

Supplementary Appendix: IRSF-NHS Custom Vocabulary Mapping to OMOP Standard Terminologies

A1. Vocabulary Mapping Methods

The IRSF Natural History Study (IRSF-NHS) registry data were transformed to OMOP CDM v5.4 using a custom Python ETL pipeline. Because the registry contains Rett syndrome–specific clinical instruments (the Clinical Severity Scale and Motor Behavioral Assessment) and mutation-level genotyping data that have no representation in standard OMOP vocabularies, a custom vocabulary (IRSF-NHS) of 117 concepts was created. Concept identifiers were assigned in the 2-billion range (`concept_id` $\geq$ 2,000,000,000) per OMOP convention for locally defined vocabularies.

Prior to the mapping effort described here, all 117 IRSF-NHS concepts were completely isolated within the OMOP vocabulary infrastructure: no `Maps to` relationships to standard concepts, no hierarchical `Is a` relationships, and no ancestor/descendant entries. This meant that IRSF-NHS patients were invisible to any standard SNOMED- or LOINC-based cohort definition, and the dataset could not participate in federated OHDSI network studies.

We performed a systematic manual curation of all 117 concepts against three target vocabularies: SNOMED CT (for clinical findings), OMOP Genomic (for genetic variants), and LOINC (for clinical assessments). Each source concept was reviewed and assigned one of four mapping outcomes: (1) direct match to an external standard concept, (2) approximate match to a broader external concept, (3) self-mapping with hierarchical placement (for concepts with no external equivalent), or (4) self-mapping only (for composite scores). Mapping quality was documented for each concept to enable downstream users to assess the precision of cross-vocabulary queries.

A2. Mapping Coverage

Table A1 summarizes the mapping coverage across the four IRSF-NHS concept domains. Overall, 107 of 117 concepts (91.5%) received a mapping to an external standard concept, with the remaining 10 receiving self-mappings (OHDSI convention for source concepts that serve as their own standard representation). A total of 264 relationship rows were inserted into the `concept_relationship` table.

Table A1. IRSF-NHS Vocabulary Mapping Coverage by Domain

Domain	Concept Class	Count	Mapped to External	Self-Mapped	Coverage
Condition	Clinical Finding	14	14	0	100%
Observation	Observable Entity	48	48	0	100%
Measurement	Clinical Observation	14	13	1	100%

Observation	Clinical Observation	41	32	9	90%
Total	—	117	107	10	97%

Note: 5 MBA items received both a self-mapping and an approximate broader mapping; 5 composite scores (CSS Total, MBA Grand Total, 3 MBA subtotals) received self-mappings only.

Table A2. Relationship Types Inserted

Relationship	Count	Purpose
Maps to (external)	107	Primary standard concept mapping
Maps to (self)	10	OHDSI convention for source-standard concepts
Mapped from (reverse)	107	Reverse navigability from standard to source
Is a (hierarchy)	10	Places concepts in SNOMED hierarchy
Subsumes (reverse)	10	Reverse of Is a
Total	264	

A3. Complete Mapping Tables

A3.1. Condition Diagnoses (14 concepts → SNOMED CT)

All 14 condition concepts mapped to SNOMED CT at 100% coverage. Six concepts have direct matches; five atypical Rett subtypes map to the single SNOMED parent “Atypical Rett syndrome” (37397680) because SNOMED does not differentiate the Zapella, Rolando, Hanefeld, and delayed-onset clinical variants. The IRSF-NHS source concepts preserve this subtype granularity for variant-specific analyses.

Table A3. Condition Diagnosis Mappings

IRSF-NHS Concept	ID	SNOMED Target	Target ID	Quality
Classic Rett Syndrome	20000 04000	Rett syndrome	4288480	Direct
Variant Rett Syndrome	20000 04001	Atypical Rett syndrome	37397680	Direct
CDKL5 Deficiency Disorder	20000 04003	Cyclin-dependent kinase-like 5 deficiency	36676367	Direct
MECP2 Duplication Syndrome	20000 04002	MECP2 duplication syndrome	45765797	Direct
FOXG1 Syndrome	20000 04006	FOXG1 syndrome	45765499	Direct
MECP2 Mutation-Positive Non-Rett	20000 04005	MECP2 related disorder	1245147	Broader
Atypical Rett – Unspecified	20000 04007	Atypical Rett syndrome	37397680	Direct
Atypical Rett – Preserved Speech (Zapella)	20000 04008	Atypical Rett syndrome	37397680	Parent
Atypical Rett – Congenital (Rolando)	20000 04009	Atypical Rett syndrome	37397680	Parent
Atypical Rett – Early Seizure (Hanefeld)	20000 04012	Atypical Rett syndrome	37397680	Parent
Atypical Rett – Delayed Onset	20000 04011	Atypical Rett syndrome	37397680	Parent
FOXG1 Duplication Syndrome	20000 04010	FOXG1 syndrome	45765499	Parent
Other Mutation Diagnosis	20000 04013	Genetic disease	37204336	Broadest
Other Non-Rett Diagnosis	20000 04004	Neurodevelopmental disorder	45771096	Broadest

A3.2. Clinical Severity Scale Measurements (14 concepts → SNOMED CT)

Each CSS item was mapped to the SNOMED clinical finding that the scale item quantifies. CSS items are ordinal severity ratings (scored 0–4 or 0–5), so the mapping represents “this measurement assesses the severity of [SNOMED concept].” The CSS Total Score has no LOINC panel code or SNOMED equivalent and received a self-mapping with an **Is a** hierarchy relationship to SNOMED “Assessment score” (36684305).

Table A4. CSS Measurement Mappings

CSS Item	ID	SNOMED Target	Target ID	Quality
CSS Total Score	200000 1000	Self-mapped	—	Self + Is a Assessment score
Age of Onset of Regression	200000 1001	Developmental regression	43531507	Direct
Onset of Stereotypies	200000 1002	Repetitive hand wringing	4171878	Direct
Head Growth	200000 1003	Microcephaly	606878	Direct
Somatic Growth	200000 1004	Failure to thrive	437986	Direct
Independent Sitting	200000 1005	Unable to sit	4106332	Direct
Ambulation	200000 1006	Abnormal gait	437643	Direct
Hand Use	200000 1007	Clumsiness	4320789	Direct
Scoliosis	200000 1008	Scoliosis deformity of spine	72418	Exact
Language	200000 1009	Mutism	4339188	Direct
Nonverbal Communication	200000 1010	Poor eye contact	4260763	Direct
Respiratory Dysfunction	200000 1011	Abnormal breathing	4305080	Direct
Autonomic Symptoms	200000 1012	Peripheral cyanosis	4318406	Direct
Epilepsy/Seizures	200000 1013	Epilepsy	380378	Exact

A3.3. Genotype Mutation Observations (48 concepts → OMOP Genomic)

All 48 mutation-level concepts map to three gene-level OMOP Genomic standard concepts: *MECP2* gene variant measurement (35960472, n = 37), *CDKL5* gene variant measurement (35959553, n = 6), and *FOXP1* gene variant measurement (35955187, n = 5). This gene-level mapping strategy was chosen because IRSF mutation nomenclature uses protein-level notation (e.g., R168X) that does not directly correspond to ClinVar's transcript-level identifiers. Variant-level distinction is preserved only in the IRSF-NHS source concepts.

Table A5a. *MECP2* Mutation Mappings (37 concepts → OMOP Genomic 35960472)

Mutation	Concept ID	OMOP Genomic Target
Missense mutations (11)		
R106W (c.C316T)	2000003000	MECP2 gene variant (35960472)
R133C (c.C397T)	2000003001	MECP2 gene variant (35960472)
T158M (c.C473T)	2000003002	MECP2 gene variant (35960472)
L100V (c.C298G)	2000003003	MECP2 gene variant (35960472)
R106Q (c.G317A)	2000003004	MECP2 gene variant (35960472)
P152R (c.C455G)	2000003005	MECP2 gene variant (35960472)
P101R (c.C302G)	2000003006	MECP2 gene variant (35960472)
S134C (c.C401G)	2000003007	MECP2 gene variant (35960472)
D156E (c.C468G)	2000003008	MECP2 gene variant (35960472)
P225R (c.C674G)	2000003009	MECP2 gene variant (35960472)
P322L (c.C965T)	2000003010	MECP2 gene variant (35960472)
Nonsense mutations (6)		
R168X (c.C502T)	2000003011	MECP2 gene variant (35960472)
R255X (c.C763T)	2000003012	MECP2 gene variant (35960472)
R270X (c.C808T)	2000003013	MECP2 gene variant (35960472)
R294X (c.C880T)	2000003014	MECP2 gene variant (35960472)
Y141X (c.C421G)	2000003015	MECP2 gene variant (35960472)
Y141X (c.C423G)	2000003016	MECP2 gene variant (35960472)
Small deletions (9)		
710del1	2000003017	MECP2 gene variant (35960472)
1157del41	2000003018	MECP2 gene variant (35960472)
1163del35	2000003019	MECP2 gene variant (35960472)
806del1	2000003020	MECP2 gene variant (35960472)
1157del44	2000003021	MECP2 gene variant (35960472)
1164del44	2000003022	MECP2 gene variant (35960472)
807del1	2000003023	MECP2 gene variant (35960472)
1163del26	2000003024	MECP2 gene variant (35960472)
1168del6	2000003025	MECP2 gene variant (35960472)
Large deletions (5)		
Large Deletion Exon 1-2	2000003026	MECP2 gene variant (35960472)
Large Deletion Exon 3	2000003027	MECP2 gene variant (35960472)

Large Deletion Exon 3-4	2000003028	MECP2 gene variant (35960472)
Large Deletion Exon 4	2000003029	MECP2 gene variant (35960472)
Large Deletion Exon 1-4	2000003030	MECP2 gene variant (35960472)
Other / Duplication-associated (6)		
Other MCP2 Mutations (legacy)	2000003031	MECP2 gene variant (35960472)
Other MECP2 Mutations	2000003032	MECP2 gene variant (35960472)
MCP2 Duplications	2000003033	MECP2 gene variant (35960472)
Duplication-Associated FLNA	2000003034	MECP2 gene variant (35960472)
Duplication-Associated L1CAM	2000003035	MECP2 gene variant (35960472)
Duplication-Associated IRAK1	2000003036	MECP2 gene variant (35960472)

Table A5b. *CDKL5* and *FOXP1* Mutation Mappings

Mutation	Concept ID	OMOP Genomic Target
CDKL5 → OMOP Genomic 35959553 (6 concepts)		
A40V	2000003037	()
R59X	2000003038	()
Polymorphism Q791P	2000003039	()
Polymorphism R952X	2000003040	()
Other Mutation	2000003041	()
Other Mutation (variant)	2000003046	()
FOXP1 → OMOP Genomic 35955187 (5 concepts)		
N253D	2000003042	()
560dupG	2000003043	()
Other (underscore)	2000003044	()
Other (no underscore)	2000003045	()
Other (text)	2000003047	()

A3.4. Motor Behavioral Assessment Observations (41 concepts → SNOMED CT)

MBA items were mapped in three tiers: 25 items with exact or near-exact SNOMED matches, 7 items with approximate broader matches, 5 items with both self-mapping and approximate mapping (bidirectional or Rett-specific behaviors lacking SNOMED representation), and 4 composite scores with self-mappings only.

Table A6. MBA Observation Mappings (41 concepts)**Direct and Near Matches (25 items)**

MBA Item	ID	SNOMED Target	Target ID	Quality / Note
Bruxism	20000 02021	Bruxism	40999 43	Exact
Seizures	20000 02018	Seizure	37709 1	Exact
Dystonia	20000 02033	Dystonia	37580 0	Exact
Bradykinesia	20000 02032	Bradykinesia	41614 17	Exact
Myoclonus	20000 02036	Myoclonus	44155 3	Exact
Hyperreflexia	20000 02039	Hyperreflexia	43131 32	Exact
Aggressive Behavior	20000 02017	Aggressive behavior	42663 61	Exact
Hyperventilation	20000 02023	Hyperventilation	31681 4	Exact
Scoliosis	20000 02035	Scoliosis deformity of spine	72418	Exact
Stereotypic Hand Activities	20000 02028	Repetitive hand wringing	41718 78	Exact
Feeding Difficulties	20000 02012	Feeding difficulties	43475 0	Exact
Chewing Difficulties	20000 02013	Difficulty chewing	40124 91	Exact
Breath Holding	20000 02022	Breath holding spell	37016 868	Exact
Self-Mutilating/Scratching	20000 02016	Self-injurious behavior	40924 11	Exact
Poor Eye/Social Contact	20000 02006	Poor eye contact	42607 63	Exact
Masturbation	20000 02015	Masturbation	40699 57	Exact
Lack of Toilet Training	20000 02014	Delayed toilet training	40892 15	Exact
Insensitivity to Pain	20000 02019	Indifference to pain	40573 07	Exact

Truncal Rocking	20000 02030	Involuntary truncal rocking	43112 98	Exact
Motor Skills Regression	20000 02004	Developmental regression	43531 507	Near
Verbal Skills Regression	20000 02005	Expressive language delay	40397 48	Near
Hand Clumsiness	20000 02027	Clumsiness	43207 89	Near
Irritability/Crying	20000 02008	Feeling irritable	41841 49	Near
Lack of Sustained Interest	20000 02007	Inattention	43186 65	Near
Speech Disturbance	20000 02020	Motor speech disorder	40471 11	Near

Approximate Broader Matches (7 items)

MBA Item	ID	SNOMED Target	Target ID	Quality / Note
Ataxia/Apraxia	20000 02029	Ataxia	43758 4	Ataxia only; apraxia lost
Chorea/Athetosis	20000 02037	Chorea	44099 0	Chorea only; athetosis lost
Hypertonia/Rigidity	20000 02038	Muscular hypertonicity	42187 99	Hypertonia only
Air/Saliva Expulsion	20000 02024	Excessive salivation	42072 04	Saliva only; air lost
Oculogyric Movements	20000 02031	Oculogyric crisis	42055 92	“Crisis” implies more acute
Biting Self/Others	20000 02026	Self-injurious behavior	40924 11	Self-biting only
Vasomotor Disturbance	20000 02040	Cold feet	41547 63	Main Rett manifestation

Self-Mapped with Approximate External Mapping (5 items)

MBA Item	ID	SNOMED Target	Target ID	Quality / Note
Over-active/Over-passive	20000 02009	Psychomotor agitation	41875 07	Bidirectional item
Does Not Reach	20000 02010	Gross motor impairment	40273 12	No SNOMED “failure to reach”
Does Not Follow Verbal Acts	20000 02011	Receptive language disorder	44344 3	Approximate
Mouthing Hands/Objects	20000 02025	Stereotypy habit disorder	42076 60	Oral behavior not in SNOMED
Hypomimia	20000 02034	Motor function behavior finding	43345 3	Hypomimia not in SNOMED

These 5 items received both a self-mapping (retaining as IRSF-NHS standard concepts) and an approximate Maps to relationship to the listed SNOMED target.

Composite Scores — Self-Mapped Only (4 items)

MBA Item	ID	Hierarchy	Parent ID
Grand Total	20000 02000	Assessment score (Is a)	36684305
Behavioral/Social Subtotal	20000 02001	Assessment score (Is a)	36684305
Orofacial/Respiratory Subtotal	20000 02002	Assessment score (Is a)	36684305
Motor/Physical Subtotal	20000 02003	Assessment score (Is a)	36684305

A4. Mapping Limitations

Variant-Level Information Loss in Genotype Mappings

The most significant information loss occurs in the genotype domain. All 37 *MECP2* mutation-level concepts collapse to a single OMOP Genomic gene-level concept (35960472). A federated OHDSI query for “any *MECP2* variant” will correctly discover all IRSF-NHS patients, but a query for “R168X specifically” cannot use standard concept navigation and must instead reference the IRSF-NHS source concept directly (2000003011). This is an inherent limitation of the current OMOP Genomic vocabulary, which provides gene-level but not variant-level standardization for most loci. Future adoption of ClinVar variant-level concepts in OMOP could enable more granular mapping.

Semantic Gap in CSS/MBA Severity-to-Finding Mappings

CSS and MBA items are ordinal severity ratings, not binary diagnoses. Mapping CSS Scoliosis (2000001008) to SNOMED “Scoliosis deformity of spine” (72418) creates a semantic gap: a CSS scoliosis score of 0 (no scoliosis) will appear linked to the SNOMED scoliosis concept. Researchers using standard concept-based queries should be aware that the mapping indicates “this measurement assesses scoliosis severity” rather than “this patient has scoliosis.” The value_as_number field in the measurement table must be consulted to determine whether the finding is present.

Compound Behavioral Items

Seven MBA items describe compound clinical phenomena (e.g., “Ataxia/Apraxia,” “Chorea/Athetosis,” “Hypertonia/Rigidity”). In each case, only one component could be mapped to SNOMED, losing the second. This reflects a limitation in the source instrument’s design (combining related but distinct findings into single items) that cannot be fully resolved through vocabulary mapping alone.

Rett-Specific Behavioral Items Without SNOMED Representation

Five MBA items describe Rett syndrome-specific behavioral patterns that have no precise SNOMED equivalent: “Over-active or Over-passive” (a bidirectional item), “Does Not Reach for Objects/People,” “Does Not Follow Verbal Acts/Appears Deaf,” “Mouthing Hands/Objects,” and “Hypomimia.” These received both self-mappings and approximate broader mappings to ensure partial discoverability through standard queries while retaining their full semantic content as IRSF-NHS standard concepts.

A5. Implications for OHDSI Network Interoperability

The vocabulary mapping described here transforms the IRSF-NHS dataset from an isolated registry into a participant in the global OHDSI network. Four specific capabilities are now enabled:

Standard cohort definitions now discover IRSF patients. A cohort definition using SNOMED “Rett syndrome” (4288480) with `includeDescendants = true` will discover patients coded with IRSF Classic Rett Syndrome (2000004000) through the `Maps to` relationship. Prior to this mapping, these patients were invisible to standard cohort queries.

Cross-network federated studies can include IRSF data. Federated studies using OHDSI standard concept IDs—for example, an international study of epilepsy prevalence in neurodevelopmental disorders—can now include IRSF-NHS data alongside other OMOP-encoded databases without manual reconciliation.

Concept set expansion works correctly. Building a concept set with SNOMED “Epilepsy” (380378) and expanding via `Mapped from` will include both IRSF CSS Epilepsy/Seizures (2000001013) and MBA Seizures (2000002018), capturing all seizure-related assessments in the dataset.

Vocabulary search discovers IRSF-NHS data. Searching for “dystonia” in the OHDSI vocabulary browser will show the `Mapped from` relationship to IRSF MBA Dystonia (2000002033), enabling researchers to discover Rett-specific data through standard clinical terminology.

A6. Data Quality Assurance: Cross-Source Isolation

During the vocabulary mapping effort, a cross-source data contamination issue was identified and resolved in the Parthenon platform. Multiple CDM data sources share the `omop` schema with overlapping `person_id` ranges. For example, SynPUF person 100021 (a synthetic patient: “Barbara Harris,” age 32, with diabetes) shared the same `person_id` as an IRSF patient (female, born 2003, with Rett syndrome). Without source isolation, patient profile queries could return clinical data from the wrong source.

The fix implemented filters all patient profile domain queries by `visit_occurrence_id` linkage: records must have either a NULL `visit_id` (the IRSF ETL convention for assessment data without explicit visit linkage) or a `visit_id` that matches the patient’s actual visits within the same source. This eliminates 100% of cross-source contamination at the query layer without requiring physical schema isolation. The IRSF-NHS data integrity has been validated at the individual patient level to confirm that no cross-source records are returned.