



# Secular Trends in the Use of Valproate-Containing Medicines in Women of Childbearing Age in Europe: A Multinational DARWIN EU Network Study

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Lucía Bellas, Martí Català, Edward Burn, Yuchen Guo, Mike Du, Katia Verhamme, Egil Fridgeirsson, Talita Duarte-Salles, Tommi Kauko, Eeva Kronqvist, James T. Brash, Sarah Seager, Daniel Prieto-Alhambra, Annika M. Jödicke, Albert Prats-Urbe

OHDSI Community Call  
December 2<sup>nd</sup> 2025

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With respect to the content of the following presentation I have no actual or potential conflicts of interest or have any financial relationships to disclose.

# Background

- Valproate-containing medicine (VPA) are indicated for **epilepsy, bipolar disorder and migraine prevention.**
- Teratogen – risk of neurodevelopmental impairment and congenital malformations.

## **Contraindicated in pregnant women.**

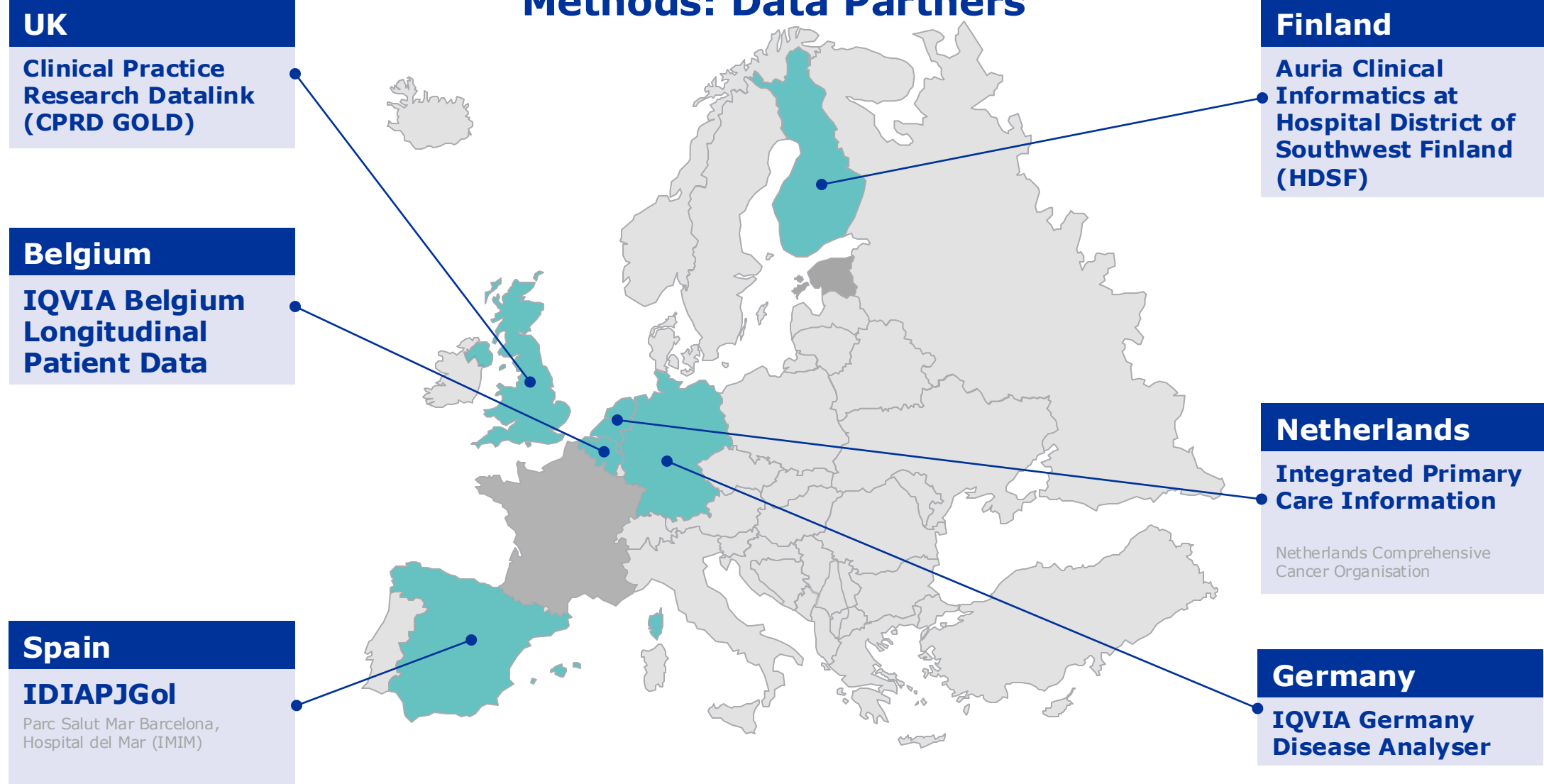
- Restrictions of its use **in women of childbearing age**: EMA issued risk minimisation measures in 2014 and 2018
- Recent **restrictions in men (2023)**

# Objectives

The objectives of this study are

1. To characterise the **prevalence and incidence** of use of VPA and alternative antiepileptic therapies among women aged 12 to 55 years of age. Analyses will be stratified by calendar year and age.
2. To characterise the **use of VPA among women aged 12 to 55 years** of age. Analyses will be stratified by indication (i.e. epilepsy, bipolar disorder and migraine prevention), calendar year and age.

## Methods: Data Partners



# Methods: Study Design and Study Population

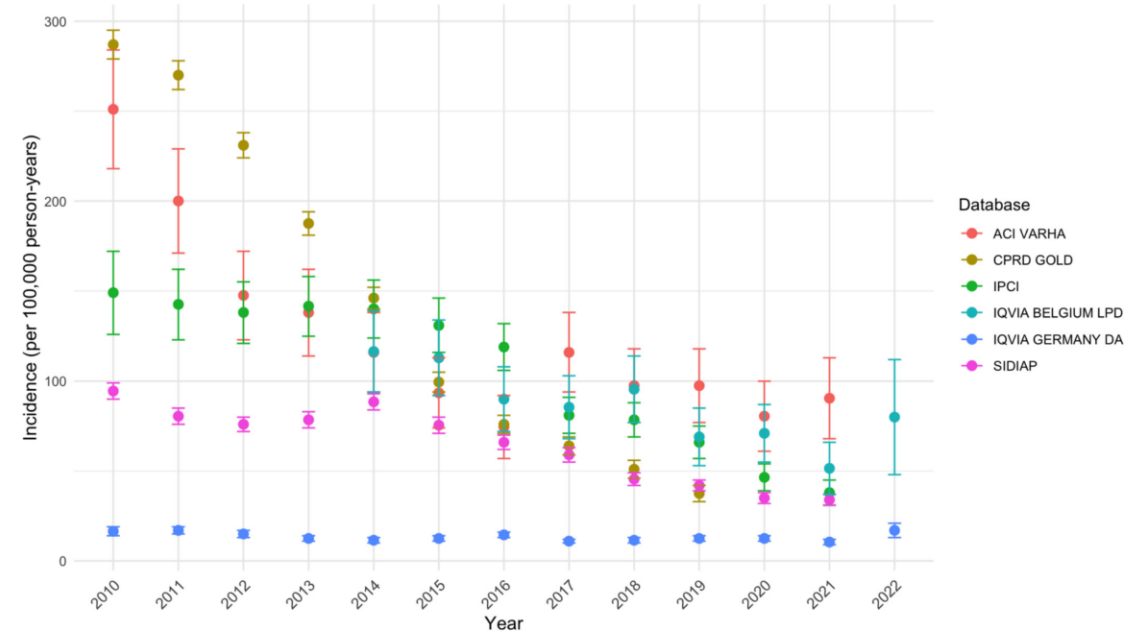
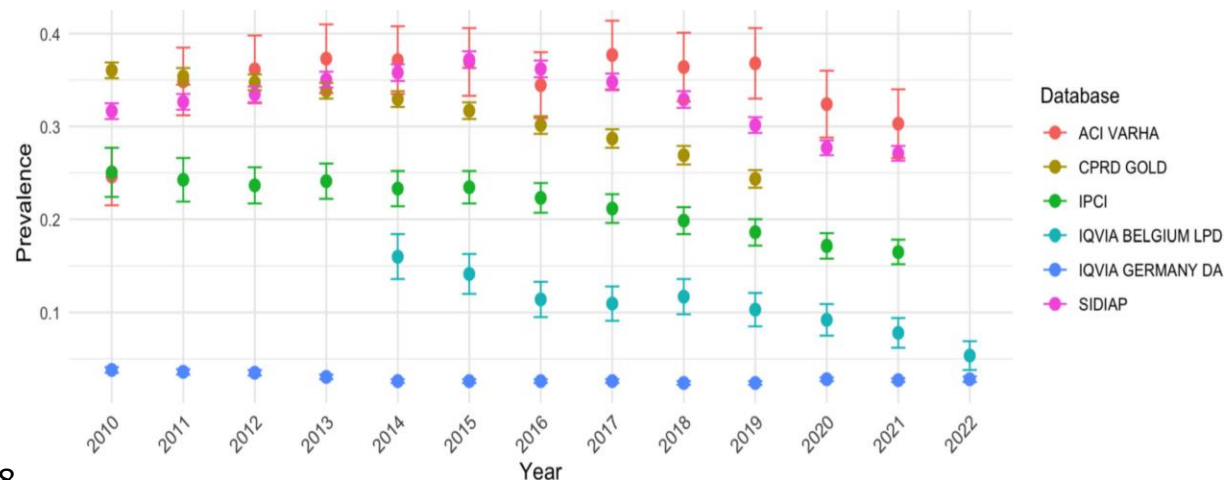
- **Drug Utilisation Study:** Population and patient level
- Included population: women between  $\geq 12$  years and  $\leq 55$  years of age (2010–2022)
- Prevalence:
  - Women contributed to the **denominator** cohort from the study start date, the date they had at least recorded 1 year of medical history or the date they reach the minimum age
  - Calculated as **annual period prevalence**.
- Incidence:
  - 365 days of **washout** for denominator calculations from the last prescription
  - Result was provided as the number of new users per 100,000

# Methods: Variables

- Exposure/s - **Drug of interest:**
  - **VPA:** Valproic acid, Sodium valproate, Magnesium valproate, Valproate semisodium and Valpromide
  - **Alternative treatments**
- Covariates for stratification in population-level drug utilisation study: **Age:** 5-year age bands were used
- Covariates for patient-level drug utilisation study:
  - **Indication:** Epilepsy, bipolar disorder, migraine
  - Co-morbidities and co-medication for **large-scale patient characterisation**

# Results Population Level

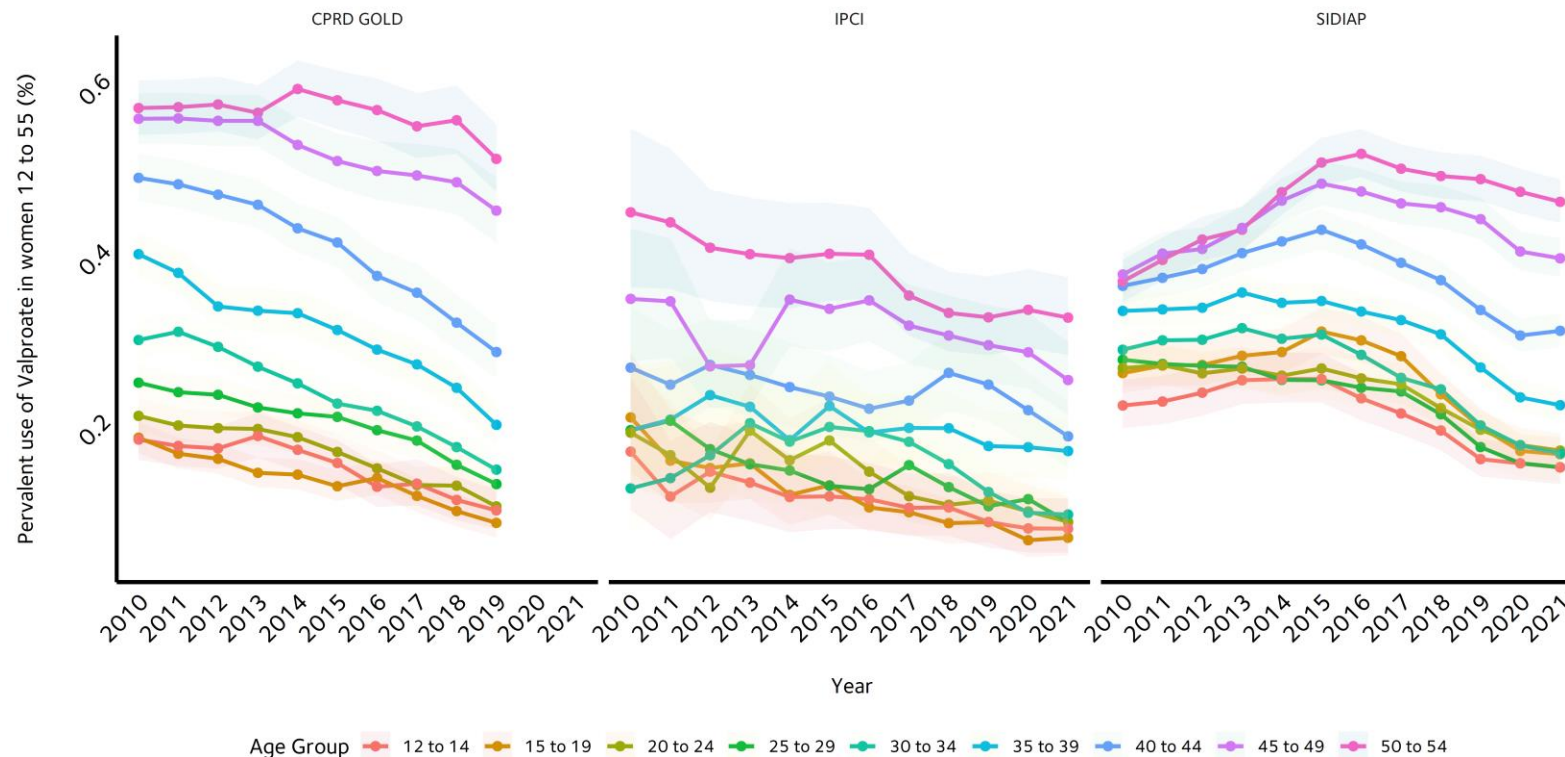
- The **incidence** of new use and **prevalence** of VPA amongst women 12 to 55 years **decreased** over the period 2010-2021
- Incidence remained **stable** for **IQVIA Germany**, sharpest **decrease in CPRD**
- Prevalence: Less pronounced decrease for ACI VARHA and IQVIA DA





# Results Population Level

- **Younger** age groups (<45) had a **lower prevalence**, which decreased over time. Incidence of use of VPA showed a decreasing pattern for all age groups in all databases.
- The prevalence of **the use of pregabalin and gabapentin** clearly **increased** during the study period, while the others followed different trends across the participating databases.



# Results Patient Level

Database	CPRD GOLD	TPCT	STDTAP	TOVIA Belgium LPD	TOVIA Germany DA
<b>Anxiety</b>	2260 (35.2%)	392 (31.6%)	4099 (39.4%)	307 (32.5%)	806 (20.1%)
<b>Asthma</b>	1017 (15.9%)	102 (8.2%)	545 (5.2%)	143 (15.1%)	234 (5.8%)
<b>Chronic Kidney Disease</b>	146 (2.3%)	<5	128 (1.2%)	<5	63 (1.6%)
<b>Chronic Liver Disease</b>	20 (0.3%)	<5	103 (1%)	NA	16 (0.4%)
<b>COPD</b>	82 (1.3%)	21 (1.7%)	96 (0.9%)	113 (12%)	135 (3.4%)
<b>Dementia</b>	23 (0.4%)	<5	37 (0.4%)	<5	64 (1.6%)
<b>Depressive disorder</b>	2460 (38.3%)	194 (15.6%)	2610 (25.1%)	414 (43.8%)	1420 (35.5%)
<b>Diabetes</b>	252 (3.9%)	57 (4.6%)	366 (3.5%)	59 (6.2%)	208 (5.2%)
<b>GERD</b>	174 (2.7%)	19 (1.5%)	262 (2.5%)	172 (18.2%)	84 (2.1%)
<b>Heart failure</b>	13 (0.2%)	6 (0.5%)	18 (0.2%)	<5	43 (1.1%)
<b>HIV</b>	6 (0.1%)	NA	53 (0.5%)	<5	5 (0.1%)
<b>Hypertension</b>	333 (5.2%)	96 (7.7%)	601 (5.8%)	166 (17.6%)	431 (10.8%)
<b>Hypothyroidism</b>	366 (5.7%)	56 (4.5%)	896 (8.6%)	104 (11%)	313 (7.8%)
<b>Infertility</b>	63 (1%)	NA	144 (1.4%)	<5	<5
<b>Inflammatory Bowel Disease</b>	40 (0.6%)	6 (0.5%)	36 (0.3%)	7 (0.7%)	30 (0.7%)
<b>Malignant neoplastic disease</b>	199 (3.1%)	59 (4.8%)	332 (3.2%)	27 (2.9%)	137 (3.4%)
<b>Myocardial Infarction</b>	10 (0.2%)	<5	16 (0.2%)	<5	13 (0.3%)
<b>Osteoporosis</b>	44 (0.7%)	7 (0.6%)	84 (0.8%)	22 (2.3%)	32 (0.8%)
<b>Pneumonia</b>	89 (1.4%)	51 (4.1%)	369 (3.5%)	29 (3.1%)	115 (2.9%)
<b>Rheumatoid Arthritis</b>	25 (0.4%)	9 (0.7%)	24 (0.2%)	5 (0.5%)	32 (0.8%)
<b>Stroke</b>	81 (1.3%)	37 (3%)	142 (1.4%)	14 (1.5%)	81 (2%)
<b>Venous Thromboembolism</b>	88 (1.4%)	25 (2%)	59 (0.6%)	28 (3%)	65 (1.6%)

# Results Patient Level

Database	CPRD GOLD	IPCI	SIDIAP	IQVIA Belgium LPD	IQVIA Germany DA
<b>Agents acting on Renin Angiotensin System</b>	366 (5.7%)	132 (10.6%)	618 (5.9%)	59 (6.2%)	228 (5.7%)
<b>Antibacterials (systemic)</b>	3043 (47.4%)	395 (31.8%)	3668 (35.3%)	308 (32.6%)	441 (11%)
<b>Antidepressants</b>	3774 (58.8%)	381 (30.7%)	6243 (60%)	365 (38.6%)	1102 (27.5%)
<b>Antiinflammatory and Antirheumatic Agents</b>	2233 (34.8%)	460 (37.1%)	5357 (51.5%)	368 (38.9%)	627 (15.7%)
<b>Antineoplastic agents</b>	<5	18 (1.5%)	100 (1%)	11 (1.2%)	18 (0.4%)
<b>Antithrombotics</b>	448 (7%)	78 (6.3%)	263 (2.5%)	27 (2.9%)	101 (2.5%)
<b>Beta Blocking Agents</b>	1079 (16.8%)	242 (19.5%)	695 (6.7%)	167 (17.7%)	270 (6.7%)
<b>Calcium Channel Blockers</b>	220 (3.4%)	50 (4%)	219 (2.1%)	30 (3.2%)	86 (2.1%)
<b>Diuretics</b>	314 (4.9%)	56 (4.5%)	348 (3.3%)	30 (3.2%)	172 (4.3%)
<b>Drugs for Acid related disorder</b>	1861 (29%)	382 (30.8%)	3519 (33.8%)	258 (27.3%)	507 (12.7%)
<b>Drugs for obstructive airway diseases</b>	1242 (19.4%)	315 (25.4%)	1858 (17.9%)	207 (21.9%)	197 (4.9%)
<b>Drugs used in diabetes</b>	262 (4.1%)	45 (3.6%)	283 (2.7%)	47 (5%)	102 (2.5%)
<b>Hormonal contraceptives (systemic)</b>	1291 (20.1%)	136 (11%)	415 (4%)	150 (15.9%)	59 (1.5%)
<b>Immunosuppressants</b>	48 (0.7%)	12 (1%)	76 (0.7%)	<5	18 (0.4%)
<b>Lipid modifying agents</b>	414 (6.5%)	82 (6.6%)	736 (7.1%)	63 (6.7%)	97 (2.4%)
<b>Opioids</b>	2149 (33.5%)	180 (14.5%)	1289 (12.4%)	206 (21.8%)	183 (4.6%)
<b>Psycholeptics</b>	3484 (54.3%)	626 (50.4%)	8030 (77.2%)	432 (45.7%)	1453 (36.3%)
<b>Psychostimulants</b>	26 (0.4%)	36 (2.9%)	429 (4.1%)	6 (0.6%)	37 (0.9%)

## Conclusion

- The **incidence and prevalence of use of VPA among women of childbearing age have declined** in BE, DE, ES, NL, and the UK. Specially in younger women.
- The **prevalence of medication** use across six databases from 2010 to 2022 shows significant **differences in trends** between drugs and regions.
- Our findings, consistent with other studies, highlight **substantial regional variability in valproate use and comorbidities**—likely driven by data-source and population differences.
- This fact underscores the importance of multidatabase studies using CDMs, facilitating the **identification of regional differences** in drug utilization, comorbidities, and **prescribing practices**.

## Paper



## Shiny App



## Report

