

Appendix

Long-Term Macrolide Therapy for Chronic Obstructive Pulmonary Disease: A Population-Based Study

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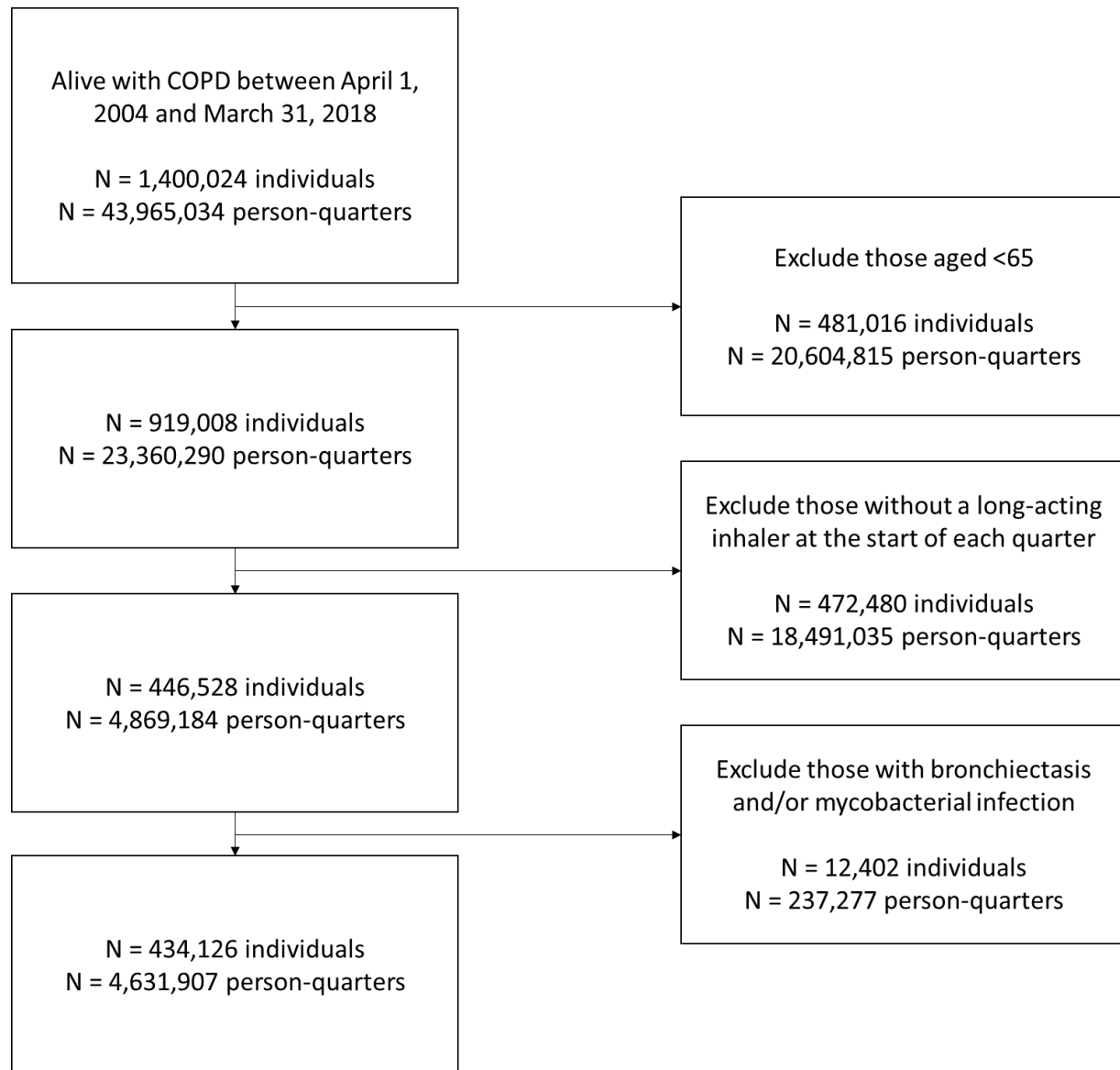
Data Sources

The Ontario Health Insurance Plan is publicly funded and covers all medically necessary services for residents of the province. The Ontario Drug Benefit program covers prescription medications (including respiratory inhalers) for patients aged 65 and over, and this database has an accuracy exceeding 99% for drugs dispensed by Ontario pharmacies.¹ Four other administrative databases were used for information on demographics, supplemental oxygen use, hospitalizations and emergency department visits. The Registered Persons Database includes patient demographics, such as age, sex, neighbourhood, income quintile and rurality. Information on supplemental oxygen use was obtained from the provincial Assistive Devices Program. The Discharge Abstract Database contains individual-level data for acute, rehabilitation, chronic and day surgery institutions in Ontario.² The National Ambulatory Care Reporting System includes patient visits to hospital and community-based ambulatory care (i.e., day surgery, outpatient clinics, and emergency department visits).³

Table S1: International Classification of Diseases Tenth Revision (ICD-10) codes used for each exclusion criterion, comorbidity, or potential adverse event examined in the study.

Condition	ICD-10 Codes
Infection due to other mycobacteria	A31
Bronchiectasis	J47
Ischemic heart disease	I20–I25
Pneumonia	J10.0, J11.0, J12–J18
Arrhythmias potentially related to macrolide-induced QT prolongation including cardiac death	I46, I49.0, I49.8, I49.9
Hearing impairment	H90.3, H90.4, H90.5, H90.6, H90.7, H90.8, H91.0, H91.8, H91.9
General adverse medication events and drug allergy	Y40.3, T88.6, T88.7
Antibiotic-resistant organisms	U88, U89
<i>Clostridioides difficile</i> colitis and non-infectious diarrhea	A04.7, K52.9
Candidiasis	B37

Figure S1: Study flow chart.



REFERENCES

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2. Juurlink D, Preyra C, Croxford R, Chong A, Austin P, Tu J, Laupacis A. Canadian Institute for Health Information Discharge Abstract Database: A Validation Study. Toronto: Institute for Clinical Evaluative Sciences; 2006.
3. Canadian Institute for Health Information, Canadian Health Information Management Association. CIHI data quality study of Ontario emergency department visits for 2004-2005: executive summary. [Internet]. Ottawa: Canadian Institute for Health Information; 2007 [cited 2019 Oct 6]. Available from: http://secure.cihi.ca/cihiweb/products/vol1_nacrs_executive_summary_nov2_2007.pdf