Uptake of biosimilars for TNF-α inhibitors adalimumab and etanercept following the best-value biological medicine initiative in Ireland

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Background

There is over 10 years of clinical experience and evidence to show that biosimilar medicines can be used as safely and effectively in approved therapeutic indications as their originator biological medicines. In Ireland, biosimilar medicine uptake has been very slow, and savings to the health service will only be realised through fostering a competitive biological medicine market.

The **objective** of this study was to investigate the utilisation of biosimilars following a 'best-value biological' (BVB) medicine initiative for adalimumab and etanercept in the Irish healthcare setting.

Methods

Data was extracted from the National High Tech claims database and High Tech ordering and management hub for the following drugs; adalimumab (Amgevita®, Hulio®, Humira®, Idacio®, and Imraldi®) and etanercept (Benepali® and Enbrel®). Main outcome measure: uptake of the BVB medicines.

Results

In June 2019, just over 90 patients had been initiated on, or switched to a BVB medicine for adalimumab or etanercept. Over the next 12 months, this increased significantly to over 8,500 patients with a corresponding reduction in prescribing of non-BVB medicines. By June 2020, BVB medicines accounted for approximately 50% of market share.

A gain-share prescribing incentive has raised over **€3.6 million** for the specialties to invest back into patient care.

From June 2019 to July 2020, the combined estimated savings and avoided costs were **€22.7 million**, as a result of this initiative.

Conclusion

Against the background of a finite healthcare budget, this study shows that increasing use of biosimilars can create the financial savings and space to invest in new innovative therapies for the benefit of many patients.

Duggan B, Smith A, Barry M. Uptake of biosimilars for TNF-α inhibitors adalimumab and etanercept following the best-value biological medicine initiative in Ireland. Int J Clin Pharm. 2021 Oct;43(5):1251-1256. doi: 10.1007/s11096-021-01243-0. Epub 2021 Feb 9. **PMID: 33560486**.