ECONOMIC IMPACT OF BIOLOGICAL MEDICINES ON A THIRD-LEVEL HOSPITAL

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BACKGROUND

High costs of biological medicines (BM) are a financial issue. Biosimilar drugs (BS) improved their accessibility by reducing their prices.

AIM AND OBJECTIVES

- To analyse costs of BM administered in the hospital setting and BM dispensed in the hospital pharmacy.
- To evaluate the economic impact of introducing BS in our hospital.

MATERIALS AND METHODS

Retrospective observational study performed in a tertiary hospital

- Study period: 4 years (2015-2019)
- Sources of information: BotPlus®, electronic prescription system, dispensation programmes

Types of BM:

- Monoclonal antibodies (Mab)
- Recombinant proteins (RP)
- Vaccines or immunoglobulins (V)

Variables:

- Active substance
- Brand name
- ATC code
- Units dispensed (number, cost)

RESULTS

% expenditure by type:

- Mab 72.5%
- PR 27.3%
- V 0.2%

Expenditure on BM:

- 2015: 8,298,177 €
- 2016: 9,123,228 €
- 2017: 10,329,683 €
- 2018: 10,942,396 €
- 2019: 12,533,034 €
- TOTAL: 51,226,517 €

Expenditure on BS:

- IFX 7,277,499 €
- ADA 7,023,066 €
- ETA 4,416,568 €

DIRECT 1,466,034 €
INDIRECT 10,509,104 €
TOTAL 11,975,408 €

RESPONSIBLE OF COST SAVINGS:

- IFX BS 56.6%
- ETA BS 19.0%
- TRA BS 17.1%
- others 7.3%

CONCLUSION AND RELEVANCE

- BM expenditure has increased >50% in the last 5 years (being Mab main responsible).
- BM with the highest budgetary impact were medicines to treat immune mediated diseases
- BS will lead to a reduction of approximately 20% of BM costs