

# RIETE - Perspective cohort of patients hospitalized for a thromboeolic event (multi-center international study)

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## General

### Identification

Detailed name Perspective cohort of patients hospitalized for a thromboeolic event (multi-center international study)

Sign or acronym RIETE

### General Aspects

Medical area Cardiology  
General practice

Health determinants Healthcare system and access to health care services  
Iatrogenic  
Medicine

Keywords Prevention

### Scientific investigator(s) (Contact)

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Organization CHU Saint-Etienne

### Collaborations

Participation in projects, networks and consortia	Yes
Funding	
Funding status	Public
Details	service's academic university
Governance of the database	
Sponsor(s) or organisation(s) responsible	CHU DE SAINT-ETIENNE
Organisation status	Public
Presence of scientific or steering committees	Yes
Additional contact	
Main features	
Type of database	
Type of database	Study databases
Study databases (details)	Cohort study
Database recruitment is carried out by an intermediary	A selection of health institutions and services
Database recruitment is carried out as part of an interventional study	No
Additional information regarding sample selection.	Prospective. Organizations actives in the constitution of the cohort: CHU, CHG. End of inclusions:01/12/2010
Database objective	
Main objective	Document the epidemiology of the venous thromboembolic disease, demographic and clinical characteristics of patients, as well as caring and 3 months prognosis (incidence of recurrence of symptomatic thromboembolic events (TVP and EP), fatal or not, incidence of hemorrhages, death, complications. Secondary objective : TVP ET
Inclusion criteria	Patient visited at the hospital for a symptomatic deep venous thrombosis (TVP) of the upper or

lower limbs, and/or a symptomatic pulmonary embolism (EP), confirmed by objective examination (i.e phlebography, venous doppler, plethysmography, MRI on suspicion of TVP, pulmonary angiography, pulmonary scintigraphy ventilation/perfusion or spiral scan for EP suspicion); patient not included in a therapeutically clinical trial; patient allowing a 3 months follow-up

## Population type

Age	Adulthood (19 to 24 years) Adulthood (25 to 44 years) Adulthood (45 to 64 years) Elderly (65 to 79 years) Great age (80 years and more)
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Population covered	Sick population
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Gender	Male Woman
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Geography area	International
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Detail of the geography area	Spain, Italy, Argentina, Israel, Chili, Greece, United Kingdom, Brazil, France
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## Data collection

### Dates

Date of first collection (YYYY or MM/YYYY)	01/2006
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## Size of the database

Size of the database (number of individuals)	Greater than 20 000 individuals
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Details of the number of individuals	57 000 in June 2015
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## Data

Database activity	Current data collection
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Type of data collected	Clinical data Declarative data Paraclinical data Biological data
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Clinical data (detail)	Direct physical measures Medical registration
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Details of collected clinical data	Clinical examination every 3 months during the follow-up: anticoagulant treatment, vena cava filter, complications (recurrence of thromboembolic events, major or clinically pertinent hemorrhages, death, bone or cutaneous complications, thrombocytopenia)
Declarative data (detail)	Face to face interview
Details of collected declarative data	Clinical examination every 3 months during the follow-up: anticoagulant treatment, vena cava filter, complications (recurrence of thromboembolic events, major or clinically pertinent hemorrhages, death, bone or cutaneous complications, thrombocytopenia)
Presence of a biobank	No
Health parameters studied	Health event/morbidity Health event/mortality Health care consumption and services
Care consumption (detail)	Hospitalization Medical/paramedical consultation Medicines consumption
Procedures	
Data collection method	Interviews: direct data entry Clinical examinations: hand-written entry Biological examinations: direct data entry
Quality procedure(s) used	Coherence request after computer data entry. Missing data asked back to the original file and/or back to the patient or a third. Surveys about death among city halls. Doctor reminders for follow-up visits. Internal quality audit. Patients are orally informed about the use of their data.
Participant monitoring	Yes
Details on monitoring of participants	Duration: 3 months
Links to administrative sources	Yes
Linked administrative sources (detail)	Pathology register
Promotion and access	
Promotion	

Link to the document	<a href="http://www.hal.inserm.fr/RIETE">http://www.hal.inserm.fr/RIETE</a>
Description	List of publications in HAL
Link to the document	<a href="http://www.ncbi.nlm.nih.gov/pubmed/?term=riete+AND+Venous+thromboembolism">http://www.ncbi.nlm.nih.gov/pubmed/?term=riete+AND+Venous+thromboembolism</a>
Description	List of publications in Pubmed
<b>Access</b>	
Terms of data access (charter for data provision, format of data, availability delay)	Possible data utilization by academic teams with contractual access conditions according to publishing rules established by the RIETE scientific committee. Data utilization not available for industry sectors.
Access to aggregated data	Access on specific project only
Access to individual data	Access on specific project only