

EDONIS - Epidemiological Study on Post-Surgical Neuropathic Pain

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General

Identification

Detailed name	Epidemiological Study on Post-Surgical Neuropathic Pain
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Sign or acronym	EDONIS
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CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	CNIL : 16/03/2007
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General Aspects

Medical area	Neurology
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Health determinants	Genetic Iatrogenic
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Keywords	chronic pain, type of surgery, neuropathic characteristics, specific tools, Health episodes, consultations, assessment, pain, prevalence
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Scientific investigator(s) (Contact)

Name of the director	Duale
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Surname	Christian
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Unit	CPC-CIC
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Organization	INSERM CIC
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Collaborations

Funding	
Funding status	Mixed
Details	24 % PHRC NATIONAL - INSERM - CHU DE CLERMONT-FERRAND PFIZER
Governance of the database	
Sponsor(s) or organisation(s) responsible	CHU de Clermont-Ferrand
Organisation status	Public
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.	Inclusion method: prospective Other bodies active in creating this cohort: CHU, CHG, CLCC, CLINICS
Database objective	
Main objective	General objective: The EDONIS projects (PHRC national 2005) piloted by the Clermont-Ferrand Clinical Investigation Centre is a national multicentric epidemiological study whose primary objective is to know the prevalence of persistent pain at 3 and 6 months after surgery. This is the first prospective study of this size on chronic post-surgical pain which is a public health problem accounting for almost 15% of new consultations in specialist pain management institutions. Secondary objective: EDONIS also aims to identify pre-and peri-operative pain risk factors and to characterise its mechanisms with a focus on neuropathic factors. Eight types of conventional surgery were selected because (a) they are already known to induce persistent pain (thoracotomy, mastectomy, inguinal hernia repair), (b) they are frequently practised in

France and chronic pain is an attribute (sternotomy, caesarean section, cholecystectomy, saphenectomy) or (c) surgery has a suspected risk of nerve injury (knee arthroscopy). There is also an associated ancillary genetic study.

Inclusion criteria

Scheduled surgery identified as neuropathy-inducing

Population type

Age

Adulthood (19 to 24 years)
Adulthood (25 to 44 years)
Adulthood (45 to 64 years)

Population covered

Sick population

Gender

Male
Woman

Geography area

National

Detail of the geography area

Multicentric cohort throughout France

Data collection

Dates

Date of first collection (YYYY or MM/YYYY)

04/2006

Date of last collection (YYYY or MM/YYYY)

06/2010

Size of the database

Size of the database (number of individuals)

[1000-10 000[individuals

Details of the number of individuals

3330

Data

Database activity

Data collection completed

Type of data collected

Clinical data
Declarative data
Biological data

Clinical data (detail)

Direct physical measures
Medical registration

Declarative data (detail)	Paper self-questionnaire
Biological data (detail)	Samples taken
Presence of a biobank	No
Health parameters studied	Health event/morbidity Health event/mortality
Procedures	
Participant monitoring	Yes
Details on monitoring of participants	Follow-up duration: 6 months
Links to administrative sources	No
Promotion and access	
Promotion	
Link to the document	http://www.ncbi.nlm.nih.gov/pubmed/?term=EDONIS+AND+Duale[Author]
Description	List of publications in Pubmed
Link to the document	J Pain 2014.pdf
Description	main publication
Link to the document	J Pain 2015.pdf
Description	ancillary caesarean section
Link to the document	CJS 2015.pdf
Description	ancillary hernia repair
Other information	genetic study to be published soon
Access	
Terms of data access (charter for data provision, format of data, availability delay)	Data may be used by academic teams Access for collaboration with INSERM U792 team (Dr. Bouhassira) under the INSERM pain research network to improve diagnostic tools already developed by this team (DN4, QEDN) within the specific post-surgical framework.
Access to aggregated data	Access on specific project only

Access to individual data

Access on specific project only