ADVANCE POC I Risk pillar - Testing new approaches to monitoring benefit/risk with pertussis vaccines as test case: Incidence rates of safety outcomes of whole-cell pertussis and acellular pertussis vaccines in pre-school children

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### Administrative details

#### **EU PAS number**

**EUPAS13779** 

Study ID

21721

**DARWIN EU® study** 

No

**Study countries** 

Denmark
Italy
Spain
United Kingdom

### Study description

RATIONALE: The ADVANCE proof-of-concept (POC) question is to test the system for benefit-risk monitoring of vaccines in Europe. For this POC feasibility study, the research question "Has the initial benefit-risk profile in children prior to school-entry booster been maintained after the switch from whole-cell pertussis (wP) vaccines to acellular pertussis (aP) vaccines?" is used.OBJECTIVES:1. To evaluate participating databases on quality criteria for inclusion in the study.2. To provide incidence rates of specific events (i.e. injection site reactions, fever, somnolence, persistent crying, irritability, febrile or afebrile seizure/convulsion, hypotonic-hyporesponsive episode HHE, extensive limb swelling) within risk periods after each dose of wP or aP vaccine and within the periods outside the risk windows (baseline) in pre-school children for a benefit/risk analysis model.3. To provide calendar time specific incidence data as test for methods development in ADVANCE WP4.STUDY DESIGN: is a retrospective dynamic cohort study. The study will be conducted utilizing electronic health care data from ADVANCE partners in different European countriesPOPULATION: The study population will comprise all children registered in any of the participating databases during the study period and for whom an adequate start and end of follow-up and date of birth can be defined. Children will be followed from start of the study period, one month after date of birth, or date of valid data in the database (whichever is the latest) until the end of study period (31-12-2015, the school-entry pertussis booster, transferring out of the database, death, reaching age 6 years: whichever is the earliest). Data Analysis: incidence rates (i.e. baseline and risk-window specific) of known adverse reactions following vaccination with pertussis-containing vaccines for use in a multi-criteria

decision analysis (MCDA) model of benefits and risks of wP versus aP pertussis vaccines.

### **Study status**

Finalised

## Research institutions and networks

## Institutions

## **Erasmus Medical Centre Rotterdam**

First published: 01/02/2024

**Last updated:** 01/02/2024

Institution



## SSI Denmark, BIFAP Spain, FISABIO Spain, THIN UK

### **Networks**

Accelerated development of vaccine benefit-risk collaboration in Europe (ADVANCE)

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### Contact details

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**Primary lead investigator** 

**Daniel Weibel** 

Primary lead investigator

## Study timelines

Date when funding contract was signed

Planned: 01/10/2013

Actual: 01/10/2013

### Study start date

Planned: 01/06/2016 Actual: 01/06/2016

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

Planned: 01/06/2016 Actual: 17/08/2017

## Sources of funding

• EU institutional research programme

## More details on funding

IMI

# Study protocol

ADVANCE POC-Risk-Protocol.pdf (1.84 MB)

# 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 typo

#### **Study topic:**

Disease /health condition

Human medicinal product

#### Study type:

Non-interventional study

#### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

#### **Data collection methods:**

Secondary use of data

### Main study objective:

1. To evaluate participating databases on quality criteria for inclusion in the study 2. To provide incidence rates within specific risk windows after each dose of wP or aP vaccine in pre-school children and within the periods outside the risk windows (baseline) for a benefit/risk analysis model3. To provide calendar time specific incidence data as test for methods development in ADVANCE WP4.

## Study Design

### Non-interventional study design

Cohort

# Study drug and medical condition

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

#### Medical condition to be studied

Injection related reaction

Somnolence

Crying

Convulsion in childhood

Lip swelling

## Population studied

#### Short description of the study population

All children registered in any of the participating databases during the study period and for whom an adequate start and end of follow-up and date of birth can be defined.

### Age groups

Infants and toddlers (28 days - 23 months)

Children (2 to < 12 years)

#### **Estimated number of subjects**

10000000

# Study design details

#### **Outcomes**

Exposure of interestAny wP vaccines and aP pertussis-containing vaccines and their doses in the vaccine schedule (D1, D2, D3, D4, D5)Outcomes

Injection site reactions: erythema, edema, induration/nodule/sterile abscess,

pain/tenderness

Fever

Somnolence

Persistent crying, irritability

Generalized convulsive seizures

HHE

Extensive limb swelling

#### Data analysis plan

Data Analysis: The purpose of this study is to provide incidence rates (i.e. baseline and risk-window specific) of known adverse reactions following vaccination with pertussis-containing vaccines for use in a multi-criteria decision analysis (MCDA) model of benefits and risks of wP versus aP pertussis vaccines (models are described in a separate benefit-risk study protocol). In some more recent databases, wP information will not be captured. To generate risk-window specific incidence rates for the wP period in these databases, the IR ratio originating from an SCCS analysis of wP versus baseline in other databases will be multiplied by the baseline IR.

### **Documents**

### Study results

ADVANCE D5 6 ExecSummaryEU-PAS.docx.pdf (221.73 KB)

## 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.

### Signed checklist for study protocols

## Data sources

#### Data source(s)

THIN® (The Health Improvement Network®)

Danish registries (access/analysis)

The Information System for Research in Primary Care (SIDIAP)

BIFAP - Base de Datos para la Investigación Farmacoepidemiológica en el

Ámbito Público (Pharmacoepidemiological Research Database for Public Health

Systems)

**ARS Toscana** 

### **Data sources (types)**

Administrative healthcare records (e.g., claims)

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**

Unknown