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Determinantes, barreiras e facilitadores da utilização de medicamentos biossimilares nos hospitais públicos em Portugal

DETERMINANTS OF BIOSIMILAR UPTAKE IN PORTUGAL – STUDY 1

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RELEVANCE OF THE TOPIC

» Health system objectives: Access, Equity, Quality, Responsiveness

Sustainability: if the health system is not sustainable

Tax increases: sacrifice other consumptions

Debt increases: sacrifice the consumption of future generations

» Rationing: sacrifice access to care

» Biosimilars: free resources to avoid sacrifices

RATIONALIZING, NOT RATIONING!

INTERNATIONAL STUDIES

- » Cross-country differences (from 9% to 94%): guidelines; quotas and incentives; independent information; limitations on discounts; availability

Within-country variation?

DATA

- » Portal da Transparência do SNS
- » Completed with data on RCTs (Infarmed), public contracts (Portal Base), and GDH (casemix index)
- » Period January 2015-July 2021, 45 SNS hospitals, monthly data
- » Selected drugs: adalimumab, etanercept, infliximab, rituximab, and trastuzumab

OBJECTIVE: UNDERSTAND THE HIGH HETEROGENEITY ACROSS SNS HOSPITALS

50% of the hospitals

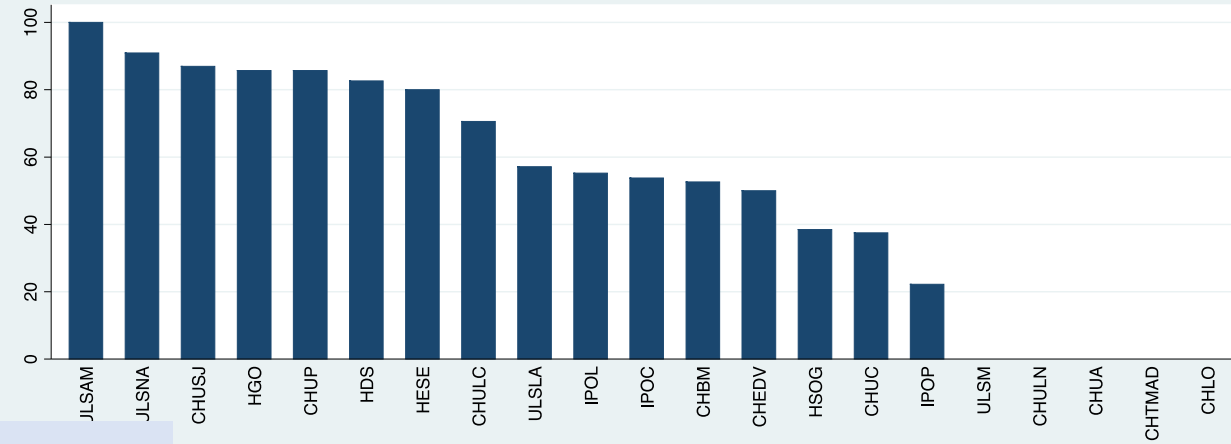
>2.5 year to adopt etanercept biosimilar

> 3.5 year for rituximab biosimilar

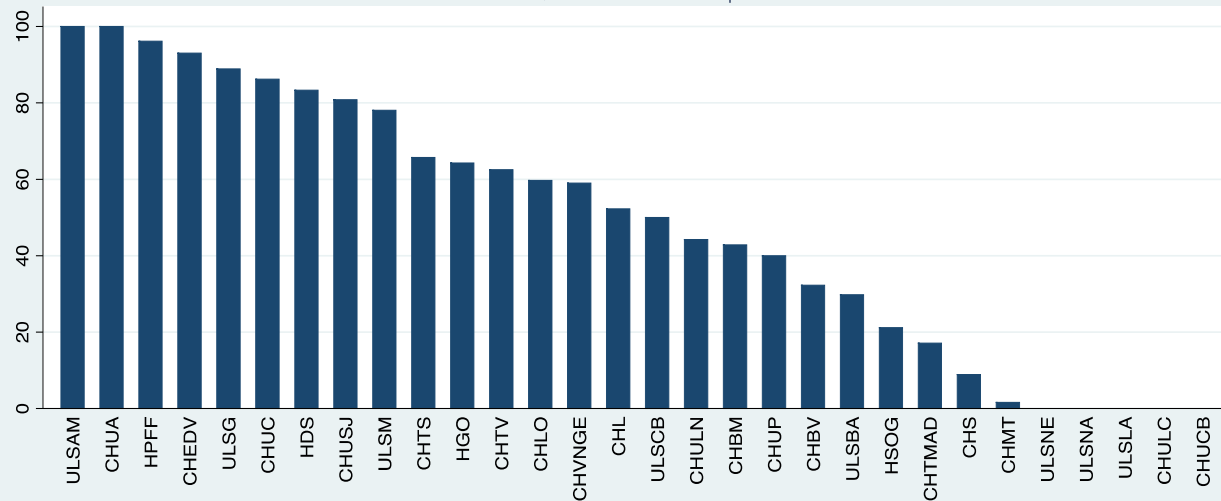
almost two years for trastuzumab biosimilar

December 2020

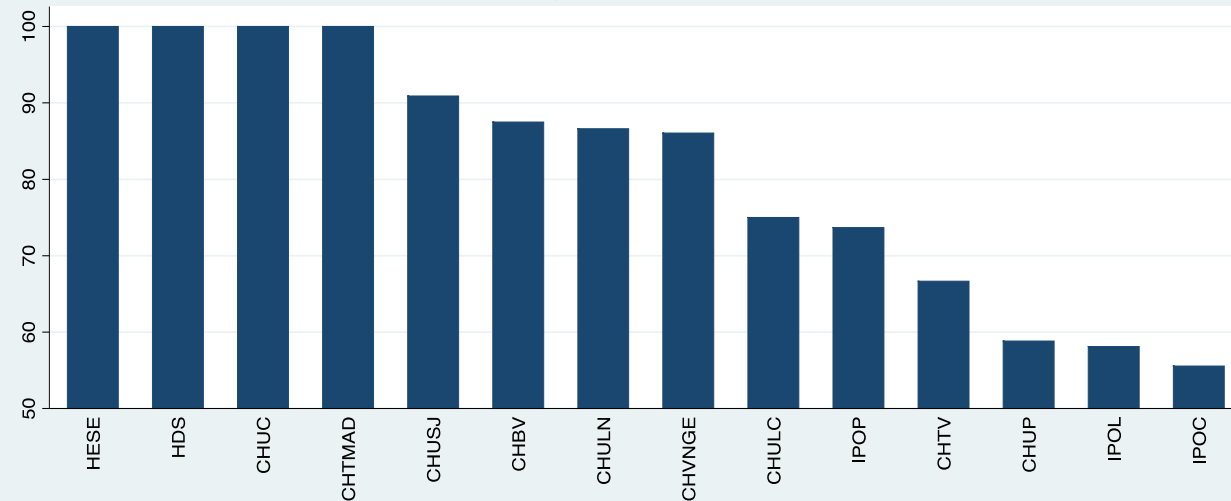
Quota biosimilares - Trastuzumab



Quota biosimilares - Etanercept



Quota biosimilares - Rituximab



KEY FINDINGS

“FIRST BIOLOGICS UPTAKERS” HYPOTHESIS

» **Academic hospitals:** quicker uptake in some cases, but lower quotas

Quicker uptake may lead to more difficult switch

Compulsory delivery to privately followed patients

» **Higher consumption:** lower quota (except rituximab)

Possibility to get larger rebates for originator drugs

Unobserved higher casemix

KEY FINDINGS

“SAVINGS FOR INNOVATION” HYPOTHESIS

- More RCTs: quicker uptake, higher quota
- Hospitals with higher portfolios of originator company: quicker adoption and higher quotas in some cases

Stronger interest in adopting new costly therapies

Greater need to produce savings for such investment

Greater link also to biosimilar firms

POTENTIAL UPTAKE

» Potential savings if all hospitals behaved as best performers:

5.443 million for adalimumab (26% savings)

1.499 million euros for etanercept (7%)

2.766 million euros for infliximab (13%)

28,448 euros for rituximab (9%)

4.194 million euros for trastuzumab (32%)

» Potential savings of 13.9 millions per year, out of 76.7 million, for these 5 drugs



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