Observational, multicentre, prospective, real-world post-authorization safety study describing the achievement of nintedanibassociated DIArrhoea control after 12 weeks of follow-up in patients with idiopathic puLmonary FIBrosis (IPF) and progressive pulmonary fibrosis (other than IPF) in Spain: the DIALFIB study

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## Administrative details

### PURI

https://redirect.ema.europa.eu/resource/106525

### **EU PAS number**

EUPAS106524

### Study ID

106525

#### DARWIN EU® study

No

#### **Study countries**

Spain

### **Study description**

This study aims to describe the proportion of patients that achieve diarrhoea control after 12 weeks of follow-up among patients with IPF and other PPF having a first episode of nintedanib-associated diarrhoea in real world settings in Spain. It is expected that the study findings would suggest potential alternatives to address this problem and guide future studies aiming to prove the effectiveness of anti-diarrhoea treatments in this population.

### Study status

Planned

## Research institutions and networks

### Institutions

Clinical Pharmacology Department, Area del Medicament, Hospital Clínic de Barcelona

Spain

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## **Contact details**

Study institution contact

Mireia Canals

Study contact

mireia.canals@boehringer-ingelheim.com

Primary lead investigator Sellarès Jacobo

Primary lead investigator

# Study timelines

**Date when funding contract was signed** Planned: 05/06/2023 Actual: 05/06/2023

Study start date Planned: 30/04/2024

Data analysis start date Planned: 30/05/2025

Date of final study report

Planned: 28/11/2025

## Sources of funding

• Pharmaceutical company and other private sector

### More details on funding

Boehringer Ingelheim Spain

## 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 type:** Non-interventional study

### Scope of the study:

Disease epidemiology Other

### If 'other', further details on the scope of the study

Nintedanib associated diarrhoea control

### Data collection methods:

Primary data collection

### Main study objective:

To describe the proportion of patients who achieve diarrhoea control while taking a nintedanib dose of 150 mg bid at 12-week follow up in patients with IPF and other PPF reporting a first episode of nintedanib-associated diarrhoea at study baseline.

# Study Design

### Non-interventional study design

Other

### Non-interventional study design, other

Observational new data PASS

# 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)

Estimated number of subjects 100

## Study design details

### Outcomes

Achievement of diarrhoea control (yes/no), defined as the passage of less than 3 loose or liquid stools in a 24-hour period (loose or liquid stools defined as stools with a BSFS of 6 or 7 points (17))while being treated with 150 mg bid of nintedanib, at 12-week follow-up. 1. Absolute change in the proportion of patients taking optimal nintedanib dose (150 mg bid) at 12-week follow-up referent to baseline 2. Absolute change in BSFS score at week 12 follow-up referent to baseline 3. Absolute change in number of stools per day at 12-week follow-up referent to baseline 4. Absolute change in current body weight (in kilograms) at 12-week And 6 more

#### Data analysis plan

Descriptive statistics will be presented as absolute (counts) and relative frequencies (proportions) for categorical variables, and mean, standard deviation, median, 25 and 75 quartiles, and minimum, and maximum values for continuous variables.

### Data management

### Data sources

### Data sources (types)

Electronic healthcare records (EHR) Other

### 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

### **Check completeness**

Unknown

### **Check stability**

Unknown

### **Check logical consistency**

Unknown

## Data characterisation

### Data characterisation conducted

No