the classification and participating the development

# WHO Aktivitäten

2005 Beginn der Arbeiten zur 11. Revision

## Ziele:

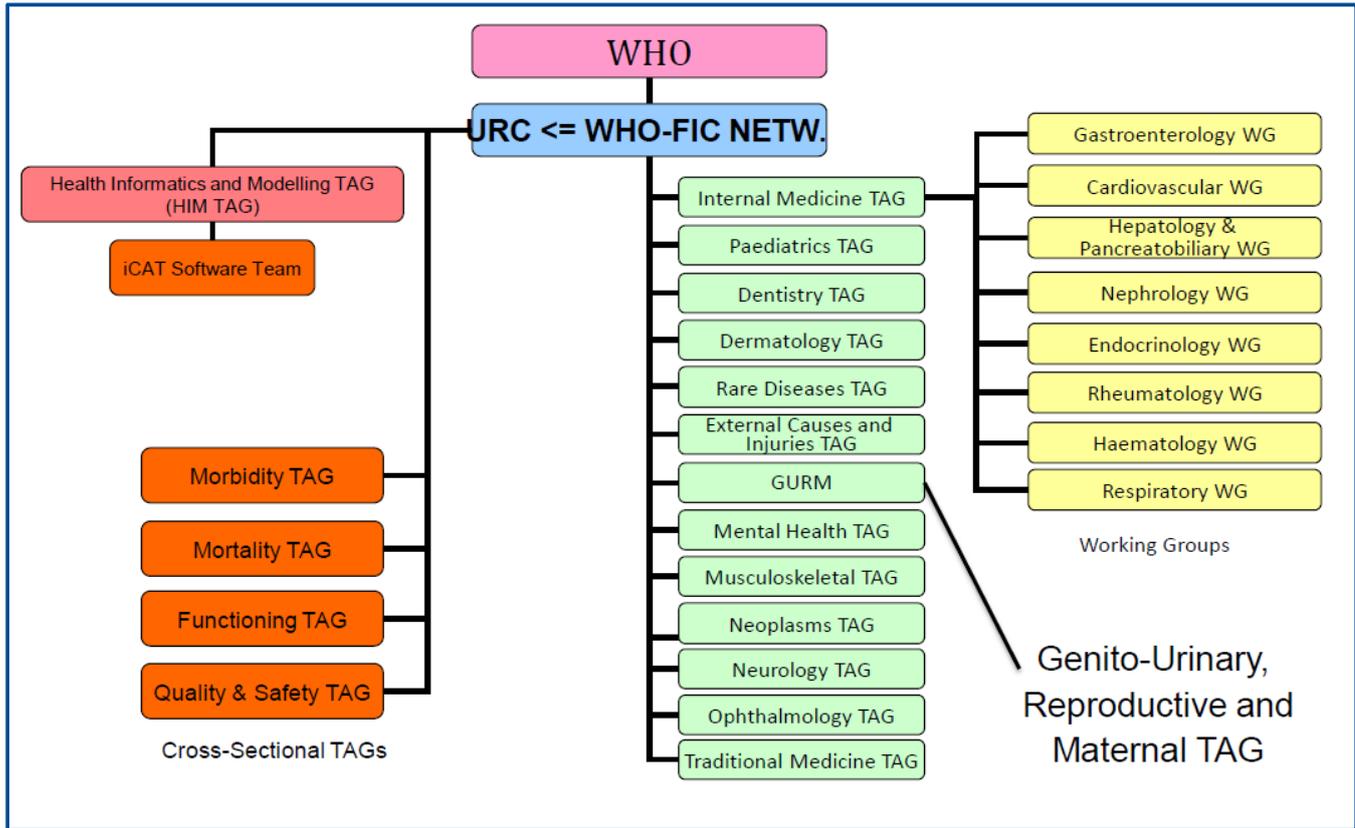
1. Kohärente Klassifikation für unterschiedliche Anwendungsgebiete
2. Internationaler Standard für Wissenschaft, Kommunikation und Information in der Medizin
3. Integration in IT-Systemumgebungen heute und in der Zukunft

2018 Von der WHO anvisierte Verabschiedung der 11. Revision durch die World Health Assembly (WHA)

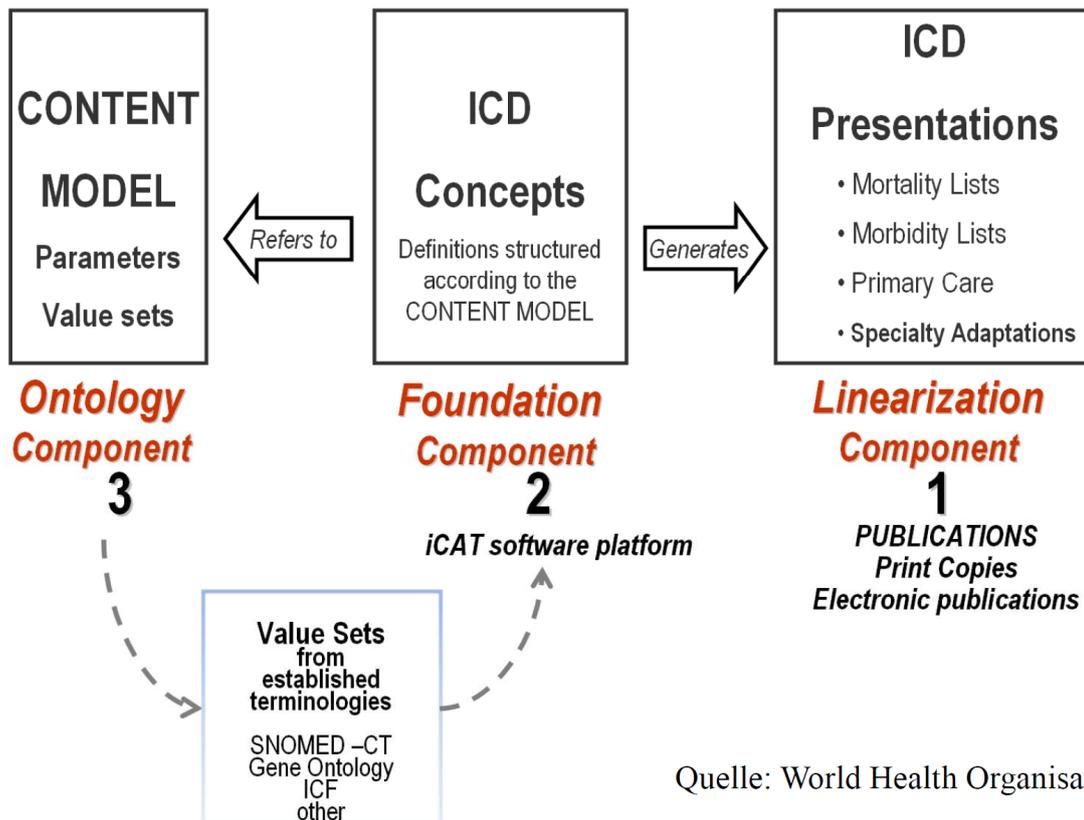
## ICD-11 Revisionsprozess

- **Entwicklung unter drei Hauptaspekten**
  - IT-Konzeption (ontologisch)
  - Content (medizinisch-wissenschaftlich)
  - Klassifikatorisch (unterschiedliche Anwendungsbereiche)
- **Einbeziehung internationaler Expertise**
  - Medizininformatik und Systementwicklung
  - Medizinische Fachgesellschaften, Organisationen und Interessenverbänden
  - Epidemiologie, Case Mix (DRG) Systeme, Public Health, Quality and Patient Safety, Primary Care etc.
- **Einbeziehung der *interessierten Öffentlichkeit***
  - Anwender aus den unterschiedlichsten Bereichen

# ICD Revision Organisationsstruktur



# ICD-11 Architektur



Quelle: World Health Organisation (WHO)

# Foundation Component

- Enthält alle Entitäten zu Krankheiten, Störungen und sonstige Konzepte
    - **Content Modell** legt die Struktur der Entitäten fest
    - **Verlinkungen** zu anderen Begriffssystemen
  - Bildet die Beziehungen zwischen den Entitäten ab
    - **Logisches Netzwerk** von Konzepten
    - Child-Entitäten können **ein** oder **mehrere** Parent-Entitäten aufweisen (sog. **Multi-Parenting**)
- WHO: Repräsentiert das gesamte *Universum* der ICD

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# Foundation Component

**ICD-11 Beta Draft** (Foundation) Signed in as: AZaiss | Manage Account | Log off  
Last Update: Sep 07

Search  [ Advanced Search ] Foundation Linearizations Contributions Info

**ICD-11 Beta Draft**

- ▶ Infectious diseases
- ▶ Neoplasms
- ▶ Diseases of the blood and blood-forming organs
- ▶ Disorders of the immune system
- ▶ Conditions related to sexual health
- ▶ Endocrine, nutritional and metabolic diseases
- ▶ Mental and behavioural disorders
- ▶ Sleep-wake disorders
- ▶ Diseases of the nervous system
- ▶ Diseases of the eye and adnexa
- ▶ Diseases of the ear and mastoid process
- ▶ Diseases of the circulatory system
- ▶ Diseases of the respiratory system
- ▶ Diseases of the digestive system
- ▶ Diseases of the skin
- ▶ Diseases of the musculoskeletal system and connective tissue
- ▶ Diseases of the genitourinary system
- ▶ Pregnancy, childbirth and the puerperium
- ▶ Certain conditions originating in the

Foundation Id : <http://id.who.int/icd/entity/426429380> Change History

## Diseases of the circulatory system

### Definition

This refers to diseases of the organ system that passes nutrients (such as amino acids, electrolytes and lymph), gases, hormones, blood cells, etc. to and from cells in the body to help fight diseases, stabilize body temperature and pH, and to maintain homeostasis.

### Exclusions

- Infectious diseases ⇒
- Certain conditions originating in the perinatal and neonatal period ⇒
- Neoplasms ⇒
- congenital malformations, deformations and chromosomal abnormalities ⇒
- complications of pregnancy, childbirth and the puerperium ⇒
- Injury, poisoning and certain other consequences of external causes ⇒
- Endocrine, nutritional and metabolic diseases ⇒
- systemic connective tissue disorders ⇒

### Social Participation Impact

- d9. CHAPTER 9 COMMUNITY, SOCIAL AND CIVIC LIFE

⚠ Please read the Caveats

Proposals !

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# Linearizations

- Vollständige Teilmenge der Foundation Component für einen spezifischen Anwendungsfall (**use case**)
  - Alle Entitäten (**stem codes**) sind klar gegeneinander abgrenzbar (**mutually exclusive**)
  - Jede Entität hat **eine** originäre Parent-Entität, kann aber an verschiedenen Stellen angezeigt werden
- Stellt eine **hierarchische Klassifikation** dar
- Aktuell wird die **Joint Linearization for Mortality and Morbidity Statistics (JLMMS)** als gemeinsamer „Kern“ der beiden Hauptanwendungsgebiete der ICD erstellt

## Linearization (JLMMS)

**ICD-11 Beta Draft** (Joint Linearization for Mortality and Morbidity Statistics) Signed in as: AZaiss | Manage Account | Log off  
Last Update: Sep 07

Search  [ Advanced Search ] Foundation Linearizations Contributions Info

ICD-11 Beta Draft - Joint Linearization for Mortality and Morbidity Statistics

- ▶ 01 Infectious diseases
- ▶ 02 Neoplasms
- ▶ 03 Diseases of the blood and blood-forming organs
- ▶ 04 Disorders of the immune system
- ▶ 05 Conditions related to sexual health
- ▶ 06 Endocrine, nutritional and metabolic diseases
- ▶ 07 Mental and behavioural disorders
- ▶ 08 Sleep-wake disorders
- ▶ 09 Diseases of the nervous system
- ▶ 10 Diseases of the eye and adnexa
- ▶ 11 Diseases of the ear and mastoid process
- ▶ 12 Diseases of the circulatory system
- ▶ 13 Diseases of the respiratory system
- ▶ 14 Diseases of the digestive system
- ▶ 15 Diseases of the skin
- ▶ 16 Diseases of the musculoskeletal system and connective tissue
- ▶ 17 Diseases of the genitourinary system
- ▶ 18 Pregnancy, childbirth and the puerperium
- ▶ 19 Certain conditions originating in the perinatal and neonatal period
- ▶ 20 Developmental anomalies

Foundation Id : <http://id.who.int/icd/entity/426429380> Change [ ? ] [ ? ] [ ? ]

### 12 Diseases of the circulatory system

**Definition**

This refers to diseases of the organ system that passes nutrients (such as amino acids, electrolytes and lymph), gases, hormones, blood cells, etc. to and from cells in the body to help fight diseases, stabilize body temperature and pH, and to maintain homeostasis.

**Exclusions**

- Infectious diseases (1A00-1Q2G)
- Certain conditions originating in the perinatal and neonatal period (KA00-KC2Z)
- Neoplasms (2A00-2K3Z)
- congenital malformations, deformations and chromosomal abnormalities (LA00-LF0Z)
- complications of pregnancy, childbirth and the puerperium (JA00-JB3Z)
- Injury, poisoning and certain other consequences of external causes (NA00-NE5Z)
- Endocrine, nutritional and metabolic diseases (6A00-6F0Z)
- systemic connective tissue disorders (6A00-6F0Z)

**All Index Terms**

Proposals !

# Kodiertechiken: Prä- vs. Post-Kombination

- **Prä-Kombination:** So wenig wie möglich, soviel wie nötig
  - v.a. für die **unikausale Mortalitätskodierung** (Grundleiden bei Todesfällen)
  - Fortschreibung von Zeitreihenanalysen, z.B. zur Mortalitätsstatistik
- **Post-Kombination:** zusätzliche Spezifität, wenn nötig
  - v.a. für die **Morbiditätskodierung** (z.B. DRG-System)
  - Kombination mehrerer Primärkodes
  - Kombination mit den Erweiterungskodes des sog. **X-Chapters**

## X-Chapter – eXtension Codes

Type 1	Type 2	Type 3
<b>Severity</b>	<b>Main Condition</b> (types)	<b>History of</b>
<b>Temporality</b> (course of the condition)	Reason for encounter/admission	<b>Family History of</b>
<b>Temporality</b> (Time in Life)	Main Resource Condition	Screening/Evaluation
Etiology	<b>Present on Admission</b>	
<b>Anatomic detail</b> Topology Specific Anatomic Location	<b>Provisional</b> diagnosis	
Histopathology	<b>Diagnosis confirmed by</b>	
Biological Indicators	<b>Rule out / Differential</b>	
Consciousness		
External Causes (detail)	<b>X-Chapter – eXtension Codes</b>	
Injury Specific (detail)		

# Chapter 26 Extension Codes

**ICD-11 Beta Draft** (Joint Linearization for Mortality and Morbidity Statistics) Signed in as: AZaiss | Manage Account | Log off  
Last Update: Sep 07

Search  [ Advanced Search ] Foundation Linearizations Contributions Info

- ▶ 25 Codes for special purposes
- ▼ 26 Extension Codes
  - ▼ Severity Scale Value
    - ▶ Capacity Scale
    - ▼ Mild Moderate Severe Scale
      - XA10 Profound
      - XA11 Severe
      - XA12 Moderate
      - XA13 Mild
      - XA14 None
      - XA15 Unspecified severity
    - ▶ Staging Scale
    - ▶ Grading Scale
    - ▶ Phase Scale
  - ▶ Temporality
  - ▶ Etiology
  - ▶ Topology Scale Value
  - ▶ Specific Anatomic Detail
  - ▶ Histopathology
  - ▶ Dimensions of external causes
  - ▶ Dimensions of injury
  - ▶ Consciousness
  - ▶ Substances
  - ▶ Code usage

Foundation Id : <http://id.who.int/icd/entity/979408586> Change @ 💬 🔍

## 26 Extension Codes

### Definition

These categories should never be used in primary coding. They are provided for use as supplementary or additional codes when it is desired to identify more detail in diseases classified elsewhere.

### All Index Terms

There are no index terms associated with this entity

Proposals

[Please read the Caveats](#)

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## Extension Codes – Cluster Coding

### 4.27.1 Using extension codes and cluster coding

Extension codes as much as codes from other parts of ICD can be used to describe in detail a diagnosis. The group of codes is called a cluster. Clusters are marked by the following conventions:

**Last Digit Cluster Coding Style:** Where each appropriate X chapter entry is listed in one line followed by a specific digit that indicates that whole set refers to a particular cluster. For example:

2J7Y.-- <b>1</b>	(Other specified benign neoplasms)
XA10.1- <b>1</b>	(Eyelid)
XA91.2- <b>1</b>	(Medial)
XH80.35 <b>1</b>	(Lipoma)
MF11.-- <b>1</b>	(Erythema)
XL11.-- <b>1</b>	(Right)

The last digit (1 in bold) is the cluster code.

The trailing 7<sup>th</sup> digit 1 indicates that the codes A, B, C, D, E and F are all part of the same Cluster

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# Extension Codes – Chain or String Coding

**Chain or String Sequential Cluster Coding Style:** The codes are written in one line and are separated by a separator(/). Each X chapter entry is added as an additional code to the string, followed by a separator. For example:

2J7Y / XA10.1 / XA91.2 / XH80.35 / MF11 / XL1

Other specified benign neoplasms / Eyelid / Medial / Lipomaer / Eythema / Right

Type 3 extension codes are used as prefixes (see “X chapter”).

For more detail about coding, please see also the section “pre- and post-coordination, cluster” and “adding detail – post-coordination with multiple stem codes and extension code”.

Permissible combinations of stem codes and extension codes are described by sanctioning rules that are embedded in the foundation of ICD-11. They will prevent impossible combinations, and the creation of combinations that already exist in pre-coordination in the linearization in question.

## WHO - Aktivitäten

- 14. April 2015 Report of the ICD-11 Revision Review  
→ Empfehlungen für das Projektmanagement
- 12. Mai 2015 Antwort der WHO und Vorlage eines neuen Projektplans

Einrichtung einer JLMMS Steering Group und einer Task Force Group

May 2018 Verabschiedung der ICD-11 durch die WHA

# Aktivitäten in Deutschland

ICD-11 Workshops des Kuratoriums für Fragen der Klassifikation im Gesundheitswesen (KKG)

09.07.2013 1. Workshop → Brief mit Empfehlungen an die WHO

28.08.2014 2. Workshop → Brief mit Empfehlungen an die WHO

Briefe wurden beim Report zur ICD-11 Revision berücksichtigt.

25. und 26.08.2015 3. Workshop des KKG mit Schwerpunkten

Tag 1: Auswirkungen/Anforderungen aus Systemsicht

Tag 2: Fachlich inhaltliche Sicht

## Ergebnisse des 3. Workshops zur ICD-11

- 1) Brief an WHO mit Fortschreibung der bisherigen Punkte
- 2) Information an das BMG
- 3) Unterstützung der WHO

Vorgesehen sind

- 1) Information für die interessierte Fachwelt
- 2) Weitere Workshops

# Empfehlungen des KKG

## Mehr **Transparenz** für

- ICD-11 Revisionsprozess und Entscheidungen
- Unterschiede zwischen „Foundation“ und „Linearization“
- Konzept und Anwendung des „Multi-Parenting“
- Umgang mit Prä- und Post-Kombination
  - Anwendung und Kodierung mit eXtension Codes

Klarstellung der Bedeutung der „Definitions“

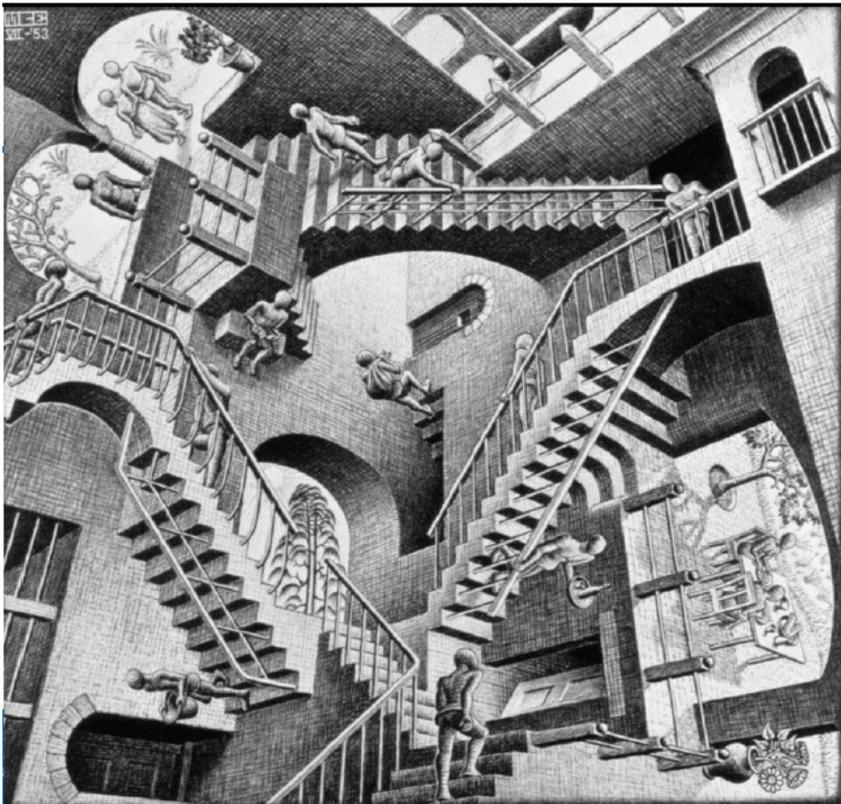
Unterscheidung von Exklusiva in Typ1 und Typ2

Derselbe Kode in allen „Linearizations“

- Z.B. für Mortalität, Morbidität und KV-Bereich

Aufnahme Nationaler Ergänzungen der ICD-10-GM in die ICD-11

## Wie geht es mit der ICD-11 weiter?



Wenn die WHO in 2018 die ICD-11 verabschiedet ...

Deutsche Übersetzung soll elektronisch erstellbar sein ...

Feldtests ...

Kosten-Nutzen-Bewertung eines Umstiegs ...

Einsatz in Deutschland frühestens 4 bis 5 Jahre nach Veröffentlichung durch die WHO

**Besten Dank für Ihre Aufmerksamkeit**