

Long term, prospective, observational cohort study evaluating the safety profile in patients with highly active relapsing multiple sclerosis (RMS) newly started on oral cladribine – CLARION

First published: 27/06/2018

Last updated: 03/07/2025

Study

Ongoing

Administrative details

EU PAS number

EUPAS24484

Study ID

47525

DARWIN EU® study

No

Study countries

☐ Australia

☐ Belgium

- ☐ Canada
 - ☐ Croatia
 - ☐ Czechia
 - ☐ Denmark
 - ☐ Finland
 - ☐ France
 - ☐ Germany
 - ☐ Italy
 - ☐ Kuwait
 - ☐ Lebanon
 - ☐ Netherlands
 - ☐ Norway
 - ☐ Sweden
 - ☐ Switzerland
 - ☐ Türkiye
 - ☐ United States
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Study description

This Post-authorisation safety study (PASS) is a multi-country, multi-center, long-term, prospective, observational study evaluating the safety in patients with highly active relapsing remitting multiple sclerosis (R(R)MS) newly initiating oral cladribine (cladribine cohort) as compared to R(R)MS patients newly initiating fingolimod (comparator cohort).

The study is projected to last for a maximum of 15 years, with a maximum 5-year recruitment period until both cohorts have reached 4,000 patients and with a follow-up of 10 years for each patient.

The study will only use pre-existing registries or databases and is based on a mixed data collection model relying on secondary use of data and additional (primary) data collection. For each patient, data collection will begin after the signature of the informed consent form – noting that patient consent applies to

countries with primary data collection will be conducted and to some countries where secondary use of data will be performed –and continue during 10 years, as each patient will be followed-up for a period of 10 years, except if s/he is lost to follow-up, or withdrawn his/her consent, or die before the end of the follow-up period.

Follow-up will continue regardless of oral cladribine or fingolimod discontinuation.

Study status

Ongoing

Research institutions and networks

Institutions

IQVIA

☐ United Kingdom

First published: 12/11/2021

Last updated: 22/04/2024

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 Bezemer

Primary lead investigator

Study timelines

Date when funding contract was signed

Planned: 05/10/2017

Actual: 05/10/2017

Study start date

Planned: 14/09/2018

Actual: 25/09/2018

Data analysis start date

Planned: 01/09/2033

Date of interim report, if expected

Planned: 30/09/2021

Actual: 30/09/2021

Date of final study report

Planned: 06/12/2034

Sources of funding

- Pharmaceutical company and other private sector

More details on funding

Merck KGaA

Study protocol

[20180626_MS700568-0002 CLARION protocol v1.0__Redacted.pdf](#)(1.52 MB)

[MS700568_0002-Protocol-CLARION-v4.0_Redacted.pdf](#)(3.13 MB)

Regulatory

Was the study required by a regulatory body?

Yes

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

EU RMP category 3 (required)

Methodological aspects

Study type

Study type list

Study topic:

Human medicinal product

Study type:

Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

Data collection methods:

Combined primary data collection and secondary use of data

Study design:

Multi-country, multi-center, long-term, prospective, observational cohort study. The study is projected to last 15 years, with an anticipated 5-year recruitment period until both cohorts have reached 4,000 patients and with a follow-up of 10 years for each patient.

Main study objective:

To further characterize and compare the risk, in terms of incidence of AESI (malignancies [all], severe infections, herpes zoster, tuberculosis, PML, other opportunistic infections, and seizures) in patients with highly active R(R)MS newly initiating oral cladribine or fingolimod.

Study Design

Non-interventional study design

Cohort

Study drug and medical condition

Name of medicine

FINGOLIMOD

MAVENCLAD

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

CLADRIBINE

FINGOLIMOD HYDROCHLORIDE

Anatomical Therapeutic Chemical (ATC) code

(L04AA40) cladribine

cladribine

(L04AE01) fingolimod

fingolimod

Medical condition to be studied

Multiple sclerosis

Relapsing multiple sclerosis

Population studied

Short description of the study population

Patients newly initiating oral cladribine or fingolimod according to the local label for MS, after the date of oral cladribine launch in the relevant country.

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)

Estimated number of subjects

8000

Study design details

Setting

The study will only use pre-existing registries or databases and is based on a mixed data collection model relying on secondary use of data and primary data collection.

Comparators

R(R)MS patients newly initiating fingolimod.

Outcomes

Primary outcomes (on cohort level):

- Number of AESIs (malignancies [all], severe infections, herpes zoster, tuberculosis, PML, other opportunistic infections, and seizures) in patients with highly active R(R)MS newly initiating oral cladribine or fingolimod.

Secondary outcomes (on cohort level):

- Number of AESIs in patients with highly active R(R)MS newly initiating oral cladribine or fingolimod by prior use of immunomodulatory/ immunosuppressive agents;
- Number of severe lymphopenia events in patients with highly active R(R)MS newly initiating oral cladribine;
- Number of patients by DMT (immunosuppressive or immunomodulatory agents) after oral cladribine treatment in patients with highly active R(R)MS newly initiating oral cladribine;
- Number of AESIs in patients with highly active R(R)MS by first subsequent use of DMT (immunomodulatory / immunosuppressive agents) after oral cladribine

treatment.

Exploratory outcomes (on cohort level):

- Number of patients switching treatment, overall and by reasons for stopping study drug in patients with highly active R(R)MS newly initiating oral cladribine or fingolimod;
 - Number and time points of severe lymphopenia events and AESI in patients with highly active R(R)MS newly initiating oral cladribine.
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Data analysis plan

Data analysis will be performed using a pooled aggregated dataset based on the data source specific aggregated datasets.

In the primary analysis, using the intention-to-treat (ITT) exposure definition, the crude and adjusted incidence rates of the different AESIs along with 95% CIs will be estimated in both oral cladribine patients and fingolimod patients. To compare the adjusted incidence of AESI between oral cladribine and fingolimod patients, the incidence rates ratios of the AESI together with the 95% CIs will be estimated by Poisson regression models adjusted for the key prognostic factors (including prior use of immunomodulatory/ immunosuppressive agents).

The impact of the prior use of DMT classified as immunomodulatory/ immunosuppressive agents on the incidence of AESI in patients initiating oral cladribine or fingolimod will be assessed by stratifying the analyses.

The impact of first subsequent DMT used on the incidence of AESI in patients after oral cladribine treatment will be assessed grouping DMT in IM or in IS.

In the secondary analyses, using the as-treated exposure definition, the crude and adjusted incidence rate of severe lymphopenia among oral cladribine patients as well as the 95% CI will be estimated using Poisson regression models. As for the primary analysis, the adjustments will be done for the key prognostic factors and results displayed by means of forest plots.

Documents

Study, other information

[20190306_ms700568-0002-clarion-protocol-v3-0_fully signed_Redacted.pdf](#)

(3.53 MB)

[DeclarationofInterests-Annex5_signed IB 11JUN2021.pdf](#)(204.76 KB)

Study publications

[The CLARION study design and status update: a long-term, registry-based study e...](#)

[The CLARION study: first report on safety findings in patients newly initiating...](#)

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.

This study has been awarded the ENCePP seal

Conflicts of interest of investigators

[Conflict\(s\) of interest of investigators.pdf](#)(782.08 KB)

Composition of steering group and observers

[MS700568-0002 CLARION protocol v1.9_Composition of Steering Committee and Observers.pdf](#)(8.37 KB)

[MS700568-0002 CLARION_Composition of Steering Committee_v4.0.pdf](#)(364.42 KB)

Signed code of conduct

[2018-0051_Declaraton compliance with Code.pdf](#)(415.96 KB)

[ENCePPCoCAAnnex3_DeclarationofcompliancewiththeENCePPCodeofConduct__signed_IB_R](#)
(361.19 KB)

Signed code of conduct checklist

[2018-0051_CoC checklist.pdf](#)(2.44 MB)

[ENCePPCoCAAnnex2_ChecklistofCodeofConduct__signed IB 11JUN2021.pdf](#)
(530.36 KB)

Signed checklist for study protocols

[2018-0051_Checklist for Study Protocol.pdf](#)(296.45 KB)

[CLARION_v4.0.Checklist for Study Protocol_Redacted.pdf](#)(212.19 KB)

Data sources

Data source(s), other

- Multiple sclerosis management system 3 Dimension, Germany
 - Observatoire Français de la Sclérose en Plaques, France
 - Italian multiple sclerosis and related disorders Registry
 - MSBase: Australia, Belgium, Canada, Croatia, Kuwait, Lebanon, the Netherlands and Turkey
 - The national healthcare and MS registers in Denmark, Finland, Norway, and Sweden
 - The Swiss MS Cohort (Switzerland)
 - US DOD
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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

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No