Cohort Study of Long-term Safety of Upadacitinib for the Treatment of Ulcerative Colitis and Crohn’s Disease in a Real-world Setting in Europe

First published: 15/12/2023

Last updated: 08/08/2024

Study Ongoing

Administrative details

EU PAS number

EUPAS107124

Study ID

107125

DARWIN EU® study

No

Study countries

- ☐ Denmark
- ☐ Spain
- ☐ Sweden

Study description

This study aims to evaluate the long-term safety of upadacitinib use in adults in routine clinical care for the treatment of Ulcerative Colitis (UC) and Crohn's Disease (CD) Main objectives are to describe and compare the incidence of gastrointestinal (GI) perforation, and where possible, the incidence of fractures and drug-induced liver injury (DILI), in adults with UC or CD treated with upadacitinib, relative to those treated with select biologic inflammatory bowel disease (IBD) treatments at a similar line of therapy. To describe and compare, where possible, the incidence of the secondary safety outcomes, malignancy excluding non-melanoma skin cancer (NMSC), stratified by type, NMSC, major adverse cardiovascular events, venous thromboembolic event, serious infections (defined as all infections that require hospitalization, including opportunistic infections), herpes zoster, active tuberculosis, all-cause mortality, in adults with UC or CD treated with upadacitinib, relative to those treated with select biologic IBD treatments at a similar line of therapy.

Study status

Ongoing

Research institutions and networks

Institutions

Centre for Pharmacoepidemiology, Karolinska Institutet (CPE-KI)

Sweden

First published: 24/03/2010

Last updated: 23/04/2024

Institution | Educational Institution | Laboratory/Research/Testing facility | Not-for-profit | 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

RTI Health Solutions (RTI-HS)

☐ France
☐ Spain
☐ Sweden
☐ United Kingdom
☐ United Kingdom (Northern Ireland)
☐ United States

First published: 21/04/2010

Last updated: 13/03/2025

Institution | Not-for-profit | ENCePP partner

Contact details

Study institution contact

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Study contact

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Primary lead investigator

Johan Reutfors

Primary lead investigator

Study timelines

Date when funding contract was signed

Actual: 25/08/2022

Study start date

Planned: 10/11/2023

Actual: 10/11/2023

Date of interim report, if expected

Planned: 31/12/2029

Date of final study report

Planned: 30/06/2035

Sources of funding

- Pharmaceutical company and other private sector

More details on funding

AbbVie

Study protocol

p24343-protocol-pmos-v1.0_Redacted 2.pdf(13.04 MB)

Regulatory

Was the study required by a regulatory body?

Yes

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

EU RMP category 3 (required)

Other study registration identification numbers and links

P24-343

Methodological aspects

Study type

Study type list

Study type:

Non-interventional study

Scope of the study:

Safety study (incl. comparative)

Data collection methods:

Secondary use of data

Main study objective:

To describe and compare the incidence of gastrointestinal (GI) perforation, and where possible, the incidence of fractures, drug-induced liver injury (DILI), and where possible, the incidence of the secondary safety outcomes, in adults with UC or CD treated with upadacitinib, relative to those treated with select biologic inflammatory bowel disease (IBD) treatments at a similar line of therapy

Study Design

Non-interventional study design

Cohort

Study drug and medical condition

Name of medicine

RINVOQ

Study drug International non-proprietary name (INN) or common name

UPADACITINIB

Anatomical Therapeutic Chemical (ATC) code

(L04AA44) upadacitinib

upadacitinib

Medical condition to be studied

Crohn's disease

Colitis ulcerative

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

7500

Study design details

Outcomes

GI perforation, fractures and DILI. Malignancy excluding non-melanoma skin cancer (NMSC), stratified by type, NMSC, major adverse cardiovascular events, venous thromboembolic event, serious infections (defined as all infections that require hospitalization, including opportunistic infections), herpes zoster, active tuberculosis, all-cause mortality

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Data analysis plan

Comparison of rates of GI perforation between upadacitinib and comparators will be made with a Cox regression model, by each line of treatment cohorts. If assessed as feasible, based on (1) number of upadacitinib users, (2) number of other select biologic IBD treatments users suitable for comparison, and (3) number of safety events, Cox regression analyses will be performed to compare rates of DILI, bone fracture and all the secondary outcomes between upadacitinib and comparator treatments. Cox regression models will be performed separately for each outcome, stratified by line of treatment. Comparative analyses of GI perforation will be performed in the interim report if number of patients is sufficient. Comparative analyses on all other outcomes will be performed in the final report, as applicable

Data management

ENCePP Seal

This study has been awarded the ENCePP seal

Conflicts of interest of investigators

DeclarationofInterests-Annex5-JReutfors.pdf(105.48 KB)

Composition of steering group and observers

EUPAS107124-107878.pdf(60.64 KB)

Signed code of conduct

ENCePP Declaration of compliance_signed.pdf(38.09 KB)

Signed code of conduct checklist

ENCePP Checklist Code of conduct_signed.pdf(470.09 KB)

Signed checklist for study protocols

Signed ENCePP checklist for Upa IBD PASS v1.0 Study Protocol.pdf(1.11 MB)

Data sources

Data source(s)

Danish registries (access/analysis)

Sweden National Prescribed Drugs Register / Läkemedelsregistret

Sweden National Cancer Register / Cancerregistret

Data source(s), other

SWIBREG (Sweden), ENEIDA (Spain), SMINET (Sweden), Swedish national patient register (Sweden), Swedish cause of death register (Sweden)

Data sources (types)

Administrative healthcare records (e.g., claims)

Disease registry

Drug dispensing/prescription data

Laboratory tests and analyses

Other

Population registry

Data sources (types), other

Medical chart abstraction, quality register

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