

# Non-interventional study describing patients' perception on anticoagulant treatment and treatment convenience when treated with Pradaxa® or Vitamin K Antagonist for Stroke Prophylaxis in Atrial Fibrillation (RELATE)

**First published:** 05/05/2016

**Last updated:** 01/04/2024

Study

Finalised

## Administrative details

### EU PAS number

EUPAS13390

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### Study ID

26437

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### DARWIN EU® study

No

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### Study countries

-  Indonesia
  -  Korea, Republic of
  -  Malaysia
  -  Singapore
  -  Thailand
  -  Viet Nam
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## Study description

The aim of this non-interventional study is to describe patient's perception of anticoagulant treatment when using Pradaxa® to prevent stroke and systemic embolism while suffering from atrial fibrillation (according to its approved indication in the approved dosages of 110 mg or 150 mg twice daily) in comparison to standard care using Vitamin K Antagonist (VKA).

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## Study status

Finalised

# Research institutions and networks

## Institutions

**Boehringer Ingelheim**

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**Institution**

Multiple centres: 50 centres are involved in the study

## Contact details

### Study institution contact

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Study contact

[peak-yuen.lee@boehringer-ingenelheim.com](mailto:peak-yuen.lee@boehringer-ingenelheim.com)

### Primary lead investigator

Peak Yuen Lee

Primary lead investigator

## Study timelines

### Date when funding contract was signed

Planned: 16/05/2016

Actual: 03/06/2016

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### Study start date

Planned: 05/06/2016

Actual: 24/06/2016

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### Data analysis start date

Planned: 11/01/2018

Actual: 22/01/2018

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

Planned: 30/09/2018

Actual: 28/10/2018

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Boehringer Ingelheim

## Study protocol

[1160 261-clinical-trial-protocol-final-25 Jan 16.pdf](#) (710.37 KB)

[1160 261-clinical-trial-protocol-final-25 Jan 16\\_Redacted.pdf](#) (714.68 KB)

## Regulatory

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

No

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

Non-EU RMP only

## Methodological aspects

### Study type

### Study type list

**Study topic:**

Disease /health condition  
Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Drug utilisation

**Data collection methods:**

Primary data collection

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**Main study objective:**

Describe the atrial fibrillation patient's treatment perception by using the PACT-Q at three time-points at baseline, during initiation period and during the continuation period.

## Study Design

**Non-interventional study design**

Cohort

## Study drug and medical condition

**Medicinal product name**

PRADAXA

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**Medical condition to be studied**

## Population studied

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

Patients aged 18 years and older with non-valvular atrial fibrillation (AF) in South East Asia South Korea (SEASK) with a current Vitamin K Antagonist (VKA) therapy and subsequent initiation of Pradaxa® (Cohort A) OR patients being newly diagnosed with AF and initiated on Pradaxa® or VKA (Cohort B).

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### **Age groups**

- 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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### **Special population of interest**

Other

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### **Special population of interest, other**

Atrial fibrillation patients

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### **Estimated number of subjects**

1385

## Study design details

## Outcomes

Primary outcome For Cohort A (switcher):- Mean PACT-Q2 scores at second and last assessment compared to baseline assessment For Cohort B (newly initiated):- Mean PACT-Q2 scores at second and last assessment between treatment groups, Secondary outcome: For Cohort A (switcher):- Mean PACT-Q2 score at last assessment compared to second assessment For Cohort B (newly initiated):- Description of PACT-Q1 items at baseline

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## Data analysis plan

Baseline data will be analyzed using a descriptive approach. Data from the longitudinal follow-up will be summarized descriptively. For Cohort A, mean differences in PACT-Q2 scores between assessments will be assessed using paired t-tests. For Cohort B, mean differences in PACT-Q2 scores between Pradaxa® and VKA patients will be assessed using propensity score matched analysis. Due to the nature of this non-interventional study, there is no (confirmatory) hypothesis testing foreseen in a strict statistical sense. Analyses are descriptive in nature and confidence intervals and p-values from statistical models are used for exploratory purposes.

## Documents

### Study results

[CSR for ENCEPP\\_Redacted.pdf](#) (3.69 MB)

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### Study publications

[Monz BU, Connolly SJ, Korhonen M, Noack H, Pooley J. Assessing the impact of da...](#)

[Prins MH, Guillemin I, Gilet H, Gabriel S, Essers B, Raskob G, Kahn SR. Scoring...](#)

[De Caterina R, Brueggenjuergen B, Darius H, Le Heuzey JY, Renda G, Schilling RJ...](#)

Lip GY, Nieuwlaat R, Pisters R, Lane DA, Crijns HJ. Refining clinical risk stra...

Pisters R, Lane DA, Nieuwlaat R, De Vos CB, Crijns HJ, Lip GY. A novel user-fri...

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## 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 sources (types)

[Other](#)

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### Data sources (types), other

Prospective patient-based data collection

## Use of a Common Data Model (CDM)

### CDM mapping

No

## Data quality specifications

**Check conformance**

Unknown

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**Check completeness**

Unknown

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**Check stability**

Unknown

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**Check logical consistency**

Unknown

## Data characterisation

**Data characterisation conducted**

Unknown