ARDCO - Cohort on Screening Programme for Asbestos-Related Diseases

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General		
Identification		
Detailed name	Cohort on Screening Programme for Asbestos- Related Diseases	
Sign or acronym	ARDCO	
CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	CNIL 908001 (16/04/08), amendement 10/09/10, 22/05/2015, 17/06/2016, 05/07/2017; CPP 1946 (11/02/02)	
General Aspects		
Medical area	Cancer research Occupational Medicine	
Health determinants	Occupation	
Keywords	long-duration disease (LDD), pleural plaques, asbestosis, medical usage, chest CT scan, anxiety, lung cancer, mesothelioma, colon cancer, Health episodes, treatment, mortality, asbestos	
Scientific investigator(s) (Contact)		
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Unit	INSERM UNITÉ 955 - GEIC2O INSERM	
Organization	INSTITUT INTER-UNIVERSITAIRE DE MEDECINE DU TRAVAIL DE PARIS ILE DE FRANCE	

Collaborations	
Participation in projects, networks and consortia	Yes
Funding	
Funding status	Public
Details	CNAM (CRAMIF), ANSES
Governance of the database	
Sponsor(s) or organisation(s) responsible	Institut inter-universitaire de médecine du travail de Paris - Ile de France (IIMTPIF)
Organisation status	Private
Presence of scientific or steering committees	Yes
Additional contact	
Main features	
Type of database	
Type of database	Study databases
Study databases (details)	Cohort study
Database recruitment is carried out by an intermediary	A population file
Database recruitment is carried out as part of an interventional study	No
Additional information regarding sample selection.	Prospective Other bodies active in creating this cohort: CPAM, IIMTPIF, INSERM, University (Bordeaux), Social Security (ERSM RHONE ALPES) Inclusion cut-off date: 01/12/2005
Database objective	
Main objective	1 - To evaluate the incidence of cancer mortality (including lung and pleura cancers) in the ARDCO cohort based on work calendar and benign

asbestos-related diseases (asbestosis, pleural

3 - To assess the psychological impact of post-

plaques). 2 - Evaluation of the contribution of CT examinations, thoughts on examination periodicity.

	occupational medical surveillance of individuals exposed to asbestos 4 - To evaluate the role of co-exposures to other carcinogens with asbestos pollution in the risk of developing cancer 5 - To contribute to defining the populations at risk of lung cancer 6 - To contribute defining optimal methods for monitoring populations previously exposed to asbestos
Inclusion criteria	Subjects affiliated with a general social security scheme, retired (or a few inactive subjects), exposed to asbestos professionally, with different age limits according to all 4 regions.
Population type	
Age	Adulthood (45 to 64 years) Elderly (65 to 79 years) Great age (80 years and more)
Population covered	General population
Pathology	
Gender	Male Woman
Geography area	Local
French regions covered by the database	Aquitaine Limousin Poitou-Charentes Auvergne Rhône-Alpes Normandie
Detail of the geography area	Multicentric cohort throughout France (4 regions): Aquitaine, Rhônes-Alpes, Upper and Lower Normandy
Data collection	
Dates	
Date of first collection (YYYY or MM/YYYY)	10/2002
Date of last collection (YYYY or MM/YYYY)	2021
Size of the database	
Size of the database (number of individuals)	[10 000-20 000[individuals
Details of the number of	16000

individuals

Data	
Database activity	Current data collection
Type of data collected	Clinical data Declarative data Paraclinical data
Clinical data (detail)	Direct physical measures Medical registration
Declarative data (detail)	Paper self-questionnaire
Paraclinical data (detail)	Imaging (chest CT)2002-2005- lung function test by a pulmonologist (initial assessment) for 5825 patients, then chest CT for 2350 patients in 2011- 2012 and chest CT for 1339 patients in in 2018- 2019
Presence of a biobank	No
Health parameters studied	Health event/morbidity Health event/mortality Health care consumption and services
Care consumption (detail)	Hospitalization
Procedures	
Data collection method	Self-administered questionnaire: input from a paper questionnaire or optical input (Daptascan) - Clinical examination data collected by treating physician at baseline: input from a paper questionnaire - chest CT: optical reading from a standardised review scale
Participant monitoring	Yes
Monitoring procedures	Monitoring by contact with the participant (mail, e-mail, telephone etc.)
Details on monitoring of participants	Since 2002. Programm in progress in 2020
Links to administrative sources	Yes
Linked administrative sources (detail)	CépiDC, Health insurance databases, Cancer registries for départements involved
Promotion and access	

Promotion	
Link to the document	http://tinyurl.com/HAL-ARDCO
Description	List of publications in HAL
Link to the document	http://tinyurl.com/Pubmed-ARDCO
Description	List of publications in Pubmed
Access	
Terms of data access (charter for data provision, format of data, availability delay)	Data may be used by academic teams. Currently no access but no objection to opening the database to academic teams. All data access requests according to agreement by the ARDCO project National Science Council Data may not be used by industrial teams.
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