# A post-marketing surveillance study for Repatha Inj. (evolocumab) in Korea text (20160156)

First published: 25/07/2017

Last updated: 05/06/2024





## Administrative details

PURI
https://redirect.ema.europa.eu/resource/29447
EU PAS number
EUPAS19680
Study ID
29447
DARWIN EU® study
No
Study countries
Korea, Republic of

### **Study description**

To assess the safety and efficacy of Repatha in post-marketing routine clinical settings as required by the Ministry of Food and Drug Safety.

#### **Study status**

**Finalised** 

## Research institutions and networks

### **Institutions**

## **Amgen**

United States

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

Last updated: 21/02/2024

Institution

Multiple centres: 30 centres are involved in the

study

### Contact details

### **Study institution contact**

Global Development Leader Amgen Inc.

Study contact

medinfo@amgen.com

### **Primary lead investigator**

Global Development Leader Amgen Inc.

**Primary lead investigator** 

## Study timelines

#### Date when funding contract was signed

Planned: 01/11/2017

Actual: 01/11/2017

#### Study start date

Planned: 29/03/2019

Actual: 09/04/2019

#### Data analysis start date

Planned: 20/02/2023

Actual: 27/01/2023

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

Planned: 12/07/2023

Actual: 07/08/2023

## Sources of funding

• Pharmaceutical company and other private sector

## More details on funding

Amgen

## Study protocol

Repatha PMS\_20160156\_ver 1 redacted.pdf(670.63 KB)

# Regulatory

Was the study required by a regulatory body?

Yes

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

#### **Study type:**

#### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness Safety study (incl. comparative)

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

Primary data collection

#### Main study objective:

The primary objective of this study is to assess the incidence rate of adverse events (AEs) (including device related AEs) and adverse drug reactions (ADRs) for up to 12 weeks in patients who are prescribed Repatha according to the approved therapeutic indications, dosage, and administration in post-marketing settings

## Study Design

#### Non-interventional study design

Other

### Non-interventional study design, other

Single arm, prospective, observational study

## Study drug and medical condition

#### Name of medicine

REPATHA

#### Medical condition to be studied

Hyperchloraemia

# Population studied

### Short description of the study population

Adults and adolescents aged 12 years or older with homozygous familial hypercholesterolemia (HoEH) received treatment with Penatha under routing

nypercholesterolemia (HoFH) received treatment with Repatha under routine
clinical settings in Korea.
Inclusion criteria:
☐ HoFH patient treated with Repatha Inj. according to the approved therapeutic
indications, dosage, and administration in post-marketing settings
☐ Patient who voluntarily provided written informed consent
Exclusion criteria:
☐ Patient who did not provide written informed consent
☐ There are no other exclusion criteria.
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Age groups
Adolescents (12 to < 18 years)
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

Patients with homozygous familial hypercholesterolemia

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

10

## Study design details

#### **Outcomes**

incidence rate of AEs/ADRs observed or reported to the investigator during the follow-up period, Efficacy measurement, change in low-density lipoprotein (LDL)-cholesterol (LDL-C) measured as part of routine clinical practice from baseline to the end of follow-up, patient demographic information and medical history, diagnosis of hypercholesterolemia, concomitant medication prior to study participation, other concomitant medication

#### Data analysis plan

Categorical variables will be summarized with frequency and percentage, and continuous variables will be summarized with mean, standard deviation (SD), standard error (SE), median, Q1, Q3, minimum, and maximum. Subject disposition, demographic information, and baseline characteristics will be summarized in the safety set. For safety analysis, number of subjects, number of events, and incidence rate will be presented in the safety set for AEs (including device related AEs), ADRs, and serious AEs (SAEs). 95% confidence interval will not be calculated because it is not meaningful for the planned sample size of 10 subjects. For efficacy analysis, change (%) in LDL-C at Week 12 from baseline will be analysed in the efficacy set.

### **Documents**

#### **Study results**

20160156 ORSR Redacted.pdf(171.48 KB)

## Data management

### Data sources

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

Other

### 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

#### **Check completeness**

Unknown

## **Check stability**

Unknown

## **Check logical consistency**

Unknown

# Data characterisation

### **Data characterisation conducted**

No