

Use cases for development, optimisation and implementation of artificial intelligence methods for real world data analyses in regulatory decision-making and health technology assessment along the product lifecycle (Real4Reg)

First published: 29/06/2023

Last updated: 23/04/2024

Study

Ongoing

Administrative details

PURI

<https://redirect.ema.europa.eu/resource/105545>

EU PAS number

EUPAS105544

Study ID

105545

DARWIN EU® study

No

Study countries

Denmark

Finland

Germany

Portugal

Study description

The use of real world data (RWD) is established in regulatory processes such as safety monitoring, but evidentiary value for further use cases, especially in the pre-authorisation and evaluation phase of medicinal products, is rudimentary. Also, the use of RWD in post-authorisation steps is constrained by data variability and by challenges in analysing data from different settings and sources. Moreover, there are emerging opportunities in the use of artificial intelligence (AI), but there is a lack of knowledge on its appropriate application to heterogeneous RWD sources to increase evidentiary value in the regulatory decision-making and health technology assessment (HTA) context. Thus, the development of new and optimised AI-supported methodologies for RWD analyses is essential. In addition, the four use cases to be investigated in this study contain phenotype-specific open questions of high regulatory interest.

Study status

Ongoing

Research institution and networks

Institutions

Pharmacoepidemiology Research, Federal Institute for Drugs and Medical Devices (BfArM)

Germany

First published: 02/06/2023

Last updated

23/04/2024

Institution

Regulatory Authority

ENCEPP partner

School of Pharmacy/Kuopio Research Center of Geriatric Care, University of Eastern Finland (Gerho)

Finland

First published: 20/12/2017

Last updated

13/12/2018

Institution

Educational Institution

ENCEPP partner

Aarhus University & Aarhus University Hospital DEPARTMENT OF CLINICAL EPIDEMIOLOGY

Denmark

First published: 20/07/2021

Last updated

02/04/2024

Institution

Educational Institution

ENCePP partner

Data Analytic Center (DAC), Danish Medicine Agency

Denmark

First published: 17/04/2023

Last updated

17/04/2023

Institution

EU Institution/Body/Agency

ENCePP partner

National Authority of Medicines and Health Products, I.P. (Infarmed) Lisboa, Portugal;
Fraunhofer Society, Fraunhofer Institute for Algorithms and Scientific Computing (SCAI), Research Group AI and Data Science Sankt Augustin, Germany;
IT Centre for Science (CSC) Espoo, Finland;
German Centre for Neurodegenerative Diseases (DZNE), Research Group Pharmacoepidemiology Bonn, Germany;
European Organization for Professionals and Patients with ALS (EUpALS) Leuven, Belgium;
European Institute of Women's Health (EIWH) Dublin, Ireland.

Networks

Real4Reg

Belgium

Denmark

Finland

Germany

Ireland

Portugal

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Network

Contact details

Study institution contact

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Study timelines

Date when funding contract was signed

Planned:

05/11/2022

Actual:

11/11/2022

Study start date

Planned:

01/09/2023

Actual:

11/09/2023

Date of final study report

Planned:

31/12/2026

Sources of funding

- Other

More details on funding

HORIZON Europe (European Union, European Commission)

Study protocol

[Study_protocols_Real4Reg_2023_June_29.pdf](#)(1.35 MB)

[Study_protocols_Real4Reg_2024_April_11.pdf](#)(1.48 MB)

Regulatory

Was the study required by a regulatory body?

No

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

Study type:

Non-interventional study

Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

Disease epidemiology

Drug utilisation

Effectiveness study (incl. comparative)

Method development or testing

Safety study (incl. comparative)

Data collection methods:

Secondary data collection

Study design:

See study protocols.

Main study objective:

The study develops tools & technologies for the effective analyses of real-world data (RWD) in regulatory decision-making & HTA based on four highly relevant uses cases along the pre- & post-authorisation steps of the product life cycle. Portugal, Finland, Denmark, & Germany provide routine care RWD.

Study Design

Non-interventional study design

Cohort

Other

Non-interventional study design, other

External control arm study

Study drug and medical condition

Anatomical Therapeutic Chemical (ATC) code

(A10BH) Dipeptidyl peptidase 4 (DPP-4) inhibitors

(A10BK) Sodium-glucose co-transporter 2 (SGLT2) inhibitors

(J01) ANTIBACTERIALS FOR SYSTEMIC USE

(J01MA) Fluoroquinolones

Medical condition to be studied

Type 2 diabetes mellitus

Amyotrophic lateral sclerosis

Breast neoplasm

Additional medical condition(s)

Cardiac arrhythmias, Peripheral neuropathies, Drug-induced liver injury, Cardiac failure, Sudden cardiac death

Population studied

Short description of the study population

The source population come from health registers for the entire adult population (?18 years) in Denmark, Finland, and Portugal and from claims records of public health insurance providers in Germany (~90% of population). Populations studied vary by use case, see settings below.

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)

Estimated number of subjects

88000000

Study design details

Setting

Adult population (?18 years unless otherwise specified).

Inpatient and outpatient data is used.

Setting varies by use case, in short:

1&2: a) persons diagnosed with incident primary breast cancer and external controls,

b) persons diagnosed with incident ALS and external controls,

3. persons with prescriptions of oral antibiotics,

4. persons with prescriptions of noninsulinic antidiabetes drugs (?40 years).

Study period:

for use cases 1&2: 2000/2005/2008*-2021;

for use case 3: 2010-2021*;

for use case 4: 2012-2021*.

*depending on data availability

Comparators

Use case 3: fluoroquinolones compared to active comparators

Use case 4: SGLT-2 inhibitors compared to active comparators

Outcomes

For details, see protocols.

Use case 1&2: incidence, prevalence, survival time, mortality; further outcomes see protocol;

Use case 3: number of prescriptions, trends in user characteristics, sudden cardiac death or cardiac arrhythmia, sudden cardiac death, aortic aneurysm and dissection, acute toxic liver disease, polyneuropathy;

Use case 4: proportion of SGLT-2 inhibitor prescription/non-insulin antidiabetic prescriptions, change in user characteristics, hospital admission, heart failure diagnosis, mortality.

Data analysis plan

* Define a simplified common data model based on OMOP to harmonise metadata

Use Case (UC) 1

* Determine the population as well as rates of occurrence and outcome using the STROBE standards (Strengthening the Reporting of Observational studies in Epidemiology).

* Examine heterogeneity within the dataset, including coding practices in the four partners, representativeness etc.

UC 2

* Develop a workflow to subset and display RWD by user definable inclusion/exclusion criteria; workflow allows to display summary statistics and disease trajectories of selected patients.

* Construct synthetic and external control arms for RWD ALS patients (based on data from the ProACT database: <https://ncr1.partners.org/ProACT>) by implementing different propensity score matching algorithms from the literature

* Explore, whether one of the RCTs contained in ProACT can be emulated using RWD, depending on availability of treatments in data

UCs 3 and 4

* Drug utilisation study: description of outcomes:

UC 3: proportion of fluorquinolone (FQ) and comparison antibiotics prescriptions out of all oral antibiotic prescriptions, change in user characteristics;

UC 4: proportion of SGLT-2 inhibitors users and DPP-4 inhibitors users out of all non-insulin antidiabetic drug users, change in user characteristics

* Adverse drug reaction study concerning FQ use (UC 3) and effectiveness analysis concerning SGLT-2 inhibitor use (UC4):

- Use active comparator new user (ACNU) design,
- Derive propensity scores for ACNU design derived from pre-specified covariates using logistic regression,
- Fit IPT-weighted Cox regression (if assumptions are met) for the entire follow-up
- Outcomes:
 - UC3: Sudden cardiac death and cardiac arrhythmia, aortic aneurysm and dissection, acute toxic liver diseases (drug-induced liver injury), polyneuropathy (drug-induced peripheral polyneuropathy)
 - UC4: heart failure diagnosis, all-cause and cause-specific hospital admissions and mortality.

Data management

ENCePP Seal

This study has been awarded the ENCePP seal



Conflicts of interest of investigators

[Declarations_of_Interest_Real4Reg.pdf](#) (3 MB)

Composition of steering group and observers

[WP leaders R4R.pdf](#) (99.94 KB)

Signed code of conduct

[ENCePPCoCAnnex3_DeclarationofcompliancewiththeENCePPCodeofConduct_Real4Reg.pdf](#)
(411.29 KB)

Signed code of conduct checklist

[Checklist_Code_of_Conduct_Real4Reg.pdf](#)(2.64 MB)

Signed checklist for study protocols

[Checklist_study_protocols_Real4Reg_spring_2024.pdf](#)(1.52 MB)

Data sources

Data source(s)

Danish registries (access/analysis)

Data source(s), other

- Registo Oncológico Nacional (RON) - Portugal;
 - Individual-level data collected from the Finnish national healthcare, mortality and population registers and censuses - Finland;
 - Health Data Lab - Germany.
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Data sources (types)

[Administrative data \(e.g. claims\)](#)

[Disease registry](#)

[Drug dispensing/prescription data](#)

[Electronic healthcare records \(EHR\)](#)

[Population registry](#)

Use of a Common Data Model (CDM)

CDM mapping

Yes

CDM Mappings**CDM name**

OMOP

CDM website

<https://www.ohdsi.org/Data-standardization/>

Data quality specifications

Check conformance

Unknown

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

Unknown