

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:

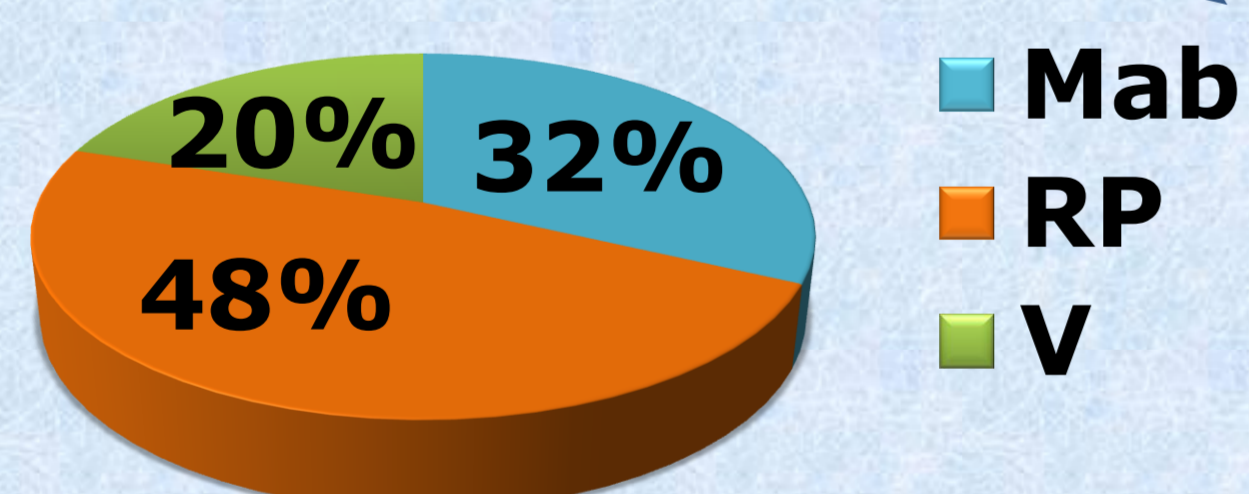
- Active substance
- Brand name
- ATC code
- Units dispensed (number, cost)

RESULTS

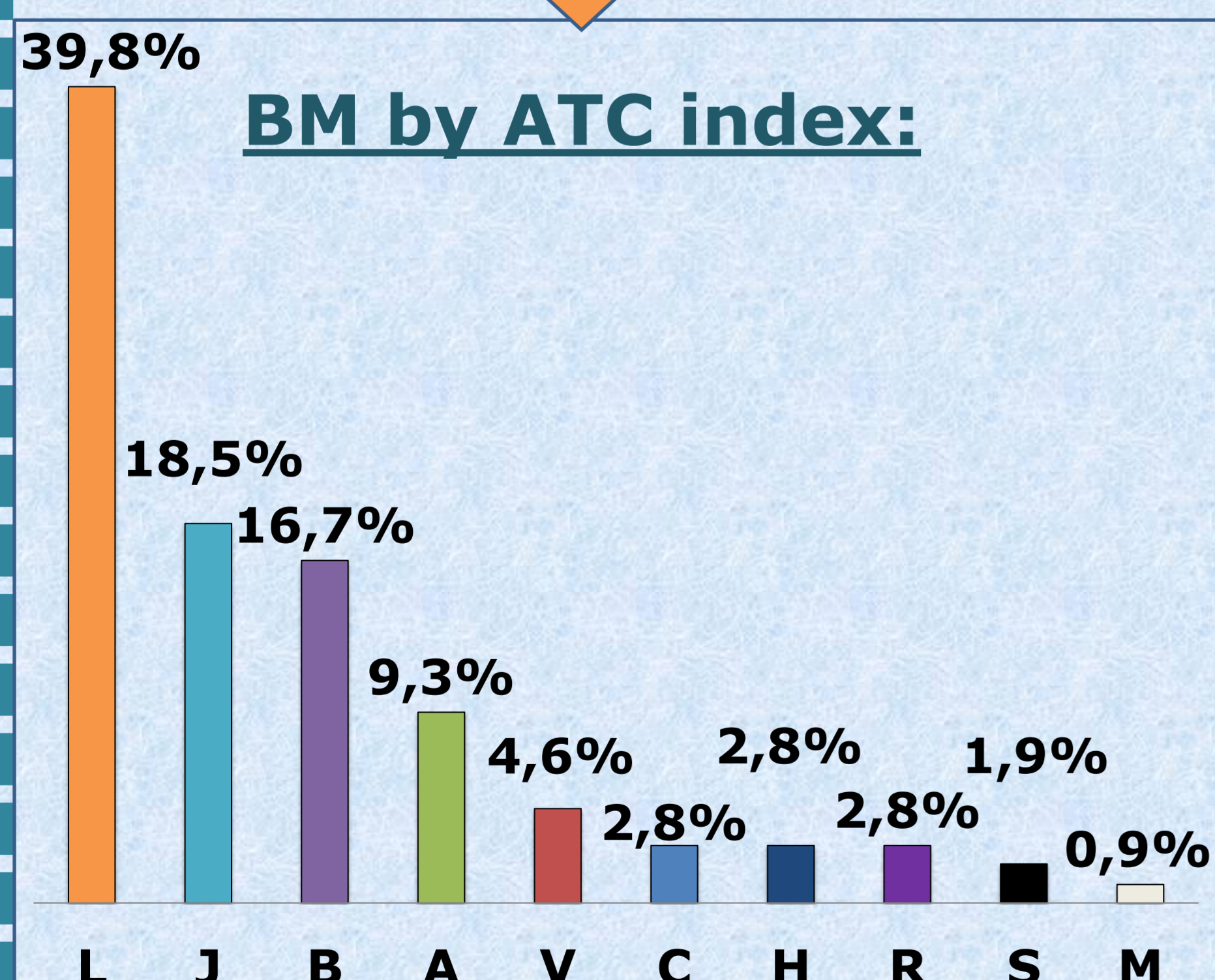
BS introduced:

Infliximab (IFX)	Trastuzumab (TRA)
Epoetin α (EPO)	Pegfilgrastim (PEG)
Etanercept (ETA)	Insulin glargine (INS)
Rituximab (RTX)	Adalimumab (ADA)

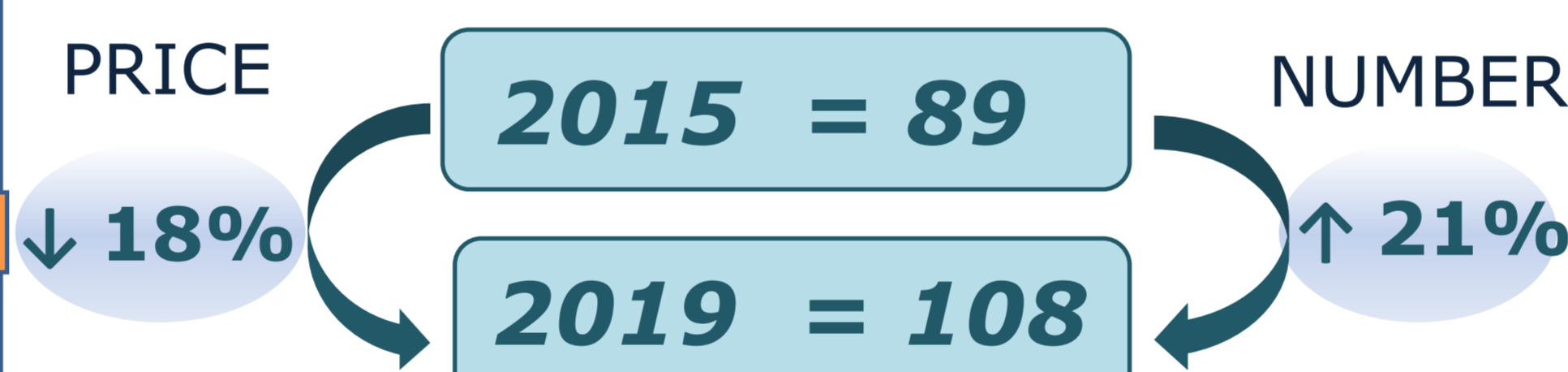
BM by type:



BM by ATC index:



Biological Active Substances:



PHARMACEUTICAL EXPENDITURE

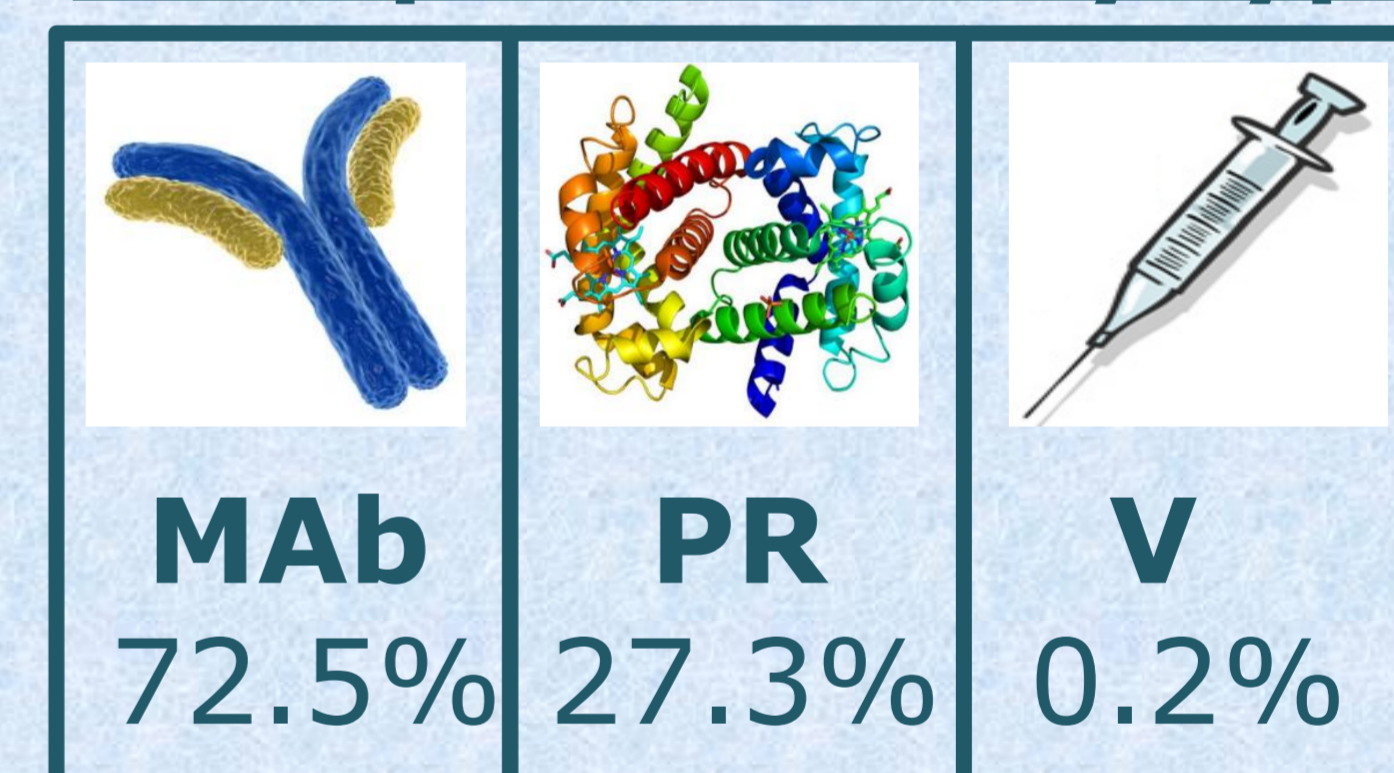
2015	8.298.177 €
2016	9.123.228 €
2017	10.329.683 €
2018	10.942.396 €
2019	12.533.034 €
TOTAL	51.226.517 €

Expenditure on BS: **1.713.288 €** (3.3%)

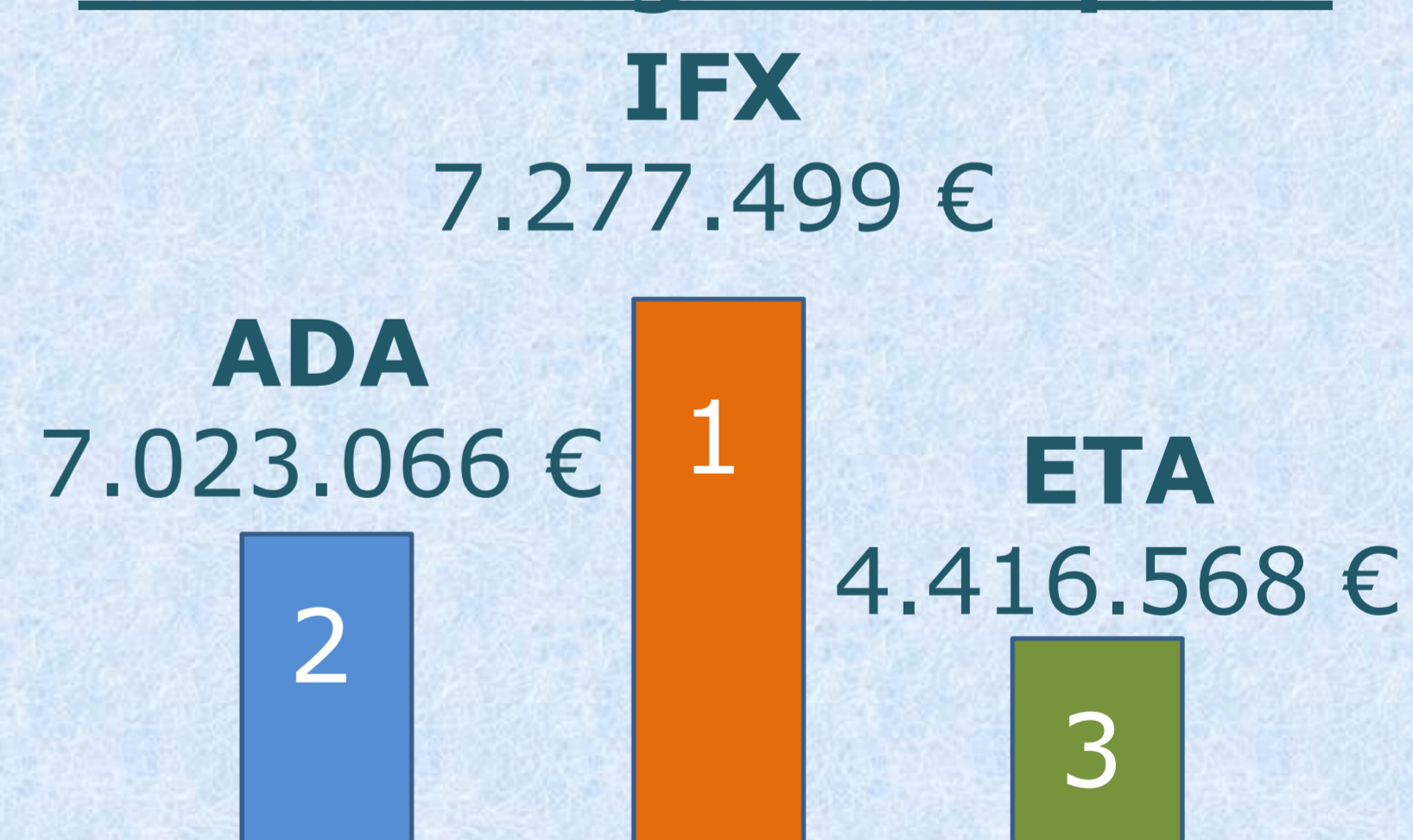
COSTS SAVINGS:

DIRECT	1.466.034 €
INDIRECT	10.509.104 €
TOTAL	11.975.408 €

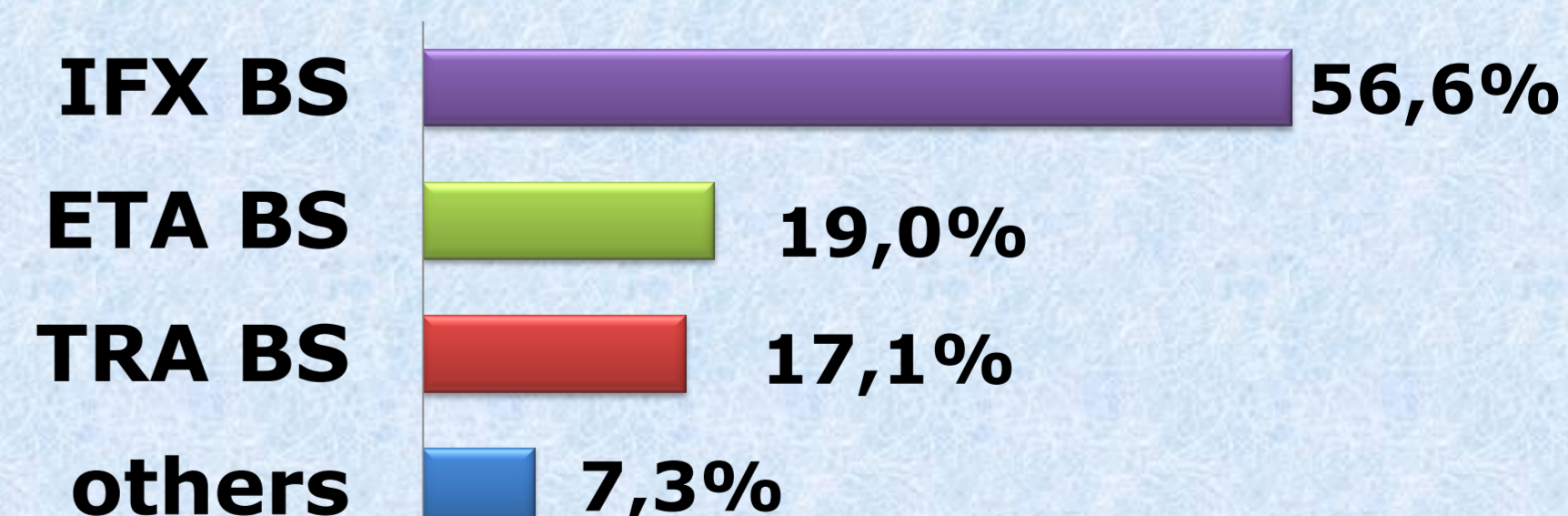
% expenditure by type:



BM with highest impact:



Responsible of cost savings:



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