Message from the Director

2015 so far has been a year of advance for the ICD-11 Revision, thanks to major efforts from many stakeholders. Based on a very useful external review, to which many of you contributed, there is a path to the 2018 World Health Assembly which is now established. The external review, combined with an updated governance structure to steward the Joint Linearization for Mortality and Morbidity Statistics (JLMMS), has produced some clear steps forward for the revision process, resulting in significant technical progress. Likewise, the work on the Traditional Medicine Chapter in JLMMS is well progressed with pilot field testing and international peer review underway.

The efforts and outcomes are very clear, highlighted on page 2 of this newsletter. The 2016 strategy for the JLMMS will focus on developing:

i. A classification that meets the needs of the Member States;
ii. A sustainable model beyond 2018; and
iii. Improved health information implementation beyond 2018 in both high resource and low resource settings.

The commitment and extraordinary efforts from our global partners continue to be appreciated by the WHO team.

As of October we have a new WHO Department responsible for the classifications work: the Department of Information, Evidence and Research (IER). With this, changes are occurring in the structure including the CTS team: the incorporation of health informatics into the team and the work on developing ICD in low resource settings will help support the strategic directions for the team until the 2018 World Health Assembly.

And with the ICD Revision on a good path towards finalization, Dr Bedirhan Ustun has been asked to take on a challenging new assignment as coordinator for WHO’s work on Data Revolution and Big Data in the IER department, a rapidly evolving field where WHO urgently needs to develop a clear strategy and position. Bedirhan’s leadership and contributions to the first phase of the ICD revision process have been instrumental, and I look forward to this new phase.

- Dr Ties Boerma, Director, Information, Evidence, and Research
# ICD-11: Progress

<table>
<thead>
<tr>
<th>Foundation Development</th>
<th>Proposal platform: (activity since June 2014)</th>
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<tbody>
<tr>
<td></td>
<td>• 4743 proposals (78 authors, including WHO)</td>
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<td>• 3025 proposals actioned</td>
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<td>• More than 1700 proposals to be addressed before testing commences.</td>
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<tr>
<td>Proposal Type:</td>
<td>65% content enhancement proposals, (definitions or terms);</td>
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<tr>
<td></td>
<td>21% complex hierarchical changes</td>
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<td>14% delete or add individual entities</td>
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<tr>
<th>Technology Development</th>
<th>ICD-11 browser</th>
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<tr>
<td></td>
<td>• See foundation and linearization – grid view</td>
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<tr>
<td></td>
<td>• Download versions</td>
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<tr>
<td></td>
<td>• ‘frozen’ versions</td>
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<tr>
<td></td>
<td>• See differences between versions</td>
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<tr>
<td>Tools</td>
<td>Coding tool developed</td>
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<td>Proposal tool in active use</td>
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<td>Review tool in development</td>
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<td>Translation tool (Translate in your language)</td>
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<td>Mapping tool</td>
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<tr>
<th>JUMMS Development</th>
<th>Technical Activities</th>
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<tr>
<td></td>
<td>Restructure infectious diseases chapter, diabetes, ‘postoperative complications’, and edit ‘Dementia’</td>
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<tr>
<td></td>
<td>Design ‘primary care’</td>
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<td></td>
<td>Reviewing ‘shorelining’</td>
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<td>Volume 2 edited</td>
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<td></td>
<td>Ordering, Terminology, Parenting, Exclusions</td>
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<td></td>
<td>Testing strategy and multilingual version of data entry program (ICD-FiT)</td>
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<td>Coordination of on-going translations</td>
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<td></td>
<td>Traditional Medicine chapter development (see below)</td>
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<tr>
<th>Project Management Activities</th>
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<tbody>
<tr>
<td>Frozen version release May 31, 2015</td>
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<tr>
<td>External Review of ICD Process</td>
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<tr>
<td>Project Plan¹</td>
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<tr>
<td>Strategy Development²</td>
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<tr>
<th>Traditional Medicine Chapter</th>
<th>Technical Activities</th>
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<tbody>
<tr>
<td></td>
<td>Draft Coding guidelines</td>
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<tr>
<td></td>
<td>Index development</td>
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<td></td>
<td>Harmonization of TM Chapter terminology</td>
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<tr>
<th>Testing Strategy:</th>
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<tr>
<td>Draft translation in Chinese, Japanese, Korean (completed), French and Spanish (ongoing)</td>
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<tr>
<td>Pilot Field Testing clinical utility – Europe-wide</td>
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<tr>
<td>Peer review: 1st round – International</td>
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¹ [http://www.who.int/classifications/icd/revision/icdprojectplan2015to2018.pdf?ua=1](http://www.who.int/classifications/icd/revision/icdprojectplan2015to2018.pdf?ua=1)

² [https://docs.google.com/viewer?a=v&pid=sites&srcid=ZGVmYXVsdGRvbWFpbmxpY2QxMXJldmlzaW9ufGd4OjMwMDA0NjI5ZjhyN2QzNTM](https://docs.google.com/viewer?a=v&pid=sites&srcid=ZGVmYXVsdGRvbWFpbmxpY2QxMXJldmlzaW9ufGd4OjMwMDA0NjI5ZjhyN2QzNTM)
ICD-11: Taking Shape

ICD-11 / JLMMS Chapters

At a Glance

Chapter 01 – Infectious diseases
Chapter 02 – Neoplasms
Chapter 03 – Diseases of the blood and blood-forming organs
Chapter 04 – Disorders of the immune system
Chapter 05 – Conditions related to sexual health
Chapter 06 – Endocrine, nutritional and metabolic diseases
Chapter 07 – Mental and behavioural disorders
Chapter 08 – Sleep – Wake disorders
Chapter 09 – Diseases of the nervous system
Chapter 10 – Diseases of the eye and adnexa
Chapter 11 - Diseases of the ear and mastoid process
Chapter 12 – Diseases of the circulatory system
Chapter 13 – Diseases of the respiratory system
Chapter 14 – Diseases of the digestive system
Chapter 15 – Diseases of the skin
Chapter 16 – Diseases of the musculoskeletal system and connective tissue
Chapter 17 – Diseases of the genitourinary system
Chapter 18 – Pregnancy, childbirth and the puerperium
Chapter 19 – Certain conditions originating in the perinatal period
Chapter 20 – Developmental anomalies
Chapter 21 – Symptoms, signs, clinical forms, and abnormal clinical and laboratory findings, not elsewhere classified
Chapter 22 – Injury, poisoning and certain other consequences of external causes
Chapter 23 – External causes of morbidity and mortality
Chapter 24 – Factors influencing health status and contact with health services
Chapter 25 – Codes for special purposes
Chapter 26 – Extension Codes
Chapter 27 – Traditional Medicine

Differences to ICD-10

ICD-11 has many new elements

New Chapters:

• Chapter 3 Diseases of the Blood and Blood forming Organs
• Chapter 4 Disorders of the Immune System.
• Chapter 5 Conditions related to Sexual Health.
• Chapter 8 Sleep-Wake Disorders
• Chapter 26 Extension codes
• Chapter 27 Traditional Medicine

New Concepts:

• Foundation: Everything in ICD
• Entity: Each element in the foundation
• Linearization: also known as a Classification
• Stem code: Category (includes former ‘dagger’ codes)
• Extension code: Additional information
• Linearization parents: Classification hierarchy, Chapter, Block, Category

Content Model

• ICD-11 categories have a short and a long definition.
• All ICD-11 categories include separate information on anatomy, aetiology, and other aspects. These can be accessed through searches, or when browsing in the tabular list.

New Coding Scheme

• The chapter numbering: now arabic numbers, not roman numerals
• The coding scheme for categories: now minimum 4 characters, 2 levels of subcategories
• Asterisk codes become Clinical forms or Extension codes. Additional sub-classifications become Extension codes

Terminology

• ICD-10 had a range of expressions to describe a causal relationship between conditions in a code title. In ICD 11, the preferred term is “due to”.
• ICD-10 had a range of expressions indicating the coincidence of two conditions in a code title (e.g. “in” or “with”). In ICD-11, the preferred term is “associated with”.

World Health Organization – Classifications, Terminologies, and Standards

November 2015
Revision Steering Group - Small Executive Group (RSG-SEG)

- **Chair: Christopher G. Chute** - Bloomberg Distinguished Professor of Health Informatics, Johns Hopkins Medicine, USA
- **Donna Pickett** - National Center for Health Statistics, Centers for Disease Control and Prevention, USA
- **James Harrison** - Research Centre for Injury Studies, Flinders University, and Australian Institute of Health and Welfare National Injury Surveillance Unit, Australia
- **Robert Chalmers** - Honorary Consultant Dermatologist, University of Manchester School of Medicine, UK
- **Alan Rector** - School of Computer Science, University of Manchester, Retired
- **Doris Chou** - World Health Organization
- **Lars Berg** - WHO-FIC Collaborating Centre in the Nordic Countries, Norwegian Directorate of Health, Oslo.

Revision Steering Group - RSG

- RSG is composed of more than 50 experts from across the spectrum of health disciplines
- Full membership available here: [http://www.who.int/classifications/icd/RSG/en/](http://www.who.int/classifications/icd/RSG/en/)

JLMMS Task Force

- **Co-Chair: James Harrison** - Research Centre for Injury Studies, Flinders University, and Australian Institute of Health and Welfare National Injury Surveillance Unit, Australia
- **Co-Chair: Stefanie Weber** – DIMDI, German Institute of Medical Documentation and Information, Germany
- **Jenny Hargreaves** - Australian Institute of Health and Welfare, Co-Chair WHO FIC Council, Australia
- **Christopher G. Chute** - Bloomberg Distinguished Professor of Health Informatics, Johns Hopkins Medicine, Chair: RSG-SEG, USA
- **Robert Anderson** - National Center for Health Statistics, Centers for Disease Control and Prevention, USA
- **Donna Pickett** - National Center for Health Statistics, Centers for Disease Control and Prevention, USA
- **Sam Notzon** - National Center for Health Statistics, Centers for Disease Control and Prevention, USA
- **Martti Virtanen** - Managing Director, Nordic Casemix Centre
- **Lars Berg** - WHO-FIC Collaborating Centre in the Nordic Countries, Norwegian Directorate of Health, Oslo
- **Vincenzo Della Mea** – Department of Mathematics and Computer Science, University of Udine, Italy
- **Kees Van Boven** - Radboud University Nijmegen, Netherlands
- **James Eynstone-Hinkins** - Australian Bureau of Statistics Health and Vital Statistics Unit, Australia
- **Vera Dimitroupolous** - National Centre for Classification in Health, University of Sydney, Australia
- **Anne Elsworth** - National Centre for Classification in Health, Faculty of Health Sciences, University of Sydney, Australia
- **Richard Madden** - National Centre for Classification in Health, Faculty of Health Sciences, University of Sydney, Australia
- **Patricia Wood** - Health Statistics Division, Statistics Canada
- **Ulrich Vogel** – DIMDI, German Institute of Medical Documentation and Information, Germany
- **Emiko Oikawa** - International Classification & Information Management Office, Ministry of Health, Labour and Welfare, Japan

**2015 Advisory Activities**

- WHO-FIC Council (2015 teleconferences and meetings - 9)
- WHO-FIC Network (Meetings - 1)
- RSG-SEG (Teleconferences - 30)
- RSG (Teleconferences - 9)
- JLMMS Task Force (Meetings - 2 and teleconferences - 4)
- Individual specialty TAGs meetings (meetings – more than 40)