Background

Adalimumab is a subcutaneous anti TNF antibody therapy used in treatment of numerous pathologies related to rheumatology, dermatology and gastroenterology areas. This drug is on the top of ranking of annual hospital budget. Data exclusivity period on the reference drug (Humira ®) is close to expire.

Objective

To analyse the cost of treatment with biosimilar adalimumab in comparison with its reference drug.

Material and methods

All patients treated (September 2015-August 2016) with adalimumab were included. Data were obtained from electronic medical record (SAP®). The total cost was calculated using the current reference price, 436.06 €, and separated by clinical departments: Rheumatology, Dermatology and Gastroenterology.

Considering the same price reduction (30% less than reference price) for biosimilar adalimumab than that observed for other biosimilar drugs, we estimated the price of biosimilar adalimumab in 305.24 €. Cost saving was calculated considering the expected biosimilar adalimumab price for the same period.

Results

A total of 326 patients were treated with 5,894 doses of adalimumab during the studied period. The annual cost was 2,570,137.6 €. Divided by department: reumatological pathologies accounted for the 53.4% of the cost, followed by gastroenterological pathologies 28.8%, and dermatological 17.1%; the cost of other areas accounted for less than 1% of total cost.

The economical impact of switching to biosimilar could result in annual saving of 771,041.3 €.

Conclusion

Owing to biosimilar therapy has shown in clinical practise similar results to those observed with the reference drug, we consider that the cost savings associated with the use of biosimilar drugs contributes to the sustainability of the National Health System.

No conflict of interest