

# National biosimilar policies: switching and substitution

Experiences from the Danish DANBIO registry



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### Danish health care

#### Biological treatments are

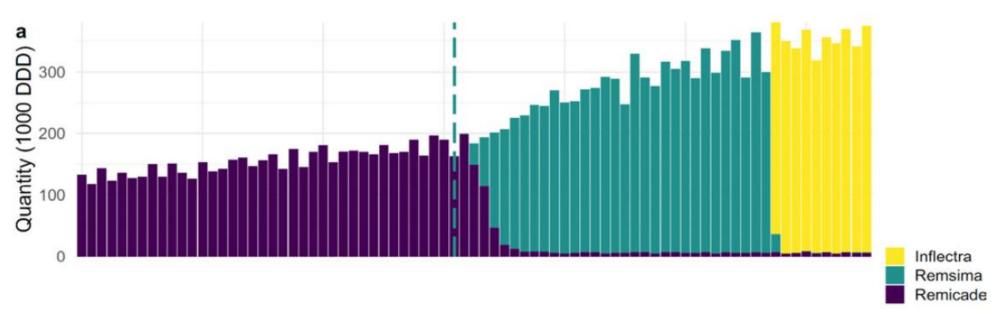
- Tax paid
- Free of charge to the patient equal access
- Available with liberal access with all drugs being available
- Provided through hospitals
- Handed to patients every 12 weeks (s.c. treatments)

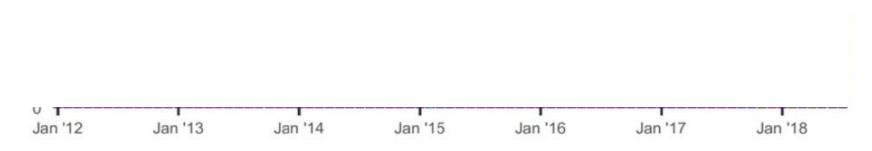


### National tender system - Danish Medicines Council

- Assessment of new medicines including biosimilars
  - Compared to the standard therapy
  - Evaluated by experts in the field (e. g. rheumatologist, clinical pharmacologists, patients)
- National tender process
  - Widest possible competition to reduce costs
  - Suppliers submit their bid and relevant documentation through a secured online system
- National recommendations
  - A prioritized list of medicines to be used for specific indications
  - The cheapest drug gets e. g. 80% of the market share

## Biosimilar switches - It all started in year 2015





The dashed vertical line on 13 Feb 2015 represents the date of expiration of the Remicade patent

### Denmark: nationwide mandatory switches

#### Originator bDMARD → biosimilar bDMARD

Infliximab (Remicade) → CT-P13 (Remsima/Inflectra)

Etanercept (Enbrel) → SB4 (Benepali)

Adalimumab (Humira) → SB5 (Hyrimoz)

Rituximab (Mabthera) → GP2013 (Rixaton)

### The nationwide DANBIO registry

DANBIO
Dansk Reumatologisk
Database

- Established year 2000
- Nationwide
- Mandatory to monitor bDMARD treated patients with inflammatory arthritis
- 95% coverage of bDMARDs
- Online data entry by patients and physicians
- >60,000 patients currently monitored

An optimal tool to explore the national strategies







### Results from DANBIO

Clinical and epidemiological research

#### CONCISE REPORT

A nationwide non-medical switch from originator infliximab to biosimilar CT-P13 in 802 patients with inflammatory arthritis: 1-year clinical outcomes from the DANBIO registry

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Hanne Lindegaard, <sup>6</sup> Asta Linauskas, <sup>7</sup> Oliver Hendricks, <sup>8</sup> Inger Marie Jensen Hansen, <sup>9</sup>
Dorte Vendelbo Jensen, <sup>2,3</sup> Natalia Manilo, <sup>10</sup> Jakob Espesen, <sup>11</sup> Mette Klarlund, <sup>12</sup>
Jolanta Grydehøj, <sup>13</sup> Sabine Sparre Dieperink, <sup>3</sup> Salome Kristensen, <sup>14</sup>
Jimmi Sloth Olsen, <sup>15</sup> Henrik Nordin, <sup>16</sup> Stavros Chrysidis, <sup>17</sup> Dorte Dalsgaard Pedersen, <sup>18</sup>
Michael Veedfald Sørensen, <sup>19</sup> Lis Smedegaard Andersen, <sup>20</sup> Kathrine Lederballe Grøn, <sup>3</sup>
Niels Steen Krogh, <sup>21</sup> Lars Pedersen, <sup>22</sup> Merete Lund Hetland, <sup>1,4</sup>On behalf of all departments of rheumatology in Denmark

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#### **CLINICAL SCIENCE**

Comparative effectiveness of two adalimumab biosimilars in 1318 real-world patients with inflammatory rheumatic disease mandated to switch from originator adalimumab: nationwide observational study emulating a randomised clinical trial

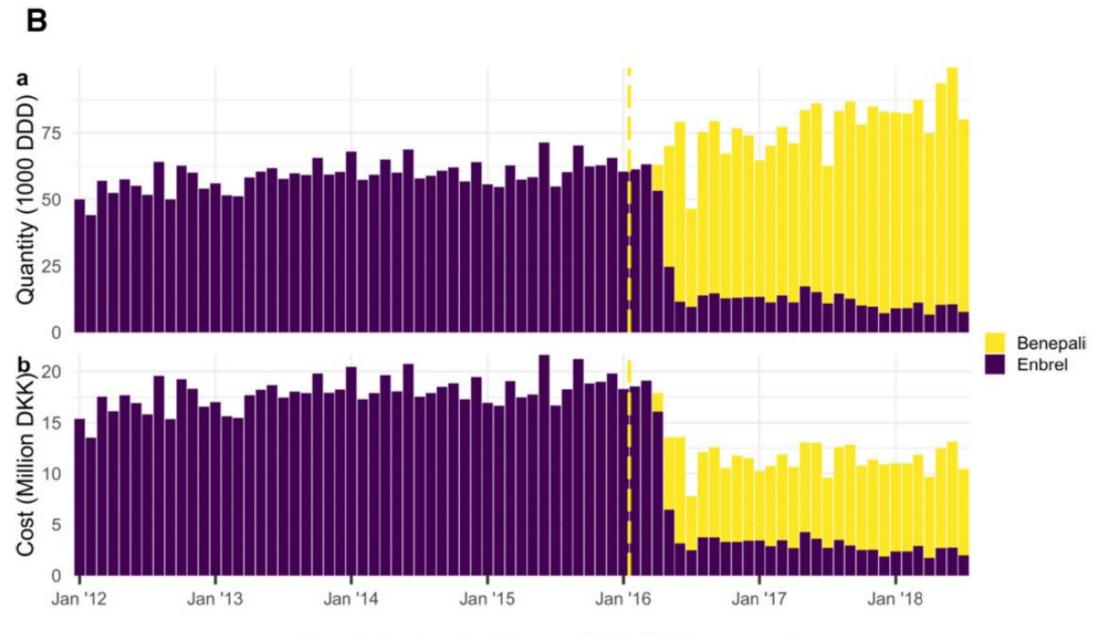
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Hafsah Nabi , 1,2 Stylianos Georgiadis , 1 Anne Gitte Loft , 3,4 Oliver Hendricks , 5,6 Marlene Andersen , 7 Stavros Chrysidis , 8 Ada Colic , 9 Kamilla Danebod , 10 Mohamad Redha Hussein, 11 Maren Høgberget Kalisz , 12 Salome Kristensen , 13 Niels Lomborg , 14 Natalia Manilo, 15 Heidi Lausten Munk , 16 Jens Kristian Pedersen , 17 Johnny Lillelund Raun, 18 Frank Mehnert , 19 Niels Steen Krogh, 20 Merete Lund Hetland , 1,2 Bente Glintborg , 1,2
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Clinical and epidemiological research

#### EXTENDED REPORT

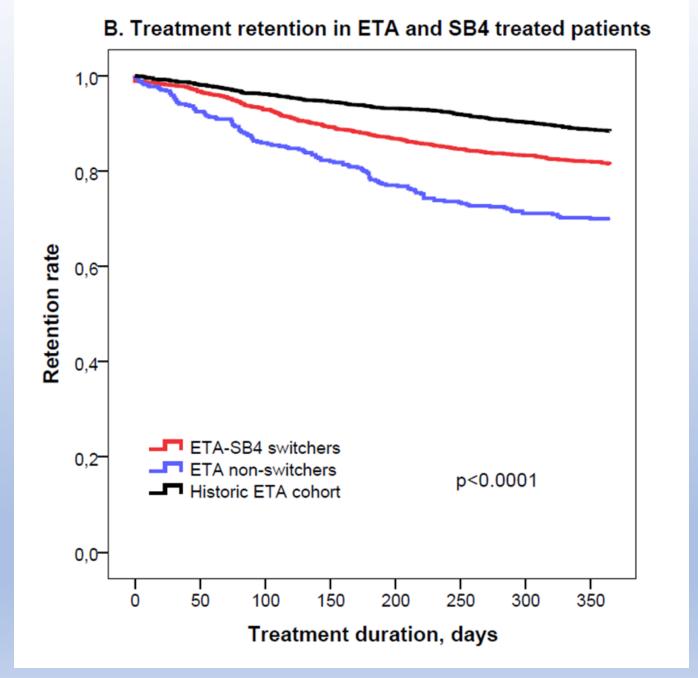
To switch or not to switch: results of a nationwide guideline of mandatory switching from originator to biosimilal etanercept. One-year treatment outcomes in 2061 patients with inflammatory arthritis from the DANBIO registry

Bente Glintborg, <sup>1,2</sup> Anne Gitte Loft, <sup>3,4</sup> Emina Omerovic, <sup>5</sup> Oliver Hendricks, <sup>6</sup> Asta Linauskas, <sup>7</sup> Jakob Espesen, <sup>8</sup> Kamilla Danebod, <sup>2</sup> Dorte Vendelbo Jensen, <sup>2</sup> Henrik Nordin, <sup>9</sup> Emil Barner Dalgaard, <sup>10</sup> Stavros Chrysidis, <sup>11</sup> Salome Kristensen, <sup>12</sup> Johnny Lillelund Raun, <sup>13</sup> Hanne Lindegaard, <sup>14</sup> Natalia Manilo, <sup>15</sup> Susanne Højmark Jakobsen, <sup>16</sup> Inger Marie Jensen Hansen, <sup>16</sup> Dorte Dalsgaard Pedersen, <sup>17</sup> Inge Juul Sørensen, <sup>18,19</sup> Lis Smedegaard Andersen, <sup>20</sup> Jolanta Grydehøj, <sup>21</sup> Frank Mehnert, <sup>22</sup> Niels Steen Krogh, <sup>23</sup> Merete Lund Hetland <sup>18,19</sup>

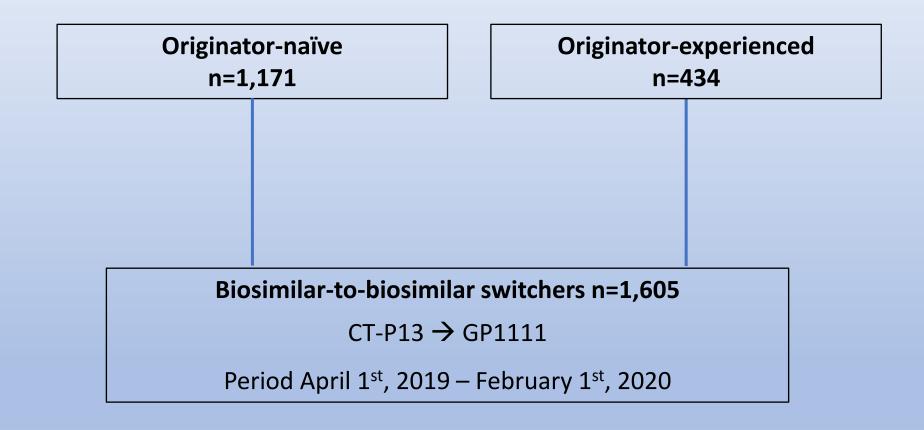


The dashed vertical line on 1 Feb 2016 represents the date of expiration of the Enbrel patent

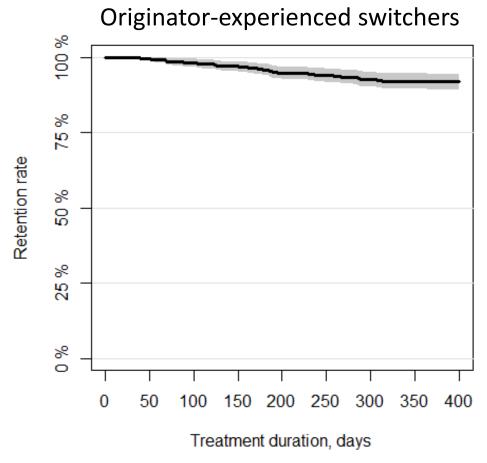
### Etanercept switch

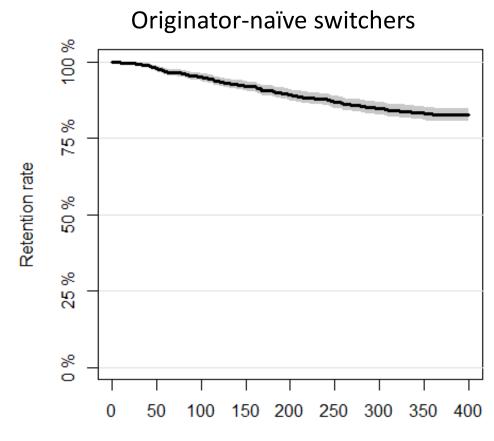


### Infliximab biosimilar-biosimilar switching



### Biosimilar-to-biosimilar infliximab switches





Treatment duration, days

	Day 0	Day 180	Day 365	Day 0 Da	y 180	Day 365
No. at risk	434	416	400	1171 1	L059	969
No. of events	0	18	34	0	112	202
Retention (95% CI)	100.0%	95.9%	91.9%	100.0% 9	0.4%	82.7%
	(100-100%)	(94-98%)	(89-95%)	(100-100%) (89	9-92%)	(81-85%)

### Conclusion, biosimilars in routine care

In Danish rheumatology

- A range of mandatory biosimilar switches have been performed
- Data from DANBIO have confirmed interchangeability of originators and biosimilars (infliximab, etanercept, adalimumab)

### Thank you for your attention

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