Surveillance Of Emicizumab-Treated Patients: An Analysis of the EUHASS Pharmacovigilance Registry (Emicizumab Pharmacovigilance: EUHASS registry)

First published: 23/03/2018 Last updated: 12/06/2025





Administrative details

EU PAS number	
EUPAS23177	
Study ID	
49016	
DARWIN EU® study	
No	
Study countries	
Austria	
Belgium	
Bulgaria	

Croatia
Cyprus
Czechia
Denmark
Finland
France
Germany
Greece
Hungary
Ireland
Italy
Latvia
Lithuania
Malta
Netherlands
Norway
Poland
Portugal
Romania
Russian Federation
Slovakia
Slovenia
Spain
Sweden
Switzerland
Türkiye
United Kingdom

Study description

This is a cohort-surveillance, secondary data use, non-interventional, post authorization safety study (PASS) based on data collected by the European Haemophilia Safety Surveillance System (EUHASS) from participating centers. The main goal of this study is to assess the incidence of thromboembolism (TE), thrombotic microangiopathy (TMA), and anaphylaxis under real-world conditions in patients exposed to emicizumab with or without coagulation factor products. Secondary objectives are: to estimate the incidence of TE and TMA in patients exposed to emicizumab alone and concomitantly with each of the following drugs: activated prothrombin complex concentrate (aPCC), recombinant activated factor VII (rFVIIa), and factor VIII (FVIII) product, to describe individual cases of TE and TMA identified in EUHASS, to summarize the frequency of other adverse events collected by EUHASS in patients exposed to emicizumab, and to describe individual cases of "unexpected poor efficacy" reported to EUHASS based on the available information.

Study status

Ongoing

Research institutions and networks

Institutions

F. Hoffmann-La Roche

First published: 01/02/2024

Last updated: 01/02/2024

Institution

European Haemophilia Safety Surveillance System (EUHASS)

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Last updated: 01/02/2024

Institution

Networks

EUHASS

Contact details

Study institution contact

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Study contact

 $global.clinical_trial_registry@roche.com$

Primary lead investigator

Letizia Polito

Primary lead investigator

Study timelines

Date when funding contract was signed

Actual: 14/02/2018

Study start date

Planned: 01/01/2019 Actual: 01/01/2019

Data analysis start date

Planned: 28/02/2026

Date of final study report

Planned: 30/06/2026

Sources of funding

• Pharmaceutical company and other private sector

More details on funding

F. Hoffmann-La Roche, Ltd.

Study protocol

Prot GO40162 Hemlibra v1_Redacted.pdf (983.2 KB)

GO40162- Protocol v4_Redacted.pdf (1.36 MB)

Regulatory

Was the study required by a regulatory body?

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

EU RMP category 3 (required)

Other study registration identification numbers and links

GO40162

Methodological aspects

Study type

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 Safety study (incl. comparative)

Data collection methods:

Secondary use of data

Main study objective:

The primary objective for this study is to estimate the incidence of TE, TMA, and anaphylaxis under real-world conditions in patients exposed to emicizumab, with or without coagulation factor products.

Study Design

Non-interventional study design

Cohort

Other

Non-interventional study design, other

Cohort surveillance

Study drug and medical condition

Medicinal product name

HEMLIBRA

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

EMICIZUMAB

Anatomical Therapeutic Chemical (ATC) code

(B02BX06) emicizumab emicizumab

Medical condition to be studied

Haemophilia A with anti factor VIII
Haemophilia A without inhibitors

Population studied

Short description of the study population

The study population will consist of patients with Hemophilia A treated with emicizumab at centers participating in the EUHASS registry. Depending on the local approval/reimbursement decisions in the participating countries, the study population may include patients with any level of disease severity without FVIII inhibitors.

Age groups

- Paediatric Population (< 18 years)
 - Neonate
 - Preterm newborn infants (0 27 days)
 - Term newborn infants (0 27 days)
 - Infants and toddlers (28 days 23 months)
 - Children (2 to < 12 years)
 - Adolescents (12 to < 18 years)
- Adult and elderly population (≥18 years)
 - Adults (18 to < 65 years)
 - Adults (18 to < 46 years)
 - Adults (46 to < 65 years)
 - Elderly (≥ 65 years)
 - Adults (65 to < 75 years)
 - Adults (75 to < 85 years)
 - Adults (85 years and over)

Special population of interest

Hepatic impaired
Immunocompromised
Pregnant women

Estimated number of subjects

680

Study design details

Data analysis plan

Descriptive statistics on endpoints, including number and percentage of patients, will be provided. Continuous variables will be summarized by mean, median, minimum, maximum, and interquartile range (IQR).

Categorical variables will be summarized by counts, percentages, and corresponding 95% confidence intervals (CIs). Data generated within the first 7 calendar years post-marketing authorization throughout the European Union (2018-2024) will be analyzed annually.

Proportions of each adverse event, along with corresponding 95% CIs, will be calculated annually for all patients exposed to emicizumab. In addition, proportions of TE and TMA will be calculated annually for patients exposed to emicizumab and each of the following agents: aPCC, rFVII, and FVIII.

Documents

Study report

Interim CSR-3_GO40162-Annual Report_01Jul2022_Synopsis_Redacted.pdf (527.26 KB)

Interim CSR GO40162 NI-

PASS_Annual_Report_030Jun2020_Synopsis_Redacted.pdf (1.15 MB)
Interim_CSR_2-GO40162_Annual Report_23Jun2021_Synopsis_Redacted.pdf
(443.45 KB)

Interim CSR-4, GO40162-Annual Report 2023_Synopsis_Redacted.pdf (1.48 MB)

Interim CSR-5, GO40162-Annual Report 2024_Synopsis_Redacted.pdf (384.64 KB)

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), other

EUHASS - Blood disorders

Data sources (types)

Other

Data sources (types), other

Spontaneous reporting system, prospective patient-based data collection

Use of a Common Data Model (CDM)

CDM mapping

No

Data quality specifications

Unknown Check completeness Unknown

Check stability

Check conformance

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No