

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

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Last update : 02/28/2014 | Version : 3 | ID : 60139

## 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)

Population covered Sick population

Gender  
Male  
Woman

Geography area International

Detail of the geography area Spain, Italy, Argentina, Israel, Chili, Greece, United Kingdom, Brazil, France

## Data collection

### Dates

Date of first collection (YYYY or MM/YYYY) 01/2006

## Size of the database

Size of the database (number of individuals) Greater than 20 000 individuals

Details of the number of individuals 57 000 in June 2015

## Data

Database activity Current data collection

Type of data collected  
Clinical data  
Declarative data  
Paraclinical data  
Biological data

Clinical data (detail) Direct physical measures  
Medical registration

Details of collected clinical data	Clinical examination every 3 months during the follow-up: anticoagulant treatment, vena cava filter, complications (recurrence of thromboeolic 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 thromboeolic 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
<b>Procedures</b>	
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. Intern 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