

# EMIF Use Case 17 - Investigating the relationship in paediatric population between dosing of antibiotics (prescribed, dispensed or administered) and patient's weight. (EMIF UC17)

**First published:** 20/06/2018

**Last updated:** 23/10/2025

Study

Ongoing

## Administrative details

### EU PAS number

EUPAS24458

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### Study ID

27797

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### DARWIN EU® study

No

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### Study countries

 Italy

 Netherlands

## Study description

Dosing errors are one of the most common types of medication issues and contribute to the mortality and morbidity within the paediatric population. Paediatric patients are at a higher risk than adults of experiencing such problems because of the need for a dose calculation based on the patient's age, weight (mg/kg), body surface area ( $\text{mg}/\text{m}^2$ ), and clinical condition. Antibiotics are the medications most widely prescribed in the paediatric population and one of the drug classes most commonly reported to be involved in paediatric dosing errors. Despite a number of studies conducted about antibiotics usage in different European countries, the appropriateness of antibiotic dosing (prescribed by doctors in primary or secondary care, dispensed by community or hospital pharmacies, or administered in hospital settings) according to the child's age, weight and height (and other related parameters, as Body Mass Index - BMI, Body Surface Area - BSA) has not yet been investigated. In this study, we would like to assess in European Medical Information Framework (EMIF) Electronic Healthcare Records (EHR) databases (DBs) the relationship between dosing of antibiotics prescribed, administered or dispensed (either for outpatients or inpatient settings) to children (age 0-18 yr), and their weight, age and height.

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## Study status

Ongoing

## Research institutions and networks

### Institutions

## The PHARMO Institute for Drug Outcomes Research (PHARMO Institute)

 Netherlands

**First published:** 07/01/2022

**Last updated:** 19/12/2025

**Institution**

**Non-Pharmaceutical company**

**ENCePP partner**

## Department of Medical Informatics - Health Data Science, Erasmus Medical Center (ErasmusMC)

 Netherlands

**First published:** 03/11/2022

**Last updated:** 02/05/2024

**Institution**

**Educational Institution**

**ENCePP partner**

## Fundació Institut Universitari per a la Recerca a l'Atenció Primària de Salut Jordi Gol i Gurina, IDIAPJGol

 Spain

**First published:** 05/10/2012

**Last updated:** 23/05/2025

Institution

Educational Institution

Laboratory/Research/Testing facility

Not-for-profit

ENCePP partner

PHARMO Netherlands, Pedianet Italy, SIDIAP  
Spain, IPCI Netherlands

## Networks

### European Medical Information Framework (EMIF)

 European Union

**First published:** 01/02/2024

**Last updated:** 12/03/2024

Network

### Pedianet network (So.Se.Te)

 Italy

**First published:** 23/10/2025

**Last updated:** 08/04/2026

Network

## Contact details

**Study institution contact**

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Study contact

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**Primary lead investigator**

Luigi Cantarutti

Primary lead investigator

## Study timelines

**Date when funding contract was signed**

Planned: 11/12/2012

Actual: 11/12/2012

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**Study start date**

Planned: 15/06/2018

Actual: 28/06/2018

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**Data analysis start date**

Planned: 03/12/2018

Actual: 03/12/2018

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**Date of final study report**

Planned: 31/07/2019

## Sources of funding

- Other

## More details on funding

EU/EFPIA

## Study protocol

[PediatricUseCase\\_UC17.pdf](#) (1.12 MB)

## Regulatory

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

No

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

Not applicable

## Methodological aspects

### Study type

### Study type list

**Study topic:**

Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Drug utilisation

**Main study objective:**

The primary objective is to investigate for each DB, the relationship, among the Drug Events, between the antibiotic dosing and the patient's weight, stratified by: • type of antibiotic (ATC code), • care setting (Hospitalisation/No-Hospitalisation)

## Study Design

**Non-interventional study design**

Other

## Study drug and medical condition

**Anatomical Therapeutic Chemical (ATC) code**

(J01CA04) amoxicillin

amoxicillin

(J01CR02) amoxicillin and beta-lactamase inhibitor

amoxicillin and beta-lactamase inhibitor

(J01CE02) phenoxymethylpenicillin

phenoxymethylpenicillin

(J01CE05) pheneticillin

pheneticillin

(J01CF05) flucloxacillin

flucloxacillin

(J01DC04) cefaclor

cefaclor

(J01FA01) erythromycin

erythromycin

(J01FA10) azithromycin

azithromycin

(J01FA09) clarithromycin

clarithromycin

(J01CA01) ampicillin

ampicillin

## Population studied

### Age groups

- Preterm newborn infants (0 - 27 days)
- Term newborn infants (0 - 27 days)
- Infants and toddlers (28 days - 23 months)
- Children (2 to < 12 years)
- Adolescents (12 to < 18 years)

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### Estimated number of subjects

3000000

## Study design details

### Outcomes

The primary objective is to investigate, for each DB, the relationship among the Drug Events, between the antibiotic dosing and the patient's weight, stratified by: • type of antibiotic (ATC code), • care setting (Hospitalisation/No-Hospitalisation), The first secondary objective is to evaluate the frequency distribution of the different types of antibiotics in all DEs, stratified, for each DB, by: • care setting (Hospitalisation/No-Hospitalisation), • calendar year, • age group. The second secondary objective is to investigate, for each DB, the relationship among the Drug Events, between the antibiotic dosing and the patient's BSA

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### **Data analysis plan**

Data extraction, transformation, derivation of specific variables will be done locally at each site by data custodians, using purpose-build software called Jerboa Reloaded. The results are transmitted to a central secured environment, namely, a Private Remote Research Environment (PRRE), for further processing and analyses. Since we expect a linear correlation, among the DEs, between the antibiotic dosing (expressed as mg/day) and the patient's weight (expressed in kilos), this relationship will be investigated scatter-plotting the antibiotic dosing against the patient's weight and computing Pearson's correlation coefficient  $r$ .

## 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)**

Integrated Primary Care Information (IPCI)

The Information System for Research in Primary Care (SIDIAP)

PHARMO Data Network

ARS Toscana

Pedianet

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## **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

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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**

No