

# Pregnancy Surveillance Program of Women and Infants Exposed to TEGSEDI During Pregnancy (TEG4005)

**First published:** 02/07/2021

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Study

Planned

## Administrative details

### EU PAS number

EUPAS41839

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### Study ID

41840

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### DARWIN EU® study

No

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### Study countries

- ☐ Austria
- ☐ Bulgaria
- ☐ Canada
- ☐ Cyprus

- ☐ France
  - ☐ Germany
  - ☐ Greece
  - ☐ Italy
  - ☐ Portugal
  - ☐ Spain
  - ☐ Sweden
  - ☐ United Kingdom
  - ☐ United States
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### **Study description**

This is a worldwide observational pregnancy surveillance program (PSP) of pregnancy exposures to TEGSEDI. The study is designed to estimate the frequency of selected pregnancy, fetal/neonatal and pregnancy complications outcomes from the TEGSEDI exposed and unexposed patients. Pregnancies will be reported voluntarily to the centrally located Pregnancy Call Center (PCC) by Healthcare Providers (HCPs), by patients and by secondary contacts. Patients will be identified from the online website, from any ongoing clinical trials, post market studies, pharmacovigilance cases or the TEGSEDI Risk Evaluation and Mitigation Strategy (REMS) Program.

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### **Study status**

Planned

## Research institutions and networks

### Institutions

[Akcea Therapeutics, Inc.](#)

## Contact details

### Study institution contact

Akcea Therapeutics, Inc. [globalregulatoryaffairs@ionis.com](mailto:globalregulatoryaffairs@ionis.com)

Study contact

[globalregulatoryaffairs@ionis.com](mailto:globalregulatoryaffairs@ionis.com)

### Primary lead investigator

Akcea Therapeutics, Inc.

Primary lead investigator

## Study timelines

### Date when funding contract was signed

Planned: 19/10/2019

Actual: 04/02/2020

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### Study start date

Planned: 15/01/2020

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### Date of final study report

Planned: 31/12/2031

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

## Regulatory

### **Was the study required by a regulatory body?**

Yes

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### **Is the study required by a Risk Management Plan (RMP)?**

EU RMP category 3 (required)

## Methodological aspects

### Study type

### Study type list

#### **Study type:**

Non-interventional study

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#### **Scope of the study:**

Other

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

Pregnancy Surveillance Program

#### **Study design:**

This is a worldwide observational pregnancy surveillance program (PSP) of pregnancy exposures to TEGSEDI. The study is designed to estimate the

frequency of selected pregnancy, fetal/neonatal and pregnancy complications outcomes from the TEGSEDI exposed and unexposed patients.

### **Main study objective:**

The objectives of this PSP are to:

- Estimate the frequency of selected pregnancy and fetal/neonatal outcomes through 1 year of age in women who were exposed to at least 1 dose of TEGSEDI (Cohort 1) within 25 weeks prior to conception or during pregnancy, with the exposure window of interest for major congenital malformations being the first trimester, and in the unexposed cohort of pregnant women (Cohort 2) who have a diagnosis of hATTRPN
  - pregnancy outcomes include live births, spontaneous abortions, stillbirths, elective abortions, preterm birth
  - fetal/neonatal outcomes include major and minor congenital malformations, small for gestational age, failure to thrive, and postnatal development
- Estimate the frequency of selected pregnancy complications in women who were exposed to TEGSEDI (Cohort 1) within 25 weeks prior to conception or during pregnancy and in the unexposed cohort of pregnant women (Cohort 2) who have a diagnosis of hATTR-PN

## Study Design

### **Non-interventional study design**

Cohort

Other

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### **Non-interventional study design, other**

Pregnancy surveillance program

## Study drug and medical condition

**Name of medicine**

TEGSEDI

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**Additional medical condition(s)**

Pregnancy Hereditary Transthyretin Amyloidosis with Polyneuropathy (hATTR-PN)

## Population studied

**Age groups**

Preterm newborn infants (0 – 27 days)

Term newborn infants (0 – 27 days)

Infants and toddlers (28 days – 23 months)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

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**Special population of interest**

Pregnant women

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**Estimated number of subjects**

20

## Study design details

**Setting**

The study will actively pursue and attempt to capture all pregnancies that meet the eligibility criteria that occur worldwide.

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## Outcomes

### Primary Outcome Measures:

#### 1. Frequency of Selected Pregnancy and Fetal/Neonatal Outcomes

Estimate the frequency of selected pregnancy and fetal/neonatal outcomes through 1 year of age in women who were exposed to at least 1 dose of TEGSEDI (Cohort 1) within 25 weeks prior to conception or during pregnancy, with the exposure window of interest for major congenital malformations being the first trimester, and in the unexposed cohort of pregnant women (Cohort 2) who have a diagnosis of hereditary transthyretin amyloidosis with polyneuropathy (hATTR-PN)

- pregnancy outcomes include live births, spontaneous abortions, stillbirths, elective abortions, preterm birth
- fetal/neonatal outcomes include major and minor congenital malformations, small for gestational age, failure to thrive, and postnatal development

[Time Frame: 10 years or 12 months after the last live birth whichever is later]

#### 2. Frequency of Selected Pregnancy Complications

Estimate the frequency of selected pregnancy complications in women who were exposed to TEGSEDI (Cohort 1) within 25 weeks prior to conception or during pregnancy and in the unexposed cohort of pregnant women (Cohort 2) who have a diagnosis of hATTR-PN

[Time Frame: 10 years or 12 months after the last live birth whichever is later]

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## Data analysis plan

The primary outcomes of interest are major congenital malformations (MCMs) as reviewed and classified using both the conventions of the Metropolitan Atlanta Congenital Defects Program (MACDP) (Correa, 2007) and European Registration of Congenital Anomalies and Twins (EUROCAT) definitions. For these outcomes, the prevalence will be summarized using all live births as the denominator in computing the rates. A 2-sided 95% confidence interval for these rates will be calculated using exact (Clopper-Pearson) methods. Analysis

will be repeated by trimester of first exposure and by the timing of exposure beginning prior to or during pregnancy, with the exposure window of interest for MCMs being the first trimester.

## 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 sources (types)

[Other](#)

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### Data sources (types), other

both retrospective and prospective cases will be collected

## 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