# A Multi-Country Prospective Multi-Drug Resistant Tuberculosis Patient Registry to Monitor Bedaquiline Safety, Utilization, and Emergence of Resistance

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### Administrative details

#### **EU PAS number**

EUPAS16023

#### **Study ID**

40892

#### **DARWIN EU® study**

No

#### **Study countries**

Hong Kong

Korea, Republic of

☐ Philippines



### **Study description**

This study is a prospective, multi-country MDR-TB registry to further assess the benefits and risks of BDQ by evaluating BDQ safety, effectiveness, and emergence of resistance, BDQ drug utilization, and adherence to WHO guidance on the use of BDQ in MDR-TB treatment.

Study status

Finalised

## Research institutions and networks

### Institutions

Johnson & Johnson

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Institution

### Contact details

### Study institution contact

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Study contact

### RA-RNDUS-CInclTrlsEU@its.jnj.com

### Primary lead investigator Helen Pai

Primary lead investigator

### Study timelines

Date when funding contract was signed Actual: 14/09/2015

Study start date

Actual: 03/05/2016

### Date of final study report

Planned: 30/12/2020 Actual: 26/10/2020

### Sources of funding

• Pharmaceutical company and other private sector

### More details on funding

Janssen Research & Developmentt

### Study protocol

TMC207TBC4002\_Multi Country MDRTB Registry Protocol v2.0.pdf(182.7 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:

Human medicinal product Disease /health condition

### Study type:

Non-interventional study

### Scope of the study:

Disease epidemiology Drug utilisation

### Data collection methods:

Combined primary data collection and secondary use of data

### Main study objective:

To further assess the benefits and risks of BDQ by evaluating BDQ safety, effectiveness, and emergence of resistance, BDQ drug utilization, and adherence to WHO guidance on the use of BDQ in MDR-TB treatment.

### Study Design

Non-interventional study design Cohort

### Study drug and medical condition

#### Name of medicine

SIRTURO

#### Medical condition to be studied

Multiple-drug resistance Pulmonary tuberculosis

### Population studied

#### Short description of the study population

Inclusion Criteria

The study population will be drawn from the population of all patients treated for MDR-TB in multiple countries. All patients newly diagnosed with MDR-TB as well as all patients newly treated with BDQ at participating sites will be eligible for inclusion in the registry. All patients meeting registry inclusion criteria will be eligible for inclusion in the registry provided they submit the necessary informed consent for participation.

**Exclusion Criteria** 

No specific exclusion criteria will be applied in this study other than those scenarios that follow from the inclusion criteria.

#### 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

Pulmonary tuberculosis patients

#### Estimated number of subjects

6000

## Study design details

#### Outcomes

The registry is designed to observe several aspects of MDR-TB treatment such as drug utilization characteristics, treatment outcomes (clinical and microbiologic), and safety outcomes (adverse events and mortality).

#### Data analysis plan

Descriptive analyses will be used to describe baseline characteristics including demographics, country of origin, medical history, susceptibility of baseline MDR-TB isolates to BDQ and TB background regimen drugs, and use of medications at cohort entry. MDR-TB treatment will also be described including indication of use, dose, frequency, duration of use, usage with TB background regimen, and susceptibility of concomitant TB treatment regimens. Relative risk rates and 95% confidence intervals will be calculated and appropriate stratified analyses will be conducted for each adverse event, including death. Adjustments for imbalances between the treatment groups will be applied using accepted methods based on sample size availability and the observed overlap of key patient characteristics.

### Documents

#### **Study publications**

Pai H, Ndjeka N, Mbuagbaw L, Kaniga K, et al. Bedaquiline safety, efficacy, uti... Shim TS, Pai H, Mok J, et al. A prospective patient registry to monitor safety,...

### Data management

### Data sources

### Data sources (types)

Disease registry Drug registry 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