

# Comparative Effectiveness and Safety of Immunosuppressive Drugs in Transplant patients (CESIT)

**First published:** 11/12/2020

**Last updated:** 13/03/2025

Study

Ongoing

## Administrative details

### EU PAS number

EUPAS38308

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### Study ID

41064

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### DARWIN EU® study

No

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### Study countries

☐ Italy

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### Study description

CESIT is an Italian multicenter retrospective cohort study on the use of immunosuppressive drugs in transplant patients, based on information available in regional administrative healthcare databases and on National Transplant Information System (SIT). The aims are: 1) to describe the prescriptive patterns of immunosuppressive drug regimens in different transplant settings (kidney, lung, liver, heart) used in maintenance phase and to identify patient characteristics associated to these patterns in the four Italian regions (Lombardy, Veneto, Lazio, Sardinia), accounting for over 20 million residents, 2) to compare the risk-benefit profile of different immunosuppressive therapeutic regimens, with a focus on generics/branded and special populations (paediatric and elderly) 3) to evaluate data validity and generalizability through SIT. All transplant patients residing in the regions involved in the study will be identified through an algorithm considering all the hospitalizations, occurred over the years 2009–2019, reporting a transplantation procedure. Comorbidity will be defined from Hospital discharge records (ICD-9-CM codes), disease specific copayment exemptions, and, as far as possible, disease specific drug treatments and NTIS. Drug utilisation patterns will be based on drugs (ATC codes) prescribed to outpatients using the DDDs. Specific outcomes, such as organ survival and rejection, will be identified by SIT. Safety and effectiveness will be investigated using a new-user approach and applying both, intention-to-treat and as-treated analysis. Data and analysis will be managed through a common data model, with shared data scripts, performing the analysis and pooling aggregated anonymous data to obtain overall results.

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## **Study status**

Ongoing

## **Research institutions and networks**

### **Institutions**

## Department of Epidemiology of the Regional Health Service - Lazio

☐ Italy

**First published:** 23/03/2010

**Last updated:** 22/06/2018

**Institution**

**Outdated**

**EU Institution/Body/Agency**

**ENCEPP partner**

## Pharmacoepidemiology Unit - National Centre for Epidemiology, Surveillance and Health Promotion, Istituto Superiore di Sanità (ISS)

☐ Italy

**First published:** 23/03/2010

**Last updated:** 18/09/2023

**Institution**

**Educational Institution**

**Laboratory/Research/Testing facility**

**ENCEPP partner**

## Department of Epidemiology of the Regional Health Service - Lazio

☐ Italy

**First published:** 23/03/2010

**Last updated:** 22/06/2018

**Institution**

**Outdated**

**EU Institution/Body/Agency**

**ENCePP partner**

## Pharmacology Unit - Veneto Pharmacovigilance Centre (Pharmacol UNIVR), University Hospital Verona

☐ Italy

**First published:** 25/10/2022

**Last updated:** 13/03/2025

**Institution**

**Educational Institution**

**Hospital/Clinic/Other health care facility**

**ENCePP partner**

National transplant center (CNT), National Institute of Health Rome, Italy, Pharmacoepidemiology Unit, National Centre for Drug Research and Evaluation, National Institute of Health Rome, Italy, Epidemiology Observatory - Department of Health of Lombardy Region Milan, Italy, Department of Diagnostics and Public Health, Section of Pharmacology, University of Verona

Verona, Italy, Epidemiological Department,  
Azienda Zero, Veneto Region Padua, Italy, Regional  
Councillorship of Health 'Regione Autonoma della  
Sardegna' Cagliari, Italy

## Contact details

### Study institution contact

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Study contact

[v.belleudi@deplazio.it](mailto:v.belleudi@deplazio.it)

### Primary lead investigator

Valeria Belleudi

Primary lead investigator

## Study timelines

### Date when funding contract was signed

Planned: 23/09/2020

Actual: 23/09/2020

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### Study start date

Planned: 12/04/2021

Actual: 04/05/2021

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**Data analysis start date**

Planned: 10/06/2021

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**Date of interim report, if expected**

Planned: 23/09/2021

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**Date of final study report**

Planned: 30/09/2022

## Sources of funding

- Other

## More details on funding

Italian Medicines Agency, Regional Drug Departments

## 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 type:**

Non-interventional study

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**Scope of the study:**

Drug utilisation

Effectiveness study (incl. comparative)

**Main study objective:**

1. To describe the prescriptive patterns of immunosuppressive drug regimens in different transplant settings (kidney, lung, liver, heart) used in maintenance phase and identify patient characteristics associated to these patterns in the four Italian regions 2. To compare the risk-benefit profile of different immunosuppressive therapeutic regimens in transplant patients

## Study Design

**Non-interventional study design**

Cohort

## Study drug and medical condition

**Medical condition to be studied**

Transplant

## Population studied

**Age groups**

- Preterm newborn infants (0 – 27 days)
  - Term newborn infants (0 – 27 days)
  - Infants and toddlers (28 days – 23 months)
  - Children (2 to < 12 years)
  - 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)
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### **Special population of interest**

Hepatic impaired

Renal impaired

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### **Estimated number of subjects**

7000

## **Study design details**

### **Outcomes**

Transplant rejection, organ survival, use of steroids or immunoglobulin or antibodies for acute rejection, overall mortality, infections, diabetes incidence, cancer incidence (including skin cancer and lymphoma), hypertension incidence, incident statin use, Use of health care services, adverse drug reactions, lymphoproliferative disease, hyperglycemia, magnesium metabolism disorders, recurrence of HCV

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### **Data analysis plan**



Data will be organised and managed through a common data model. Analysis will be performed running the shared scripts at local level and pooling aggregated data at the end. Drug utilization will be defined on the basis of DDDs. CER will be performed through both a multivariate models and a propensity matched cohort design (head-to-head comparison between different drug groups/drugs). Patients in the compared exposure groups will be propensity matched. Intention-to-treat and As-treated analyses will be performed using Cox proportional Hazard models (HRs and 95%CI).

## Data management

### ENCePP Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

## Data sources

### **Data source(s)**

Mortality Information System  
Drug claims information system  
Hospital Information System  
Healthcare Emergency Information System

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### **Data source(s), other**

MIS, PHARM, HIS, HEIS

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## **Data sources (types)**

Administrative healthcare records (e.g., claims)

Disease registry

# 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**

No