

# AIV - FISABIO Impact and risk of Herpes Zoster in immunosuppressed subjects in Valencia Region, Spain

**First published:** 02/08/2019

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

Study

Finalised

## Administrative details

### PURI

<https://redirect.ema.europa.eu/resource/30801>

### EU PAS number

EUPAS30792

### Study ID

30801

### DARWIN EU® study

No

### Study countries

Spain

### Study description

Herpes Zoster is a disease caused by the reactivation of the varicella-zoster virus in situations of decreased cellular immunity. Among the patients with the highest risk of suffering an HZ are patients with advanced age and immunosuppression of different origin and grade. These subjects would be beyond the scope of the only vaccine that currently exists on the market, as it is a live attenuated virus vaccine. An alternative to this type of vaccine is the inactivated subunit vaccine (glycoprotein E). Primary objective: Estimate the incidence of HZ in immunosuppressed subjects > 18 years in the Valencian Community, between 2009 and 2014, both globally and stratifying by age groups, sex and type of

immunodeficiency. Secondary: Estimate the risk of HZ in immunocompromised subjects compared to immunocompetent subjects, compare the consumption of health resources, the risk of complications and the risk of recurrent HZ. To study the impact of HZ on the underlying pathology (immunosuppression), comparing the six months prior to the first diagnosis of HZ with the six months after said diagnosis. To study the risk of HZ and the consumption of resources in immunocompromised patients in comorbidity with diabetes and / or chronic obstructive pulmonary disease and / or heart failure and / or chronic kidney disease, compared to immunocompetent subjects. To estimate the prevalence of immunosuppressive conditions in the general population prior to the first diagnosis of HZ with the six months after that diagnosis. To study the risk of HZ and the consumption of resources in immunocompromised patients in comorbidity with diabetes and / or chronic obstructive pulmonary disease and / or heart failure and / or chronic kidney disease, compared to immunocompetent subjects. Estimate the risk of suffering a recurrent HZ in immunocompromised and immunocompetent subjects. Estimate the prevalence of immunosuppressive conditions in the general population.

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### Study status

Finalised

## Research institution and networks

### Institutions

#### The Foundation for the Promotion of Health and Biomedical Research of Valencia Region (FISABIO)

Spain

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

Last updated 01/02/2024

Institution

## Contact details

### Study institution contact

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Study contact

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### Primary lead investigator

Javier Diez-Domingo

Primary lead investigator

## Study timelines

**Date when funding contract was signed**

Actual:

27/01/2017

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**Study start date**

Actual:

27/02/2017

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**Date of final study report**

Actual:

27/09/2018

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

GSK

## Study protocol

[AIV - FISABIO\\_HZ\\_2017\\_04\\_IHZIS\\_JDD.pdf](#)(218.32 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)?**

Not applicable

## Methodological aspects

### Study type

### Study type list

**Study topic:**

Disease /health condition

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**Study type:**

Non-interventional study

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**Scope of the study:**

Disease epidemiology

Other

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

Impact and risk

**Data collection methods:**

Secondary data collection

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**Main study objective:**

To estimate the incidence of HZ in IS subjects 18 years and older in Valencia Region, from 2009 to 2014, both globally and stratified by age groups, sex and immunodeficiency type (HIV, malignancies, organ transplantation, immunodeficiency disorders and autoimmune diseases)

## Study Design

**Non-interventional study design**

Cohort

Other

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**Non-interventional study design, other**

Population based, retrospective cohort study

## Study drug and medical condition

**Medical condition to be studied**

Immunodeficiency common variable

## Population studied

**Short description of the study population**

Immunosuppressed subjects ? 18 years in the Valencian Community, between 2009 and 2014.

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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

Immunocompromised

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## Estimated number of subjects

4382590

# Study design details

## Outcomes

An incident case of HZ will be considered the first appearance of a HZ-related ICD-9-CM code (053.xx), in either SIA or CMBD (in any position). Any outpatient medical contact or visit, or hospital admission related to HZ will be considered as a medical encounter.

Recurrence of HZ will be examined in all HZ incident cases. - Health care resources consumption due to HZ: Outpatient visit. Hospitalizations. Length of hospitalization. Medication. Periods off work. - Health care resources consumption due to IS: Outpatient visits. Hospitalizations. Length of hospitalization. - HZ complications - Post-herpetic Neuralgia- Comorbidities

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## Data analysis plan

We might expect approx. 4 million subjects to fulfil the inclusion criteria. Internal data from a previous study from our team, using the same health databases from Valencia Region and the same ICD-9 codes showed a prevalence of IS of 11.8% in subjects > 50 years old. These data correlate with a published work with a large study population of 51 million subjects and a prevalence of IS of 11.9% for subjects > 50 years old. According to this and the published data, the observed prevalence of IS for subjects aged 18 years and older was approx. 7% so, we will expect around 280.000 IS subjects in the present study.

# Data management

## Data sources

### Data sources (types)

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

[Drug registry](#)

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**

Unknown