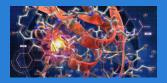
Biosimilars - Innovative Molecules Responding to the Demand for Biologics Treatment

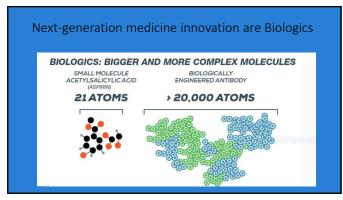


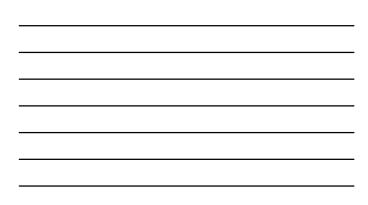
Marile L. Santamarina MS, PharmD, CPh, CDCES, CPI Innovative Pharmacy Practice Conference September 9-10, 2023

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Objectives

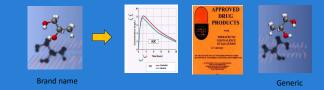
- 1) Describe development of biosimilars
- 1) Discuss common misconceptions with biosimilars.
- 2) Describe nocebo effects with Biosimilars.
- 3) Identify role of the pharmacist in the adoption of Biosimilars.





Small Molecule / Conventional Drugs

- "Conventional" or small molecule drug o Identical molecules synthesized chemically in the laboratory o Smaller molecules



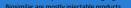
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Large Molecule / Biologic Drugs



SMALL MOLECULE

*





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Rationale for Developing Biosimilars

- Rationale for Biosimilars developed in US
 Biologics USE accounted~2% of drug use
 Biologic EXPENDITURE accounted for ~37% of drug use
- > In 2010 → as part of the Affordable Care Act → Biologics Price Competition Act (BCPIA)

 o Provided an "Abbreviated Pathway" for Biosimilar drug approval

- > Biosimilars in Europe
 o In 2006 → Europe approved their first biosimilar → Somatotropin
 o In 2022 cumulative cost savings resulting the impact of competition of biosimilars reached more than
 - € 30 billion
 Europe has 93 biosimilars as of May 2023

Development of Biologics

- > A biosimilars can be marketed once the period of exclusivity of the biologic reference product has expired
- > Period of exclusivity of biologics ranges between 8-12 years
- ➤ The biosimilar drug demonstrates to FDA → There is NO CLINICALLYT MEANINFUL DIFFERENCE the efficacy, safety or immunogenicity between the reference product and the biosimilar



HEALTH INC.

AbbVie's blockbuster drug Humira finally loses its 20-year, \$200 billion monopoly January 31, 2023 · 6:00 AM ET By Leslie Walker, Dan Gorenst



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Rationale for Developing Biosimilars

> Increase medication innovation



- \succ Increase competition between pharmaceutical companies → Reduce drug prices $_{\odot}$ Humira cost without insurance → \$6,922 / month
- Increase patient access to medications
 - $_{\odot}\,$ The report finds the average sales price of biosimilars \rightarrow 50% less than the biologic originator

 - Competition from biosimilars has reduced the average sales price of originator product by ~25%
 The market for biosimilar continues to expand and competition among biosimilars has reduced the average sales price or their originator product by an average of 25%

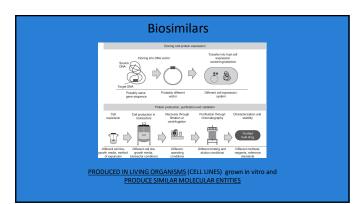
Biosimilars approvals in the US

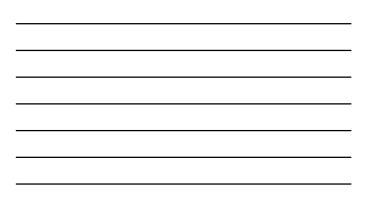
- ➢ Biologics Price and Competition Act → abbreviated pathway for biosimilars
 No dosing finding studies are needed → determined by the reference product
 Clinical trials conducted are smaller and shorter
 No need to conduct clinical trials for "every indication" seeking FDA approval → EXTRAPOLATION
- First biosimilar approved in the US Zarxio (filgrastim-sndz) -- 2015



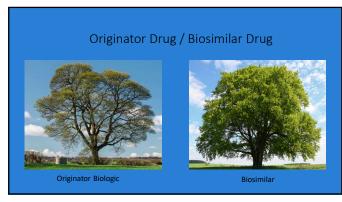
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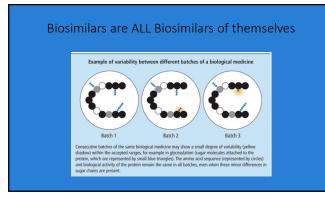






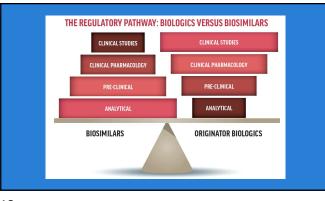






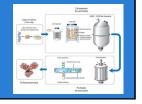
Active substance	Trade name	Company code (BS order)	EU MA date (mm- yyyy)	Number of post-approval MCs(n)	Follow-up to May 2021 (years)	Average incidence rate of MCs/year (high-risk/year)
Inflicinab	Remicade®	Originator (RP)	08-1999	112	21.8	5.2 (0.8)
	Remsims®	CTP13(BS1) ^b	09-2013	133	7.7	17.3 (2.7)
	Inflectra® Flixabl®	SB2 (BS2)	05-2016	57	5.0	11.4 (1.4)
	Zessly®	SB2 (BS2) GP111 (BS3)	05-2016	9	3.0	3.0 (0.0)
Etanercept	Enbrel®	Originator (RP)	02-2018	125	21.3	8.2 (0.9)
connercept	Benepali [®]	SB4 (BS1)	01-2016	43	5.3	81 (0.5)
	Epelzi®	GP2015 (BS2)	06-2017	30	3.9	7.7 (0.0)
	Nepexto#	YLB113 (BS3)	05-2020	8	10	8.0 (0.0)
Adoliminah	Humiral	Originator (RP)	09.2003	124	17.7	7.1 (1.0)
7 Manual Martinez	Amgevita® Solvmbic®*	ABP501 (BS1) ^b	03-2017	11	4.2	2.6 (0.2)
	Imraldi®	SB5 (BS2)	08-2017	45	3.8	12.0 (0.5)
	Cyltezo®*	B1695501 (BS3)	11-2017	1	1.3 ^c	0.8 (0.0)
	Hefiya® Halimatoz® Hyrimoz®	GP2017 (BS4) ^b	07-2018	28	2.8	9.9 (0.7)
	Hulio®	FKB327 (BS5)	09-2018	18	2.7	6.8 (0.7)
	Idacio® Kromeya®	MSB11022 (BS6) ^b	04-2019	7	2.1	3.4 (0.0)
	Amsparity®	PF06410293 (BS7)	02-2020	0	1.3	





Biosimilar FDA Approval Process

- > Is a rigorous approval process which include:
 - o Biosimilar protein molecules production and purification
 - \circ $\,$ Physicochemical and Functional assessment of the molecular entity \rightarrow Longest period
 - $\circ \quad {\sf Pharmacokinetic / Pharmacodynamic studies}$
 - $\circ~$ Clinical Trials \rightarrow Smaller and shorter studies
 - Approval process ~ 7- 8 yrs



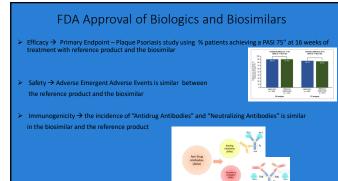


Biosimilars FDA Approval Physicochemical and Functional Assessment Assessment of critical quality attributes of molecular entity Longest period of the biosimilar development program → up to 5 yrs Peptide mapping - Primary structure of molecule Purty of biosimilar Biological functioning and potency compared to originator Pharmacokinetic parameters → Cmax and AUC



Randomized Clinical Trials → smaller (# patients), fewer (# trials)
 o Efficacy, Safety and IMMUNOGENICITY

Biologics must demonstrate that the molecule is HIGHLY SIMILAR to the originator product and exhibits NO CLINICALLY MEANINFUL differences with respect to efficacy, safety and immunogenicity when compared to originator product

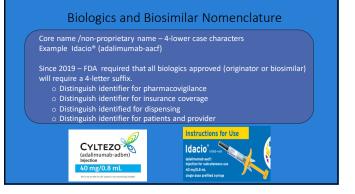


Question #1

During the FDA approval process of a biosimilar. The biosimilar must demonstrate that the molecule structure, PK parameters, safety, efficacy and immunogenicity of the biosimilar is highly similar and will have no clinically meaningful differences with respect to efficacy, safety and immunogenicity when compared to the reference product.

a)	True	
b)	Falco	

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Misconceptions associated with Biosimilars

Biosimilars and Extrapolation

Biosimilar do not conduct clinical trials for EVERY SINGLE indication requested from the FDA

- By FDA using the concept of Extrapolation
 Data provided in the Biosimilar application
 Reference product safety, efficacy and immunogenicity data presented to FDA
 Indication pathophysiology THE CLINICAL TRIAL Conc Objective observation

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Interchangeability of Biosimilars

- \succ Only use US \rightarrow Definition Interchangeability = a interchangeable biosimilar may be substitute at the time of dispensing by a pharmacists without the intervention of the prescriber this varies depending on every State Board of Pharmacy
- \succ Interchangeable designation does not exist in Europe \rightarrow when the biosimilars demonstrate no clinically meaningful difference in terms efficacy, safety and immunogenicity between reference product and biosimilar ightarrow all biosimilar are interchangeable in EU

EMA (first biosimilar approved-2006). In 2022 – analyzed biosimilar data concluded \rightarrow there is no evidence that switching between a biosimilar and its reference product will increase the risk of immunogenicit

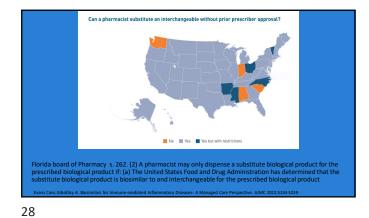


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Interchangeability of Biosimilars

- \succ The FDA has created a new regulatory designation \rightarrow Interchangeability
- Biosimilars requesting "Interchangeable" designation must provide to the FDA one study having at least 3 switches between reference product and biosimilar
- Biosimilars having the interchangeability designation are not more similar or superior to biosimilars not having such designation







June 20, 2023
 June 20, 2023
 June 20, 2023
 June 20, 2023
 Biosimilar Red Tape Elimination Act

 Introduction of "Interchangeability" by the FDA has created a two-tiered system for biosimilars approval which
has confused \rightarrow physicians, patients and State Board of Pharmacy about the safety and efficacy of biosimilars

 This two-tiered system has affected the adoption of biosimilars in the US

 Some State Board of Pharmacy have passed laws "not allowing" pharmacists from automatically substituting a
reference biologic for its biosimilar unless they have the interchangeable designation from the FDA

 As of May 2023 \rightarrow FDA has approved 41 biosimilars - 4 biosimilars have applied for interchangeability

 https://www.lee.senate.gov/2023/7/lee-seeks-increased-competition-in-biological-inge-market

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Question #2

As part of the approval process of a biosimilar; the biosimilar must conduct clinical trials in each one of the indications that the biosimilar is seeking approval for

a) True

b) False

Question #3

b) False

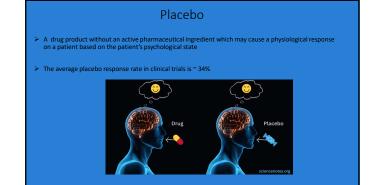
A biosimilar having "interchangeable" designation has demonstrated greater efficacy, safety and immunogenicity than a biosimilars not having "interchangeable" designation a) True

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Question #4 Interchangeability is regulatory designation independent of the approval process as a biosimilar a) True b) False

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Biosimilar and the Nocebo Effect



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Nocebo Effect

- The worsening of symptoms or onset of new clinical issues resulting from a patient's negative belief towards a drug product despite receiving an a pharmaceutically active drug product
- Nocebo effect has been observed in some patients switching from a high-cost biologic to a new lower-cost biosimilar – claiming loss of efficacy with the biosimilar
- A review of randomized blinded clinical trials and their open-label extension period where patients were transition from reference product to the biosimilar discontinuation rates were higher in the open-label studies (14.3%) versus in the blinded clinical trials (6.9%)



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Nocebo Effect

- \succ Very difficult to assess if lack of the rapeutic efficacy from a reference product to biosimilar
- > Could it be that a given biosimilar does not work for a particular patient?
- Is the lack of efficacy to switch from reference product to a biosimilar the result of "Nocebo Effect"?
- A review of multiple clinical trials in patients diagnosed with rheumatoid and psoriatic arthritis after patients were switched from reference product to biosimilar showed a discontinuation therapy rate of 83.6%



Question # 4

The use of biosimilars has been associated with patients experiencing "Nocebo effect".

a) True

b) False

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Role of the Pharmacist in the adoption of Biosimilars

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Pharmacist and Biosimilars adoption

> Provide \rightarrow EDUCATION, EDUCATION, EDUCATION ... patients and providers

- Biologics/ biosimilars treat chronic debilitating disease oncology, irritable bowel disease (peds & adults), rheumatic conditions (peds & adults), plaque psoriasis (peds & adults), ankylosing spondylitis
- Patients do not understand the difference between biologics and biosimilar

 FDA approval process

FDA approval process
 Two-tiered designation → interchangeable or not interchangeable

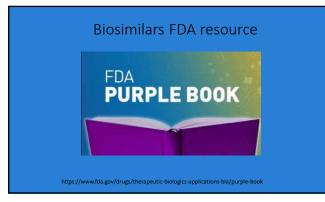


Pharmacists and Adoption of Biosimilars

- $\succ\,$ Patients who have achieve remission of their disease $\, {\rightarrow}\, \rm DO\, NOT$ want to switch to a biosimilar $\, {\rightarrow}\, \rm Ask$ the patient why?
- \succ HCP patients that have patients that have achieved remission on a reference product are reluctant to switch to a biosimilar
- > Insurance coverage will cover biosimilar rather than reference product



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Thank you for your kind attention !!!

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References

1) Lasamil AM, Giezen TJ, Egberts TC et al. nature and timing of post-approval manufacturing changes of tumour necrosis factor cinhibitor product: A 20-yearfollow-up study of originators and biosimilars. Eur J Pharmaceu Sci 175 (2022) 106227 2) US Food and Drug Administration. <u>https://www.fda.gov/drugs/biosimilars/review-and-approval</u> [Accessed August 1, 2023]. 3) Camacho LY, Frost CP, Abella E et al. Biosimilars 101: consideration for US oncologists in clinical practice. Cancer Med 2014;3(4):889-899.

4) Biosimilar insulins: will switching soon be the norm? Practical Diabetes Short Report 2012;38(4):17-20.
5) Lasamil AM, Giezen TJ, Egberts TC et al. nature and timing of post-approval manufacturing changes of tumour necrosis factor a inhibitor product: A 20-yearfollow-up study of originators and biosimilars. Eur J Pharmaceu Sci 175 (2022) 106227
6) Christi LA, Woodcock J, Kosłowski S: Biosimilars: The US regulatory framework. Annu Rev Med 68:243-254, 2017
7) Pizano-Martinez O, Mendieta-Condado E, Vazques del-Mercado M et al. Anti-Drug Antibodies in the biological therapy of autoimmune Rheumatic Diseases. J Clin Medic 2023;12,3271 https://doi.org/10.8350/jcm.1063571.
8) Tesser JRP, Furst DE and Jacobs I. Biosimilars and the extrapolation an indications for inflammatory conditions. Biologics 2017;11:5-11.

9) Interchangeable Biological Products. https://www.fda.gov.biosimilar interchangeability [Access Sep1,2023].

10) The 2023 FL Statutes. Title XXXII. Chapter 465. section 2 [Accessed sep1,2023]. 11) Vrhovac. Placebo and its importance in medicine. Int J Clin Pharmacol Biopharm 1977;15(4):161-165.

Orloca L, Placeba and its importance in medicine, init 2 cm Plarmaco signarin 3977(25(4):101-05).
 Colloca L, Planaccione R and Murphy KT. The Clinical Implications of Nocebo effects for Biosimilar Therapy. Front Pharm 2019;10:1372.

44

Reference

 Jacobs I, Singh E, Sewell KL, et al. Patient attitudes and understanding about biosimilars: an international cross-sectional survey. *Jaccess August 28,2023.rvey. Patient Prefer Adhrence.* 2016;10:937-948.
 Tweehuysen L, van der Bent BJ, van Ingen IL et al. Subjective complaint as the Main Reason for Biosimilar Discontinuation after Open-Jabel Transition from Reference. Infliximab to Biosimilar Infliximab. Arthr & Rheum 2018;70:60-

Discontinuation after Open-label Transition from Reference Infliximab to Biosimilar Infliximab. Arthr & Rheum 2018;70:60-68.

15) Gasteiger C, Gasteiger N, Petrie KJ. Pharmacists' confidence in explaining biosimilars to patients before a nationwide medicine change: a cross-sectional study. Explor Res Clin Soc Phorm. 2022;8:100199.

16) Jacobs I, Singh E, Sewell KL, et al. Patient attitudes and understanding about biosimilars: an international cross-sectional suAccess August 28,2023.rvep. Patient Prefer Adherence. 2016;10:937-948.

17) Purple Book. FDA. https://www.fda.gov/drugs/therapeutic-biologics-applications-bla/purple-book 18) Cardinal Health Biosimilar Report. <u>https://www.cardinalhealth.com/en/product-solutions/pharmaceutical-</u> products/biosimilars/biosimilars-report.html Accessed Aug28,2023.