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MEETING OF WHO COLLABORATING CENTRES FOR THE FAMILY OF INTERNATIONAL CLASSIFICATIONS

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Title: The Dutch Family of International Classifications: ICPC-2, ICD-10, and ICF

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Purpose: for information and discussion

Abstract:

The Netherlands has a long history in applying international classifications to the Dutch health care system: electronic versions of the Dutch translations of ICPC-2, ICD-10 and ICF are widely available. The Dutch Ministry of Health has granted a project in which the Dutch College of General Practitioners and the Department of Family Practice of the University of Amsterdam, in close cooperation with the WHO-FIC Collaborating Centre has developed new tools to support the central role of general practice electronic patient records in the Dutch health care system.

Ample research shows that ICPC-2 is a highly useful diagnostic ordering principle for general practice. Its usefulness is substantially enhanced by the reliable and practically complete mapping between the diagnostic classes of ICPC-2 and ICD-10. This has resulted in a diagnostic terminology in the form of a Dutch/Flemish/Walloon Thesaurus, commissioned by the Dutch and Belgian Governments. The French terms were translated from the Dutch, and have no direct relation with the alphabetical Index of the French ICD-10.

ICPC-2 and ICD-10 are different systems, which result in different data retrieval strategies. In this terminology, however, each diagnostic term has a combination of an ICPC-2 and an ICD-10 code, leaving the ordering principle of each system entirely intact.

The Function Classification of ICF can in ICPC-2 be represented in patients' reasons for encounter in the form of symptoms and complaints, and in GP's clinical observations during a physical exam, as an extension of ICPC in its process mode. The ICF Component on Activities and Participation involves the clinical consequences of a specific episode of care, resulting in limitations that a GP could attach to an ICPC process code. The ICF Qualifiers for Function and Activities/Participation seem to be quite useful for family practice, and need no adaptation.

An example of the application of the ICF by the General Practitioner will be presented.

Further work will be done in the Departments of Family/General Practice of the Universities of Ghent and Amsterdam.

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