

# Use of Selincro® and impact on usual practice (USE-PACT)

**First published:** 15/12/2015

**Last updated:** 23/07/2024

Study

Finalised

## Administrative details

### EU PAS number

EUPAS11854

### Study ID

49889

### DARWIN EU® study

No

### Study countries

☐ France

### Study description

Selincro® (nalmefene) has obtained European market authorisation “for the reduction of alcohol consumption in adult patients with alcohol dependence who have a high drinking risk level, without physical withdrawal symptoms and

who do not require immediate detoxification”. The French health authorities have requested an evaluation on real-life conditions of Selincro® use and its impact on morbidity. In response, a French prospective cohort including 1000 patients initiating Selincro® followed during 1 year using a random sample of general practitioners, psychiatrists, and physicians in specialised structures has been developed. The main objective is to evaluate the evolution of alcohol consumption at 1 year in patients initiating Selincro®. The secondaries are to describe prescribers characteristics, initial demographic, clinical, biological characteristics of patients, patient support, notably psychosocial, at start and during treatment, characteristics of Selincro® during the study period, the frequency of adverse effects during Selincro® treatment. Each participating physician should, during 4-month period, include in cohort all patients for whom he/she initiates Selincro® and fulfilling the eligibility criteria, and record in a non-inclusion register patients for whom Selincro® is initiated and not included in cohort. The physician will follow the patients with a clinical evaluation at 1, 3, 6, 9 and 12 months performed during usual follow-up consultations. In parallel, each patient will complete a self-administered questionnaire at the same points. Patients declared as lost-to-follow-up and, failing that, his/her general practitioner will be contacted in order to fill-out a “last known status questionnaire”. For patients who could not be reached, vital status will be investigated using the INSEE/INSERM centralised procedure defined by decree. The representativeness of the cohort will be evaluated by an analysis in a representative French health insurance database.

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## **Study status**

Finalised

## **Research institutions and networks**

### **Institutions**

# Bordeaux PharmacoEpi, University of Bordeaux

☐ France

**First published:** 07/02/2023

**Last updated:** 08/02/2023

**Institution**

**Educational Institution**

**Hospital/Clinic/Other health care facility**

**Not-for-profit**

**ENCePP partner**

Multiple centres: 180 centres are involved in the study

## Contact details

### Study institution contact

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**Study contact**

[patrick.blin@u-bordeaux.fr](mailto:patrick.blin@u-bordeaux.fr)

### Primary lead investigator

Nicholas Moore

**Primary lead investigator**

## Study timelines

**Date when funding contract was signed**

Planned: 01/07/2015

Actual: 14/10/2015

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**Study start date**

Planned: 01/09/2015

Actual: 23/02/2016

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**Date of final study report**

Planned: 01/12/2017

Actual: 10/07/2019

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Lundbeck France

## Regulatory

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

Yes

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

Not applicable

## Methodological aspects

### Study type

### Study type list

**Study topic:**

Disease /health condition

Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Drug utilisation

Effectiveness study (incl. comparative)

**Data collection methods:**

Primary data collection

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**Main study objective:**

To evaluate the evolution of alcohol consumption at one year in patients initiating Selincro® in usual practice.

## Study Design

**Non-interventional study design**

Cohort

## Study drug and medical condition

**Anatomical Therapeutic Chemical (ATC) code**

(N07BB05) nalmefene

nalmefene

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## **Medical condition to be studied**

Alcohol abuse

## Population studied

### **Short description of the study population**

Adult patients with alcohol dependence who have a high drinking risk level, without physical withdrawal symptoms and who do not require immediate detoxification initiated treatment with Selincro® (nalmefene).

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### **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**

1000

## Study design details

### **Outcomes**

The evolution of alcohol consumption at 1 year will be defined as the relative evolution of Total Alcohol Consumption (TAC) between inclusion and end of follow-up at 1 year. The TAC (g/day) is equal to the number of standard drinks consumed in previous week by patient multiplied by a factor of ten (one standard drink corresponding to about 10g of alcohol), then divided by 7 (days number of week). At the different times of follow-up (1, 3, 6, 9 and 12 months)

the evolution of alcohol consumption will be evaluated with respect to inclusion day in terms of: relative and absolute evolution of TAC and Heavy Drinking Days (HDD, number of days with a high consumption of alcohol), at least 70% reduction in TAC, change in the alcohol consumption risk level according to the WHO.

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### **Data analysis plan**

Statistical analysis will be performed after database lock using SAS® software. The representativeness of the cohort in terms of patient characteristics will be evaluated by an analysis in a representative French health insurance database, the EGB (Echantillon Généraliste de Bénéficiaires). Statistical analysis will provide a description of : the total population, and according to prescriber specialty, and previous medicinal treatment, the treated patient characteristics, the evolution in alcohol consumption, the follow-up, Selincro® treatment, and adverse events.

## Data management

### Data sources

#### **Data sources (types)**

[Other](#)

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#### **Data sources (types), other**

Prospective patient-based data collection

## Use of a Common Data Model (CDM)

**CDM mapping**

No

Data quality specifications

**Check conformance**

Unknown

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**Check completeness**

Unknown

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**Check stability**

Unknown

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**Check logical consistency**

Unknown

Data characterisation

**Data characterisation conducted**

No