Malignancies in Multiple Sclerosis: multi-country cohort database studies (feasibility study) (MALBEC-f)

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Administrative details

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PURI

https://redirect.ema.europa.eu/resource/46551

EU PAS number

EUPAS21870

Study ID

46551

DARWIN EU® study

No

Study countries

Denmark
France
Netherlands
United States

Study description

The pattern of malignancies in the cladribine clinical program in multiple sclerosis (MS) (all exposed subjects) did not show an obvious difference compared to the available data on malignancies in the general population, or in MS patients. There is no obvious evidence of an increase of the risk of a particular tumor type in cladribine treated subjects compared to European reference populations. No dose-relationship could be found. The effect of age, immunomodulators (IM) and immunosuppressants (IS) treatments on the risk of malignancy in patients with MS is currently uncertain. MS patients seem to have a similar risk of malignancy than the general population but further studies using external data sources are needed to estimate the risk in MS as compared to general population. In this context, this study will provide estimates of malignancies incidence for a cohort of MS patients compared to non-MS patients of the general population, and for a cohort of MS patients newly treated with MS modifying drugs (DMDs), according to the type of medication used. This study will be done in 4 countries: France, the Netherlands, Denmark, United States. The overall results will be used with a view to a later post-marketing evaluation of cladribine.

Study status

Finalised

Research institution and networks

Institutions



The PHARMO Institute for Drug Outcomes Research (PHARMO Institute) Netherlands First published: 07/01/2022 Last updated 10/01/2022 Laboratory/Research/Testing facility ENCePP partner





Study timelines

Date when funding contract was signed

Actual: 08/09/2017

Data collection

Actual:

Start date of data analysis

Actual: 01/11/2017

Date of final study report

Planned: 31/12/2018 Actual: 10/12/2018

Sources of funding

Pharmaceutical company and other private sector

More details on funding

Merck KGaA

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 list

Study topic:

Human medicinal product

Study type:

Non-interventional study

Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

Data collection methods:

Secondary data collection

Main study objective:

To estimate the incidence of malignancies stratified by age and gender:- in the MS cohort compared to a sample of non-MS patients from the general population,- in untreated patients of the MS cohort,- in newly treated patients with disease modifying drugs (DMD) according to the DMD group, To characterize the association between DMD treatment exposure and any occurrence of malignacies.

Study Design

Non-interventional study design

Cohort

Study drug and medical condition

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

INTERFERON BETA-1A

INTERFERON BETA-1B

GLATIRAMER ACETATE

PEGINTERFERON BETA-1A

DACLIZUMAB

TERIFLUNOMIDE

FINGOLIMOD HYDROCHLORIDE

DIMETHYL FUMARATE

ALEMTUZUMAB

MITOXANTRONE

NATALIZUMAB

METHOTREXATE

CYCLOPHOSPHAMIDE

MYCOPHENOLIC ACID

AZATHIOPRINE

RITUXIMAB

Medical condition to be studied

Multiple sclerosis

Population studied

Short description of the study population

Multiple sclerosis patients

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

Immunocompromised

Estimated number of subjects

632

Study design details

Outcomes

Occurrence of any malignancies (including/excluding Non-melanoma skin cancer) :- Overall- Per individual malignancy type.

Data analysis plan

The statistical analysis will be performed using the SAS software (latest current version), following a detailed statistical analysis plan. Descriptive analyses will be conducted on the MS population, the untreated MS population and the MS population newly treated with a DMD. Crude and adjusted incidence rates of malignancy will also be calculated stratified on age and gender, in the MS, the untreated MS and the MS newly treated populations. The malignancy incidence estimated in the MS cohort will be then compared to the malignancy incidence estimated after age- and sex-standardization in a sample of non-MS patients from the general population. In the MS newly treated population, the association between DMD and risk of malignancy will be assessed with a time varying cox model.

Data management

Data sources

Data sources (types)

Administrative data (e.g. claims)

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