What's New
MedDRA Version 15.0

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ACKNOWLEDGEMENTS

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1. DOCUMENT OVERVIEW

This What's New document contains information on the source and types of changes made to the Medical Dictionary for Regulatory Activities (MedDRA) terminology between Version 14.1 and v15.0.

Section 2, Version 15.0 Change Requests, provides a summary of information on the number of change requests processed for the version.

Section 3, New Developments in Version 15.0, highlights changes in v15.0 related to change request submissions, new initiatives, and information on Standardised MedDRA Queries (SMQs).

Section 4, Summary of Changes, contains details on:

- Term history
- The impact of this version on the terminology (in tables)
- Impact on the records in MedDRA files
- MedDRA term counts
- Modified Lowest Level Terms (LLT) and Preferred Term (PT) names
- All LLTs in MedDRA that had a currency status change.

All updated documentation associated with this version is located in the distribution file in Adobe® Portable Document Format (PDF). Please refer to the !!Readme.txt file for a complete listing.

The Maintenance and Support Services Organization (MSSO) Help Desk can be reached at International AT&T Toll Free at 1-877-258-8280 or mssohelp@mssotools.com.

2. VERSION 15.0 CHANGE REQUESTS

2.1 TERMINOLOGY CHANGES

Changes to MedDRA result from both user change requests, proactivity requests submitted by MedDRA users, and internal change requests. Internal change requests result from MSSO maintenance activities as well as special working group activities in which the MSSO participates.

MedDRA v15.0 is a complex change version which means changes can be made at all levels of the MedDRA hierarchy.

Change requests involve both MedDRA updates and SMQ changes. There was a total of 1470 change requests processed for this version; 1251 change requests were approved and implemented, and 183 change requests were rejected. There are, in addition, 36 change requests suspended for further consideration and resolution beyond this version.

The electronic version of these changes is accessible both as a cumulative Detail Report (all change requests and actions taken for v15.0) which is included in the MedDRA English version download and a weekly supplemental update file (for v15.0). In addition, users may review all change requests from MedDRA v5.1 to the present in WebCR.

Figure 2-1 (shown below) summarizes all changes made per System Organ Class (SOC) and may be useful to gauge the impact of changes to a specific area of MedDRA. The data are derived from the difference in counts of primary and secondary PT/LLTs, HLTs, and HLGTs for v15.0 (shown in Table 4-6) and the corresponding information for v14.1. Additionally, term name changes and LLT status changes are included in Figure 2-1.

Please see Section 4 for a summary of the changes in MedDRA v15.0.

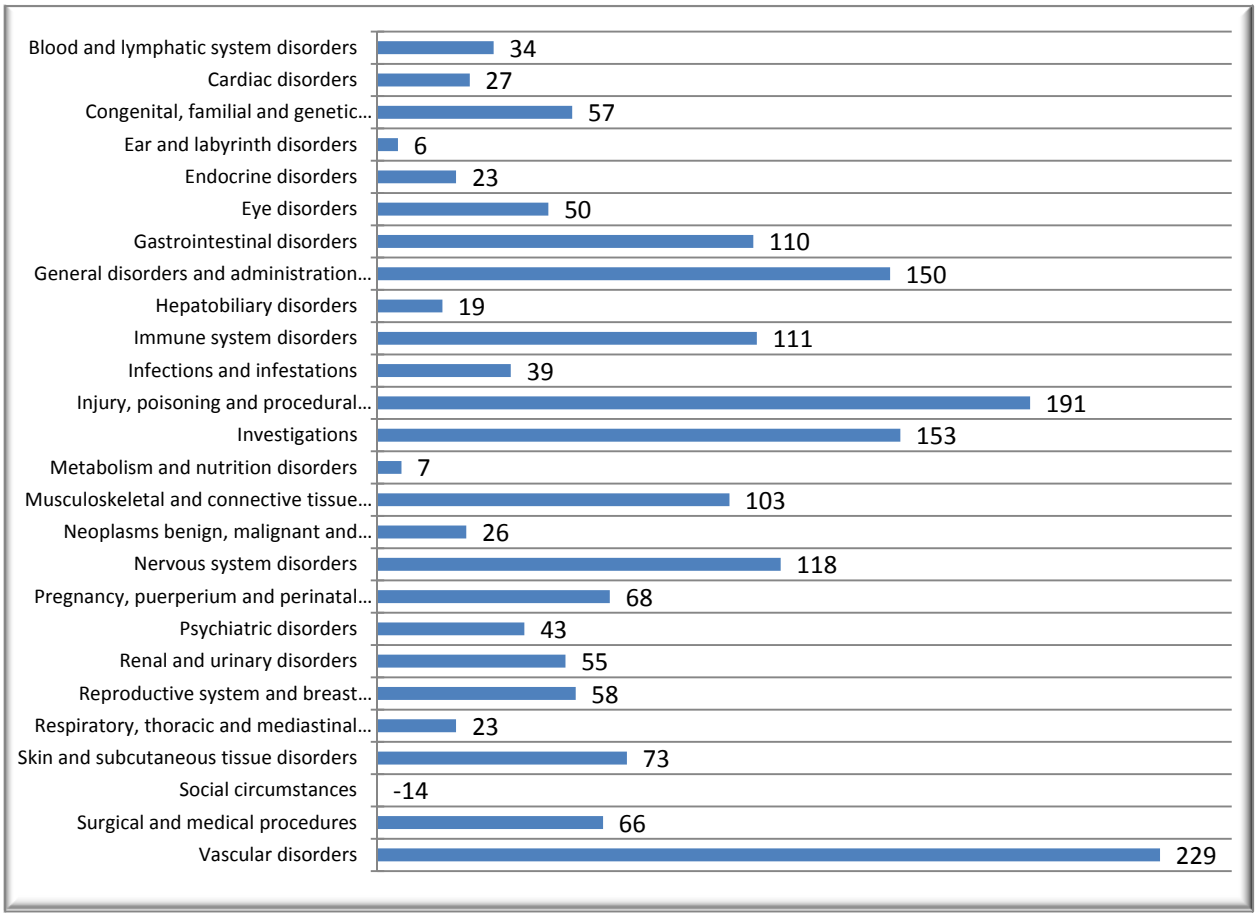

Figure 2-1. Changes per SOC

2.2 COMPLEX CHANGES

The proposals for complex changes considered during v15.0 included those submitted by users, special initiatives, and those internally identified by the MSSO during change request processing.

Complex change proposals were posted on the MSSO Web site for feedback from the MedDRA user community from 1 July 2011 to 29 July 2011. Complex changes were followed by further internal review and consensus discussions which resulted in the final approved set of 16 complex changes.

The complex changes implemented in v15.0 are summarized below. Please see the Complex Change section of the MSSO Web site for specific details.

At the SOC level: No changes were made to existing SOCs.

At the HLGT level: There were two new High Level Grouping Terms (HLGTs) added and two HLGTs merged as a result of complex changes in v15.0. The changes are as follows:

New HLGTs

New HLGT	To SOC
Exposures, chemical injuries and poisoning	**Injury, poisoning and procedural complications**
Physical examination and organ system status topics	**Investigations**

Table 2-1. New HLGTs

Merged HLGTs

Merged HLGT	To HLGT
Chemical injury and poisoning	**Exposures, chemical injuries and poisoning**
Physical examination topics	**Physical examination and organ system status topics**

Table 2-2. Merged HLGTs

At the HLT level: There were seven new High Level Terms (HLTs) added, four HLTs merged and one HLT moved as a result of the complex changes in v15.0. The changes are as follows:

New HLTs

New HLT	To HLGT
Acquired gene mutations and other alterations	**General system disorders NEC**
Dialysis related complications	**Procedural related injuries and complications NEC**
Exposures associated with pregnancy, delivery and lactation	**Exposures, chemical injuries and poisoning in SOC Injury, poisoning and procedural complications** **Pregnancy, labour, delivery and postpartum conditions in SOC Pregnancy, puerperium and perinatal conditions**
Exposures NEC (excl medication errors due to accidental exposures)	**Exposures, chemical injuries and poisoning**
Gene analyses	**Cytogenetic investigations**
Myasthenia gravis and related conditions	**Muscle disorders**
Physical examination procedures and organ system status	**Physical examination and organ system status topics**

Table 2-3. New HLTs

Merged HLTs

Merged HLT	To HLT
Acquired mutations NEC	Acquired gene mutations and other alterations
Myasthenias	Myasthenia gravis and related conditions
Physical examination procedures	Physical examination procedures and organ system status
Pregnancy related accidental exposures and injuries	Exposures associated with pregnancy, delivery and lactation

Table 2-4. Merged HLTs

Moved HLT

HLT	From HLGT	To HLGT
Cell marker procedures	Immunology and allergy investigations	Cytogenetic investigations

Table 2-5. Moved HLT

2.3 TRANSLATION CHANGES

In addition to terminology changes, there were 235 translation correction requests considered and 224 changes implemented to replace misspelled or mistranslated terms in the non-English versions of MedDRA. Below is a summary of the number of changes implemented and the language affected.

- 40 Chinese
- 103 Dutch
- 70 French
- 10 German
- 1 Portuguese

The large number of changes to Dutch MedDRA resulted from a MedDRA user pointing out several inconsistencies in this translation. The large number of changes to French MedDRA is due to efforts by the MSSO and the Canadian regulatory authority, Health Canada, to identify and correct issues with the French translation. Please see the Change Request section of the MSSO Web site if you wish to request corrections to a non-English version of MedDRA.

3. NEW DEVELOPMENTS IN VERSION 15.0

3.1 PREGNANCY EXPOSURE TERMS

In MedDRA v14.1 new sets of pregnancy exposure terms were added and existing terms reorganized to make them more self explanatory and easier to use for pharmacovigilance purposes. These changes were based upon suggestions from the ICH Points To Consider Working Group.

Both the new and existing terms were organized to refer to circumstances involving transmission of various agents through intimate contact (e.g., mother to fetus or newborn, between partners, etc). The two main circumstances considered were exposures related to pregnancy and lactation, and terms representing relevant forms of potential transmission of various agents through intimate contact (e.g., PT *Exposure via partner*).

Existing terms where an actual harm is proved were not part of this set, even if they convey the concept of a pregnancy or intimate related exposure (e.g., PT *Maternal drugs affecting foetus* and PT *Anaesthetic complication foetal*). Additionally, existing exposure terms related to an agent or form of contamination which does not involve intimate contact and is only applicable to one individual (e.g., PT *Exposure to toxic agent*) were not included in this reorganization.

In MedDRA v15.0, changes to pregnancy exposure terms were made at the HLT and HLGT levels. See the table below for a summary of these changes.

New HLGT	To SOC
Exposures, chemical injuries and poisoning	Injury, poisoning and procedural complications
New HLT	**To HLGT**
Exposures associated with pregnancy, delivery and lactation	Exposures, chemical injuries and poisoning in SOC Injury, poisoning and procedural complications Pregnancy, labour, delivery and postpartum conditions in SOC Pregnancy, puerperium and perinatal conditions
Exposures NEC (excl medication errors due to accidental exposures)	Exposures, chemical injuries and poisoning

Table 3-1. Pregnancy Exposure Term Complex Changes

Additionally, existing HLGT *Chemical injury and poisoning* and its underlying HLTs were merged under new HLGT *Exposures, chemical injuries and poisoning.* Existing HLT *Pregnancy related accidental exposures and injuries* and its underlying PTs were merged under new HLT *Exposures associated with pregnancy, delivery and lactation.* A few terms related to communicable diseases, environmental occupational and non-occupational exposures were moved from SOC *Social circumstances* to new HLT *Exposures NEC (excl medication errors due to accidental exposures).*

Please see the Complex Change section of the MSSO Web site for specific details.

3.1.1 Special Note on Five Exposure Terms

Five PTs listed below were originally shown in the Complex Change Implementation document posted on the in the Complex Change section of the MSSO Web site as moving from HLT *Medication errors due to accidental exposures* to new HLT *Exposures NEC (excl medication errors due to accidental exposures).*

- PT *Exposure via blood*
- PT *Exposure via direct contact*
- PT *Exposure via partner*
- PT *Exposure via semen*
- PT *Exposure via vaginal fluid*

Recently, significant concerns were express by a MedDRA user about moving these terms to the new HLT *Exposures NEC (excl medication errors due to accidental exposures).* For the time being, these terms will remain under HLT *Medication errors due to accidental exposures* pending a larger discussion with this user and other parties on the organization and placement of exposure terms in MedDRA. The Complex Change Implementation document has been updated to reflect this.

3.2 PHARMACOGENETIC TERMS

In MedDRA v14.1 the MSSO added to MedDRA an initial group of pharmacogenetic and pharmacogenomic (PG) concepts of relevance to MedDRA users. This was a proactive MSSO initiative, which originated from several MedDRA user submitted change requests. The criteria used to add new terms focused on those genetic concepts and factors that have a potential impact on drug therapy.

In MedDRA v15.0, changes to pharmacogenetic and pharmacogenomic (PG) concepts were made at the HLT level to complete this initiative. See the table below for a summary of these changes.

New HLT	To HLGT
Acquired gene mutations and other alterations	**General system disorders NEC**
Gene analyses	**Cytogenetic investigations**

Table 3-2. Pharmacogenetic Term Complex Changes

Additional changes included moving existing HLT *Cell marker procedures* from HLGT *Immunology and allergy investigations* to HLGT *Cytogenetic investigations*. Existing HLT *Acquired mutations NEC* and its underlying PTs were merged under new HLT *Acquired gene mutations and other alterations*. There were 41 new pharmacogenetic PTs and 8 LLTs concepts added in v15.0.

Please see the Complex Change section of the MSSO Web site for specific details.

3.3 BLEEDING AND HEMORRHAGE TERMS

Based upon a proactivity request submitted by a MedDRA user, the MSSO added missing "bleeding" LLTs under existing "haemorrhage" PTs to improve MedDRA for coding and consistency. There was a total of 149 LLTs added. See the table below for an example.

New v15.0 LLT	Existing PT
Ear bleeding	Ear haemorrhage
Eye bleeding	Eye haemorrhage

Table 3-3. Bleeding LLTs

Per MedDRA convention, hemorrhage and bleeding are considered synonymous concepts. In MedDRA, "haemorrhage" is generally represented at the PT level and bleeding at the LLT level.

3.4 REMOVAL OF CODES FROM EARLIER TERMINOLOGIES

The initial release of MedDRA (v2.1) in March 1999 included numeric or symbol codes from earlier terminologies. The codes are links from other terminologies to similar or

identical terms in MedDRA and included codes from COSTART, WHO-ART, ICD9, ICD9-CM, HARTS, and JART. See the figure below for an example.

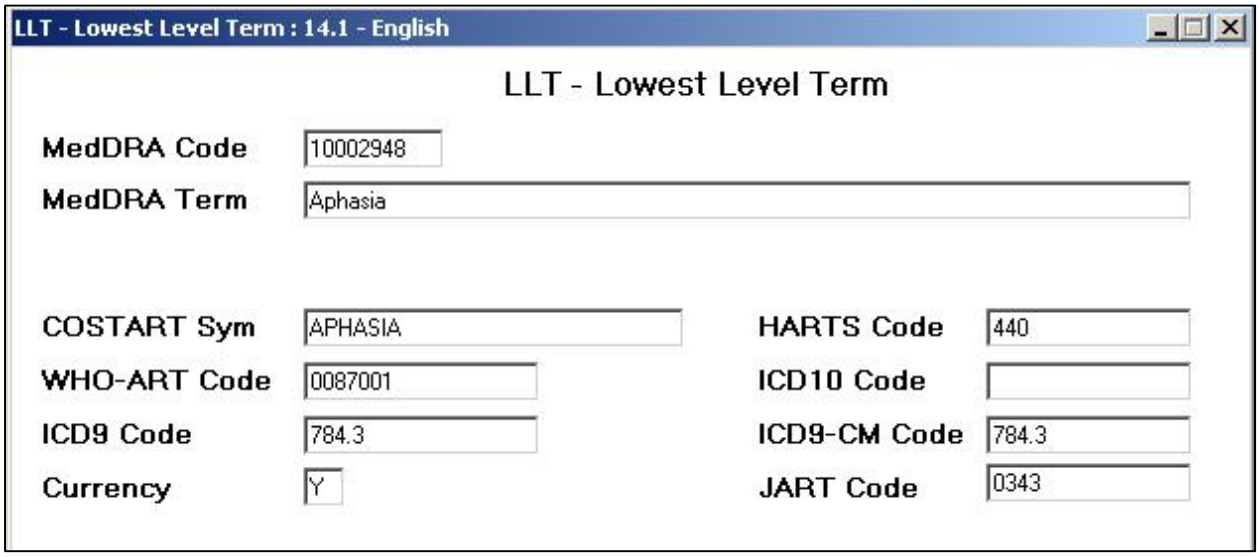

Figure 3-1. Codes from Earlier Terminologies

The ICH M1 Expert Working Group – who created the original version of MedDRA – included these codes with the text of the terms with the intent that the codes would be useful in the transition to MedDRA. Since most organizations have long since migrated to MedDRA, and the codes have not been maintained or updated since the original release of MedDRA, the MSSO has removed them from the MedDRA files.

The following points should be noted:

1. No terms have been removed from MedDRA; only the codes and symbols associated with earlier terminologies have been removed.

2. The MedDRA code assigned to each term has not changed.

3. The structure of the distributed extended ASCII files has not changed. The entries in the distribution files for these earlier codes are empty (i.e., null fields).

A list of MedDRA terms with the legacy codes is available on the MSSO Web site should any MedDRA users need to reference them.

3.5 STANDARDISED MedDRA QUERIES (SMQs)

No new SMQs were introduced into MedDRA v15.0, but there were 171 approved changes to existing SMQs. Only minor changes were made to the SMQ Introductory Guide.

3.6 MedDRA Version Analysis Tool

In the first quarter of 2012, the MSSO will release the MedDRA Version Analysis Tool (MVAT). This tool is designed to assist organizations by comparing any two versions of MedDRA – including non-consecutive versions – to identify changes. MVAT will be free to all MedDRA subscribers as part of their subscription. The tool comprises three parts:

- Version Report Generator – Compare any two MedDRA releases to produce an exportable version report specific to those releases.
- Data Impact Report – Identifies changes to a specific set of MedDRA terms uploaded to MVAT and compare them to any two MedDRA releases.
- Search Term Change – Identify the changes to a single MedDRA term or code between any two MedDRA releases.

The MSSO will continue to produce the Version Report spreadsheet which details changes between two consecutive releases and which is included in the English MedDRA language download.

4. SUMMARY OF CHANGES

4.1 SUMMARY OF IMPACT ON THE TERMINOLOGY

The tables below (See Tables 4-1 through 4-5) summarize the impact on MedDRA in v15.0. These tables are intended only as a reference. For detailed information on the changes to v15.0, please see the MedDRA Version Report included within the English language download.

SOC, HLGT, HLT Changes

Level	Change Request Action	Net Change	v14.1	v15.0
SOC	Total SOCs	0	26	26
HLGT	New HLGTs	2	0	2
	Merged HLGTs	2	0	2
	Total HLGTs[1]	0	335	335
HLT	New HLTs	7	0	7
	Merged HLTs	4	0	4
	Total HLTs[1]	3	1710	1713

Table 4-1. Summary of Impact on SOCs, HLGTs, HLTs

[1] Total net change of HLGTs/HLTs equals the number of new HLGTs/HLTs minus the number of merged HLGTs/HLTs.

PT Changes

Level	Change Request Action	v14.1	v15.0
PT	New PTs	253	270
	Promoted LLTs	25	20
	Demoted PTs	70	34
	Net Change[1]	208	256
	Total PTs	19294	19550

Table 4-2. Summary of Impact on PTs

[1]Net change of PTs equals the number of new PTs plus the number of promoted LLTs minus the number of demoted PTs.

LLT Changes

Level	Change Request Action	Net Change	v14.1	v15.0
LLT	Total LLTs[1]	653	69524	70177

Table 4-3. Summary of Impact on LLTs

[1]Total LLTs include PTs.

SMQ Changes

Level	Change Request Action	Net Change	v14.1	v15.0
SMQs	New SMQs[1]	0	86	86

Table 4-4. Summary of Impact on SMQs

[1] The number of SMQs shown only includes top level SMQs. No sub-search SMQs were added in MedDRA v15.0.

4.2 SUMMARY OF IMPACT ON RECORDS IN MedDRA FILES

The table below summarizes the impact on MedDRA in v15.0. The table is intended only as reference.

INTL_ORD.ASC	Added	0
	Removed	0
	Modified	0
SOC.ASC	Added	0
	Removed	0
	Modified	0
SOC_HLGT.ASC	Added	2
	Removed	2
	Modified	0
HLGT.ASC	Added	2
	Removed	2
	Modified	0
HLGT_HLT.ASC	Added	11
	Removed	7
	Modified	0
HLT.ASC	Added	7
	Removed	4
	Modified	1
HLT_PT.ASC	Added	743
	Removed	282
	Modified	0
MDHIER.ASC	Added	988
	Removed	502
	Modified	0
PT.ASC	Added	290
	Removed	34
	Modified	2765

LLT.ASC	Added	653
	Removed	0
	Modified	22819
SMQ_LIST.ASC[1]	Added[1]	0
	Removed	0
	Modified	203
SMQ_CONTENT.ASC	Added	771
	Removed[2]	0
	Modified	180

Table 4-5. Summary of Impact on Records in MedDRA Files

[1] The number of SMQs added includes both top level (Level 1) and sub-search SMQs.

[2] The number of removed PTs represents terms moved from one SMQ to another.

4.3 MedDRA TERM COUNTS

The table below shows term counts by SOC for HLGTs, HLTs, primary and secondary PTs and LLTs, and primary PTs and LLTs.

SOC	LLTs* (Primary)[1]	PTs (Primary)[1]	LLTs* (Primary and Secondary)[2]	PTs (Primary and Secondary)[2]	HLTs[3]	HLGTs[3]
Blood and lymphatic system disorders	1006	242	3889	883	87	17
Cardiac disorders	1302	293	2141	527	36	10
Congenital, familial and genetic disorders	3090	1147	3090	1147	99	19
Ear and labyrinth disorders	421	81	747	184	17	6

SOC	LLTs* (Primary)[1]	PTs (Primary)[1]	LLTs* (Primary and Secondary)[2]	PTs (Primary and Secondary)[2]	HLTs[3]	HLGTs[3]
Endocrine disorders	575	159	1542	442	38	9
Eye disorders	2350	532	3387	871	64	13
Gastrointestinal disorders	3506	755	6877	1484	109	21
General disorders and administration site conditions	2238	697	2779	870	49	9
Hepatobiliary disorders	592	168	1300	364	19	4
Immune system disorders	432	119	2009	532	24	4
Infections and infestations	6521	1714	6822	1791	147	12
Injury, poisoning and procedural complications	5750	818	7400	1454	61	7
Investigations	12449	4930	12449	4930	106	23
Metabolism and nutrition disorders	883	250	2368	654	63	14
Musculoskeletal and connective tissue disorders	2239	397	5775	1030	60	11

SOC	LLTs* (Primary)[1]	PTs (Primary)[1]	LLTs* (Primary and Secondary)[2]	PTs (Primary and Secondary)[2]	HLTs[3]	HLGTs[3]
Neoplasms benign, malignant and unspecified (incl cysts and polyps)	7948	1738	8506	1965	203	40
Nervous system disorders	3184	799	6245	1588	107	20
Pregnancy, puerperium and perinatal conditions	1590	205	2610	495	48	8
Psychiatric disorders	2171	479	2941	674	78	23
Renal and urinary disorders	1120	311	2395	647	32	8
Reproductive system and breast disorders	1625	431	3770	997	52	16
Respiratory, thoracic and mediastinal disorders	1545	464	3747	983	48	11
Skin and subcutaneous tissue disorders	1863	420	3924	1015	56	10
Social circumstances	605	251	605	251	20	7
Surgical and medical procedures	4050	1895	4050	1895	140	19

SOC	LLTs* (Primary)[1]	PTs (Primary)[1]	LLTs* (Primary and Secondary)[2]	PTs (Primary and Secondary)[2]	HLTs[3]	HLGTs[3]
Vascular disorders	1122	255	5640	1269	68	11
Total	**70177**	**19550**				

Table 4-6. MedDRA Term Counts

[1]Primary count only includes the number of terms that are primarily linked to the designated SOC at either the LLT level or the PT level. The sums of primary LLTs and PTs match those in Tables 4-2 and 4-3.

[2]Total count includes the number of terms that are both primarily and secondarily linked to the designated SOC at either the LLT level or the PT level. Therefore, the sums of total LLTs and PTs are greater than those in Tables 4-2 and 4-3.

[3]The HLT and HLGT counts are not necessarily unique values given MedDRA's multi-axiality (see Section 2.2 of the Introductory Guide for a discussion of multi-axiality). There are some HLTs that are counted in more than one SOC. For example, HLT *Connective tissue disorders congenital* and HLGT *Musculoskeletal and connective tissue disorders congenital* are counted in both SOC *Congenital, familial and genetic disorders* and SOC *Musculoskeletal and connective tissue disorders*. The sums of HLTs and HLGTs are greater than those found in Table 4-1.

4.4 MODIFIED PT AND LLT NAMES

As part of ongoing MedDRA maintenance activities, existing PTs and LLTs can be modified (renamed) to correct for misspelling, double spacing, capitalization or other errors that meet the renaming criteria in MedDRA. This rename provision retains the original MedDRA code of the term and preserves its original meaning. This facilitates the reuse of the same MedDRA code for the renamed PT/LLTs.

The table below lists the PTs and LLTs renamed in MedDRA v15.0.

Code	Level	Term Name in v14.1	Term Name in v15.0
10017873	PT	Gastro-enterostomy	Gastroenterostomy
10017882	LLT	Gastro-jejunostomy	Gastrojejunostomy
10027314	LLT	Mensenchymal neoplasm of the testis	Mesenchymal neoplasm of the testis

Table 4-7. Modified PT/LLT Names

4.5 LLT CURRENCY STATUS CHANGES

The following table reflects terms at the LLT level in MedDRA v15.0 that have a change in their currency status along with the rationale for that change.

Lowest Level Term	Currency Status Changed to	Rationale
Bleeding DU	Non-Current	The MSSO made LLT *DU* non-current in MedDRA v14.0 on the basis that DU is also used to abbreviate decubitus ulcer. LLT *Bleeding DU* will be made non-current for a similar reason.
Difficulty in walking involving joint, site unspecified	Non-Current	This multi-concept ("due to") term involves the condition (difficulty in walking) and the etiology of a joint disorder with the unqualified anatomical descriptor (joint, site unspecified). For this reason, the term will be made non-current as it can be coded by using two existing MedDRA concepts -LLT *Difficulty in walking* and LLT *Joint disorder*.
Difficulty in walking involving lower leg joint	Non-Current	This multi-concept ("due to") term involves the condition (difficulty in walking) and the etiology of a joint disorder with the unqualified anatomical descriptor (joint, site unspecified and the lower leg). For this reason, the term will be made non-current as it can be coded by using two existing MedDRA concepts - LLT *Difficulty in walking* and, for example, LLT *Arthropathy unspecified, involving lower leg*.

Lowest Level Term	Currency Status Changed to	Rationale
Grand multiparity, with current pregnancy	Non-Current	This action originated from a request to move LLT *Grand multiparity, with current pregnancy* from PT *Multiparous* to PT *Pregnancy* which was not approved. There are two concepts (multiparity and pregnancy), each of which could be considered important for coding. Therefore, rather than moving the LLT, the MSSO changed the status of the LLT *Grand multiparity, with current pregnancy* to Non-current and add a new LLT *Grand multiparity* to PT *Multiparous*.
Supine hypotension	Non-Current	LLT *Supine hypotension* is an ambiguous term in that it may be interpreted as a synonym of LLT *Supine hypotension syndrome*, or a description of a low blood pressure measurement in a patient while in the supine position.

Table 4-8. LLT Currency Changes