

DARWIN EU® - Antipsychotic prescribing in children in Europe: a descriptive analysis of trends and patient characteristics

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Study

Finalised

Administrative details

EU PAS number

EUPAS1000000592

Study ID

1000000592

DARWIN EU® study

Yes

Study countries

- ☐ Croatia
- ☐ Denmark
- ☐ Germany
- ☐ Netherlands

☐ Norway

☐ Spain

Study description

Antipsychotic drugs are indicated for the management of schizophrenia and bipolar disorder.

They are also used in adults to manage behavioral and psychological symptoms of dementia (BPSD) with the recommendation to be discontinued after BPSD symptoms resolve.

Antipsychotic drugs can be classified into typical and atypical antipsychotics with different recommendations for their use.

For example, guidelines recommend the preferential use of atypical antipsychotic in adults when required for the management of BPSD.

Safety concerns have previously led to regulatory warnings and risk communications over their use.

Antipsychotic drugs have been associated with several adverse drug reactions, particularly in the elderly. Somnolence, hypotension, extrapyramidal side effects and gait abnormalities are well-recognized side effects that may in turn contribute to the risk of falls and fracture in elderly persons.[1] Similarly, cardiovascular adverse effects, falls and injuries may increase mortality.

Antipsychotics are sometimes used in children and adolescents; however, not all antipsychotics have been approved for use in children and adolescents and if prescribed their use would be considered off-label.

A prior study reported an increased use of antipsychotics between 2008 and 2017 in the paediatric populations of Catalonia (35.7%), Norway (45.1%) and Sweeden (57.6%).

Likewise, in England, the use of antipsychotics in patients between 3 and 18 years doubled between 2000 and 2019.

This study aims to provide an overview of antipsychotic prescribing in children from databases in Europe, and to describe the characteristics of children

initiating antipsychotics.

This will provide a benchmark to understand current clinical practice over their use in children and adolescents and help to understand whether off-label use may occur.

Study status

Finalised

Research institutions and networks

Institutions

Department of Medical Informatics - Health Data Science, Erasmus Medical Center (ErasmusMC)

☐ Netherlands

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Last updated: 02/05/2024

Institution

Educational Institution

ENCePP partner

Networks

Data Analysis and Real World Interrogation Network (DARWIN EU®)

☐ Belgium

☐ Croatia

☐ Denmark

- ☐ Estonia
- ☐ Finland
- ☐ France
- ☐ Germany
- ☐ Greece
- ☐ Hungary
- ☐ Italy
- ☐ Netherlands
- ☐ Norway
- ☐ Portugal
- ☐ Spain
- ☐ Sweden
- ☐ United Kingdom

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Last updated: 30/04/2025

Network

Contact details

Study institution contact

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Study contact

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Primary lead investigator

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Study timelines

Date when funding contract was signed

Planned: 17/03/2025

Actual: 17/03/2025

Study start date

Planned: 12/05/2025

Actual: 12/05/2025

Date of final study report

Planned: 30/08/2025

Actual: 29/09/2025

Sources of funding

- EMA

Study protocol

[DARWIN EU_Protocol_P4-C2-003_Antipsychotic in Children_V3.pdf](#) (900.14 KB)

Regulatory

Was the study required by a regulatory body?

Yes

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

Not applicable

Methodological aspects

Study type

Study type list

Study topic:

Human medicinal product

Study type:

Non-interventional study

Data collection methods:

Secondary use of data

Study design:

Retrospective cohort studies will be conducted using routinely collected health data from 7 databases.

Main study objective:

1. To characterise children with a first prescription of an antipsychotic in each database in terms of age, sex, comorbidities and indication of use.
2. To measure trends in the incidence/prevalence of antipsychotic prescribing in children overall, by typical/atypical grouping and separately for 11 drug substances in each database. Results would be stratified by calendar year, age and sex.

3. To characterise first use of antipsychotic initiation in children (overall, by typical/atypical use, and by the 11 prespecified drug substances) in terms of dose and duration in each database. Results will be stratified by age and sex.

Study Design

Non-interventional study design

Cohort

Study drug and medical condition

Medicinal product name, other

All antipsychotics under the ATC code N05A (all, and by grouped by typical/atypical);

and eleven prespecified drug substances: risperidone, aripiprazole, olanzapine, quetiapine, paliperidone, chlorprothixene, clozapine, methotrimeprazine (levomepromazine), pipamperone, sulpiride, and promazine.

Anatomical Therapeutic Chemical (ATC) code

(N05A) ANTIPSYCHOTICS

ANTIPSYCHOTICS

Population studied

Short description of the study population

The study cohort will comprise all paediatric individuals between 1- and 18-years old present in the database during the study period (i.e., 2013-2023).

Additional eligibility criteria for patient-level antipsychotic characterisation and

drug utilisation, and for the calculation of incidence rates will be applied, where a minimum follow-up of 365 days of data availability will be required to exclude individuals with a prior use of the respective drug of interest:

- When overall, no prior use of any of the common antipsychotics will be required.

In other words, users with prior use of any of the antipsychotics of interest will be excluded from the analysis.

- When stratified by specific antipsychotic drug, no prior use of the specific antipsychotic will be required.

In other words, users with prior use of the same antipsychotic will be excluded from the analysis.

Documents

Study report

[DARWIN EU_Report_P4-C2-003_Antipsychotics in children_V4.0.pdf](#) (7.2 MB)

[Shiny App](#)

Data management

ENCePP Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

Data sources

Data source(s)

Danish Health Data Registries

Integrated Primary Care Information (IPCI)

The Information System for Research in Primary Care (SIDIAP)

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

Norwegian Linked Health registry at University of Oslo

Croatia National Public Health Information System (Nacionalni javnozdravstveni
informacijski sustav)

InGef Research Database

Use of a Common Data Model (CDM)

CDM mapping

Yes

CDM Mappings**CDM name**

OMOP

CDM website

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

CDM version

<https://ohdsi.github.io/CommonDataModel/index.html>

Data quality specifications

Check conformance

Unknown

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

Unknown