CLINICAL AND ECONOMIC IMPACT OF INFliximab BIOSIMILAR INFLECTRA IN RHEUMATOID ARTHRITIS, PSORIATIC ARTHROPATHY AND ANKYLosing SPONDYLITIS NAÏVE AND SWITCHED PATIENTS: AFTER 5 YEARS OF FOLLOW-UP
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BACKGROUND
Biosimilar Inflectra® has been authorized by the EMA for Rheumatoid Arthritis (RA), Psoriatic Arthritis (PSA) and Ankylosing Spondylitis (AS).

OBJECTIVES
Determine the persistence, clinic and economic impact of the use of Inflectra® in RA, PSA and AS naïve and Remicade® switched patients.

METHODS
Patients treated with Inflectra® for more than 6 months: we collected age, sex, indication, dose, safety and persistence of Inflectra® naïve patients.

In Remicade® switched patients: we collected persistence before to the switching to Inflectra®. Efficacy endpoints included DAS28 and BASDAI.

We determined the real cost of Inflectra® treatment for each patient from individualized IV administration and correlated dates during the study period were collected from FARMIST/DISPENSA.

We simulated the real cost of these patients as if they have received Remicade®.

RESULTS
From Jun 2015 to Sept 2019 a total of 62 patients 31 AS, 18 RA, 13 PSA were treated with Inflectra®. 33 (53%) patients were naïve patients and 29 (47%) were Remicade® pretreated patients.

At Sept 2019, 33 (54%) patients continued on Inflectra® treatment (11 naïve patients and 22 Remicade® pretreated patients) in clinical remission.

29 patients discontinued therapy: 24 due to relapse of their rheumatology condition. 5 patients due to adverse reactions.

CONCLUSION
The implementation of the procedure to use Inflectra® for all prescriptions of Infliximab® in these patients saved 197,964€ during 5 years.

Figure 1. Remicade® and Inflectra® drugs.

Figure 2. Naive and Switched patients.

Table 1. Persistence in studied patients.