

WP6 Replication Study: The risk of acute liver injury associated with the use of antibiotics: Population based case control study

First published: 05/09/2012

Last updated: 29/10/2013

Study

Ongoing

Administrative details

EU PAS number

EUPAS2946

Study ID

5053

DARWIN EU® study

No

Study countries

 United Kingdom

Study description

This study builds on previous work within the EU-PROTECT Programme (<http://www.imi-protect.eu/>), that examined different methodological approaches to pharmacoepidemiological research design to investigate, by using a case study of antibiotic induced liver injury, the population case control approach. The study proposes to replicate a previous analysis, to ensure that the baseline model is identical, and then perform sensitivity analyses to understand how changes to input parameters (such as definition of current exposure, code selection, definition of outcome and study periods) may affect the estimates of risk of acute liver injury associated with antibiotics in the general population. The analyses will be performed using the UK General Practice Research Database (CPRD /GPRD). The study design is a population based case control study, with definite and possible cases defined using an algorithm that incorporates consultation diagnosis codes, referral to specialist codes and liver laboratory analyses. Conditional logistic regression is used to analyse the matched data.

Study status

Ongoing

Research institutions and networks

Institutions

Takeda

First published: 01/02/2024

Last updated: 01/02/2024

Institution

Networks

PROTECT

-  Belgium
-  Denmark
-  France
-  Germany
-  Italy
-  Netherlands
-  Poland
-  Spain
-  Sweden
-  Switzerland
-  United Kingdom

First published: 26/06/2013

Last updated: 14/01/2025

Network

Contact details

Study institution contact

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Study contact

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Primary lead investigator

David Irvine

Primary lead investigator

Study timelines

Date when funding contract was signed

Planned: 01/02/2011

Actual: 01/02/2011

Study start date

Planned: 13/11/2012

Actual: 04/12/2012

Data analysis start date

Planned: 08/01/2013

Actual: 08/01/2013

Date of final study report

Planned: 12/12/2013

Sources of funding

- Pharmaceutical company and other private sector

More details on funding

Takeda Development Centre (Europe)

Regulatory

Was the study required by a regulatory body?

No

Methodological aspects

Study type

Study type list

Study type:

Non-interventional study

Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

Other

If 'other', further details on the scope of the study

Replication of previous analysis in the same database, followed by sensitivity analyses

Main study objective:

The main objective is to replicate a previous analysis of data in the same database, blinded to the results, under the same work programme (<http://www.imi-protect.eu/>) . This will be followed by an examination of the robustness of the strength of the association, altering a variety of parameters. Validation of Acute Liver Injury may be sought through a GP questionnaire.

Study Design

Non-interventional study design

Case-control

Study drug and medical condition

Anatomical Therapeutic Chemical (ATC) code

(J01) ANTIBACTERIALS FOR SYSTEMIC USE

ANTIBACTERIALS FOR SYSTEMIC USE

Medical condition to be studied

Liver injury

Population studied

Age groups

- Children (2 to < 12 years)
 - Adolescents (12 to < 18 years)
 - Adults (18 to < 46 years)
 - Adults (46 to < 65 years)
 - Adults (65 to < 75 years)
 - Adults (75 to < 85 years)
 - Adults (85 years and over)
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Estimated number of subjects

12000

Study design details

Outcomes

To estimate the relative risk of acute liver injury associated with antibiotics exposure (users vs. non-users). To estimate the relative risk of acute liver injury comparing various antibiotics classes. To estimate the relative risk of acute liver injury comparing specific individual antibiotics. A questionnaire to GP may seek validation of the computerised diagnosis. To assess the effect of dose and duration of use for specific individual antibiotics. Various definitions of exposure time, recovery time, and criteria for inclusion of confounders/ effect modifiers will be will be altered to examine the robustness of the association.

Data analysis plan

The population based case control study will be analysed by conditional logistic regression. Matching will be on age at birth, gender and Practice. Odds ratios and 95% confidence intervals will be computed to examine the association between first occurrence of idiopathic acute liver injury and exposure to antibiotics (as a group, in different classes (tetracycline, penicillins & betalactamic, cephalosporin, macrolides, aminoglycosides, quinolones and other antibiotics and combinations), and individual drugs where possible). A series of bivariate models will be examined to evaluate the contribution of confounder / effect modification variables. Stepwise inclusion methods will be used to improve model fit evaluated by the Likelihood Ratio test. A full model with all such variables will be constructed. These procedures will be repeated in sensitivity analyses, changing exposure window length, definitions for case inclusion, and extending the length of liver injury recovery time.

Data management

ENCePP Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

Data sources

Data source(s)

Clinical Practice Research Datalink

Data source(s), other

CPRD

Data sources (types)

[Electronic healthcare records \(EHR\)](#)

Use of a Common Data Model (CDM)

CDM mapping

No

Data quality specifications

Check conformance

Unknown

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No