ADVANCE POC Study Protocol - Testing new approaches to monitoring benefit/risk with pertussis vaccines as test case. Coverage rates of acellular and whole-cell pertussiscontaining vaccines in preschool children (ADVANCE Coverage POC)

First published: 29/06/2016
Last updated: 31/03/2024





### Administrative details

**EU PAS number** 

**EUPAS13908** 

Study ID

21742

**DARWIN EU® study** 

No

**Study countries** 

Denmark		
Italy		
Spain		
United Kingdom		

#### **Study description**

The overall ADVANCE proof-of-concept (POC) question is to test the system for benefit-risk monitoring of vaccines in Europe. This will first be done by using test cases. For this POC, the following research question is used: "Has the initial benefit-risk profile in children prior to school-entry booster been maintained after the switch from whole-cell pertussis vaccines to acellular pertussis vaccines"?

### **Study status**

**Finalised** 

### Research institutions and networks

### Institutions



Department of Medical Informatics - Health Data Science, Erasmus Medical Center (ErasmusMC)		
Netherlands		
First published: 03/11/2022		
<b>Last updated:</b> 02/05/2024		
Institution		



THIN UK, FISABIO Spain, BIFAP spain, SSI Denmark

**Networks** 

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

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### Contact details

### **Study institution contact**

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Study contact

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### **Primary lead investigator**

Hanne-Dorthe Emborg

**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: 15/09/2016 Actual: 29/06/2016

### Sources of funding

- EU institutional research programme
- Pharmaceutical company and other private sector

### More details on funding

GSK, SP, NOVARTIS, SP MSD, CRUCELL, PFIZER, TAKEDA, IMI

### Study protocol

ADVANCE POC-Coverage-Protocol.pdf (1.62 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 type

Study type list

#### **Study topic:**

Human medicinal product

#### Study type:

Non-interventional study

#### Scope of the study:

Other

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

Coverage study

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

Secondary use of data

### Main study objective:

To estimate the coverage of pertussis-containing vaccines in children less than 6 years of age. The specific objective of this study is to assess the system capability to estimate acellular pertussis and whole-cell pertussis vaccine coverage

# Study Design

### Non-interventional study design

Other

#### Non-interventional study design, other

Retrospective population based cohort study

# Study drug and medical condition

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

# 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**

Coverage rate overall and for wP and aP vaccines is the proportion of vaccinated children by database, birth cohort, age in months and per dose The variability of vaccine administration is defined as the time elapsed between birth and the first dose and the time elapsed between subsequent scheduled doses. Changes of coverage rates over time will be described by general descriptive statistic

#### Data analysis plan

• The coverage by age in months per birth cohort will be calculated using a Kaplan-Meier method. The proportion of vaccinated children with dose 1, 2, 3, and subsequent boosters will be calculated stratified by year of birth, type of vaccine and database. • The change of coverage rates over time will be calculated by the difference between coverage rates and a defined threshold. Low coverage thresholds will be determined for identification of variability of interest/concern. Data-driven thresholds will be compared with set values based on coverage rates required for herd immunity. CUSUM involves the calculation of a cumulative sum (which is what makes it 'sequential'). It is designed to detect changes in the difference. It differs from Sequential Probability Ratio Test (SPRT) by always using zero function as the lower 'holding barrier'. Also, CUSUM does not require the use of the likelihood function.

### **Documents**

### **Study results**

EUPAS13908-21740.pdf (813.13 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.

### Data sources

#### Data source(s)

THIN® (The Health Improvement Network®)

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**

# Data characterisation

### **Data characterisation conducted**

Unknown