

Resource Summary Report

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Simulx

RRID:SCR_000486

Type: Tool

Proper Citation

Simulx (RRID:SCR_000486)

Resource Information

URL: <http://www.ddmore.eu/simulx>

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Description: THIS RESOURCE IS NO LONGER IN SERVICE. Documented on April 8, 2025. R function for computing predictions and simulating data from both Mlxtran and PharmML models that is based on MlxCompute, the model simulation engine developed by Lixoft. MlxCompute combines the Mlxtran language interpreter with the equation solvers to compute efficiently complex systems of ordinary differential equations (ODEs) and delayed differential equations (DDEs). Simulx takes advantage of the modularity of hierarchical models for simulating different components of a model: models for population parameters, individual covariates, individual parameters and longitudinal data, including continuous, count, categorical, and time-to-event data. It is also extremely flexible for defining complex dose regimens. Simulx will be the core of the next version of the DDMoRe Clinical Trial Simulator.

Abbreviations: Simulx

Resource Type: software resource

Keywords: windows, linux, macos, model, r, simulation, population, covariate, dose regimen

Availability: THIS RESOURCE IS NO LONGER IN SERVICE

Resource Name: Simulx

Resource ID: SCR_000486

Alternate IDs: nlx_158166

License: CeCILL-B license

Record Creation Time: 20220129T080201+0000

Ratings and Alerts

No rating or validation information has been found for Simulx.

No alerts have been found for Simulx.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 2 mentions in open access literature.

Listed below are recent publications. The full list is available at [NIF](#) .

Dinh TD, et al. (2022) Population-Based Pharmacokinetics and Dose Optimization of Imipenem in Vietnamese Critically-Ill Patients. Infection and drug resistance, 15, 4575.

Nguyen TM, et al. (2021) Population Pharmacokinetics and Dose Optimization of Ceftazidime and Imipenem in Patients with Acute Exacerbations of Chronic Obstructive Pulmonary Disease. Pharmaceutics, 13(4).