


Cochrane Vocabulary Browser

The Vocabulary browser provides a simple structured way to browse the Cochrane vocabulary and see how the terminology is being used. Any queries or comments should be sent to [Anna Last](#).

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What the Vocabulary browser provides

1	Number of systematic reviews which have been annotated with the terms in the vocabulary	<div><div><div><div><div></div><div>Cochrane</div></div><div><div>Linked Data</div><div>Trusted evidence. Informed decisions. Better health.</div></div></div><div><div>Condition - Cancer</div><div>http://data.cochrane.org/concepts/r4hp38ck9r8w</div><div><div>RDF Type: http://data.cochrane.org/ontologies/core/Condition</div><div>SNOMED: 363346000</div><div>MedDRA: 10007051,10007050</div><div>MeSH: D009369</div><div>Synonyms:<div>Cancer (nos) Cancer Malignant Neoplastic Disease Malignant tumour Malignant tumour CA - Cancer Malignant neoplasm Malignant neoplastic disease</div></div></div></div></div></div>	<div><div>Search Cochrane linked data...</div><div><div>Systematic Reviews [1-10 of 257]</div><div><div>CD009219</div><div>Medical interventi</div><div><div>Male and Female</div><div>Platinum Compounds</div><div>Quality of Life</div><div>Overall Survival</div></div></div><div><div>CD010837</div><div>Effect of testing fo with unprovoked \</div><div><div>Male and Female</div><div>Child, Preschool 2-5 yrs</div><div>Screening For Cancer</div></div></div><div><div>CD009219</div><div>Medical interventi</div><div><div>Male and Female</div><div>Platinum Compounds</div><div>Toxicity Renal</div><div>Toxicity</div></div></div><div><div>CD005195</div><div>Selenium for prev</div><div><div>Male and Female</div><div>Adolescent 13-18 years</div></div></div><div><div>CD010885</div><div>Different infusion</div><div><div>Male and Female</div><div>Platinum Compounds</div><div>Hearing Loss</div><div>Event-Free Survival</div></div></div><div><div>CD011530</div><div>Antibiotics for pre</div><div><div>Male and Female</div><div>Preventive</div><div>Interv</div></div></div></div></div>
2	Vocabularies from where the term has been taken	<div><div>Neoplastic Disease</div><div>http://data.cochrane.org/concepts/r4hp38ck9r8w</div><div>SNOMED: 363346000</div></div> <div><div>Broader Terms</div><div><div>Malignant Tumor Of Lower Limb</div><div>http://data.cochrane.org/concepts/r4hp38ck9r8w</div><div>SNOMED: 363346000</div></div><div><div>Narrower Terms [1-10 of 56]</div><div>Next ></div><div><div>Malignant Tumor Of Epidermal Appendage</div><div>http://data.cochrane.org/concepts/r4hp38ck9r8w</div><div>SNOMED: 363346000</div></div></div></div>	
3	The parent or broader terms		
4	The child or narrower terms		

Building the Cochrane Vocabulary

The Linked Data team chose controlled vocabularies to build the Cochrane vocabulary with the following aims:

- Acceptable for use across Cochrane
- Structured in a way that allows them to be linked to other parts of the linked data universe
- Compatible with vocabularies already in use within Cochrane or by our close collaborators.

Controlled vocabularies	URL
MedDRA	https://tools.meddra.org/wbb/login.aspx
WHO ATC/DDD	https://www.whooc.no/atc_ddd_index/
RxNorm	https://www.nlm.nih.gov/research/umls/rxnorm/
SNOMED CT	http://browser.ihtsdotools.org/?

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Vocabularies used in each PICO component

PICO	Vocabularies	Notes
P (Patient /Condition)	<ul style="list-style-type: none"> • MeSH • MedDRA • SNOMED CT 	For age and sex , MeSH ranges and headings are used. Terms for the Condition portion of P are drawn from two standard vocabularies - MedDRA and SNOMED CT . All of the terms from MedDRA are available for P annotation, but only selected subsets of SNOMED have been included.
I & C (Intervention /Comparison)	<ul style="list-style-type: none"> • RxNorm • WHO ATC • SNOMED CT 	Drug interventions are taken mainly from RxNorm or WHO ATC. Non-drug interventions are provided by SNOMED
O (Outcomes)	<ul style="list-style-type: none"> • MedDRA • SNOMED CT 	Many of the terms used in the Conditions section of P are also applicable to outcomes.

Drug categories

- WHO ATC and SNOMED CT
- Many interventions (especially at the review level) are drug categories rather than a single agent - antibiotics, vitamins, analgesics, etc.
- RxNorm only lists individual drugs or drug combinations and has no codes for drug categories.

Individual drugs

Since both RxNorm and WHO ATC have terms for individual drugs, either one can be used to annotate a drug intervention. However, the terms in WHO ATC are linked to drug categories while the terms in RxNorm are not. Because of this, a drug with multiple uses may appear more than once in different parts of the WHO ATC vocabulary tree.



In cases where there are several options to choose from, for instance one or more WHO ATC codes and an RXNorm code, then it is best to use the most appropriate WHO ATC codes rather than the RxNorm code.

If you are not sure which one to choose, use the RxNorm code.

Non-drug interventions

Terms for all non-drug interventions are drawn from SNOMED CT - only selected subsets of this vocabulary are included in the Cochrane vocabulary.

Combination terms

Both RxNorm and WHO ATC have terms to cover cases in which two or more individual drugs are combined into a single formulation (pill, solution, inhaler etc.) so that they can be easily administered together.

- Do not use these combination terms
- Annotate the individual drug components using AND

Synonyms and near synonyms in the controlled vocabularies

When synonyms or near-synonyms appear in the controlled vocabularies, then the following processes will be followed to standardize annotations.

Synonymous terms in the same vocabulary

MedDRA

MedDRA has been structured so that every term at the second-lowest level of its hierarchy (PT - Preferred Term) has a synonymous term at its lowest level (LLT - Lowest Level Term). The LLT member of each of these pairs has been removed from the Cochrane vocabulary, so there should be no exactly identical terms from MedDRA. However, there may be other close matches within MedDRA; for example, UK and US spellings of a term (oedema, edema etc.) are separate terms in MedDRA. This will be resolved in a way that will merge these MedDRA synonyms.

Guidance

1. If one of the MedDRA synonyms is linked to a SNOMED term, pick that one.
2. Annotate using the more frequently used term. If needed, send a Preferred Term Selection request via the Vocabulary Request form on your Review Group page.
3. If a UK spelling exists, please use it. If you do find US spellings, request a Merge of these terms via the Vocabulary Request form on your Review Group page.

Synonymous terms in a different vocabularies

MedDRA and SNOMED CT

The Linked Data team has attempted to identify all cases in which a term in MedDRA has a label that is identical to the label from a term in SNOMED CT and these have been merged into a single Cochrane term - with both parent terms listed in the the various tools whenever the term is used.

In addition to these exact synonyms, there are many cases in which a term in MedDRA looks as if it is probably identical to a term in SNOMED CT but has a slightly different label. An example is the MedDRA term Premature Baby & the SNOMED CT term Premature Infant. These have now been combined into a single Cochrane term with the label Preterm Infant (Less than 37 weeks).



If you find examples of near synonyms in these two vocabularies in the course of annotation or QA, please send a Merge request via the Vocabulary Request form on your Review Group page. The Linked Data team plan to either combine them into a single Cochrane term (as above) or to designate one of the pair as a "Cochrane Preferred Term" to be used in all relevant annotations.