

Post-authorization Safety Program Using the Swedish National Registers—A Validation Study of Cardiovascular and Neoplasm Events in Users of Pharmacological Treatments for Overactive Bladder

First published: 26/01/2015

Last updated: 02/07/2024

Study

Finalised

Administrative details

PURI

<https://redirect.ema.europa.eu/resource/29380>

EU PAS number

EUPAS8444

Study ID

29380

DARWIN EU® study

No

Study countries

Sweden

Study description

Mirabegron is a first in class therapeutic agent, with a mechanism of action distinct from that of antimuscarinic agents indicated for the treatment of overactive bladder (OAB). This is a retrospective cohort study of new users of individual antimuscarinic drugs: oxybutynin, tolterodine, darifenacin, solifenacin, and fesoterodine. The objectives are: to describe drug-use patterns, to describe the availability of potential confounders in the Swedish data

resources, and to calculate background rates of cardiovascular (CV) and cancer outcomes among antimuscarinic drug users in the Swedish Prescription and Inpatient National Databases, in collaboration with the Karolinska Institutet (KI) Center for Pharmacoepidemiology (CPE). Results will help to refine the study size and statistical power assessment for the post-marketing safety studies of Mirabegron, to be conducted, among other data sources, in the Swedish Databases. The study period is July 1, 2005 through December 2012. The study will calculate incidence rates of the following endpoints : - CV: including acute myocardial infarction, stroke, all-cause mortality, a MACE composite endpoint, and CV mortality.- Neoplasm endpoint: The study will focus on a composite of the 10 most commonly occurring malignancies. For cancer analyses only the first incident targeted cancer is considered.

Study status

Finalised

Research institution and networks

Institutions

RTI Health Solutions (RTI-HS)

France

Spain

Sweden

United Kingdom

United Kingdom (Northern Ireland)

United States

First published: 21/04/2010

Last updated

19/02/2024

Institution

ENCePP partner

Not-for-profit

Centre for Pharmacoepidemiology, Karolinska Institutet (CPE-KI)

Sweden

First published: 24/03/2010

Last updated

23/04/2024

Institution

Laboratory/Research/Testing facility

Not-for-profit

Educational Institution

ENCePP partner

RTI Health Solutions (RTI-HS)

France

Spain

Sweden

United Kingdom

United Kingdom (Northern Ireland)

United States

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Last updated

19/02/2024

Institution

Not-for-profit

ENCePP partner

Contact details

Study institution contact

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Study contact

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Primary lead investigator

Alejandro Arana

Primary lead investigator

Study timelines

Date when funding contract was signed

Planned:

15/09/2014

Actual:

10/10/2014

Study start date

Planned:

05/01/2015

Actual:

05/01/2015

Date of interim report, if expected

Planned:

06/02/2015

Actual:

26/03/2015

Date of final study report

Planned:

29/02/2016

Actual:

16/02/2016

Sources of funding

- Pharmaceutical company and other private sector

More details on funding

Astellas Pharma Global Development, Inc.

Study protocol

[178-cl-118-clp-02-reissue-en-v1dot1_Redacted.pdf](#)(969.29 KB)

Regulatory

Was the study required by a regulatory body?

Yes

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

EU RMP category 3 (required)

Methodological aspects

Study type

Study type list

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
Drug utilisation
Other

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

Validation of the database Swedish Prescription and Inpatient National Databases for the study of CV and neoplasm events in users of treatments for overactive bladder

Data collection methods:

Secondary data collection

Main study objective:

Characterize users of OAB drugs. Describe patterns of usage of OAB drugs. Describe the availability of potential confounders in the database, to help in the design of the PASS studies of mirabegron. Estimate IRs of study endpoints in new users of OAB drugs. Estimate the IRRs of CV outcomes in users of OAB drugs compared with tolterodine.

Study Design

Non-interventional study design

Cohort
Other

Non-interventional study design, other

Database validation study

Study drug and medical condition

Anatomical Therapeutic Chemical (ATC) code

(G04BD04) oxybutynin
(G04BD07) tolterodine
(G04BD08) solifenacin
(G04BD10) darifenacin
(G04BD11) fesoterodine

Medical condition to be studied

Urinary incontinence

Population studied

Short description of the study population

New users of any of the following medications for overactive bladder (OAB): oxybutynin, tolterodine, darifenacin, solifenacin, and fesoterodine.

Subjects in the program were required to meet all of the following inclusion criteria:

? Be a resident in Sweden for at least 12 months before the first dispensing of an OAB drug of interest (thereby providing medical and prescription history data).

? Have a first recorded dispensing for oxybutynin, tolterodine, darifenacin, solifenacin, or fesoterodine.

? Be aged 18 years or older at the time of first dispensing of a drug of interest.

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)

Special population of interest

Other

Special population of interest, other

Overactive Bladder patients

Estimated number of subjects

78000

Study design details

Outcomes

CV endpoints: AMI, stroke, CV mortality, all-cause mortality, major adverse cardiac events (MACE). Composite cancer endpoints: lung & bronchus, colon & rectum, melanoma of skin, urinary bladder, non-Hodgkin lymphoma, kidney & renal pelvis, pancreas, prostate (males), breast (females), corpus uteri (females)

Data analysis plan

Summary statistics of the covariates will be generated. Characteristics of the users at cohort entry and the patterns of use of the study medications will be described. Users of

OAB medications will be characterized with respect to selected covariates. Patterns of use of OAB drugs including dose, duration of treatment, drug switching, and use of drugs as add-on therapy will be described. The frequency of the different characteristics of the covariates and the degree of missing information will be described. 3 types of incidence endpoints will be estimated: -IRs of 4 different CV events+all-cause mortality in new users of antimuscarinic drugs for the treatment of OAB. -IRR of 4 different CV outcomes+all-cause mortality in new users of each of the OAB drugs compared with tolterodine. -IRs of 2 sex-specific, multiple-cancer composite endpoints (1 for men/1 for women), during the first year after start of treatment and during subsequent years, among new users of antimuscarinic drugs

Documents

Study results

[178-cl-118-clrr-03-disc01-en-final-02_redacted.pdf](#)(4.17 MB)

Study publications

[Linder M, Margulis AV, Anveden-Berglind I, Bahmanyar S, Bui CL, Atsma WJ, Appen... Margulis AV, Linder M, Arana A, Pottegard A, Anveden-Berglind I, Bui CB, Kristi...](#)

Data management

Data sources

Data source(s)

National Prescribed Drugs Register / Läkemedelsregistret

Data source(s), other

Swedish Cancer Register, National Patient Register, Causes of Death Register

Data sources (types)

[Administrative data \(e.g. claims\)](#)

[Disease registry](#)

[Drug dispensing/prescription data](#)

[Electronic healthcare records \(EHR\)](#)

Use of a Common Data Model (CDM)

CDM mapping

No

Data quality specifications

Check conformanceUnknown

Check completenessUnknown

Check stabilityUnknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No