

# Drug utilisation study of Eliglustat for the treatment of Gaucher Disease Type 1 in Europe using electronic healthcare records (ELIGLC06913)

**First published:** 14/04/2020

**Last updated:** 26/04/2024

Study

Planned

## Administrative details

### **PURI**

<https://redirect.ema.europa.eu/resource/50547>

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### **EU PAS number**

EUPAS34611

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### **Study ID**

50547

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### **DARWIN EU® study**

No

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## Study countries

Belgium

France

Germany

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## Study description

Eliglustat (Cerdelga®) is an oral treatment indicated for the long-term treatment of Gaucher Disease Type 1 (GD1). This treatment was approved by the EMA on 19/01/2015. Today, the EMA requested a drug utilisation study (DUS) on Eliglustat and its concomitant treatments in Europe. Eliglustat is metabolised primarily by CYP2D6, and to a lesser extent by CYP3A. The concomitant use of drugs affecting CYP2D6 or CYP3A4 activity may alter Eliglustat plasma concentrations. Inversely, Eliglustat may alter the activity of these substances. Therefore, it is important that the use of inhibitors of CYP2D6 and/or CYP3A, strong CYP3A inducers, P-gp and CYP2D6 substrates as concomitant medications among patients treated with Eliglustat be carefully monitored. Moreover, a pilot study conducted in Lombardia (Italy) in 2015 showed that a lot of patients with GD were treated with several concomitant medications such as inhibitors of CYP2D6 and of CYP3A. Consequently, this DUS would inform on the usage patterns prevailing in Europe and evaluate the effectiveness of risk minimisation measures that have been put in place. The aim of the DUS is to estimate the dose and duration of Eliglustat therapy as well as the proportion, type, and duration of past and concomitant medication use in GD1 patients treated with Eliglustat. The concomitant medications of interest are strong and moderate inhibitors of CYP2D6 and/or CYP3A inhibitors, strong CYP3A inducers, P-gp substrates and CYP2D6 substrates. Also, the DUS will describe the healthcare service pattern for the prescriptions of concomitant medications in patients treated with Eliglustat. The DUS is planned in five European countries (Belgium, France, Denmark, Germany and UK) using existing health databases. In each country, the period of study will be from one

year before the launching of Eliglustat to Q3 2022. The final report to EMA is planned in Q4 2024.

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## Study status

Planned

## Research institutions and networks

### Institutions

#### Parexel International

United States

**First published:** 19/10/2010

**Last updated:** 10/12/2024

**Institution**

**Non-Pharmaceutical company**

**ENCePP partner**

#### International Prevention Research Institute (IPRI)

France

**First published:** 19/03/2010

**Last updated:** 05/04/2012

**Institution**

**EU Institution/Body/Agency**

**ENCePP partner**

### Contact details

### **Study institution contact**

Katja M Hakkarainen

Study contact

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### **Primary lead investigator**

Katja M Hakkarainen

Primary lead investigator

## Study timelines

### **Date when funding contract was signed**

Planned: 01/08/2013

Actual: 01/08/2013

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### **Study start date**

Planned: 03/10/2022

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### **Data analysis start date**

Planned: 01/04/2024

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### **Date of final study report**

Planned: 27/11/2024

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Sanofi-Genzyme

## 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)

## Other study registration identification numbers and links

EMA/H/C/003724

## Methodological aspects

### Study type

#### Study type list

##### **Study type:**

Non-interventional study

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##### **Scope of the study:**

Drug utilisation

**Main study objective:**

The main objective of the DUS is to estimate the dose and duration of Eliglustat therapy as well as the proportion, type, and duration of past and concomitant medication use in GD1 patients treated with Eliglustat. The concomitant medications of interest are strong and moderate inhibitors of CYP2D6 and/or CYP3A inhibitors, strong CYP3A inducers, P-gp substrates and CYP2D6 substrates.

## Study drug and medical condition

**Name of medicine**

CERDELGA

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**Medical condition to be studied**

Gaucher's disease type I

## 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**

100

## Study design details

## Data analysis plan

Only descriptive analyses will be performed: - Descriptive analysis of Eliglustat therapy in terms of duration and dose. - Descriptive analysis of past (one year prior to Eliglustat initiation) and concomitant medication use in terms of proportion, type, and duration. The treatments of interest will be strong and moderate inhibitors of CYP2D6 and/or CYP3A, strong CYP3A inducers, P-gp substrates and CYP2D6 substrates. The proportions will be computed taking into account all treatments of interest and also by type of treatments and by duration. Proportions for the group CYP inhibitors will also be computed. - Descriptive analysis of the health care service pattern (i.e. prescriber's specialty and types of patient visit) for the use of concomitant medications in patients treated with Eliglustat. All these analyses will be conducted by country. Stratification analyses based on sex and age will be performed if the number of GD1 patients taking Eliglustat allows it.

## Data management

### Data sources

#### Data sources (types)

[Administrative healthcare records \(e.g., claims\)](#)

[Disease registry](#)

[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