# DARWIN EU® DUS of Antibiotics in the 'Watch' category of the WHO AWaRe classification of antibiotics for evaluation and monitoring of use

First published: 03/02/2023 Last updated: 25/09/2024





## Administrative details

EU PAS number
EUPAS103381
Study ID
Study 10
103382
DARWIN EU® study
Yes
Study countries
France
Germany
Netherlands

Spain	
United	Kingdom

## **Study description**

This drug utilisation study aims to characterise the incidence of prescription of the 141 antibiotics in the 'Watch' list, including indication and treatment duration, for the period 2012-2021, stratified by year and country. For this study, databases from 5 European countries will be used namely IPCI (NI), CPRD Gold (UK), SIDIAP (Spain), IQVIA DA (Germany), IMASIS (Spain) and CHUBX (France). Specific objectives of this study are the following: (i) To investigate the incidence and prevalence of use of antibiotics (from the WHO Watch list) stratified by calendar year, age, sex and country/database during the study period 2012-2021. (ii) To explore duration of antibiotic use as well as indication for antibiotic prescribing/dispensing.

## **Study status**

Finalised

## Research institutions and networks

## **Institutions**

**Last updated:** 02/05/2024

Department of Medical Informatics - Health Data
Science, Erasmus Medical Center (ErasmusMC)
☐ Netherlands
First published: 03/11/2022

IQVIA NL, Real-World-Evidence
Netherlands
First published: 25/11/2022
<b>Last updated:</b> 21/03/2025
Institution Other ENCePP partner



PSMAR Spain, CHUBX France, University of Oxford UK

**Networks** 

Data Analysis and Real World Interrogation Network
(DARWIN EU®)
☐ Belgium
☐ Croatia
☐ Denmark
Estonia
Finland
France
Germany
☐ Greece
Hungary
Italy
Netherlands
Norway
Portugal
Spain
Sweden
United Kingdom
First published: 01/02/2024
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Network

# Contact details

Study institution contact

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Study contact

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## **Primary lead investigator**

## Katia Verhamme

**Primary lead investigator** 

# Study timelines

## Date when funding contract was signed

Planned: 03/11/2022

Actual: 03/11/2022

## Study start date

Planned: 01/12/2022

Actual: 01/12/2021

## Data analysis start date

Planned: 02/01/2023

Actual: 02/01/2023

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

Planned: 06/02/2023

Actual: 15/02/2023

# Sources of funding

# Study protocol

D2.2.3\_Darwin\_EU\_Study\_Protocol\_C1-003\_v2.2.pdf (970.76 KB)

# Regulatory

Was the study required by a regulatory body?

Yes

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

Not applicable

# Methodological aspects

Study type

Study type list

**Study topic:** 

Human medicinal product

**Study type:** 

Non-interventional study

Scope of the study:

Drug utilisation

#### **Data collection methods:**

Secondary use of data

## Main study objective:

To investigate the incidence and prevalence of use of antibiotics (from the WHO Watch list) stratified by calendar year, age, sex and country/database during the study period 2012-2021. To explore duration of antibiotic use as well as indication for antibiotic prescribing/dispensing.

# Study Design

#### Non-interventional study design

Cohort

Other

#### Non-interventional study design, other

Retrospective study

## Study drug and medical condition

## **Anatomical Therapeutic Chemical (ATC) code**

(J01A) TETRACYCLINES

**TETRACYCLINES** 

(J01C) BETA-LACTAM ANTIBACTERIALS, PENICILLINS

BETA-LACTAM ANTIBACTERIALS, PENICILLINS

(J01DD) Third-generation cephalosporins

Third-generation cephalosporins

(J01F) MACROLIDES, LINCOSAMIDES AND STREPTOGRAMINS
MACROLIDES, LINCOSAMIDES AND STREPTOGRAMINS
(J01G) AMINOGLYCOSIDE ANTIBACTERIALS
AMINOGLYCOSIDE ANTIBACTERIALS
(J01MB) Other quinolones
Other quinolones
(J01XX) Other antibacterials
Other antibacterials

## Population studied

#### Short description of the study population

The study focused on population-level drug utilisation of antibiotics and patient-level drug utilisation analysis.

The population-level analysis includes individuals with 365 days of database history between 1 January 2012 and 31 December 2021, examining the prevalence and incidence of antibiotic use.

The patient-level analysis includes new users of antibiotics who have not used the antibiotic for 30 days between 1 January 2012 and 31 December 2021, with at least 365 days of visibility prior to their first antibiotic prescription/dispensing.

#### Age groups

Term newborn infants (0 – 27 days)

Infants and toddlers (28 days - 23 months)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

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**

30000000

## Study design details

## Data analysis plan

Population-level antibiotic use: Annual period prevalence of antibiotic use and annual incidence rates per 100,000 person years. Patient-level antibiotic use: Large-scale patient-level characterisation will be conducted. Index date will be the date of the first prescription of the specific antibiotic for each person. Frequency of indication at index date will be assessed. Cumulative treatment duration will be estimated and the minimum, p25, median, p75, and maximum will be provided. For all analyses a minimum cell count of 5 will be used when reporting results, with any smaller counts obscured.

## **Documents**

#### Study results

StudyReport C1-003 version3.1.pdf (4.2 MB)

#### **Study report**

Appendix StudyReport C1-003 v3.1.pdf (1.14 MB)

## 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

The Information System for Research in Primary Care (SIDIAP)

Integrated Primary Care Information (IPCI)

IQVIA Disease Analyzer Germany

Institut Municipal d'Assistència Sanitària Information System / Hospital del Mar / PSMAR / (Hospital del Mar Information System)

## Data source(s), other

**CHUBX France** 

#### Data sources (types)

Electronic healthcare records (EHR)

## Use of a Common Data Model (CDM)

#### **CDM** mapping

Yes

#### **CDM Mappings**

CDM name	
ОМОР	
CDM website	
https://www.ohdsi.org/Data-standardization/	
Theps.//www.ondshorg/Bata Standardization/	
Data quality specifications	
Check conformance	
Unknown	
Check completeness	
Unknown	
Check stability	
Unknown	
Check logical consistency	
Unknown	
Data characterisation	
Data characterisation conducted	
No	