

# PHARMACOVIGILANCE IN JUVENILE IDIOPATHIC ARTHRITIS PATIENTS (PHARMACHILD) TREATED WITH BIOLOGIC AGENTS AND/OR METHOTREXATE.

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

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Data source

Human

Disease registry

Other

## Administrative details

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#### Data source ID

29629

#### Data source acronym

Pharmachild

#### Data holder

IRCCS Istituto Giannina Gaslini, Pediatric Rheumatology International Trials  
Organisation (PRINTO)

### **Data source type**

Disease registry

Other

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### **Data source type, other**

Exposure registry

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### **Main financial support**

European public funding

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### **Care setting**

Hospital inpatient care

Hospital outpatient care

Secondary care – specialist level (ambulatory)

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### **Data source qualification**

If the data source has successfully undergone a formal qualification process (e.g., from the EMA, ISO or other certifications), this should be described.

No

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### **Data source website**

<https://www.printo.it/>

## **Contact details**

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**Main**

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# Data source regions and languages

## Data source countries

Italy

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## Data source languages

English

# Data source establishment

## Data source established

15/06/2011

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## Data source time span

**First collection:** 15/12/2011

The date when data started to be collected or extracted.

# Publications

## Data source publications

For all the PRINTO publications, see [PRINTO website](#).

# Studies

## List of studies that have been conducted using the data source

[A non-interventional, post-authorization safety study \(PASS\) to evaluate long-term safety of anakinra \(Kineret®\) in patients with systemic juvenile idiopathic arthritis](#)

[Survey on the collection of data on adverse events related to medicinal products through registries](#)

## Data elements collected

## **Disease information**

Does the data source collect information with a focus on a specific disease? This might be a patient registry or other similar initiatives.

Yes

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## **Disease details**

Juvenile idiopathic arthritis

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## **Disease details (other)**

Designation of ILAR category, disease course, joint exam, JUVENILE ARTHRITIS DAMAGE INDEX (JADI), drug therapy, safety evaluation

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## **Rare diseases**

Are rare diseases captured? In the European Union a rare disease is one that affects no more than 5 people in 10,000.

No

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## **Pregnancy and/or neonates**

Does the data source collect information on pregnant women and/or neonatal subpopulation (under 28 days of age)?

Yes

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## **Hospital admission and/or discharge**

No

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## **ICU admission**

Is information on intensive care unit admission available?

No

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## **Cause of death**

Not Captured

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## **Prescriptions of medicines**

Captured

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## **Prescriptions vocabulary**

other

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## **Prescriptions vocabulary, other**

Drugs are captured by the investigators from a list

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## **Dispensing of medicines**

Not Captured

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## **Advanced therapy medicinal products (ATMP)**

Is information on advanced therapy medicinal products included? A medicinal product for human use that is either a gene therapy medicinal product, a somatic cell therapy product or a tissue engineered products as defined in Regulation (EC) No 1394/2007 [Reg (EC) No 1394/2007 Art 1(1)].

No

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## **Contraception**

Is information on the use of any type of contraception (oral, injectable, devices etc.) available?

No

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## **Indication for use**

Does the data source capture information on the therapeutic indication for the use of medicinal products?

Not Captured

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## **Medical devices**

Is information on medicinal devices (e.g., pens, syringes, inhalers) available?

No

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## Administration of vaccines

Yes

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## Procedures

Does the data source capture information on procedures (e.g., diagnostic tests, therapeutic, surgical interventions)?

Captured

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## Procedures vocabulary

MedDRA

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## Healthcare provider

Is information on the person providing healthcare (e.g., physician, pharmacist, specialist) available?  
The healthcare provider refers to individual health professionals or a health facility organisation licensed to provide health care diagnosis and treatment services including medication, surgery and medical devices.

No

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## Clinical measurements

Is information on clinical measurements (e.g., BMI, blood pressure, height) available?

Yes

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## Genetic data

Are data related to genotyping, genome sequencing available?

Not Captured

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## Biomarker data

Does the data source capture biomarker information? The term “biomarker” refers to a broad subcategory of medical signs ( objective indications of medical state observed from outside the patient), which can be measured accurately and reproducibly. For example, haematological assays, infectious disease markers or metabolomic biomarkers.

Not Captured

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## **Patient-reported outcomes**

Is information on patient-reported outcomes (e.g., quality of life) available?

Yes

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## **Patient-generated data**

Is patient-generated information (e.g., from wearable devices) available?

No

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## **Units of healthcare utilisation**

Are units of healthcare utilisation (e.g., number of visits to GP per year, number of hospital days) available or can they be derived? Units of healthcare utilisation refer to the quantification of the use of services for the purpose of preventing or curing health problems.

No

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## **Unique identifier for persons**

Are patients uniquely identified in the data source?

No

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## **Diagnostic codes**

Captured

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## **Diagnosis / medical event vocabulary**

MedDRA

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## **Medicinal product information**

Captured

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## **Medicinal product information collected**

Active ingredient(s)

Dose

Route of administration

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## **Medicinal product vocabulary**

Other

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## **If 'other,' what vocabulary is used?**

Drugs are captured by the investigators from a list

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## **Quality of life measurements**

Captured

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## **Quality of life measurements vocabulary**

other

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## **Quality of life measurements, other**

JAMAR

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## **Lifestyle factors**

Not Captured

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## **Sociodemographic information**

Captured

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## **Sociodemographic information collected**

Education level

Ethnicity

Gender

Socioeconomic status

## Quantitative descriptors

## Population Qualitative Data



## **Population age groups**

Paediatric Population (< 18 years)

Infants and toddlers (28 days – 23 months)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

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## **Estimated percentage of the population covered by the data source in the catchment area**

As of May 2023 overall in Pharmachild, 11,796 patients in total were registered in the census registry since January 2017 from 98 PRINTO centers in 32 countries. Clinical and safety data were provided for 8,274 out of 11,796 patients (70.1%) belonging to 86 participating centers. Sixty out of eighty-six centers (61.2%) provided at least 70% safety data of their local JIA patients, and the median was 55 patients per center. Prospective data were collected for a total of 3,070 patients.

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## **Description of the population covered by the data source in the catchment area whose data are not collected (e.g., people who are registered only for private care)**

Regional sub-set - This project is conducted by the participating centres of the more than 50 countries belonging to the Paediatric Rheumatology International Trials Organisation (PRINTO), or the Pediatric Rheumatology European Society (PRES). Data capture is restricted to participating centres in each country, and thus do not represent nation-wide data sets.

## **Population**

## Population size

10700

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## Active population size

9200

## Population by age group

Age group	Population size	Active population size
Paediatric Population (< 18 years)	10700	9200

## Median observation time

**Median time (years) between first and last available records for unique individuals captured in the data source**

5.50

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**Median time (years) between first and last available records for unique active individuals (alive and currently registered) capt**

5.00

## Data flows and management

## Access and validation

### **Biospecimen access**

Are biospecimens available in the data source (e.g., tissue samples)?

No

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### **Access to subject details**

Can individual patients/practitioners/practices included in the data source be contacted?

Yes

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### **Description of data collection**

Investigators enter data in a secure web platform developed by PRINTO

## Event triggering registration

### **Event triggering registration of a person in the data source**

Disease diagnosis

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### **Event triggering de-registration of a person in the data source**

Loss to follow up

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### **Event triggering creation of a record in the data source**

Hospital visit

## Data source linkage

### **Linkage**

Is the data source described created by the linkage of other data sources (prelinked data source) and/or can the data source be linked to other data source on an ad-hoc basis?

No

## Data management specifications that apply for the data source

**Data source refresh**

Yearly

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**Informed consent for use of data for research**

Required for all studies

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**Possibility of data validation**

Can validity of the data in the data source be verified (e.g., access to original medical charts)?

Yes

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**Data source preservation**

Are records preserved in the data source indefinitely?

Yes

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**Approval for publication**

Is an approval needed for publishing the results of a study using the data source?

Yes

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**Data source last refresh**

08/05/2023

## Common Data Model (CDM) mapping

**CDM mapping**

Has the data source been converted (ETL-ed) to a common data model?

No