orphanet

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Procedural document:

Collection and dissemination of disease information for health professionals and the general public

www.orpha.net

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I. Introduction

1. Purpose/objectives

Orphanet aims to be the reference resource for rare diseases, and as such developed a policy concerning the collection, evaluation and dissemination of quality information produced by others. This information encompasses review articles, clinical practice guidelines (CPGs), anesthesia guidelines, practical genetics guides, clinical genetics review, guidance for genetic testing, articles for general public (all available through the "Detailed information" box on the Orphanet website's disease pages) and websites containing added-value information on rare diseases (through the "Other websites" link on the same disease page in the "Additional information" box).

This document describes how Orphanet collects, assesses and gives access to this content intended for health professionals and for lay readers on the <u>Orphanet website</u>.

2. Disclaimer

- This procedure is part of the OrphaNetWork Direct Grant (831390), which has received funding from the European Union's Health Programme (2014-2020).
- The content of this procedure represents the views of the author only and is his/her sole responsibility; it cannot be considered to reflect the views of the European Commission and/or the Consumers, Health, Agriculture and Food Executive Agency or any other body of the European Union. The European Commission and the Agency do not accept any responsibility for use that may be made of the information it contains.
- The availability of a link from the Orphanet website to other sites does not indicate endorsement of those sites by Orphanet, and Orphanet accepts no responsibility for the validity or accuracy of their content.

3. Range of application

Information is collected for all rare diseases belonging to the Orphanet nomenclature of rare diseases. Resources in all languages can be disseminated and are made available from the rare disease pages of the Orphanet website in all languages.

4. References

- AGREE II evaluation tool
- HONCode principles
- Orphanet Standard Operating Procedures

5. Abbreviation

AWMF: Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften CPG: Clinical Practice Guideline EJHG: European Journal of Human Genetics ERN: European Reference Network INCA: Institut National du Cancer IS: Information Scientists OCT: Orphanet Coordinating Team PNDS : Protocole national de diagnostic et de soins

6. Definitions

<u>AGREE II</u>: The Appraisal of Guidelines for Research and Evaluation (AGREE¹) is an international tool to assess the quality and reporting of practice guidelines.

Coordinator of acquisition of external content (hereafter named "coordinator"): Member of Orphanet coordinating team in charge of the quality assessment and dissemination by Orphanet of the different types of articles and websites of interest collected by the information scientists of the Orphanet network.

European Reference Networks (ERNs): Virtual networks involving healthcare providers across Europe that aim to tackle complex or rare diseases and conditions requiring highly specialised treatment and a concentration of knowledge and resources².

Expert: A medical doctor or researcher with prominent experience in a rare disease or a group of rare diseases, and identified by Orphanet based on published articles (particularly reviews and guidelines), involvement in expert centers, expert networks, and/or in dedicated research activities including clinical trials.

External content: Refers to the information produced and published by organisations external to Orphanet (e.g. learned society, scientific journal, patient association, governmental institution, etc.).

HON Code certification: Ethical standard aimed at offering quality health information. It demonstrates the intent of a website to publish transparent information. It guides site managers in setting up a minimum set of mechanisms to provide quality, objective and transparent

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¹ 2010 version

² European Reference Network handout, ISBN 978-92-79-65469-5

Procedural document on the collection and dissemination of disease information for health professionals and the general public. June 2021–Number 01. https://www.orpha.net/orphacom/cahiers/docs/GB/Acquisition of disease information R1 Wcont EP 02.pdf

medical information tailored to the needs of the audience.

Information scientists (IS): Member of the Orphanet team with a scientific and/or medical background in charge of collecting, producing and updating information provided in the Orphanet database.

Orphanet coordinating team (OCT): French US14 Inserm-based team coordinating the Orphanet Network, producing the Orphanet nomenclature in English and its scientific annotations and responsible for coordination of the production of the scientific content and for all Network activities including translation and IT developments.

7. Filing and updates

This document is updated by the coordinator of acquisition of external content as often as necessary and at least once a year. The most up-to-date version is available on the Orphanet website:

https://www.orpha.net/orphacom/cahiers/docs/GB/Acquisition_of_disease_information_R1_ Wcont_EP_02.pdf

| Type of text | Definition | Intended audience | Sources | Descriptive data provided by Orphanet |
|--|---|--|--|---|
| Anesthesia guidelines | Recommendations for the anaesthetic management of patients suffering from rare diseases | Anesthesists | <u>OrphanAnesthesia</u> project | Language; year of publication; (PDF format when applicable) |
| Articles for general public | Tackle various aspects of rare diseases | General public | Medical societies, patient organisations, research networks, reference centers | Language; year of publication; (PDF format when applicable) |
| Clinical genetics reviews | Review articles centered on the genetic aspects of diseases, including paragraphs on diagnosis, management and genetic counseling | Health professionals | <u>GeneReviews®</u> | Language; year of publication |
| Clinical practice guidelines (CPGs) | | | Language; year of publication; (PDF format when applicable) | |
| Guidance for genetic testing | Disease-specific guidelines regarding the clinical utility of genetic testing | Clinicians and geneticists | Peer-reviewed articles from the European Journal of Human Genetics | Language; year of publication; (PDF format when applicable) |
| Practical genetics | Peer-reviewed articles providing clinical, genetic and management information | Clinical geneticists | Peer-reviewed articles from the European Journal of Human Genetics | Language; year of publication; (PDF format when applicable) |
| Review articles | Peer-reviewed articles providing a clear, clinically-oriented and up-to-date description of rare diseases | Health professionals and scientists | Peer-reviewed articles from scientific journals | Language; year of publication; (PDF format when applicable) |
| Other websites of interest | Website displaying added-value information on rare diseases | All audiences | Medical societies, patient organisations, research networks, reference centers, etc. | Language, targeted public, access conditions, type of publisher and type of information; |

Table 1: Definitions of the types of collected information

II. Methodology

1. Flowchart

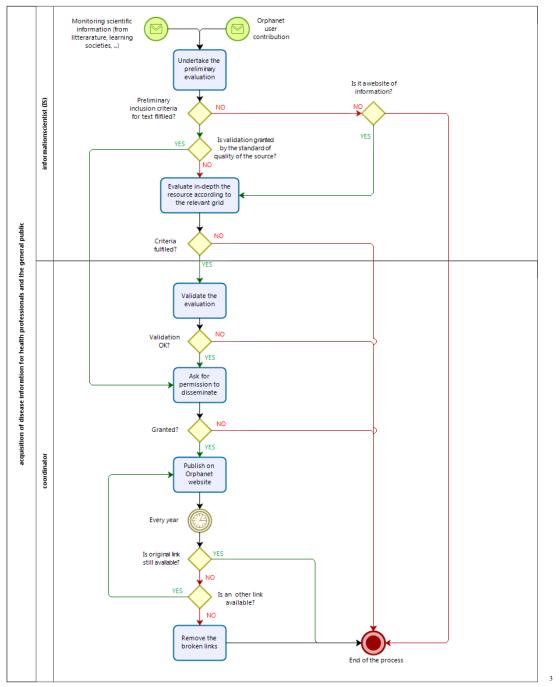


Figure 1: Workflow for the collection, evaluation and dissemination of relevant articles and websites on Orphanet

³ Powered by Bizagy Modeler

2. Description

a) Identification

Identification of medical information is carried out either directly by an information scientist of an Orphanet national team through scientific monitoring (literature[see Annex for the list of journals], Pubmed requests, learned societies etc) or following a spontaneous contribution from an Orphanet user or an organisation (ERNs, French National Rare Disease Networks).

b) Evaluation

Selected medical information undergoes a series of evaluation to assess its quality before dissemination.

<u>Preliminary evaluation</u>

The first step is to select articles that fulfil minimum quality criteria. These criteria are:

- Date of document: less than 5 years-old;
- Writers: expert of the disease. Single authors are not accepted in the case of CPGs;
- Category of document: consistent with one of the categories of texts defined by Orphanet (see definitions of article types);
- Topic: relevance of medical content in terms of addressed topics;
- Focus: on a rare disease or a group of rare diseases;
- Accessibility: full-text electronically available and for free (except for CPGs for which a link to the abstracts is sufficient whatever the full-text accessibility status);
- "Review article" type of text should be published in a peer-reviewed scientific journal.

If the preliminary criteria are fulfilled, it can

- Be published on the Orphanet website if the document is in the framework of a collaboration with Orphanet (i.e. with ERNs, other expert networks, learned societies, patient organisations, etc) or governmental sources for which their general standard of quality is granted;
- Go through an in-depth evaluation (see below).

If these preliminary criteria are not fulfilled, the documents are considered for the section "other website of interest" (see below) and undergo an in-depth evaluation based on inclusion/exclusion criteria derived from the HONCode principles (see Annex).

In-depth evaluation

A quick bibliographic search is carried out to check whether a similar article (in the same language) is available and fulfils the preliminary criteria. If yes, a rapid evaluation (based on the detailed

criteria in <u>Annex</u>) of the two articles is carried out to identify the most valuable, and then performed in-depth evaluation on the best one.

In case the quick evaluation is not sufficient to decipher between the articles, in-depth evaluation is performed for both to weigh the pros and cons.

The information scientist fills in the relevant form (see <u>Annex</u>) and provides his/her conclusions on the main aspects: topics covered, writing quality, relevance of authors, possible weaknesses and limitations. It allows a third party (including the final validator) to unambiguously understand the quality of the article (with strengths and weaknesses) without having to read it. Furthermore, the comments are useful for future comparison with another article on the same disease.

c) Validation

If the criteria of the preliminary evaluation are fulfilled and the text published by Orphanet's partners or governmental sources for which their general standard of quality is granted, the validation is automatically approved.

If the text underwent an in-depth evaluation, the evaluation sheet is checked by the coordinator, who quickly reviews the consistency of the evaluation sheet and the source and validates the added value of the source.

Table 2 summarises the validation steps in regard to the type of text.

d) Dissemination

If relevant, the IS requests permission from the copyright owner(s) before dissemination on Orphanet website.

e) Quality control

Identification of broken links is carried out by the coordinating team once a year, by running a script, completed by partially manual checking. Broken links are either corrected or removed (if correction is not possible) from the Orphanet website.

Table 2 : Validation steps of the different types of text according to their sources (NA= Not Applicable)

| Type of text | Sources | Validation after quick evaluation is sufficient | Validation tools for in- depth evaluation |
|--------------------------------|--|--|--|
| Anesthesia guidelines | OrphanAnesthesia | Yes | NA |
| Articles for general public | Medical societies, patient organisations, research networks, reference centers, etc. | No | Evaluation grid, see Annex |
| Clinical genetics review | GeneReviews | Yes | NA |
| Clinical practice | PNDS | Yes | NA |
| guidelines | ERNs guidelines | Yes | NA |
| | INCA guidelines | Yes | NA |
| | AWMF guidelines | Yes | NA |
| | Others | No | Evaluation grid for CPGs based on AGREE II evaluation tool, see Annex |
| Guidance for genetic testing | EJHG | Yes | NA |
| Other website of interest | Medical societies, patient organisations, research networks, reference centers, etc. | No | Evaluation with inclusion/exclusion criteria derived from the HONCode principles, see Annex |
| Practical Genetics | EJHG | Yes | NA |
| Review article | STArt Oncology | Yes | NA |
| | Others | No | Evaluation grid for "Review articles", see Annex |

III. Annexes

1. Evaluation grids

For Review articles:

| Similar document, in the same language, is already 1 | Similar document, in the same language, is already linked on Orphanet | | | | | |
|---|---|------------------|-------------------------------|--|--|--|
| If yes, new information about: Epidemiology | y 🗌 Clas | sification | Diagnosis | | | |
| Treatment | Other: | | | | | |
| Author(s) | _ | _ | | | | |
| Specialists of the condition | Yes | No No | _ | | | |
| Cover all medical specialties involved | Yes | No | Not applicable | | | |
| Expert reviewer(s) for abstract on Orphanet | Yes | No | | | | |
| Clarity of presentation | | _ | | | | |
| Contains introduction | Yes | No | | | | |
| Contains abstract | Yes | No No | | | | |
| Article is well written | Yes | No No | | | | |
| Explanations are concise | Yes | No | | | | |
| Main topics and conclusions are easy to find | Yes | No | | | | |
| Scope, target population | | | | | | |
| Topics covered by the article: | | _ | | | | |
| | ogy/genetics | Clinical Present | | | | |
| Diagnosis criteria Differential diagnosis | | | Genetic counseling | | | |
| Therapeutic considerations Ethics | Cost efficient | cy Other: | | | | |
| | — | | | | | |
| Population coverage is exhaustive | Yes | No, specify what | at population is not covered | | | |
| (pediatric,): | — _ | □ <i></i> | | | | |
| Geographic coverage International US | Europe | Other: | | | | |
| All therapeutic options are equally described | Yes | No. | | | | |
| Does the article explain why (described in another an | · · · · · · · · · · · · · · · · · · · | L | Yes No | | | |
| Contains information of importance to the patients? | | _ · · | ; Quality of life; disability | | | |
| information) | Yes | No | | | | |
| Contains methodology about literature search and re- | ference selection? | | Yes No | | | |
| Contains description of evidence used to establish th | e key statements? | | Yes No | | | |
| Other review available in literature? | | | | | | |
| If yes, overall rating of the present review is higher equivalent lower | | | | | | |
| different | | | | | | |
| Comment: | | | | | | |
| Assessment: Good Satis | sfactory | Poor | | | | |
| Comment: | | | | | | |
| | | | | | | |

Additional detailed criteria to assess the overall quality of review articles are as follows:

✓ Relevance of authors: especially if there is only one author, he/she should be specialist of the disease or he/she has authored other publications on the disease. If there are several authors, they should cover all domains of expertise of the disease.

- ✓ Clarity of presentation, writing quality: an introduction and an abstract are not decisive elements, but are a plus for clarity and quick reading.
- ✓ Relevance of scope and target populations: the largest coverage of topic the best. An article addressing only one topic (e.g. only therapy) is not retained, with exceptions: if no other textual information is available on Orphanet (the rule "better than nothing" applies), if the topic corresponds to the dominant aspect of the disease. Inclusion of information for patient is not decisive but a plus for selection as it is rarely present in articles.
- ✓ A methodology section on bibliographic search is not decisive but is a plus as it reflects data robustness.

***** For Clinical Practice Guidelines (adapted from the AGREE II evaluation tool):

| Scope and purpose Population coverage is exhaustive | Yes | No |
|--|---------------------|-----------|
| If no, what population is missing (pediatric,): | | |
| Geographic coverage (area of release): | | |
| | _ | |
| Covered topics: Prevention Diagnosis Genetic testing Therapeutic | Emergency | |
| Overall objectives of the guidelines are described (AGREE II Item 1) | Yes | No |
| Health questions are specifically described (AGREE II Item 2) | Yes | No 🗍 |
| Clear description of target patient population (AGREE II Item 3) | Yes | No 🗍 |
| Editorial independence | | |
| External funding Not described | Yes | No |
| Evidence that potential biases due to the funding body were taken into account | | |
| (AGREE II Item 22) | Yes | No |
| Conflicts of interest of guideline development group members are recorded (AGREE II Item 23) | | No |
| Conflicts of interest of guideline development group members are addressed (AGREE II Item 23) | | No 🗌 |
| Stakeholder involvement | | |
| Guideline development group includes individuals from all relevant professional groups | | |
| (implies that the group is clearly described) (AGREE II Item 4) | Yes | No |
| Patients' preferences are taken into account (AGREE II Item 5) | Yes | No |
| Clear description of target users of the guidelines (AGREE II Item 6) | Yes | |
| | 105 | |
| Rigour of development | _ | _ |
| Systematic methods used to search for evidence are described (AGREE II Item 7) | Yes | No |
| Criteria for selecting evidence are described (AGREE II Item 8) | Yes | No |
| Methods used to assess the strength of evidence are clearly described (GRADE method,) | _ | _ |
| (AGREE II Item 9) | Yes | No |
| Methods used to reach consensus are clearly described (Delphi technique,)(AGREE II Item 10 | 0)Yes | No |
| Benefits and risks have been considered in formulating the recommendations | | |
| (AGREE II Item 11) | Yes | No |
| Evidence used in developing guidelines is referenced adequately (linked to the recommendation | s) | |
| (AGREE II Item 12) | Yes | No |
| Guidelines have been externally reviewed prior to publication (AGREE II Item 13) | Yes | No 🗌 |
| A procedure for updating the guidelines is provided (AGREE II Item 14) | Yes | No |
| Clarity of presentation | | |
| Recommendations are specific and unambiguous (AGREE II Item 15) | Yes | No |
| The different management options are clearly presented (AGREE II Item 16) | Yes | No |
| Major recommendations can be found easily (AGREE II Item 17) | Yes | No |
| Applicability | | |
| Facilitators and barriers to the guideline's application are described (need for specific structure | e/material, special | l funding |
| mechanism)(AGREE II Item 18) | Yes | No 🗌 |
| Tools on how to put the recommendations into practice are provided (quick guide, chec | k list, algorithm | , how-to |
| directions,)(AGREE II Item 19) | Yes | No |
| Resources and costs implications have been considered (AGREE II Item 20) | Yes | No 🗌 |
| Other guidelines available Yes Yes, anterior version No | | |
| Already linked on Orphanet | | |
| If yes, overall rating of the present guidelines is higher equivalent low | er 🗌 dif | ferent |
| Explain why: | | |
| - Proventing the second s | | |

| Reviewer: Date of review dd/mm/yy): Assessment by topic: | | |
|--|--------------|--------------|
| Scope and purpose | satisfactory | insufficient |
| Editorial independence | satisfactory | insufficient |
| Stakeholder involvement | satisfactory | insufficient |
| Rigour of development | satisfactory | insufficient |
| Clarity of presentation | satisfactory | insufficient |
| Applicability | satisfactory | insufficient |
| Overall assessment : Good Comment: | Satisfactory | Poor |

Note: Regarding relevance of scope and purpose: the largest coverage of topic the best. Only documents addressing at least diagnosis and therapy are retained. However, documents that do not cover all aspects of a disease, for instance when no other recommendation is available (in the same language), or when the topic correspond to the dominant aspect of the disease, are retained.

For "Articles for the general public":

| The following conditions must all be present to continue the evaluation: | | | | | |
|---|--|--|--|--|--|
| The document targets the general public | | | | | |
| The document concerns a rare disease | | | | | |
| The document can be consulted free of charge on Internet | | | | | |
| The document does not contain an advertisement insert | | | | | |
| General and methodological information: | | | | | |
| | | | | | |
| Publisher: | | | | | |
| Image: linear | | | | | |
| patient association expert group other not indicated Specify: | | | | | |
| j not indicated specify. | | | | | |
| Production is financially supported by: Image: learned society Image: national institution Image: patient association Image: expert group Image: not indicated Specify: | | | | | |
| | | | | | |
| The(s) writer(s) has/have appropriate knowledge of the disease yes no | | | | | |
| He/she/they is/are from: | | | | | |
| Learned society I national institution expert group | | | | | |
| patient association other not indicated Specify: | | | | | |
| | | | | | |
| Revision of the document has been carried out by experts of the disease: | | | | | |
| Clinicians from expert centres institutions institutions | | | | | |
| other none, or not indicated | | | | | |
| Specify: | | | | | |
| The document contains an invitation to financial donation | | | | | |
| The desument contains a displaimer indicating that the information connet realized methods | | | | | |
| The document contains a disclaimer indicating that the information cannot replace professional medical care | | | | | |
| medical care yes no | | | | | |
| The document mentions trade names, especially drug trade names yes no | | | | | |
| If yes, are all the existing brands mentioned? | | | | | |
| | | | | | |
| The document contains patients/families testimonies yes no | | | | | |

| Presentation and content (the general public texts produced by Orphanet can serve as reference for the | | | | | | |
|---|-----------------------|-------------------|------------------|-------------|--|--|
| evaluations) | | | | | | |
| Evaluation of the topics: | very insufficient | | | > verv good | | |
| Disease definition | □1 □1 | 2 | 3 | 1 4 | | |
| Genetics and/or physiopathology dat | a 🗍 1 | <u> </u> | 3 | 4 | | |
| Clinical aspects | 1 | 2 | 3 | 4 | | |
| Treatments | 1 | 2 | 3 | 4 | | |
| Daily life | <u> </u> | 2 | 3 | 4 | | |
| Social/family issues | | 2 | 3 | 4 | | |
| The document is clearly presented (info | ormation is easy to | find, summaries | are present,) | | | |
| | | 2 | 3 | 4 | | |
| The length of the document is adapted | ? 🗍1 | 2 | 3 | 4 | | |
| There is appropriate balance between p | positive and negative | ve aspects of the | e disease | | | |
| | 1 | 2 | 3 | 4 | | |
| The document is in compliance with me | edical ethics rules a | nd patients' rigl | nts | | | |
| | 1 | 2 | 3 | 4 | | |
| The statements are in agreement with | the available scient | ific data | _ | | | |
| | | | 3 | 4 | | |
| The illustrations are adapted <i>(useful for understanding, and not shocking)*</i> | | | | | | |
| The level of language is adapted to the | general public (leve | el of popularizat | ion, and not sho | ocking) | | |
| | 1 | 2 | 3 | 4 | | |
| Links to other relevant sources of inform | mation are provide | d* | _ | _ | | |
| | L1 | 2 | 3 | 4 | | |
| (* do not tick if absent) | | - | | | | |
| Is there a similar document already ava | ilable on Orphanet | ? | | | | |
| no | | | | | | |
| yes, in another language | | | | | | |
| yes, in the same language. If yes, the present document has an added-value: | | | | | | |
| yes (it is more interesting). Specify**: | | | | | | |
| it is different. Specify**: | | | | | | |
| (**e.g. document more up-to-date, more topics are treated, the target population is different, | | | | | | |
| clarity of information, complementary information provided,) | | | | | | |

Additional detailed criteria to assess the overall quality of review articles are as follows:

- ✓ Article is retained only if at least one expert of the disease has written and/or revised the document.
- ✓ Article is not retained if the text contains drug trade names or if invitations for donations, or patient testimonies are over-stressed.
- ✓ Pictures of patients or families that are not useful for understanding the content are considered as "not relevant" illustrations.

For "Other Website of interest"

Inclusion criteria*

The source and the entity responsible for maintaining the site are clearly stated

The target audience is clearly mentioned or obvious; the information is appropriate to the audience level.

The website site provides accurate, sciencebased information that complements the information found on Orphanet. The site mentions the involvement of health professionals in the production of the content (as writers, or reviewers) or is from an academic or national institution. The site does not massively reproduce information from other websites.

The primary purpose of the site is educational.

Dates of creation/updates are mentioned.

The site is available consistently.

Exclusion criteria*

A website of a national patient organisation of a country belonging to the Orphanet consortium as they are already registered in the Orphanet database (see Exception 1).

A website of an expert center or a research network that is already listed in the Orphanet database (see Exception 2).

A website mainly constituted by a forum/blog.

A commercial or industry website (see Exception 2).

A website of a patient advocacy group.

Non-relevant information, and/or spelling mistakes or any other criteria indicating a lack of seriousness of the website.

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A website that displays advertising.

At least three inclusion criteria are needed to approve the publication and one exclusion criteria is sufficient to refuse it.

*The inclusion/exclusion criteria are derived from the <u>HON Code principles</u>. These criteria are expected to be found in a high-quality medical and health website certified by HONCode.

Exception 1: Exceptions can be made if some specific information (for instance a patient guide) is available on the website but located on a page that is difficult to retrieve. In this case, a link to the relevant specific page is added as other website, even if the website is already linked in another Orphanet section.

Exception 2: Exceptions can be made (e.g. with pharmaceutical companies) when the website provides objective added-value information, not commercially oriented.

2. List of monitored journals

Am. J. Human Genetics Am. J. Med. Genet. Ann. Int. Med. Annals of neuro. Annals of the Rheum. Dis. Arch. Pediatr. Arthritis and Rheumatology Arthritis Care & Research Blood Bone Brain Circulation Diabetes Eur. Heart Journal European Journal of Haematology Eur. J. of Hum. Genet. Eur. J. of Med. Genet. **Expert Opin Orphan Drugs** Gastroenterology Gene Therapy Genet Med Gut Hepatology Hum. Mol. Genet. Hum. Mutat. J. clin. Endocrino. and Metabo. J. Clin. Inv. J. Invest. Dermato. J. of Med. Genet. JAMA JAMA Neurology Lancet Lancet Inf. Disease Lancet Neuro. Lancet Oncology Molecular therapy Nature Nature Genetics Nature Medicine Neurology OJRD Pediatric res. **Pediatrics**

Plos Genetics PNAS Progr. Retin. Eye Res. Sci.Transl. Med. Science Stem cells The New England Journal of Medecine Translational Science of Rare Diseases **BMC** Medicine British Journal of Haematology Bulletin du Cancer **Cell Reports** Cell Stem Cell **Clinical Genetics** Cochrane Reviews (CDSR) **Current Rheumathology Reports** European Journal of Internal Medicine Familial Cancer Genome Medicine Human Genetics International Journal of RD & Orphan Drugs Journal of Allergy and Clinical Immunology Journal of the American Society of Nephrol Journal of Neuromuscular Diseases Journal of Rare Diseases: Rsch & Treatment Journal of Rare Disorders: Diagno & Therapy Intractable & RD Research Molecular Genetics and Metabolism Molecular Syndromology Muscle & Nerve Nature Neuroscience Nature Reviews Clinical Oncology Nature Reviews Endocrinology Nature Reviews Immunology Nature Reviews Nephrology Nature Reviews Rheumathology Neuromuscular Disorders **Orphan Drugs: Research and Reviews** Revue de Médecine Interne Stem Cell Reports Stem Cells Translational Medicine The Journal of Rare Disorders

For any questions or comments, please contact us: contact.orphanet@inserm.fr

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