

# Profile of patients prescribed Dymista® (azelastine hydrochloride/ fluticasone propionate) nasal spray for allergic rhinitis in the UK

**First published:** 01/08/2013

**Last updated:** 02/04/2024

Study

Finalised

## Administrative details

### EU PAS number

EUPAS4414

---

### Study ID

15022

---

### DARWIN EU® study

No

---

### Study countries

☐ Denmark

☐ Germany

☐ Norway

## **Study description**

Dymista® is a nasal spray containing a mixture of an antihistamine and a corticosteroid, which is approved in the UK for the treatment of allergic rhinitis (AR) (hay fever and year round allergy). Evidence of its efficacy and tolerability obtained during the regulatory clinical development process has been generated within the constraints of randomised clinical trials with tightly defined patient inclusion criteria. However there have been no studies on the use of Dymista® by patients in the real world clinical setting in the UK. The aim of this study is to understand the demographic characteristics, medical and treatment history of the population of patients that have been prescribed Dymista® by UK specialists, in routine NHS secondary/tertiary care environment in order to inform future strategies for the management and treatment of allergic rhinitis. This study is the UK arm of an international, multicentre study being conducted in several countries in Europe with the aim of including 7,000 patients in total. The study will involve collecting data from patients' medical records (patient's clinical characteristics, predominant symptom, reasons for the patient visit and prescribing Dymista® and previous prescribed medications for AR) and completion of a short questionnaire by patients themselves (number of visits by the patient to a healthcare professional in the last year, impact of AR on quality of life, presence of eye symptoms and previous treatment history prescribed and self-medication). In the UK, the study will include anonymised coded data from 200-250 patients recruited from 20 NHS hospital outpatient clinics (Allergy, Immunology, Ear Nose and Throat clinics).

---

## **Study status**

Finalised

## **Research institutions and networks**

## Institutions

University College London Hospitals NHS  
Foundation Trust

University Hospital of Wales cardiff, Royal Albert  
Edward Infirmary Wigan, Royal Victoria Hospital  
Belfast, Wrexham Maelor Hospital Wrexham, Royal  
Surrey County Hospita Guildford, Royal  
Hallamshire Hospital Sheffield, Northern General  
Hospital Sheffield, Cumberland Infirmary Carlisle,  
North Devon District Hospital Barnstaple, James  
Paget University Hospital Great Yarmouth

## Contact details

### **Study institution contact**

Glenis Scadding [anna@phassociates.com](mailto:anna@phassociates.com)

**Study contact**

[anna@phassociates.com](mailto:anna@phassociates.com)

### **Primary lead investigator**

## Study timelines

### **Date when funding contract was signed**

Planned: 16/07/2013

Actual: 16/07/2013

---

### **Study start date**

Planned: 16/09/2013

Actual: 30/10/2013

---

### **Data analysis start date**

Planned: 15/01/2014

Actual: 01/05/2014

---

### **Date of final study report**

Planned: 15/02/2014

Actual: 23/09/2014

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

MEDA Pharmaceuticals Ltd

## Regulatory

**Was the study required by a regulatory body?**

No

---

**Is the study required by a Risk Management Plan (RMP)?**

Not applicable

## Methodological aspects

### Study type

#### Study type list

**Study topic:**

Human medicinal product

Disease /health condition

---

**Study type:**

Non-interventional study

---

**Scope of the study:**

Drug utilisation

**Data collection methods:**

Combined primary data collection and secondary use of data

---

**Main study objective:**

To understand the demographic characteristics, medical and treatment history of the population of patients that have been prescribed Dymista® in routine UK

NHS secondary/tertiary care, in order to inform future strategies for the management and treatment of allergic rhinitis. This information is also thought to be of interest to NHS commissioners, in order to understand the impact on NHS services.

## Study drug and medical condition

### **Study drug International non-proprietary name (INN) or common name**

AZELASTINE HYDROCHLORIDE

FLUTICASONE PROPIONATE

---

### **Medical condition to be studied**

Rhinitis allergic

## Population studied

### **Short description of the study population**

Rhinitis allergic patients that have been prescribed Dymista® by UK specialists

---

### **Age groups**

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)

---

## Special population of interest

Other

---

## Special population of interest, other

Rhinitis allergic patients

---

## Estimated number of subjects

250

# Study design details

## Outcomes

To describe the clinical indications for which Dymista® has been prescribed in UK clinical practice, To describe the: demographic characteristics of patients receiving Dymista® for allergic rhinitis (AR) in UK clinical practice, reasons for prescribing Dymista®, AR symptoms experienced when Dymista® is prescribed, impact of AR on daily patient life at initiation of Dymista®, all previous treatments prescribed for AR, and number of visits to a HCP in the last year, prior to starting Dymista®

---

## Data analysis plan

Data relating to participating centres in the UK will be descriptive in nature. Both distributions and descriptive statistics of both central tendency (medians and arithmetic or geometric means) and dispersion (standard deviation, interquartile range) will be presented for quantitative variables. Nominal variables will be described with frequencies, percentages and modes, while ordinal variables will also have medians and interquartile ranges described. Confidence intervals will be provided for proportions of nominal variables and for means of quantitative variables. Analyses will be performed using the available data. No attempt will be made to impute missing values.

## Data management

## Data sources (types)

Other

---

## Data sources (types), other

Prospective patient-based data collection, Routine medical notes

# 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