South West Clinical Senate

Biosimilar Medicines Recommendations

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Biosimilar Medicines

- The questions
- The context
- A brief recap
- The transition process
- The outcome
- The benefits
- The recommendations and how we did
- Personal observations

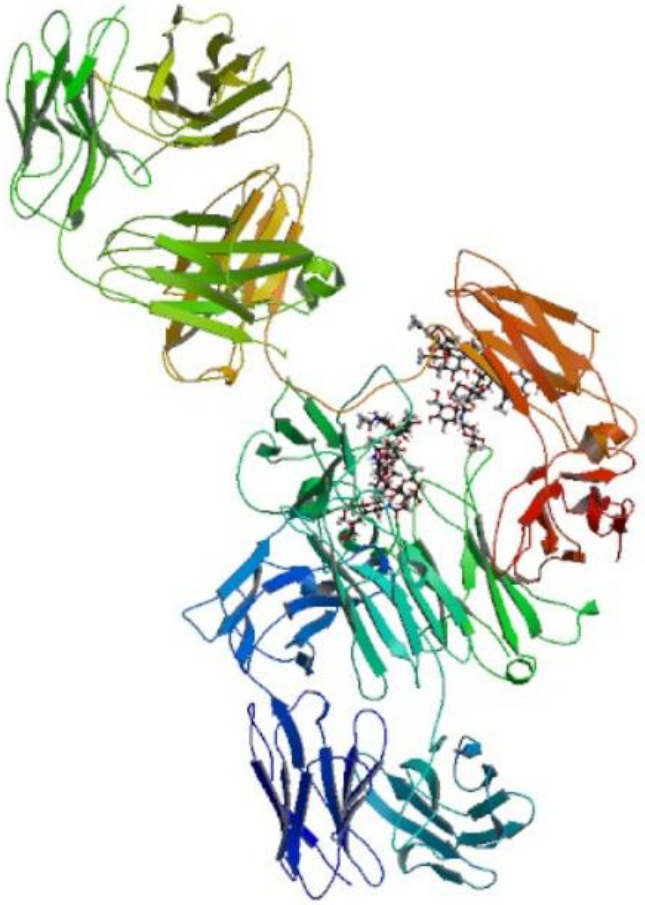
The questions

December 2017

- To what extent and how should the transition to use of biosimilar medicines be prioritised to enable the provision of best value care in the NHS?
- Does the Clinical Senate support the uptake of biosimilar medicines at pace and how can their best practice use be maximised?

The context

- Biologicals and biosimilars
- Adalimumab £450m expenditure
- >40,000 patients
- Loss of exclusivity October 2018

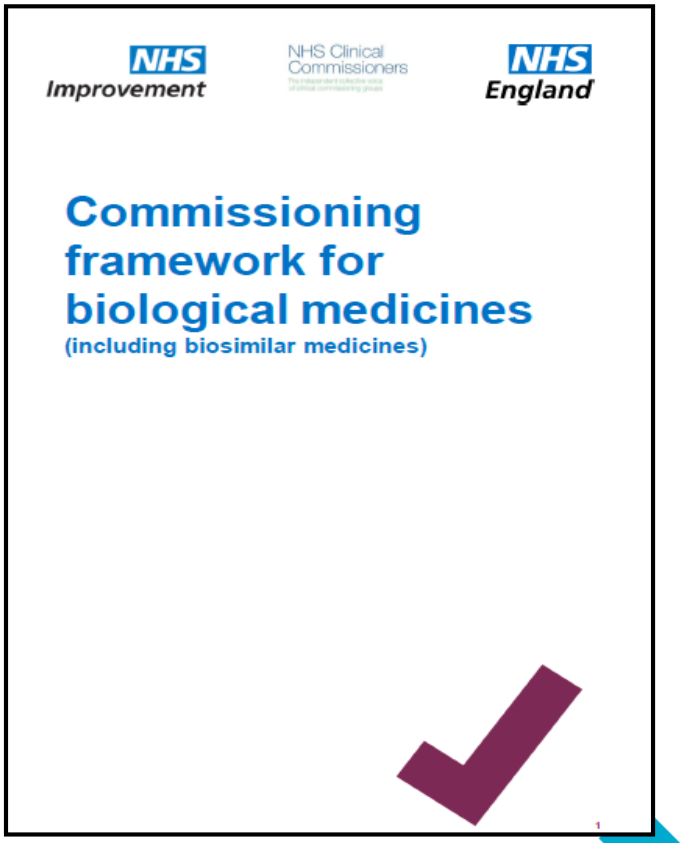


A brief recap: Commissioning Framework for Biological Medicines

Published September 2017

In partnership with industry

- To support commissioners to act promptly to make the most of the opportunity presented by increased competition in biological medicines, including biosimilar medicines
- Sets out actions which can be taken by patients, prescribing clinicians, care providers and commissioners to realise the therapeutic and economic opportunities of biological and biosimilar medicines
- In particular, seeks to set out the importance of a collaborative approach



NHS Improvement

NHS Clinical Commissioners

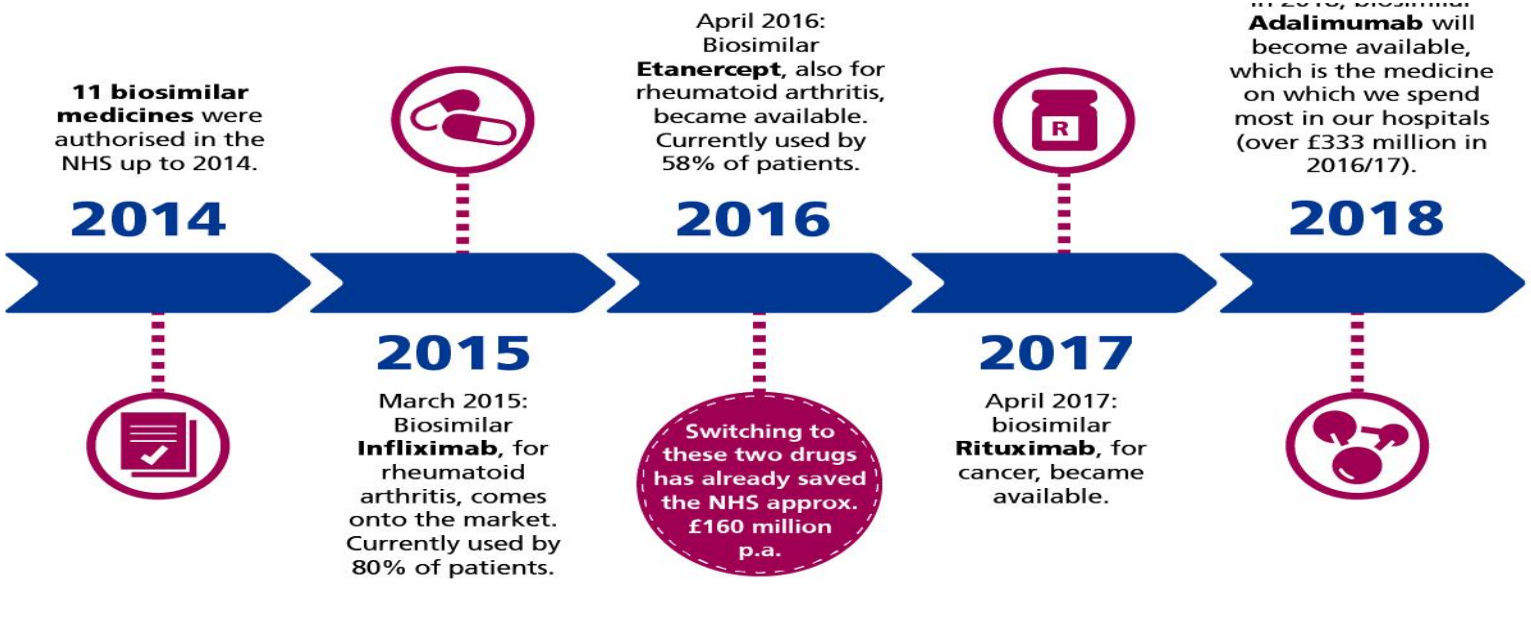
NHS England

Commissioning framework for biological medicines

(including biosimilar medicines)

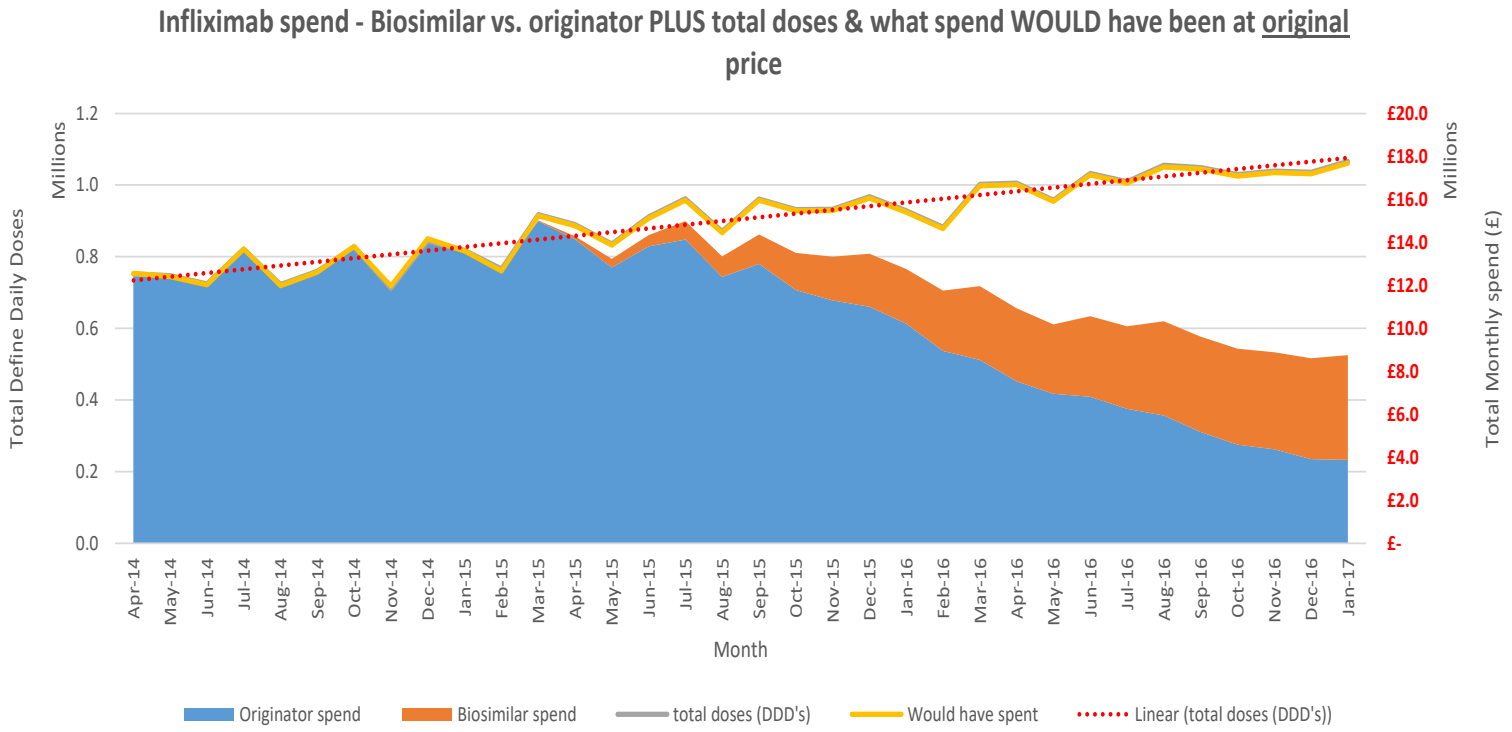
Patients	• Talk to your doctor about your medicines, so you understand them and what the different options are. • Ask them if there is a biosimilar medicine that would be appropriate for you.
Prescribers	• Consider whether a biosimilar medicine may be appropriate for new patients. • Consider whether it would be appropriate to switch existing patients to a biosimilar medicine. • Keep up to date with news from your CCG about biosimilar medicines becoming available.
Providers	• Put in place policies and support for clinicians to enable them to make clinically and cost effective choices in prescribing biological medicines. • Have a communication and implementation plan in place to alert prescribers to new and better value biological and biosimilar medicines that become available, and engage patients affected
Commissioners	• Ensure that your providers have in place policies to encourage clinically and cost effective prescribing of biological medicines. • Have a communication and implementation plan in place to alert providers to new and better value biological and biosimilar medicines that become available, and to engage patients. • Liaise with your NHS England Regional Pharmacist to understand whether there are framework agreements for the biological and biosimilar medicines that you pay for.

Medicines optimisation priority:
The importance of biosimilars



Biosimilar medicines are biological medicines which are highly similar to another biological medicine already licensed for use
To be licensed, a biosimilar medicine must be shown to have no clinically meaningful differences from the originator medicine in terms of quality, safety and efficacy
Where NICE has already recommended the originator biological medicine, the same guidance will normally apply to a biosimilar

Increasing uptake of biosimilars



Drugs such as Infliximab have significant beneficial impact on patients and slow disease progression

Analysis shows more patients are accessing Infliximab (increase from 0.75 million doses/month to 1.1 million)

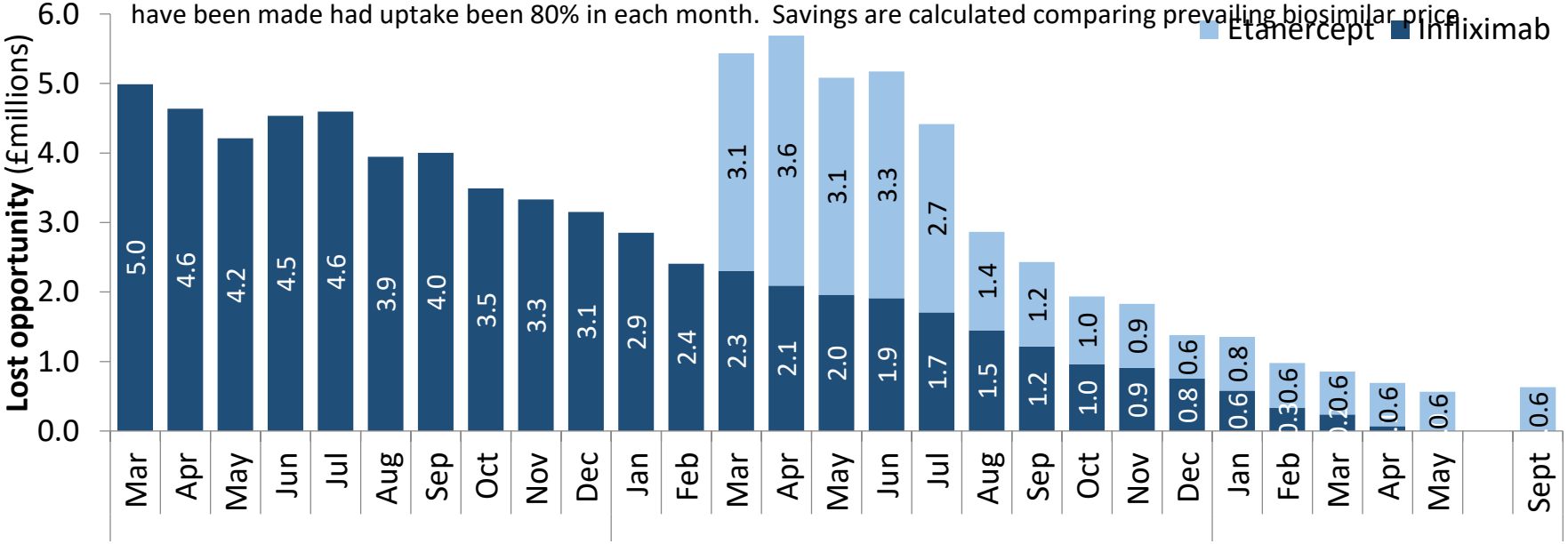
NHS costs would have been £18 million/month and now actually £9 million

Lost opportunities

	Since biosimilar launch up to and including May 2017	2016/17	Sept 2017
Infliximab	£62.6m	£14.10m	£0
Etanercept	£24.2m	£19.8m	£0.6m

Lost cost avoidance opportunity for Infliximab and Etanercept, nationally by month since launch

Lost opportunity = Difference in savings accrued by actual uptake of biosimilars each month and those that could have been made had uptake been 80% in each month. Savings are calculated comparing prevailing biosimilar price



The transition process

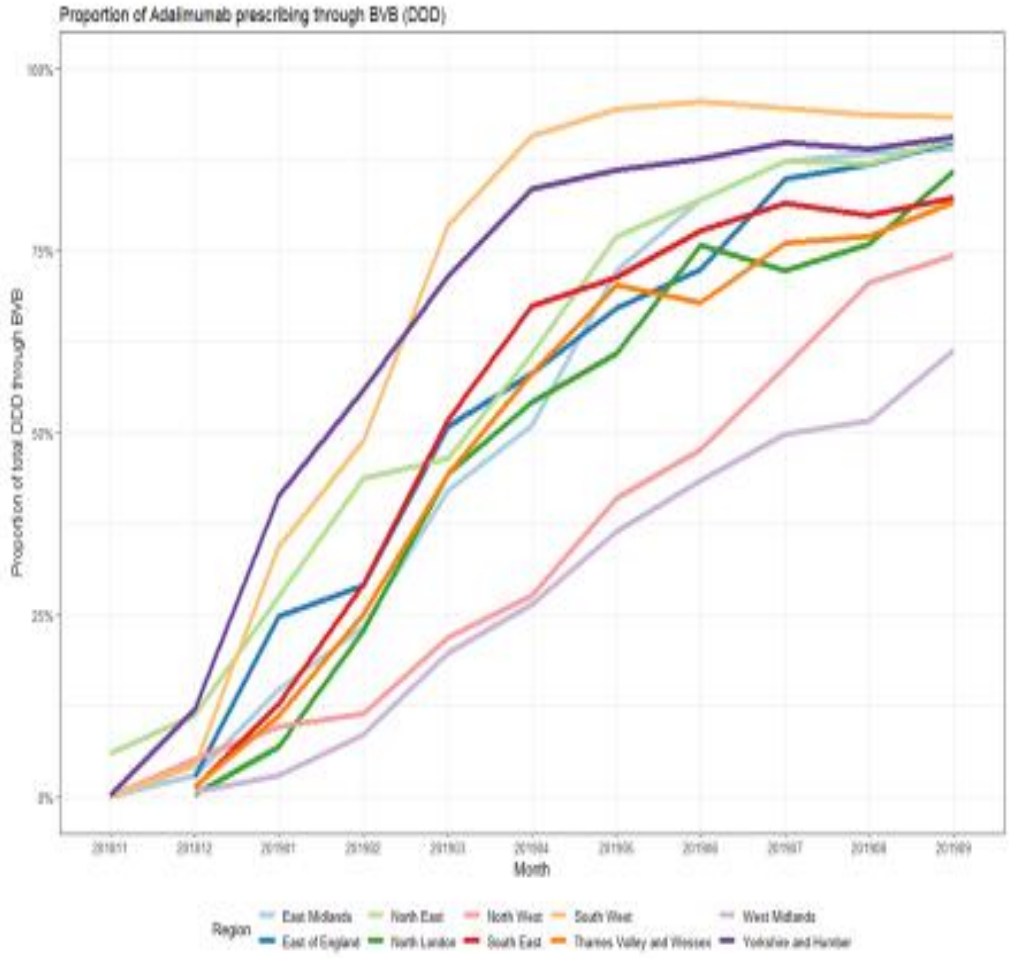
- National tender
- RMOC leadership
- Patient group engagement
- System engagement
  - Clinical, homecare, pharma
- Communication communication communication
  - Briefings
  - Webexes
  - Teleconferences
  - Face to face
  - Metrics

The outcomes and benefits

- Contracts
- Uptake
- Patients and patient groups
  - Existing patients
  - New patients
- Financial - £308m saving
- Next contract underway

BVB prescribing through biosimilars: National

Adalimumab



Other BVBs

National % of prescribing through BVB	
Products	201909
Etanercept	87%
Infliximab	95%
Rituximab	75%
Trastuzumab	94%

No Adalimumab prescribing through biosimilars in South London as originator is BVB.

Adalimumab regions based on tender.

Recommendations

NHS England

Adoption across England with uniform timescales, processes and information	Yes
Commissioning decisions and medicines procurement should be done at scale	Yes
Clear education and clinical engagement ahead of switching	Yes
Incentive agreements are essential and should be consistent	Yes
Prescribers and providers need to be informed	Yes
Prescribing should be done by brand name for traceability of drugs	Yes
Clear evidence and information to enable unanimous support	Partial
Identification of a clinical switch champion	Partial
National preparation for the marketing of adalimumab should begin now	Yes
National approach to support the benchmarking of data to add to evidence base	Partial
Strong patient involvement is required and a provider switch team	Yes
Where possible patients would be informed of the switch in a consultation	Partial

Next Steps

Shared with CCGs, STPs, NHSE and other Senates across England	Yes
Shared through RMOCs	Yes
Fed into follow up work	Yes

Observations

- Very helpful step on the journey – next steps interchangeability?
- Different perspectives from patients / clinicians / Healthwatch / MHRA / pharma industry / NHSE/I provided a comprehensive position
- The independence of the Clinical Senate discussions and conclusions carried weight and assurance
- Significant value of report in discussions, particularly with patient groups
- Senate recommendations made a difference