

# Post-Authorization Safety Study to Assess the Effectiveness of the Newly Implemented Risk Minimization Measures for Topiramate: Drug Utilization Study

**First published:** 20/03/2025

**Last updated:** 20/03/2025

Study

Planned

## Administrative details

### **PURI**

<https://redirect.ema.europa.eu/resource/1000000494>

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### **EU PAS number**

EUPAS1000000494

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### **Study ID**

1000000494

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### **DARWIN EU® study**

No

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## Study countries

- France
  - Germany
  - Spain
  - Sweden
  - United Kingdom
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## Study description

This is a pre-post, observational study using data derived from existing healthcare databases to answer the research question whether the newly implemented risk minimization measures for topiramate are associated with change in topiramate use and pregnancy exposure to the drug among women of childbearing potential with epilepsy or migraine diagnosis.

The study aims to describe the prevalence and the incidence of topiramate use among women of child-bearing potential (WOCBP) with epilepsy or migraine during the pre- and post-implementation period of the newly implemented risk minimization measures (RMMs).

In addition, the study aims to quantify exposure to topiramate during pregnancy among incident users of topiramate at two critical points:

- (1) being pregnant at treatment initiation, and
  - (2) becoming pregnant during treatment.
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## Study status

Planned

## Research institutions and networks

### Institutions

## Syneos Health

United Kingdom

**First published:** 23/04/2015

**Last updated:** 06/03/2024

**Institution**

**Non-Pharmaceutical company**

**ENCePP partner**

## Leibniz Institute for Prevention Research and Epidemiology - BIPS

Germany

**First published:** 29/03/2010

**Last updated:** 26/02/2024

**Institution**

**Not-for-profit**

**ENCePP partner**

## Fundació Institut Universitari per a la Recerca a l'Atenció Primària de Salut Jordi Gol i Gurina, IDIAPJGol

Spain

**First published:** 05/10/2012

**Last updated:** 23/02/2024

**Institution**

**Educational Institution**

**Laboratory/Research/Testing facility**

**Not-for-profit**

**ENCePP partner**

# Karolinska Institutet

Sweden

**First published:** 01/02/2024

**Last updated:** 01/02/2024

Institution

Educational Institution

## Contact details

### Study institution contact

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Study contact

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### Primary lead investigator

Brian Buysse

Primary lead investigator

### ORCID number:

0000-0003-0026-9360

## Study timelines

### Date when funding contract was signed

Planned: 20/09/2024

Actual: 20/09/2024

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**Study start date**

Planned: 01/11/2025

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**Date of interim report, if expected**

Planned: 16/01/2027

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**Date of final study report**

Planned: 16/01/2029

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Topiramate Safety Consortium of 30 MAHs, led by Janssen

## Study protocol

[Protocol\\_abstract\\_Topiramate PASS\\_7054981\\_DUS.pdf](#)(91.81 KB)

## Regulatory

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

Yes

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

EU RMP category 1 (imposed as condition of marketing authorisation)

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**Regulatory procedure number**

EMA/H/A-31/1520

## Other study registration identification numbers and links

## Methodological aspects

### Study type

### Study type list

**Study topic:**

Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Assessment of risk minimisation measure implementation or effectiveness

Drug utilisation

**Data collection methods:**

Secondary use of data

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**Study design:**

The study design is a pre-post, observational study using data from existing healthcare databases in the EU and the UK.

The pre- and post-implementation periods will be defined as 36 months prior to publication of Bjørk et al. on 31 May 2022 and 36 months after implementation of the new RMMs.

**Main study objective:**

The overarching goal of the study is to describe the use of topiramate among WOCBP with epilepsy or migraine during pre- and post-implementation periods of the newly implemented RMM and to determine the effectiveness of the newly implemented RMMs to reduce exposure to topiramate during pregnancy and for at least up to four weeks after discontinuing treatment with topiramate.

## Study Design

### **Non-interventional study design**

Cohort

## Study drug and medical condition

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

TOPIRAMATE

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

(N03AX11) topiramate

topiramate

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

Epilepsy

Migraine

## Population studied

## **Short description of the study population**

Patients in this study will be WOCBP ( $\geq 13$  to  $\leq 49$  years of age and without prior record of hysterectomy or sterilization) identified in the healthcare database selected for each of the countries (France, Germany, Spain, Sweden, UK).

Depending on the study objective, patients must have epilepsy and/or migraine or be exposed to topiramate.

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## **Age groups**

Adolescents (12 to < 18 years)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

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## **Special population of interest**

Women of childbearing potential not using contraception

Women of childbearing potential using contraception

# Study design details

## **Outcomes**

Exposure to topiramate is the outcome of interest and will be determined by indication. In addition, new users of topiramate during the pre- and post-implementation periods will be characterized by indication.

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## **Data analysis plan**

The data from each data source will be analysed separately according to a common study protocol.

All descriptive analyses will be displayed for the pre- and post-implementation periods, overall and by age category and country.

Interrupted time-series analysis is planned for primary objective 1, contingent upon sufficient statistical power. All other study objectives are descriptive.



Continuous variables will be summarized using appropriate statistics for continuous variables (eg, mean, standard deviation (SD), median, range, minimum and maximum).

Categorical variables will be summarized using appropriate statistics (eg, number, percentage and 95% Clopper-Pearson confidence intervals).

## Data management

### Data sources

#### **Data source(s)**

Système National des Données de Santé (French national health system main database)

German Pharmacoepidemiological Research Database

The Information System for Research in Primary Care (SIDIAP)

Landspatientregisteret (National Patient Register)

Sweden National Prescribed Drugs Register / Läkemedelsregistret

Clinical Practice Research Datalink

Hospital Episode Statistics

Swedish Cause of Death Register

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#### **Data source(s), other**

National Medical Birth Register (MBR) Sweden

Total Population Register (TPR) Sweden

Office for National Statistics (ONS) United Kingdom

Données de Consommation Inter-régimes, (DCIR) France

Programme de Médicalisation des Systèmes d'Information, (PMSI) France

### **Data sources (types)**

Administrative healthcare records (e.g., claims)

Electronic healthcare records (EHR)

## 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

## Data characterisation

### **Data characterisation conducted**

Unknown