Study Title	Approval Date	Lay Summary	Technical summary
Pulmonary Arterial Hypertension (PAH) Burden of illness study/The study of patterns of drug use in PAH in the United Kingdom.	27th March 2018	Pulmonary arterial hypertension (PAH) is a rare disease affecting the blood vessels between the heart and lungs. In this study researchers will look at how patients with this condition are treated.	Pulmonary arterial hypertension (PAH) is a rare and debilitating chronic disease, characterised by vascular proliferation and remodelling of the small pulmonary arteries, ultimately leading to right heart failure and death. The aim of this study is to describe the drug regimens prescribed to treatment-naïve patients with PAH in England using a real-world, population-level administrative database, including patterns of drug persistence/discontinuation, switching, and add-on therapy.
Use and effectiveness of palivizumab in English hospitals	16th May 2017	Respiratory syncytial virus (RSV) is a common cause of respiratory tract infections in children. The treatment options for RSV are limited and mainly consist of supportive therapy, including fluids and oxygen. There is currently no vaccine available. Palivizumab is a humanised monoclonal antibody which has been found in (industry-funded) randomised controlled trials to significantly lower the hospital admission rate in children at high risk of RSV-associated complications and is recommended for use in high risk children. This study aims to report on the use of the palivizumab in hospitals in England	The aim of this study is to examine patterns of prescriptions for palivizumab in children admitted to hospital in England. The specific objectives are to: (a) Determine the proportion of children in risk groups who start palivizumab immunoprophylaxis (b) Determine the number of children who complete the whole course of palivizumab (as a proportion of those who start a course). (c) Assess hospital-level variation in the proportion of children in a risk group who start palivizumab immunoprophylaxis (d) Determine trends over time in the proportion of children in a risk group who start palivizumab immunoprophylaxis

How have oral anticoagulant prescriptions for pulmonary embolism changed in secondary care?	12th July 2019	Pulmonary embolism (PE) occurs when there is a blockage to a pulmonary artery, which is responsible for carrying blood from the heart to the lungs. Over the last 10 years there has been an increased drive to manage many conditions traditionally treated in inpatient care in outpatient care including for patients with suspected PE. Over this time there have also been new oral treatments developed which seem to have fewer side effects. However the uptake of these drugs is thought to be low so we used this dataset to observe the use of tem in real practice.	A study to explore the patterns in anticoagulant treatments in pulmonary embolism with data from patients hospitalised in England. Specific aims to: 1. Calculate the hospital incidence and prevalence rate for pulmonary embolism 2. Explore the changes in oral anticoagulants prescription in patients with pulmonary embolism diagnoses 3. Identify patient characteristics related to varying levels of compliance to NICE guideline-based recommendations for anticoagulants prescription
Perampanel patient characteristics, treatment patterns and tolerability - a retrospective study	15th July 2019	Patients with epilepsy are treated in a stepwise way in order to control their seizures. This study will look at how a new treatment for epilepsy is prescribed	This study will examine the characteristics of patients who have been dispensed Perampanel in secondary care, along with the aim to gain further understanding into the treatment patterns prior to, and after Perampanel dispensation. Lastly, the study aims to increase insights into the general tolerability of Perampanel.

Study to understand natural history and the risk of major cardiovascular events in patients with moderate to severe psoriasis.	1st September 2020	Psoriasis is a long term condition affecting mainly the sking but can also affect nails and joints.It is modulated by the immune system and patients often suffer with other condtions (co-morbidities) also. Treatment is usually in the form of creams and ointments applied to the skin and is aimed at controlling symptoms since it is not curable. In patients where the disease is severe, treatmnts may be systemic i.e. medicines taken by mouth and in some cases even by injection. In this study the reserachers looked at the HTI data to investigate whether patients with severe psoriasis who are treated with strong medicines experience any effects on their heart and blood flow.	This study seeks to better characterize the population of patients with moderate to severe psoriasis treated with systemic medicines and investigate the incidence of major cardiovascular events following systemic therapies, biologics in particular. Crude cumulative incidence of MACE at 112, 180 and 365 days, from relevant treatment index date, stratified by overall burden of CV risk and prior use of third line drug exposure. Note that cohorts are not mutually exclusive. Reserachers compared the cumulative incidence of MACE between cumulative person-time exposed in different therapy groups within 365 days of the index diagnosis, adjusting for age, sex, and overall burden of CV risk at diagnosis index date.
Investigation into the switching dynamics between reference biological medicines and biosimilars of biological disease modifying agents in England	August 2021 (amended)	In this study the researchers aim to understand how often a patient switches from one treatment to another. The treatments are called 'biologics'. They are not manufactured in the same as way as medicines are usually made and this makes it more difficult to ensure that a 'generic' compound behaves exactly the same as the branded version. Since these are treaments for people with severe chronic conditions, it is importnat to determine that any treatment prescribed will provide stable relief from symptoms.	Switching between biosimilar and originator molecule. Cliicians have reported anecdotally that within their clinical practice patients who are switched to biosimilar for cost saving reasons may not always tolerate the product as well as the originator and often have to revert to treatment with the originator. They consider that the reverse may also be true i.e. patients started on biosimilar will not tolerate a switch to originator. The research team will investigate this using HTI in order to confirm or deny the anecdotally reported hypothesis that patients respond better to stabilised therapy with biologic drugs. The results of this study will help hospitals manage costs associated with biologic use and improve the experience of patients treated with these drugs.

Assessing the utility of the Hospital Treatment Insights (HTI) database for the development of algorithm for identification and mitigation of cardiotoxicity related to cancer treatments	8th September 2021	This study would benefit health and social care by providing a methodology for the rapid assessment of the association of different chemotherapy agents with cardiotoxic effects. The use of these agents to treat different types of cancer can be limited by the risk of cardiotoxicity in patients. In this study the researcher will explore the utility of HTI in assessing cardiotoxicity associated with different agents used to treat non small cell lung cancer.	The aim of this study is to investigate the association between cardiotoxicity-related outcomes of interest within first 12 months following treatment index date in non-small cell lung cancer (NSCLC) patients. Demographic and clinical characteristics will be described at diagnosis and at start of treatment. Treatment patterns, progression-free survival, incidence/frequency of cardiotoxicity will be described during follow-up. The risk factors of cardiotoxicity and associated healthcare cost of NSCLC patients will also be calculated.