

DARWIN EU®: where we are in the Phase 2 of its implementation

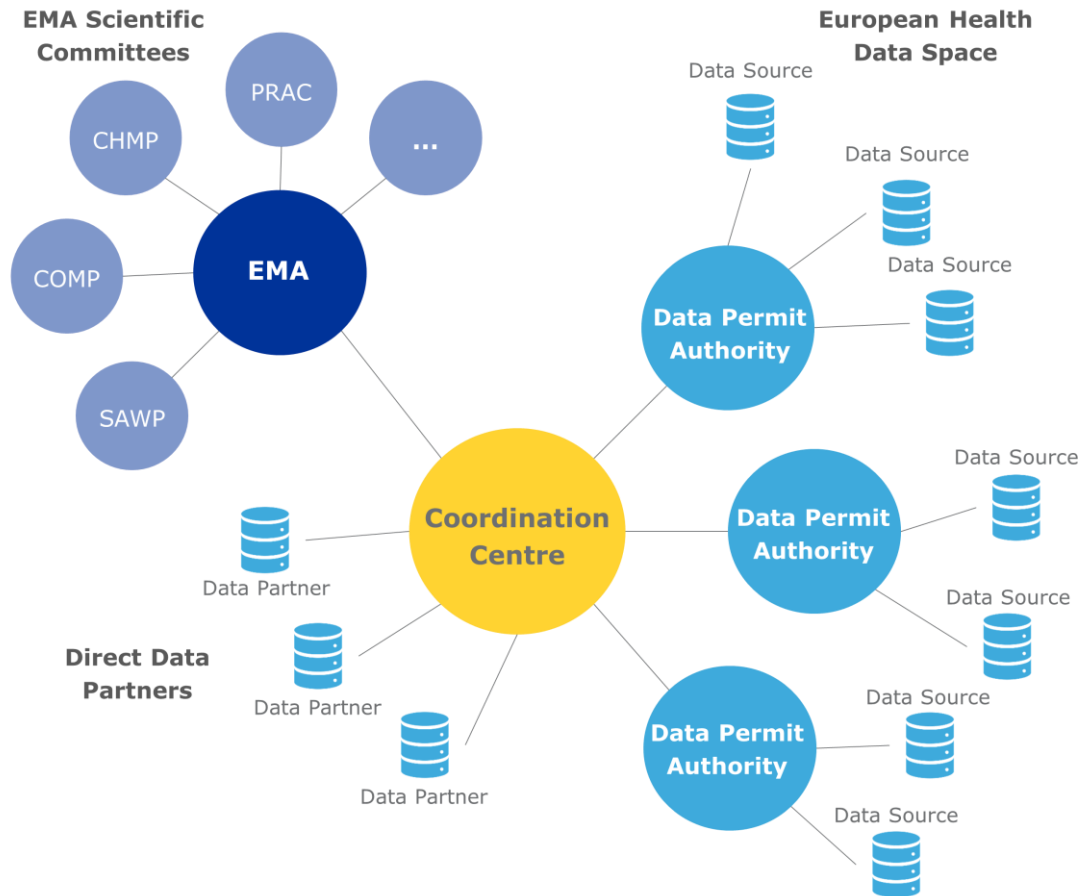
Multi-stakeholder workshop on Real World Data (RWD) quality and experience in use of Real World Evidence (RWE) for regulatory decision-making - 27 Jun 2023



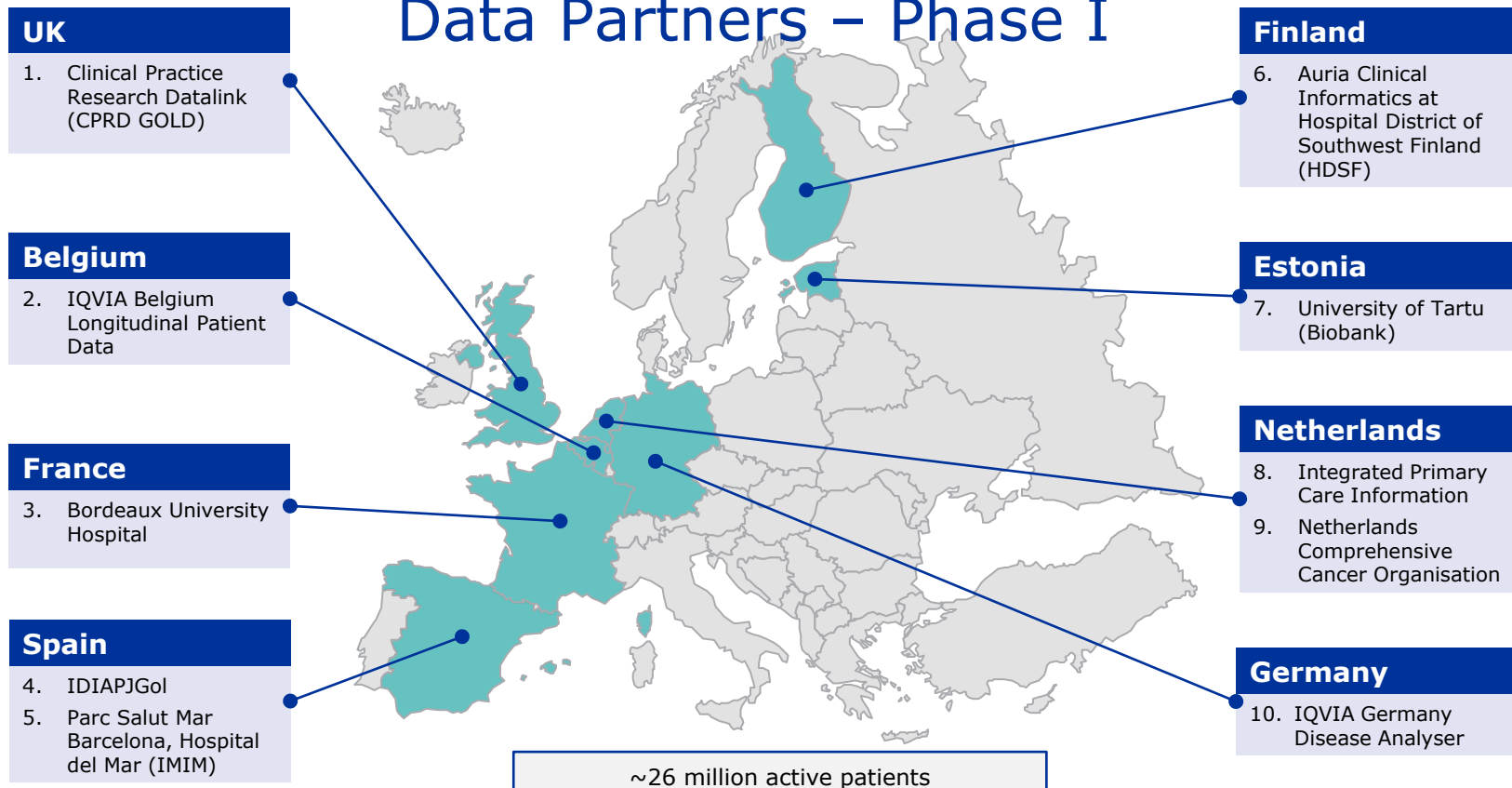
DARWIN EU® is a federated **network of data, expertise and services** that supports better decision-making throughout the product lifecycle by generating reliable **evidence from real world healthcare data**

FEDERATED NETWORK PRINCIPLES

- Data stays **local**
- **Use of Common Data Model** (where applicable) to perform studies in a timely manner and increase consistency of results

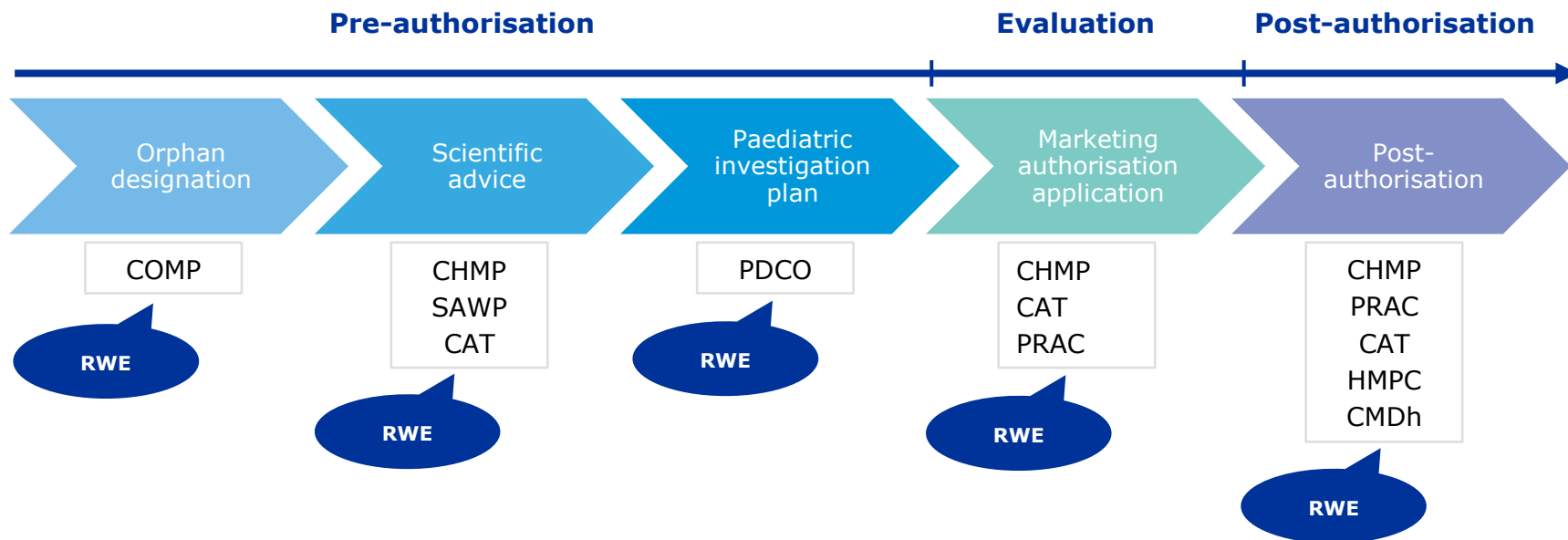


Data Partners – Phase I



Currently selecting Phase II DPs after [open call for expression of interest](#)

RWE use across the medicinal product lifecycle



Milestones completed in 2023

- ✓ Phase II in progress, delivery on target and according to plan
- ✓ Focus on selection of further Data Partners and study conduct (various use cases)
- ✓ Establishment of analytical pipelines and code

		Phase I	Phase II	Phase III	Option I	Option II
Studies	Off the shelf	2	6	30	60	60
	Routine repeated	1	6	30	60	60
	Complex study	1	4	12	24	24
	Very complex	0	0	0	1	1
Data Partners (total)		10	20	30	40	

DARWIN EU® Coordination Centre website launched

www.darwin-eu.org



DARWIN EU

Home About Data Methods Studies FAQs Contact

Home

The European Medicines Agency (EMA) and the European Medicines Regulatory Network established a coordination centre to provide timely and reliable evidence on the use, safety and effectiveness of medicines for human use, including vaccines, from real world healthcare databases across the European Union (EU). This capability is called the **Data Analysis and Real World Interrogation Network (DARWIN EU®)**.

Expression of Interest Call now open for Data Partners.

More information can be found [here](#).

Latest News

How to join the network?
How to join the data network? The Open Call for DPs described in this document welcomes expressions of interest from any data custodian in... [Read More](#)

DARWIN EU® Onboards First Data Partners
Data Network A strategic priority for DARWIN EU® is to expand the scope of the network for generation of new evidence supporting the... [Read More](#)

What will DARWIN EU deliver?

DARWIN EU delivers **real-world evidence** from across Europe on diseases, populations and the uses and performance of medicines. This enables EMA and national competent authorities in the European medicines regulatory network to use these data whenever needed throughout the lifecycle of a medicinal product.



Off-the-shelf studies

These are mainly characterisation questions that can be executed with a generic protocol. This includes disease epidemiology, for example the estimation of the prevalence, incidence of health outcomes in defined time periods and population groups, or drug utilization studies at the population or patient level.

+ Patient-level characterisation

+ Patient-level DUS analyses

Cohort of newly diagnosed patients or new users of a medicine followed over time. Studies used to characterise disease patients or use of medicines

+ Population-level DUS analyses

+ Population-level descriptive epidemiology

Used for incidence/prevalence studies. All subjects in the database are eligible subject to minimal inclusion criteria.



Complex

These are studies requiring development or customisation of specific study designs, protocols, analytics, phenotypes. This includes studies on the safety and effectiveness of medicines and vaccines.

+ Prevalent user active comparator cohort studies

+ New user active comparator cohort

+ Self-controlled case risk interval

+ Self-controlled case series

+ Time series analyses and Difference-in-difference studies

+ RMM effectiveness

Studies comparing risk of health outcome in exposed vs unexposed cohorts

Studies comparing risk of health outcome in exposed vs unexposed periods in cohort of cases

Studies to assess the impact of restrictions in the use of medicines

Studies started in 2022 (year 1/ phase I)

Additional 16 studies to start in 2023 (Phase II) – including HTA/payers, ECDC, EHDS2 pilots

Type	Studies	Data Partners	Planned RWE use
Off the Shelf	Population level epidemiology study on prevalence of rare blood cancers from 2010 EUPAS50800	NL, ES, UK, BE, DE	Support COMP in orphan designation decision making & useful as background rates for other committees
Off the Shelf	Patient level drug utilization study of valproate-containing medicinal products in women of childbearing potential from 2010 EUPAS50789	NL, ES, UK, BE, DE, FI	Assess the use of valproate after safety referral
Off the Shelf	Patient level drug utilisation study of antibiotics on the Watch list of the WHO AWaRe classification, 2010-2021 EUPAS103381	NL, FR, ES, DE, UK	Inform PRAC/CHMP decision making, AMR strategy
Complex	Background all-cause mortality rates in patients with severe asthma aged ≥12 years old EUPAS103936	NL, ES x2, UK, EE	Support CHMP post-authorisation inform future decision making

Study Report for C1-003		
	Author(s): Katia Verhamme, Maria de Ridder, Talita Duarte Salles, Dani Prieto Alhambra, Miguel-Angel Mayer, Romain Griffier	Version: v3.1
	Dissemination level: Public	

Table of contents

1. DESCRIPTION OF STUDY TEAM	7
2. DATA SOURCES	8
3. ABSTRACT	10
4. LIST OF ABBREVIATIONS	13
5. AMENDMENTS AND UPDATES	13
6. MILESTONES	13
7. RATIONALE AND BACKGROUND	13
8. RESEARCH QUESTION AND OBJECTIVES	14
9. RESEARCH METHODS	16
9.1 Study Type and Study Design	16
9.2 Study Setting and Data Sources	16
9.3 Study Period	19
9.4 Follow-up	19
9.4.1 Population-level Utilization of antibiotics from the WHO Watch list	19
9.5 Study Population with inclusion and exclusion criteria	20
9.5.1 Population-level Utilisation of the antibiotics of interest	20
9.5.2 Patient-level Utilisation of antibiotics	20
9.6 Variables	22
9.6.1. Exposure/s	22
9.6.2. Outcome/s	22
9.6.3. Other covariates, including confounders, effect modifiers and other variables	22
9.7 Study size	26
9.8 Data transformation	26
9.9 Statistical Methods	26
9.9.1 Patient privacy protection	26
9.9.2 Statistical model specification and assumptions of the analytical approach considered	26
9.9.3 Methods to derive parameters of interest	27
9.9.4 Methods planned to obtain point estimates with confidence intervals of measures of occurrence	28
9.9.5 Methods to control for potential sources of bias	30
9.9.6 Methods to deal with missing data	30
9.9.7 Description of sensitivity analyses	30
9.9.8 Evidence synthesis	31
9.10 Deviations from the protocol	31
10. DATA MANAGEMENT	31
10.1. Data management	31
10.2. Data storage and protection	31
11. QUALITY CONTROL	32
12. RESULTS	32
12.1. Population-level DUS	32
12.1.1. Participants	32
Table 12.1.1: Number of participants in each source population during the study period overall	34

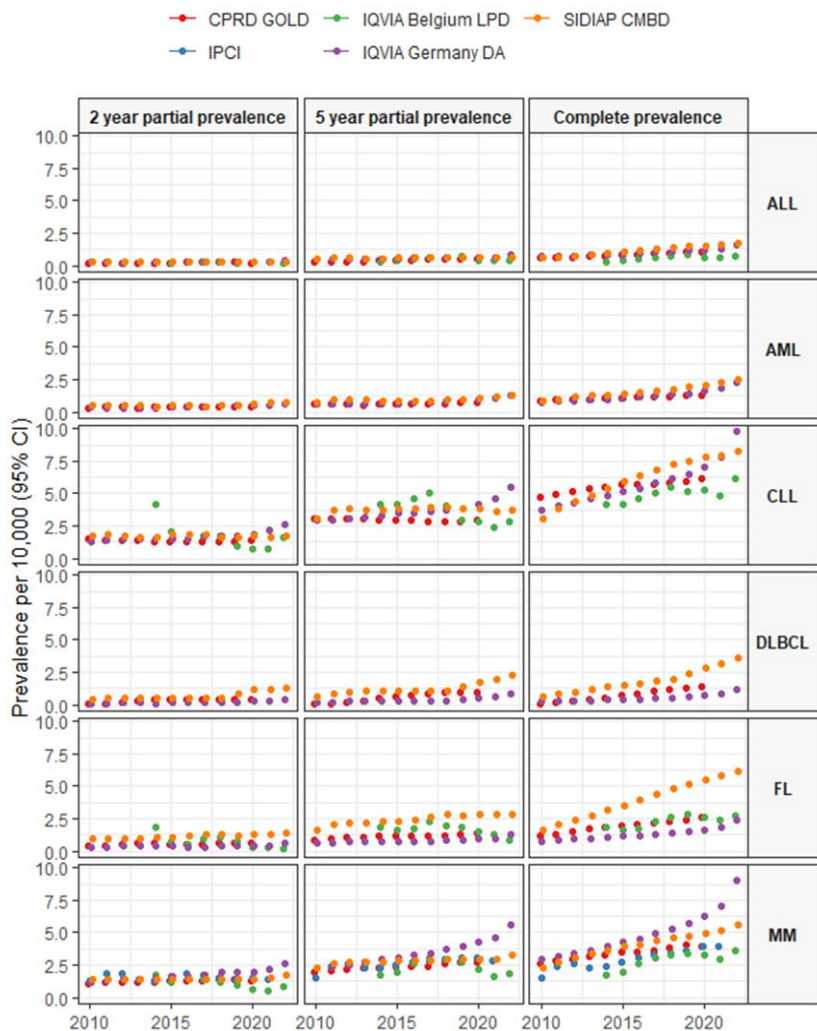
Study Report for C1-003		
	Author(s): Katia Verhamme, Maria de Ridder, Talita Duarte Salles, Dani Prieto Alhambra, Miguel-Angel Mayer, Romain Griffier	Version: v3.1
	Dissemination level: Public	

12.1.2. Descriptive Data	35
12.1.3. Outcome Data	35
12.1.4. Main Results	35
Incidence rates of the antibiotics of the WHO Watch list	35
Incidence rates of the antibiotics of the WHO Watch list by sex and age groups	52
Incidence rates of the antibiotics of the WHO Watch list by route of administration	68
Prevalence of the antibiotics of the WHO Watch list	68
12.2. Patient-level DUS	83
12.2.1. Duration of use	83
12.2.2. Indication of use	85
12.2.5. Other Analysis	86
13. MANAGEMENT AND REPORTING OF ADVERSE EVENTS/ADVERSE REACTIONS	86
14. DISCUSSION	86
14.1 Key Results	86
14.2 Limitations of the research methods	87
14.3 Results in context	87
14.4 Generalisability	88
14.5 Other information	88
15. CONCLUSION	88
16. REFERENCES	89
17. ANNEXES	90
Table 1: List with Concept Definitions for indication of use	90
Table 2: Lists with concept definitions for exposure	92

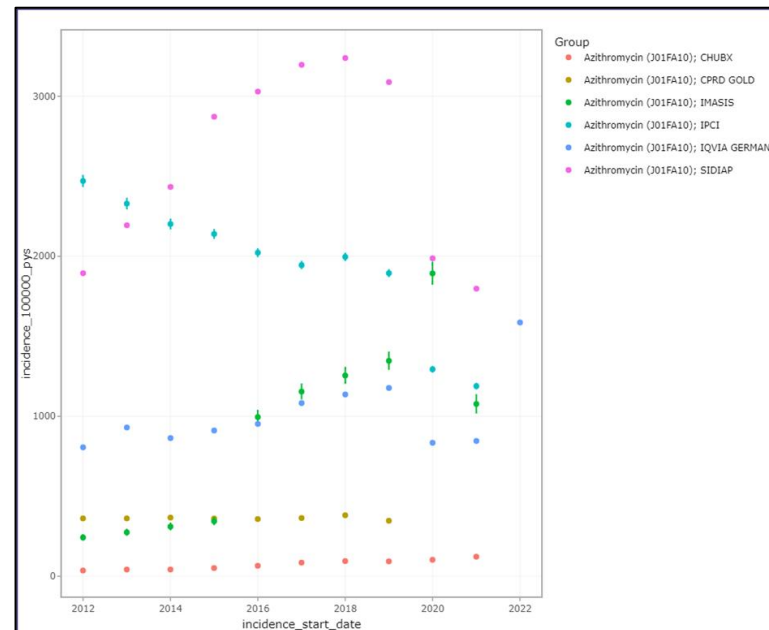
Document History

Version	Date	Description
V1.0	23/01/2023	First Version for EMA review
V2.0	06/02/2023	Second Version for EMA review
V3.0	15/02/2023	Final version incorporating EMA comments
V3.1	27/03/2023	Link to Shiny App added

More detail in
protocols +
study reports
in EU PAS
Register
+shiny apps



Incidence rates of azithromycin



Ref. [EUPAS50800](#)
and [EUPAS103381](#)

Ongoing studies

Background all-cause **mortality rates in patients with severe asthma aged ≥12 years old**
[[EUPAS103936](#)]

CHMP
Complex

Erythromycin use
as prokinetic

NCA
OTS

EHDS coagulopathy
of COVID-19

EC/EHDS
Complex

Multiple myeloma:
patient characterisation,
treatments and survival
in the period 2012-2022

HTA/Payers
OTS

Effectiveness of COVID-19 vaccines against
severe COVID-19 and
post-acute outcomes of
SARS-CoV-2 infection.

ECDC/VMP
Complex

Naloxone use in
treatment of opioid
overdose.

CHMP
OTS

Drug utilisation study on
co-prescribing of
**endothelin receptor
antagonists** (ERAs) and
**phosphodiesterase-5
inhibitors** (PDE-5is) in
pulmonary arterial
hypertension.

CHMP
OTS

Drug utilisation study
of prescription
opioids.

PRAC
OTS

Next steps

- **Selection of data sources for phase II**
- Conduct of **studies in Phase II, pilot use cases and develop pipelines**
- Consultation on **catalogue of standard data analyses** (Methodologies Working Party, DARWIN EU® Advisory Board and Industry)

Any questions?

Further information

Andrej.Segec@ema.europa.eu

Official address Domenico Scarlattilaan 6 • 1083 HS Amsterdam • The Netherlands

Telephone +31 (0)88 781 6000

Send us a question Go to www.ema.europa.eu/contact

Follow us on  **@EMA_News**



Data Analysis and Real World Interrogation
Network (DARWIN EU) | European Medicines
Agency (europa.eu)



Coordination Centre website: www.darwin-eu.org

For questions to the Coordination Centre, please
contact: enquiries@darwin-eu.org



Subscribe [here](#) to receive future issues
of the [Big Data Highlights](#)

