

# Summary of MID-NET<sup>®</sup> study: No.2023-655

August 27, 2024

## Study title

Evaluation of the risk of kidney function test abnormal in patients with mirogabalin besilate using MID-NET<sup>®</sup> (signal enhancement)

## Products investigated

Mirogabalin besilate (hereinafter referred to as "mirogabalin")

## Purpose of the study

To compare the incidence of kidney function test abnormal after prescription of mirogabalin with that after prescription of an extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use)\*<sup>1</sup>

\*<sup>1</sup> Precautions on adverse reactions related to abnormal laboratory tests (outcome) to be investigated in this study are listed in the package insert of mirogabalin and an extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use) at the time of planning this study as shown in Table 1.

Table 1. Precautions on outcome-related adverse reactions in package insert

Target function of outcome	Products investigated	Precautions on clinically significant adverse reactions related to outcome	Precautions on other adverse reactions related to outcome
Kidney function	Mirogabalin	No relevant description	No relevant description
	An extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use)	No relevant description	No relevant description

## Data source

MID-NET<sup>®</sup>

(Data period: January 1, 2016 to August 31, 2023)

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## Outline of method

### ■ Study population

<Overall population>

Among patients prescribed mirogabalin or an extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use) during the data period (excluding patients prescribed both mirogabalin and an extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use) at the first prescription date<sup>\*2</sup>), those whose first medical record date during the data period was 181 days or more before the first prescription date were defined as the overall population.<sup>\*3</sup> Patients were divided into the exposure (mirogabalin) and the comparator (an extract from inflamed cutaneous tissue of rabbits inoculated with vaccinia virus (for oral use)) based on the drug prescribed on the first prescription date.

<sup>\*2</sup> The prescription date of the exposure or that of the comparator during the data period, whichever comes first.

<sup>\*3</sup> The overall population includes patients with pre-existing abnormal laboratory tests at baseline corresponding to the outcome because there is no requirement for baseline values in Table 2.

<Subgroup 1>

Among the overall population, subgroup 1 was defined as patients whose outcome-related baseline values were missing or within the normal interval (population whose aggregation category in Table 2 corresponds to (1), (2) or (4)).

<Subgroup 2>

Among the overall population, subgroup 2 was defined as patients whose outcome-related baseline values were within the normal interval (population whose aggregation category in Table 2 corresponds to (1) or (2)).

Table 2. Assessment of baseline values<sup>\*4</sup>

Test item	Aggregation categories
eGFR	(1) $\geq 90$ mL/min/1.73 m <sup>2</sup> (2) $\geq 60$ mL/min/1.73 m <sup>2</sup> and $< 90$ mL/min/1.73 m <sup>2</sup> (3) $< 60$ mL/min/1.73 m <sup>2</sup> (4) Missing

<sup>\*4</sup> The baseline value was defined as a test result on the closest to the first prescription date within 180 days before or at the first prescription date.

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■ **Outcomes**

Kidney function test abnormal

Details of outcome definition are shown in Table 3.

Table 3. Outcome definition

Outcome	Outcome definition
Decreased eGFR (< 60)	eGFR < 60 mL/min/1.73 m <sup>2</sup>
Decreased eGFR (< 30)	eGFR < 30 mL/min/1.73 m <sup>2</sup>
Increased serum creatinine (based on acute kidney injury stage 1 in the KDIGO Clinical Practice Guideline <sup>*5</sup> )	Any of the following conditions is met: <ul style="list-style-type: none"> <li>• Serum creatinine ≥ 1.5×baseline value</li> <li>• Serum creatinine ≥ 0.3 mg/dL + baseline value</li> </ul>
Increased serum creatinine (based on acute kidney injury stage 3 in the KDIGO Clinical Practice Guideline <sup>*5</sup> )	Any of the following conditions is met: <ul style="list-style-type: none"> <li>• Serum creatinine ≥ 3×baseline value</li> <li>• Serum creatinine ≥ 4 mg/dL</li> <li>• eGFR &lt; 35 mL/min/1.73 m<sup>2</sup> and age &lt; 18 years</li> </ul>

\*5 KDIGO (Kidney Disease Improving Global Outcomes) Clinical Practice Guideline for Acute Kidney Injury

■ **Follow-up period**

Start date: Date of the first prescription

End date: The earliest date among the following:

- End date of a prescription period<sup>\*6</sup>
- Date of occurrence of the outcome
- Start date of other target drug prescription different from the date of the first prescription
- Date of the last medical record during the data period

\*6 Prescriptions were considered to be continuous if the interval between two consecutive prescription periods was less than or equal to 30 days. The end date of a prescription continuation period was defined as the last prescription period plus 30 days.

■ **Analyses**

The following indices were estimated for the overall population, subgroup 1 and subgroup 2.

- Incidence rate of outcomes in the exposure and the comparator
- Sex and age-adjusted hazard ratio in the exposure in comparison to the comparator

## Outline of results

### ■ Study population

- The number of patients and the distribution of patients' sex and age are as shown in Table 4. The distribution of baseline values in the overall population is as shown in Table 5 (Appendix).

Table 4. Number of patients and distribution of patients' sex and age

		Exposure (n=16,235)	Comparator (n=12,904)
Sex	Male, n (%)	7,514 (46.3)	5,537 (42.9)
	Female, n (%)	8,721 (53.7)	7,367 (57.1)
Age	< 65 years, n (%)	6,481 (39.9)	4,736 (36.7)
	≥ 65 years, n (%)	9,754 (60.1)	8,168 (63.3)
	mean (SD)	65.8 (14.9)	66.6 (16.1)
	median (Q1-Q3)	69.0 (56.0-77.0)	70.0 (56.0-79.0)

SD: Standard deviation; Q1: First quartile; Q3: Third quartile

### ■ Risk of outcomes

- The incidence rate of outcomes in each group and sex and age-adjusted hazard ratio are as shown in Table 6 (Appendix).
- In the analyses in subgroup 2, the sex and age-adjusted hazard ratios (95% confidence interval (CI)) for decreased eGFR (< 60) and increased serum creatinine (based on acute kidney injury stage 1 of the KDIGO Clinical Practice Guideline) were 1.56 (1.42-1.72) and 2.21 (1.85-2.64), respectively. The sex and age-adjusted hazard ratios (95% CI) for the more severe outcomes of decreased eGFR (< 30) and increased serum creatinine (based on acute kidney injury stage 3 of the KDIGO Clinical Practice Guideline) were 3.54 (2.25-5.58) and 3.80 (2.06-7.01), respectively (Table 6 and Figure 1 (both are in Appendix)).

### ■ Discussion based on the results

- Study results such as the sex and age-adjusted hazard ratios suggested an possible association between mirogabalin and kidney function test abnormal.



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### **Notes for the study**

- In this study, the relationship between the drug and outcome was examined promptly and in an exploratory manner, and only some patient backgrounds were adjusted in the study plan and statistical analysis. Therefore, the suggested relationship between the drug and outcome in this study does not immediately indicate that it is an adverse drug reaction of the drug, and the possibility of the outcome being an adverse drug reaction should be considered based on other information as well.

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## Appendix

Table 5. Distribution of baseline values in the overall population

Test item	Category	Exposure (n=16,235)	Comparator (n=12,904)
Serum creatinine	(1) ≤ ULN, n (%)	8,406 (51.8)	6,175 (47.9)
	(2) > ULN, n (%)	3,003 (18.5)	2,406 (18.6)
	(3) Missing, n (%)	4,826 (29.7)	4,323 (33.5)
eGFR (mL/min/1.73 m <sup>2</sup> )	(1) ≥ 90, n (%)	1,642 (10.1)	1,092 (8.5)
	(2) ≥ 60 and < 90, n (%)	5,495 (33.8)	4,068 (31.5)
	(3) < 60, n (%)	4,272 (26.3)	3,421 (26.5)
	(4) Missing, n (%)	4,826 (29.7)	4,323 (33.5)

ULN: Upper limit of normal of the common reference interval of the Japanese Committee for Clinical Laboratory Standards  
(male: 1.07 mg/dL, female: 0.79 mg/dL)

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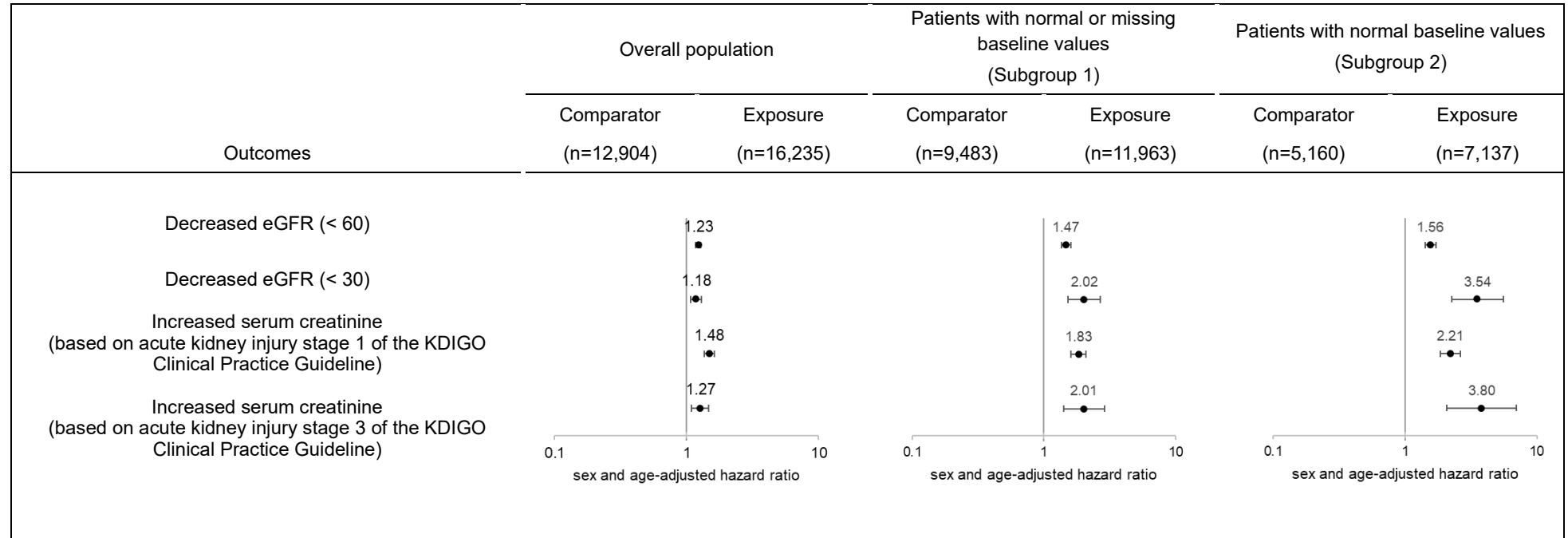
**Table 6. Incidence rate of kidney function test abnormal in the exposure and comparator , and sex and age-adjusted hazard ratios of the exposure in comparison with the comparator**

Outcomes		Overall population		Patients with normal or missing baseline values (Subgroup 1)		Patients with normal baseline values (Subgroup 2)	
		Exposure (n=16,235)	Comparator (n=12,904)	Exposure (n=11,963)	Comparator (n=9,483)	Exposure (n=7,137)	Comparator (n=5,160)
Decreased eGFR (< 60)	Incidence rate of outcome (/1000 person-years)	1,071.756	955.783	386.104	277.358	503.091	341.440
	Sex and age-adjusted hazard ratio (95% confidence interval)	1.23 (1.17-1.28)	Reference	1.47 (1.36-1.60)	Reference	1.56 (1.42-1.72)	Reference
Decreased eGFR (< 30)	Incidence rate of outcome (/1000 person-years)	165.114	150.402	36.439	18.336	39.454	11.408
	Sex an age-adjusted hazard ratio (95% confidence interval)	1.18 (1.07-1.30)	Reference	2.02 (1.52-2.67)	Reference	3.54 (2.25-5.58)	Reference
Increased serum creatinine (based on acute kidney injury stage 1 of the KDIGO Clinical Practice Guideline)	Incidence rate of outcome (/1000 person-years)	245.741	169.471	161.566	89.110	185.938	83.080
	Sex and age-adjusted hazard ratio (95% confidence interval)	1.48 (1.36-1.62)	Reference	1.83 (1.60-2.08)	Reference	2.21 (1.85-2.64)	Reference
Increased serum creatinine (based on acute kidney injury stage 3 of the KDIGO Clinical Practice Guideline)	Incidence rate of outcome (/1000 person-years)	66.427	54.786	22.508	11.188	23.312	5.935
	Sex and age-adjusted hazard ratio (95% confidence interval)	1.27 (1.09-1.47)	Reference	2.01 (1.41-2.88)	Reference	3.80 (2.06-7.01)	Reference

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Figure 1. Forest plots of sex and age-adjusted hazard ratios of the exposure in comparison with the comparator



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