

# Effectiveness of antiresorptives in preventing hip fractures in older women ( $\geq 75$ years) with osteoporosis: nested case-control study cohort (BiHip)

**First published:** 20/03/2023

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Study

Planned

## Administrative details

### EU PAS number

EUPAS104033

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### Study ID

104775

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### DARWIN EU® study

No

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### Study countries

☐ Spain

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## Study description

**JUSTIFICATION:** When antiresorptive came on the market, they had demonstrated efficacy in improving bone density. However, in most of the fundamental trials the results showed no clear potential benefit in reducing the risk of hip fracture. Several meta-analyses of antiresorptives have been carried out, reporting a statistically significant but clinically questionable benefit.

**HYPOTHESIS:** The analysis of population cohort data has become a tool for assessing the real-life effectiveness of certain drugs. Antiresorptives may have a limited impact on preventing hip fractures in older osteoporotic women.

**GENERAL OBJECTIVE:** To determine the real-life effectiveness of antiresorptive treatment in preventing hip fractures in older women ( $\geq 75$  years) with osteoporosis.

**SPECIFIC OBJECTIVES:** Analyze the risk of hip fracture in older women ( $\geq 75$  years) with osteoporosis exposed to each group of collected antiresorptive versus those who do not have it. Analyze the risk of hip fracture in older women with osteoporosis exposed to antiresorptives versus those who do not have it, depending on when they receive treatment and its duration. The study will be nested case-control within a BIFAP cohort with the following inclusion criteria: Women aged  $\geq 75$  years. Diagnosis of osteoporosis Exclusion criteria History of cancer (excluding basal cell skin) Paget's disease, rheumatoid arthritis, polymyalgia rheumatica or ankylosing spondylitis Patients taking oral corticosteroids for more than 3 months History of high impact trauma hip fracture Event: hip fracture Main exposure: antiresorptives Adjustment variables: confounding factors for osteoporosis

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## Study status

Planned

## Contact details

**Study institution contact**

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Study contact

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**Primary lead investigator**

Cedeño Veloz Bernardo Abel

Primary lead investigator

## Study timelines

**Date when funding contract was signed**

Actual: 16/03/2023

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**Study start date**

Planned: 10/05/2023

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**Date of final study report**

Planned: 30/06/2023

## Sources of funding

- EU institutional research programme
- Non-for-profit organisation (e.g. charity)
- Other

- Pharmaceutical company and other private sector

## More details on funding

None, None, Osasunbidea, None, None

## Study protocol

[Protocolo del estudio V3 27-02-23.pdf](#)(332.69 KB)

## Regulatory

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

No

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

Not applicable

## Other study registration identification numbers and links

Spanish Clinical Trials Registry ID: 0044-2023-OBS

<https://reec.aemps.es/reec/observacional/0044-2023-OBS>

## Methodological aspects

### Study type

### Study type list

**Study type:**

Non-interventional study

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**Scope of the study:**

Effectiveness study (incl. comparative)

**Main study objective:**

GENERAL OBJECTIVE: To determine the real-life effectiveness of antiresorptive treatment in preventing hip fractures in older women (> 75 years) with osteoporosis.

## Study Design

**Non-interventional study design**

Case-control

Cohort

## Study drug and medical condition

**Anatomical Therapeutic Chemical (ATC) code**

(M05BA) Bisphosphonates

Bisphosphonates

(M05BA01) etidronic acid

etidronic acid

(M05BA02) clodronic acid

clodronic acid

(M05BA03) pamidronic acid

pamidronic acid

(M05BA04) alendronic acid

alendronic acid

(M05BA05) tiludronic acid

tiludronic acid

(M05BA06) ibandronic acid

ibandronic acid

(M05BA07) risedronic acid

risedronic acid

(M05BA08) zoledronic acid

zoledronic acid

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### **Medical condition to be studied**

Senile osteoporosis

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### **Additional medical condition(s)**

Substance abuse, Anxiety, Arrhythmia, Asthma, Ischemic heart disease, Depression, Type II diabetes mellitus, Celiac disease, Chronic obstructive pulmonary disease, Chronic kidney disease, Death, Hypertension, Hyperthyroidism, Hypothyroidism Stroke, Heart failure, Malignant neoplasm, Parkinsonism, Smoking Major, neurocognitive disorder

## Population studied

### **Age groups**

Adults (75 to < 85 years)

Adults (85 years and over)

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### **Estimated number of subjects**

700000

## Study design details

## Outcomes

Hip fracture, Tibia and fibula fracture Nasal bone fracture Wrist fracture  
Vertebral fracture Humerus fracture

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## Data analysis plan

We will use conditional logistic regression to estimate adjusted ORs and 95% CIs for the association between antiresorptive exposure and hip fractures. Antiresorptive use will be categorized as exposed vs non-exposed. In separate analyses, current use (current users) versus recent use (recent users) and past use (past users) will also be evaluated. Likewise, continuous and cumulative duration will be evaluated and results analyzed to identify a trend. The established significance level will be  $p=0.05$ . In the analysis by duration of exposure, the reference group will be never-users of antiresorptives. If a protective effect is found, an analysis of response duration (time-to-hip-fracture analysis) using log-rank test and Cox regression will be carried out.

## Data management

### Data sources

#### Data source(s)

BIFAP - Base de Datos para la Investigación Farmacoepidemiológica en el Ámbito Público (Pharmacoepidemiological Research Database for Public Health Systems)

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#### Data sources (types)

[Disease registry](#)

Electronic healthcare records (EHR)

Other

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**Data sources (types), other**

Prospective patient-based data collection, Prescription event monitoring

## 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

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## Data characterisation

**Data characterisation conducted**

No