# Viral SARS-CoV-2 rebounds in commercial pharmacy-based SARS-CoV-2 PCR testing

First published: 23/02/2023

Last updated: 12/09/2024



# Administrative details

#### **EU PAS number**

EUPAS103517

#### **Study ID**

105624

#### **DARWIN EU® study**

No

#### **Study countries**

United States

#### **Study description**

This is a non-interventional, retrospective cohort study using secondary data sources containing structured data from the US. This study will include adults ( $\geq$ 18 years of age) and pediatric participants (<18 years of age) with a positive

SARS-CoV-2 test (e.g. positive polymerase chain reaction (PCR) of direct SARS-CoV-2 viral testing). This study will be conducted using SARS-CoV-2 diagnostic testing data from the Helix Respiratory Registry with linkage to the retrospective Komodo Healthcare claims data during the period of June 01, 2020, to February 28, 2023. Viral SARS-CoV-2 rebound will be examined after stratification of variables such as SARS-CoV-2 therapeutic treatment, viral load patterns, high-risk status for progression to severe SARS-CoV-2, age (<50 years of age versus 50+ years of age), and by timing around rebounds in relation to initial test positivity to treatment for SARS-CoV-2.

Study status

Finalised

# Research institutions and networks

### Institutions

Pfizer

First published: 01/02/2024

Last updated: 01/02/2024

Institution

### Helix OpCo, LLC

Contact details

### Study institution contact Scott Kelly Scott.Kelly@pfizer.com

Study contact

Scott.Kelly@pfizer.com

**Primary lead investigator** Scott Kelly

Primary lead investigator

# Study timelines

### Date when funding contract was signed

Planned: 17/11/2022 Actual: 17/11/2022

### Study start date Planned: 22/02/2023 Actual: 23/02/2023

**Data analysis start date** Planned: 14/07/2023 Actual: 14/07/2023

Date of final study report Planned: 14/08/2024 Actual: 13/08/2024

### Sources of funding

• Pharmaceutical company and other private sector

### More details on funding

Pfizer

# Study protocol

C4671048 NI APPROVED PROTOCOL\_FINAL\_V1.0\_08FEB2023\_redacted.pdf (463.38 KB)

# Regulatory

Was the study required by a regulatory body?

No

Is the study required by a Risk Management Plan (RMP)? Not applicable

# Methodological aspects

# Study type

Study type list

**Study type:** Non-interventional study

#### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness Disease epidemiology

### Main study objective:

To estimate viral SARS-CoV-2 rebound rates, prior to the Omicron era and during the Omicron era, in high frequency (volume) SARS-CoV-2 diagnostic testers overall, and among those treated with Paxlovid/nirmatrelvir-ritonavir for SARS-CoV-2 versus those with no evidence of SARS-CoV-2 treatment (untreated for SARS-CoV-2).

# Study Design

### Non-interventional study design

Cohort

# Study drug and medical condition

# Name of medicine

PAXLOVID

Medical condition to be studied COVID-19

# Population studied

**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)

#### Estimated number of subjects

21911

### Study design details

#### Outcomes

SARS-CoV-2 rebound where the main definition of rebound is 1) a positive test (at the index date), followed by a single negative test, followed by a positive test within 28 days or 2) 1 or more positive tests starting at the index date, followed by 1 or more negative tests, followed by a positive test within same 28-day time span.

#### Data analysis plan

Descriptive statistics among individuals with SARS-CoV-2 in the Helix Respiratory Registry that overlap with the retrospective Komodo Healthcare claims data will be summarized. Means with standard deviations, medians with interquartile ranges will be provided for continuous variables. Numbers and percentages will be provided for dichotomous variables or categorical variables. For exploratory analyses, logistic regression or Cox proportional hazards regression models will be used to identify risk factors and outcomes for SARS-CoV-2 rebound in adjusted analyses. Model selection will balance biological and contextual knowledge for potential confounders with statistical considerations for model fit and the bias versus variance tradeoff. Detailed methodology for summary and statistical analyses of data collected in this study will be documented in a statistical analysis plan (SAP), which will be dated, filed, and maintained by the sponsor.

### Documents

### Study report

C4671048 Non Interventional Final Study Report\_13Aug2024\_R.pdf(2.23 MB)

#### Study, other information

C4671048 Non Interventional Study Report Abstract\_13Aug2024\_R.pdf(89.57 KB)

### Data management

### Data sources

### Data source(s), other Helix Respiratory Registry United States, Komodo Healthcare claims data United States

Data sources (types) Administrative healthcare records (e.g., claims) Drug dispensing/prescription data

# Use of a Common Data Model (CDM)

CDM mapping

No

# Data quality specifications

### **Check conformance**

Yes

### **Check completeness**

Yes

### **Check stability**

Unknown

### Check logical consistency

Yes

## Data characterisation

### Data characterisation conducted

Unknown