# An Observational Post-Authorisation Safety Study (PASS) of Patients with Chronic Opioid Use for Non-Cancer Pain and Cancer Pain who have Opioid-Induced Constipation (OIC) (Naldemedine PASS)

**First published:** 27/09/2021

**Last updated:** 23/04/2024

Study Planned

## Administrative details

**EU PAS number**

EUPAS43258

**Study ID**

47104

**DARWIN EU® study**

No

**Study countries**

United Kingdom

United States

**Study description**

The study will be conducted using validated research-acceptable healthcare data sources to investigate investigates the real-world incidence of major adverse CV outcomes and GI perforation in patients receiving chronic opioid therapy and who have newly initiated naldemedine for OIC (naldemedine cohort), or who are newly prescribed a non-OTC and non-PAMORA medication for OIC with no evidence of prior prescribing (or dispensing) of any PAMORA (reference cohort).

**Study status**

Planned

# Research institutions and networks

## Institutions

### United BioSource Corporation (UBC)

Switzerland

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Institution | Non-Pharmaceutical company | ENCePP partner

# Contact details

**Study institution contact**

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Study contact

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**Primary lead investigator**

Irene Cosmatos

Primary lead investigator

## Study timelines

**Date when funding contract was signed**

Planned: 15/03/2021

Actual: 15/03/2021

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**Study start date**

Planned: 30/12/2021

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**Data analysis start date**

Planned: 31/03/2028

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**Date of interim report, if expected**

Planned: 31/12/2022

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**Date of final study report**

Planned: 29/12/2028

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Shionogi BV

## 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:**

Assessment of risk minimisation measure implementation or effectiveness

**Main study objective:**

Assess the incidence of major adverse cardiovascular (CV) outcomes (a composite of CV death, fatal and nonfatal myocardial infarction MI, and fatal and nonfatal stroke) and gastrointestinal (GI) perforation in patients initiating naldemedine vs. non-over-the-counter (non-OTC), non-PAMORA prescription

treatment for OIC

## Study Design

**Non-interventional study design**

Cohort

## Study drug and medical condition

**Anatomical Therapeutic Chemical (ATC) code**

(A06AH05) naldemedine

naldemedine

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**Medical condition to be studied**

Constipation

## Population studied

**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)

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**Estimated number of subjects**

26.568

## Study design details

**Outcomes**

Characterise the safety profile of patients initiating naldemedine vs. non-OTC, non- PAMORA prescription treatments for OIC in subpopulations under-represented in the clinical development programmes ((with severe hepatic impairment, with a previous history of CV disease, >=75 years old, pregnant women, with severe renal impairment, taking concurrent methadone, treated >1 year. assess the incidence of less severe outcomes in patients initiating naldemedine vs. non-OTC, non-PAMORA prescribed medication for OIC: less severe CV outcomes (hypertension, angina, arrhythmia and syncope), abdominal pain, diarrhoea, vomiting, opioid withdrawal syndrome, anti-analgesic effect due to centrally-mediated opioid receptor antagonism.

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**Data analysis plan**

Poisson regression model will be used to estimate the Relative Risk (RR) and construct 95% CIs of cumulative incidence and exposure-adjusted incidence rate of MACE for each data source. Meta-analysis techniques will be used to summarise primary and secondary endpoints across databases.

# 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)**

Clinical Practice Research Datalink

**Data source(s), other**

CPRD

**Data sources (types)**

Administrative healthcare records (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