Effectiveness and tolerability of the THC:CBD oromucosal spray vs. typical oral long-term opioid-analgesics in patients with severe neuropathic (low) back pain: retrospective analysis of open-label real-world data provided by the German Pain e-Registry (NABILA-NBP)

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Administrative details

PURI

https://redirect.ema.europa.eu/resource/38970

EU PAS number

EUPAS38969

Study ID

38970

DARWIN EU® study

No

Study countries

Germany

Study description

Cross-sectional retrospective analysis of anonymized real-world data provided by the German Pain e-Registry on the effectiveness, safety and tolerability of an oromucosal spray containing delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD) vs. typical oral long-term opioid-analgesics, given as add-on treatment in patients with severe chronic neuropathic (low) back pain (NBP) in routine clinical practice.

Study status

Planned

Research institutions and networks

Institutions

Institute for Neurological Sciences (IFNAP)

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Institution

Contact details

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Study contact

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Primary lead investigator

Michael Ueberall

Primary lead investigator

Study timelines

Date when funding contract was signed

Planned: 30/09/2020

Study start date

Planned: 01/10/2020

Data analysis start date

Planned: 15/10/2020

Date of final study report

Planned: 31/12/2020

Sources of funding

Pharmaceutical company and other private sector

More details on funding

Almirall Hermal GmbH Germany, IFNAP - Institute of Neurological Sciences

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:

Drug utilisation

Effectiveness study (incl. comparative)

Main study objective:

Main objective of this analysis is to gain further insight into the differential effects and the benefit-risk profile (BRP) of THC:CBD oromucosal spray vs. typical oral long-acting opioid-analgesics given add-on to patients with elsewhere refractory severe chronic neuropathic (low) back pain under real life conditions.

Study Design

Non-interventional study design

Cohort

Cross-sectional

Study drug and medical condition

Name of medicine, other

Sativex

Study drug International non-proprietary name (INN) or common name

MORPHINE

HYDROMORPHONE

OXYCODONE

Medical condition to be studied

Neuropathy peripheral

Additional medical condition(s)

Neuropathic (low) back pain

Population studied

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)

Estimated number of subjects

1300

Study design details

Outcomes

Primary efficacy endpoint is an aggregated 9-factor symptom relief score (ASR-9) defined as a composite of nine efficacy parameters (at least 50% improvement of pain, pain-related disabilities in daily life, sleep, overall wellbeing, physical and mental quality-of-life, depression, anxiety and stress, each at end of observation vs. baseline). Secondary endpoint is the spectrum of treatment emergent adverse reactions (TEAEs) and the proportion of related treatment discontinuations.

Data analysis plan

Exploratory analysis of anonymized 24-week routine/open-label data of the German Pain e-Registry (GPR) on adult NBP patients, in whom a treatment with THC:CBD oromucosal spray or with a typical oral long-acting-opioid analgesic (LAO) has been initiated in compliance with the current German prescribing regulations between March 10th and July 31st, 2020. No formal sample size analysis will be performed. Data analyses will be performed for all registered patients who took at least one dose of the THC/CBD oromucosal spray and

comparable patients treated with LAO, who had at least one post-baseline/post-dose measure (modified intent-to-treat approach). Analyses will be performed only for patients with neuropathic (low) back pain identified with the modified 7-dimensional patient-reported pain detect questionnaire (PDQ7).

Data management

Data sources

Data sources (types)

Electronic healthcare records (EHR)

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