A pharmacoepidemiological study of Rivaroxaban use and potential adverse outcomes in routine clinical pratice in Germany

First published: 01/10/2015 Last updated: 08/07/2024



# Administrative details

#### **EU PAS number**

EUPAS11145

#### **Study ID**

43353

#### DARWIN EU® study

No

#### **Study countries**

Germany

#### **Study description**

This prospective cohort study will provide information about: Characteristics of Rivaroxaban use in patients who are prescribed Rivaroxaban for the first time compared to patients who are prescribed standard of care for the first time The occurrence of intracranial haemorrhage, gastrointestinal and urogenital bleeding, and the occurrence of non-infective liver disease.

#### **Study status**

Finalised

## Research institutions and networks

### Institutions

# Leibniz Institute for Prevention Research and Epidemiology - BIPS

Germany

First published: 29/03/2010

Last updated: 26/02/2024

Institution (Not-for-profit) (ENCePP partner

# Contact details

#### Study institution contact

Tania Schink gepard@leibniz-bips.de

Study contact

### Primary lead investigator Tania Schink

Primary lead investigator

# Study timelines

Date when funding contract was signed Actual: 06/08/2012

Study start date

Actual: 22/12/2011

#### Date of final study report

Planned: 31/10/2020 Actual: 01/12/2020

# Sources of funding

• Pharmaceutical company and other private sector

### More details on funding

Bayer HealthCare AG

# Study protocol

16159\_GePaRD\_Rivaroxaban protocol.pdf(601.88 KB)

# Regulatory

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

Yes

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

EU RMP category 1 (imposed as condition of marketing authorisation)

# Methodological aspects

# Study type

# Study type list

#### Study topic:

Disease /health condition Human medicinal product

#### Study type:

Non-interventional study

#### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

Drug utilisation

Effectiveness study (incl. comparative)

#### Data collection methods:

Secondary use of data

Main study objective:

To assess patterns of drug utilization and to quantify outcomes related to safety and effectiveness in new users of rivaroxaban compared with new users of standard of care in routine clinical practice in Germany.

# Study Design

Non-interventional study design

Cohort

# Study drug and medical condition

#### Name of medicine

XARELTO

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

#### Anatomical Therapeutic Chemical (ATC) code

(B01A) ANTITHROMBOTIC AGENTS ANTITHROMBOTIC AGENTS

#### Medical condition to be studied

Venous thrombosis Pulmonary embolism Atrial fibrillation Acute coronary syndrome

### **Population studied**

#### Short description of the study population

All patients aged 2 years and above who have been enrolled in The German Pharmcoepidemiological Research Database (GePaRD) for at least 1 year. Cohorts of first-time users of either rivaroxaban or comparators will be identified using the date of first dispensation of the respective drug (the index drug) as the index date.

A patient will be considered eligible to enter a study cohort as a first-time user of rivaroxaban or a first-time user of "standard of care" when he or she has a first prescription of the drug dispensed during the enrolment period. In Germany, for VTE prevention, DVT/PE treatment and SPAF, standard of care is treatment with the most widely used vitamin K antagonist, phenprocoumon, and for the secondary prevention of ACS, standard of care is antiplatelet drug(s) such as low-dose acetylsalicylic acid, clopidogrel, dipyridamole, prasugrel, ticlopidine and ticagrelor. Many patients with ACS have a history of ischaemic heart disease for which platelet inhibition is standard treatment, and thus exclusion of patients with prior use of platelet inhibitors risks excluding a majority of typical ACS patients. Therefore, those who have been using one or more platelet inhibitors will remain eligible to enter the study.

Patients who have any record of being dispensed their index drug in the year before index date (i.e. cohort entry), or who qualify for both cohorts on the same day will be excluded. If a patient qualifies as first-time user of both rivaroxaban and "standard of care" comparison drug during the enrolment period, she/he will be assigned to the cohort of drug first prescribed during the enrolment period, with the date of this prescription being the index date. Many patients with ACS have a history of ischaemic heart disease for which platelet inhibition is standard treatment, and thus exclusion of patients with prior use of platelet inhibitors risks excluding a majority of typical ACS patients. Therefore, those who have been using one or more plate

#### Age groups

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)

#### Special population of interest

Other

#### Special population of interest, other

Patients with venous thrombosis, pulmonary embolism, atrial fibrillation, acute coronary syndrome

#### Estimated number of subjects

200000

# Study design details

#### Outcomes

1. Descriptive analysis of demographic and clinical characteristics of patients who are prescribed oral rivaroxaban for the first time in comparison with those who are prescribed standard of care for the first time 2. Characteristics of rivaroxaban use in comparison with standard of care (NOTE: please refer to https://clinicaltrials.gov/ for further primary outcomes), 1. Safety: occurrence of bleeding events leading to hospitalization not specified as primary safety outcomes ("other bleeding") in individuals receiving rivaroxaban, in comparison with those receiving current standard of care. (NOTE: please refer to https://clinicaltrials.gov/ for further secondary outcomes)

#### Data analysis plan

For descriptive purposes, annualized crude incidence rates of the specified outcome events will be calculated, accompanied by 95% confidence intervals.

## Documents

Study results Abstract FinalReport.pdf(346.53 KB)

Study report 16159\_Progress report\_v1.0\_2019-01-28.pdf(94.9 KB) PASS\_report\_Germany\_1Dec2020.pdf(8 MB)

#### Study, other information

PASS\_report\_Germany\_1Dec2020.pdf(8 MB)

#### **Study publications**

. . .

Jobski K, Enders D, Amann U, Suzart K, Wallander MA, Schink T, Garbe E. Use of

Data management

Data sources

#### Data source(s)

German Pharmacoepidemiological Research Database

#### Data sources (types)

Administrative healthcare records (e.g., claims) Disease registry Drug dispensing/prescription data Electronic healthcare records (EHR) Other

#### Data sources (types), other

Discharge registry, death registry, cancer registry, and registries holding sociodemographic data

# 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