## PedNet Haemophilia registry

**First published:** 01/02/2024

Last updated: 17/10/2024

Data source

Human

Disease registry

Other

## Administrative details

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#### **PURI**

https://redirect.ema.europa.eu/resource/46153

#### **Data source ID**

46153

#### Data source acronym

PHR

#### **Data holder**

PedNet Haemophilia Research Foundation

#### **Data source type**

Disease registry

Other

#### Data source type, other

Exposure registry, Prospective studies database

#### Main financial support

Funding from industry or contract research

#### **Care setting**

Hospital inpatient care

Hospital outpatient care

#### **Data source qualification**

If the data source has successfully undergone a formal qualification process (e.g., from the EMA, ISO or other certifications), this should be described.

No

#### **Data source website**

https://www.pednet.eu

## Contact details

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## Data source regions and languages

## **Data source countries** Austria Belgium Canada Czechia Denmark Finland France Germany Greece Israel Italy Netherlands Norway Portugal Spain Sweden Switzerland United Kingdom (Northern Ireland)

#### **Data source languages**

English

## Data source establishment

#### **Data source established**

01/01/2000

#### **Data source time span**

First collection: 01/01/2000

The date when data started to be collected or extracted.

## **Publications**

## Data source publications

Labarque V, Mancuso ME, Kartal-Kaess M, Ljung R, S. Mikkelsen T, G. Andersson N. F8/F9 variants in the population-based PedNet Registry cohort compared with locus-specific genetic databases of the European Association for Haemophilia and Allied Disorders and the Centers for Disease Control and Prevention Hemophilia A or Hemophilia B Mutation

Fischer K, Ljung R, Platokouki H, Liesner R, Claeyssens -Donadel S, Smink E, van den Berg HM. Prospective observational cohort studies for studying rare diseases: the European PedNet Haemophilia Registry

Ljung R, de Kovel M, van den Berg HM, on behalf of the PedNet study group.

Primary prophylaxis in children with severe haemophilia A and B –

Implementation over the last 20 years as illustrated in real-world data in the PedNet cohorts

Gouw SC, van den Berg HM, Fischer K, Auerswald G, Carcao M, Chalmers E, Chambost H, Kurnik K, Liesner R, Petrini P, Platokouki H, Altisent C, Oldenburg J, Nolan B, Garrido RP, Mancuso ME, Rafowicz A, Williams M, Clausen N, Middelburg RA, Ljung R, van der Bom JG PedNet and Research of Determinants of Inhibitor development (RODIN) Study Group. Intensity of factor VIII treatment and inhibitor development in children with severe hemophilia A: the RODIN study.

Male C, Andersson NG, Rafowicz A, Liesner R, Kurnik K, Fischer K, Platokouki H, Santagostino E, Chambost H, Nolan, B, Königs C, Kenet G, Ljung R, van den Berg HM. Inhibitor Incidence In An Unselected Cohort Of Previously Untreated Patients With Severe Haemophilia B: A PedNet Study

## **Studies**

# List of studies that have been conducted using the data source

NN7999-4413: Adverse Event Data Collection from External Registries on Nonacog Beta Pegol

Emicizumab Use in Pediatric Patients in the Real World: an Analysis of the PedNet Registry

Establish an EU catalogue of sources of real-world data, characterised by a common set of metadata and data quality measurements

Eptacog Beta post marketing safety surveillance using the PedNet registry (F7TG2207 – PedNet Registry)

## Data elements collected

# The data source contains the following information

#### **Disease information**

Does the data source collect information with a focus on a specific disease? This might be a patient registry or other similar initiatives.

Yes

#### **Disease details (other)**

For Haemophilia A and B: details on treatment, joint health status, adverse events, quality of life, baseline measurements

#### Rare diseases

Are rare diseases captured? In the European Union a rare disease is one that affects no more than 5 people in 10,000. Yes Pregnancy and/or neonates Does the data source collect information on pregnant women and/or neonatal subpopulation (under 28 days of age)? Yes Hospital admission and/or discharge Yes **ICU** admission Is information on intensive care unit admission available? No **Cause of death** Captured Cause of death vocabulary Not coded (Free text)

#### **Prescriptions of medicines**

Captured

#### **Dispensing of medicines**

Not Captured

#### Advanced therapy medicinal products (ATMP)

Is information on advanced therapy medicinal products included? A medicinal product for human use that is either a gene therapy medicinal product, a somatic cell therapy product or a tissue

engineered products as defined in Regulation (EC) No 1394/2007 [Reg (EC) No 1394/2007 Art 1(1)].

No

#### Contraception

Is information on the use of any type of contraception (oral, injectable, devices etc.) available?

No

#### Indication for use

Does the data source capture information on the therapeutic indication for the use of medicinal products?

Captured

#### **Indication vocabulary**

Not coded (Free text)

#### **Medical devices**

Is information on medicinal devices (e.g., pens, syringes, inhalers) available?

No

#### **Administration of vaccines**

No

#### **Procedures**

Does the data source capture information on procedures (e.g., diagnostic tests, therapeutic, surgical interventions)?

Captured

#### **Procedures vocabulary**

Not coded (Free text)

#### **Healthcare** provider

Is information on the person providing healthcare (e.g., physician, pharmacist, specialist) available? The healthcare provider refers to individual health professionals or a health facility organisation licensed to provide health care diagnosis and treatment services including medication, surgery and medical devices.

Yes

#### **Clinical measurements**

Is information on clinical measurements (e.g., BMI, blood pressure, height) available?

Yes

#### Genetic data

Are data related to genotyping, genome sequencing available?

Captured

#### **Genetic data vocabulary**

Other

#### Genetic data vocabulary, other

non-specified/according to local laboratory

#### Biomarker data

Does the data source capture biomarker information? The term "biomarker" refers to a broad subcategory of medical signs ( objective indications of medical state observed from outside the patient), which can be measured accurately and reproducibly. For example, haematological assays, infectious disease markers or metabolomic biomarkers.

Captured

#### Biomarker data vocabulary

Other

#### Biomarker vocabulary, other

according to local laboratory

#### **Patient-reported outcomes**

Is information on patient-reported outcomes (e.g., quality of life) available?

Yes

#### Patient-generated data

Is patient-generated information (e.g., from wearable devices) available?

No

#### Units of healthcare utilisation

Are units of healthcare utilisation (e.g., number of visits to GP per year, number of hospital days) available or can they be derived? Units of healthcare utilisation refer to the quantification of the use of services for the purpose of preventing or curing health problems.

Yes

#### **Unique identifier for persons**

Are patients uniquely identified in the data source?

Yes

#### **Diagnostic codes**

Captured

#### Diagnosis / medical event vocabulary

Not coded (Free text)

#### **Medicinal product information**

Captured

#### Medicinal product information collected

Brand name

Formulation

Strength

Dosage	e regime
Medici	inal product vocabulary
ART 57	
SPN	
Quality	y of life measurements
Capture	ed
Quality	y of life measurements vocabulary
EQ5D	
Lifesty	/le factors
Not Ca <sub>l</sub>	ptured
Sociod	lemographic information
Capture	ed
Sociod	lemographic information collected
Age	
Gender	-
Country	y of origin

## Quantitative descriptors

Dose

Population Qualitative Data

#### Population age groups

Paediatric Population (< 18 years)

Preterm newborn infants (0 - 27 days)

Term newborn infants (0 - 27 days)

Infants and toddlers (28 days – 23 months)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

## Estimated percentage of the population covered by the data source in the catchment area

95% in participating centres.

Description of the population covered by the data source in the catchment area whose data are not collected (e.g., people who are registered only for private care)

refused-consented patients. Patients outside study area.

## Family linkage

Family linkage available in the data source permanently or can be created on an ad hoc basis

Ad hoc

## **Population**

#### **Population size**

2759

#### **Active population size**

1902

## Population by age group

Age group	Population size	Active population size
Paediatric Population (< 18 years)	2759	1902

## Median observation time

Median time (years) between first and last available records for unique individuals captured in the data source

18.00

Median time (years) between first and last available records for unique active individuals (alive and currently registered) capt

18.00

## Data flows and management

## Access and validation

#### **Governance details**

Documents or webpages that describe the overall governance of the data source and processes and procedures for data capture and management, data quality check and validation results (governing data access or utilisation for research purposes).

https://www.pednet.eu

#### **Biospecimen access**

Are biospecimens available in the data source (e.g., tissue samples)?

No

#### Access to subject details

Can individual patients/practitioners/practices included in the data source be contacted?

Yes

#### **Description of data collection**

https://pednet.eu/wp-content/uploads/2023/01/Protocol-of-the-PedNet-Haemophilia-Registry-version-6.4.pdf

## Event triggering registration

#### Event triggering registration of a person in the data source

Disease diagnosis

#### Event triggering de-registration of a person in the data source

Practice deregistration

Loss to follow up

Death

Other

## Event triggering de-registration of a person in the data source, other becoming of age >18 years

#### Event triggering creation of a record in the data source

Specialist encounter on each regular visit to the centre.

## Data source linkage

#### Linkage

Is the data source described created by the linkage of other data sources (prelinked data source) and/or can the data source be linked to other data source on an ad-hoc basis?

No

# Data management specifications that apply for the data source

#### **Data source refresh**

Yearly

#### Informed consent for use of data for research

Other

#### Possibility of data validation

Can validity of the data in the data source be verified (e.g., access to original medical charts)?

Yes

#### **Data source preservation**

Are records preserved in the data source indefinitely?

Yes

#### **Approval for publication**

Is an approval needed for publishing the results of a study using the data source?

Yes

#### Informed consent, other

There is a committee to evaluate requests for data access

#### **Data source last refresh**

01/01/2023

## Common Data Model (CDM) mapping

#### **CDM** mapping

Has the data source been converted (ETL-ed) to a common data model?

No