

IMPACT OF SWITCHING TO BIOSIMILAR ETANERCEPT IN RHEUMATOID ARTHRITIS PATIENTS FOLLOWED IN PHARMACEUTICAL CONSULTATIONS AT A TERTIARY HOSPITAL

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BACKGROUND AND IMPORTANCE

Rheumatoid Arthritis (RA) is a chronic, autoimmune, and systemic inflammatory joint disease. Although conventional disease-modifying antirheumatic drugs (DMARDs) remain the first-line therapy for RA management, the introduction of biologic therapies has reshaped the therapeutic paradigm, with etanercept (Enbrel®) being the first biologic approved for moderate-to-severe RA. With the emergence of biosimilars as a more sustainable alternative for healthcare systems, Benepali® and Erelzi® were introduced at our hospital, prompting patient switches in 2019 and 2024, respectively. The implementation of the Immunotherapy Pharmaceutical Consultation (IPC) in 2024 aimed to support patients in therapy management and to mitigate the nocebo effect, thereby ensuring the rational use of healthcare resources and the safety and effectiveness of therapies. Clinical, biochemical, adherence, and quality-of-life parameters were assessed, the latter using the EQ-5D-5L questionnaire administered before and after the switch.

AIM AND OBJECTIVES

To analyze the impact of switching between etanercept formulations in RA patients and the role of IPC follow-up, particularly regarding treatment persistence, pharmacovigilance, and patient-reported quality of life data.

MATERIAL AND METHODS

 Patients with RA receiving treatment with etanercept
  2016-2024
  Patient identification through hospital's pharmaceutical management system
  Data analysis from medical records and the EQ-5D-5L questionnaires
  Data organization using Google Forms and Microsoft Excel

RESULTS

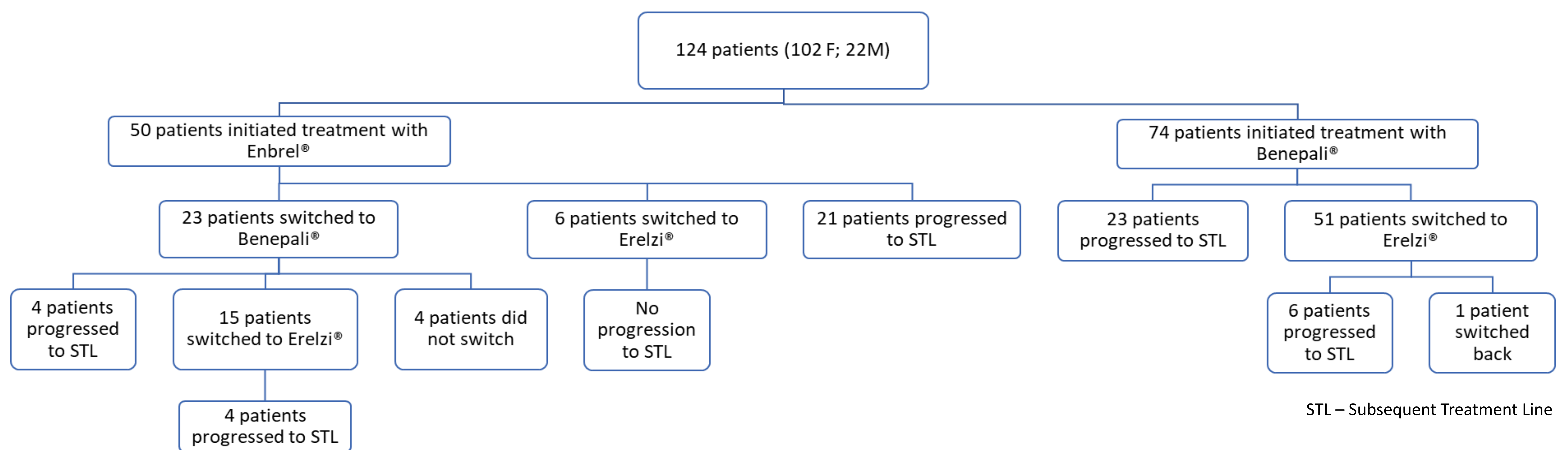
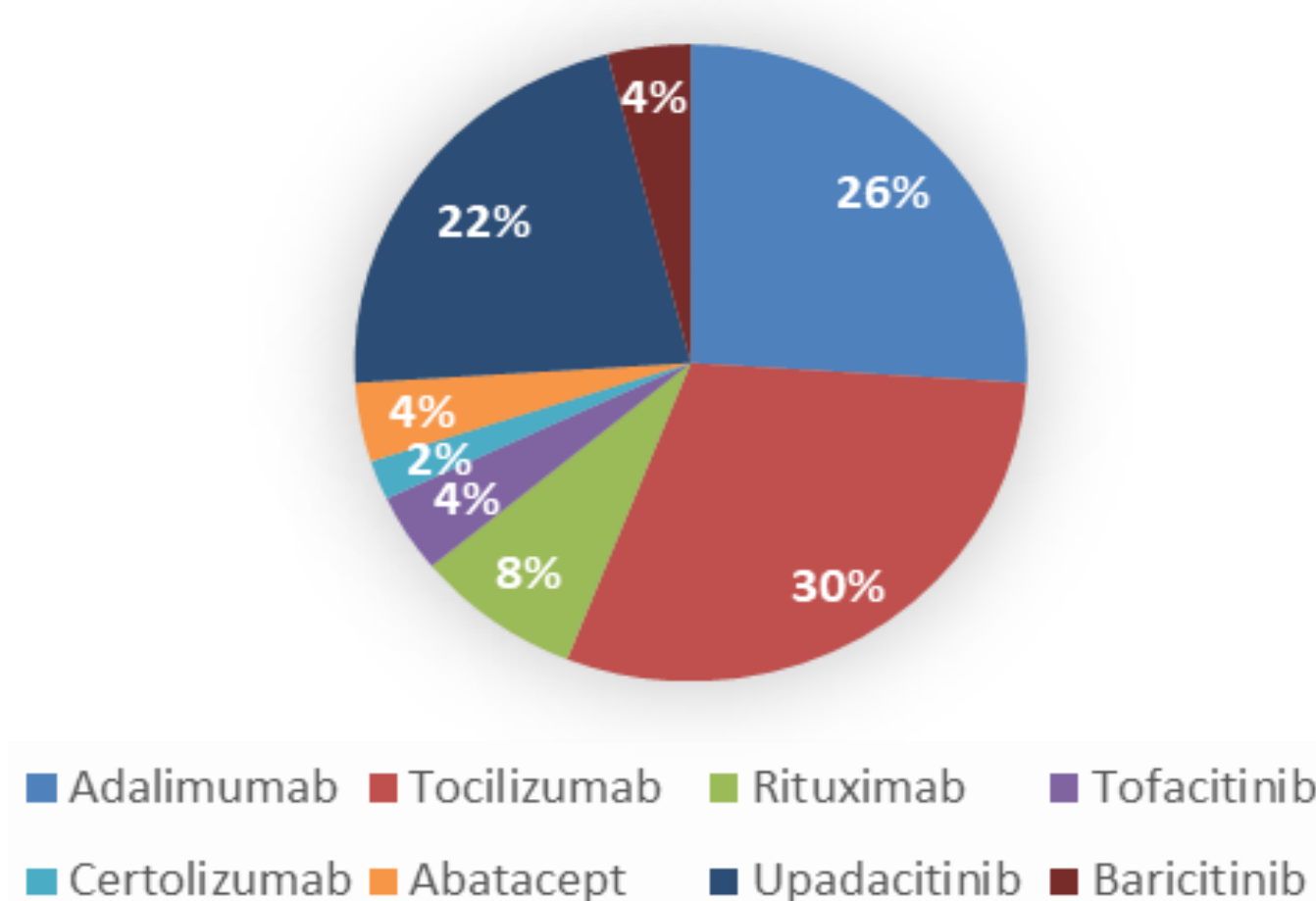


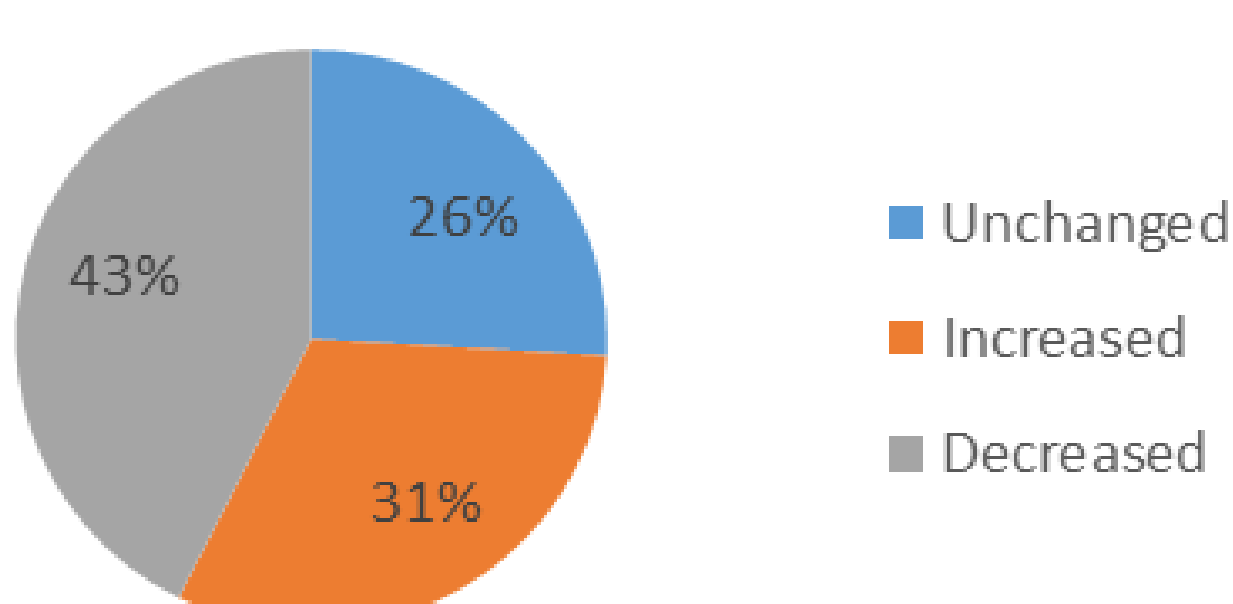
Figure 1 – Summary table of the study on switching between etanercept formulations and subsequent treatment lines

Subsequent treatment lines



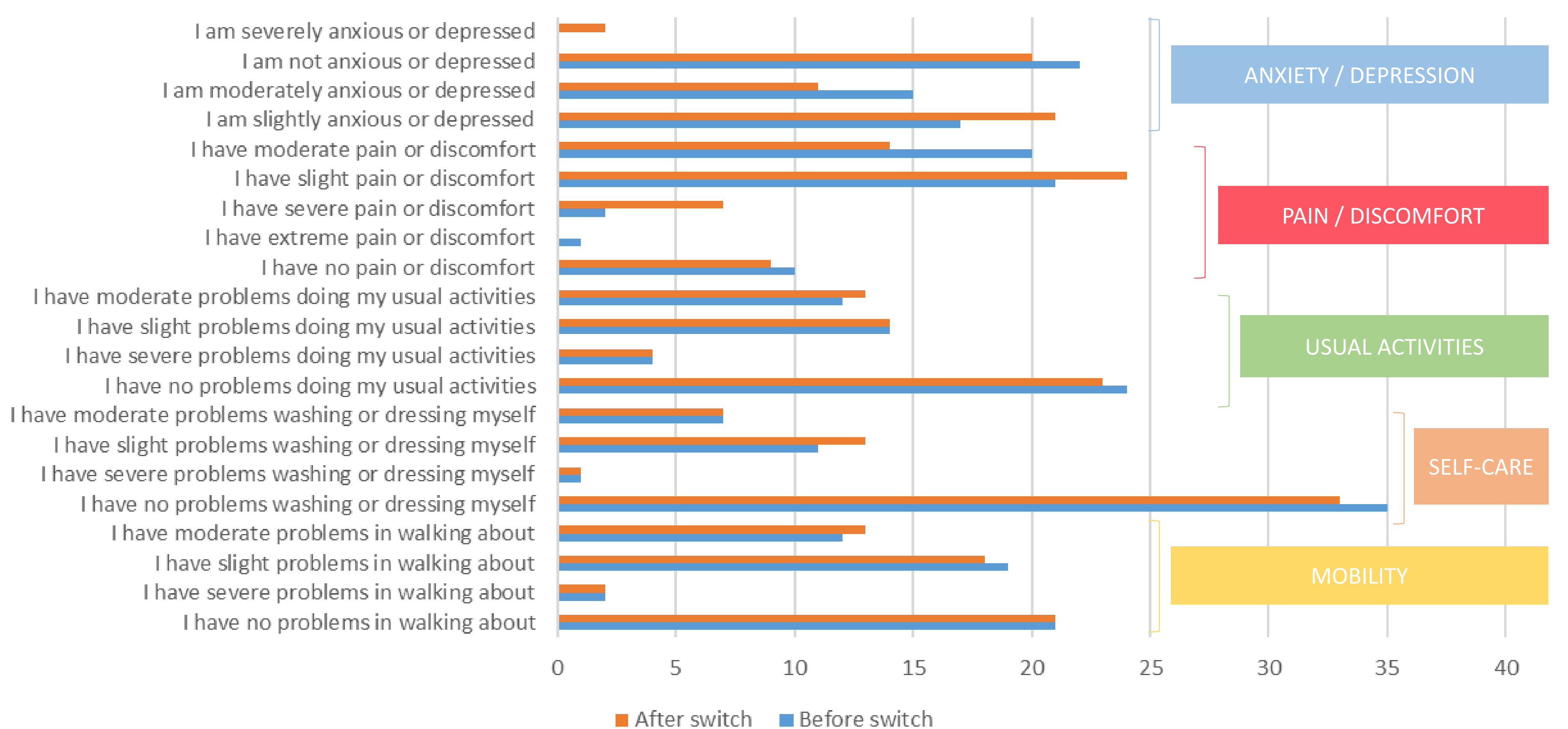
Graph 1 – Drugs used as subsequent-line treatment following etanercept

Post-switch quality of life



Graph 3 – Results of the overall perceived post-switch quality of life, as assessed through the questionnaire administered to patients during the IPC.

Results EQ-5D-5L



Graph 2 – Detailed results of the quality-of-life questionnaire administered to patients during the IPC



10 suspected adverse drug reactions reported since the implementation of the IPC in 2024

CONCLUSION AND RELEVANCE

The switching process proved to be safe and effective, without compromising treatment efficacy, with transitions to subsequent therapy lines likely associated with the natural progression of the disease. The IPC was essential in monitoring the switch, identifying clinical events, and ensuring the rational and safe use of biological therapies in Rheumatoid Arthritis.

REFERENCES AND/OR ACKNOWLEDGEMENTS:

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