

## ADALIMUMAB PERSISTENCE IN CLINICAL PRACTICE AT A REGIONAL HOSPITAL

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### BACKGROUND AND IMPORTANCE

Currently, biosimilar drugs are a great cost-effective alternative to maintain the public health system sustainable.

### AIM AND OBJECTIVES

To analyze persistence between biosimilar and originator adalimumab, as well as predictors associated with a higher risk of discontinuation.

### MATERIALS AND METHODS

Retrospective study carried out in a regional hospital with a reference area of 133,734 inhabitants.

All patients who have been treated in our hospital with originator or biosimilar adalimumab were included. Patients switching were excluded.

Kaplan-Meier method was used to analyze the 48 months retention rate and compared by a stratified log rank test. A Cox proportional hazards regression analysis stratified by age, sex, indication, year of prescription and reason for interruption was done.

Statistical analysis was performed using SPSS Statistics v22. Categorical variables are shown with percentages and quantitative variables with median and interquartile range.

#### VARIABLES COLLECTED

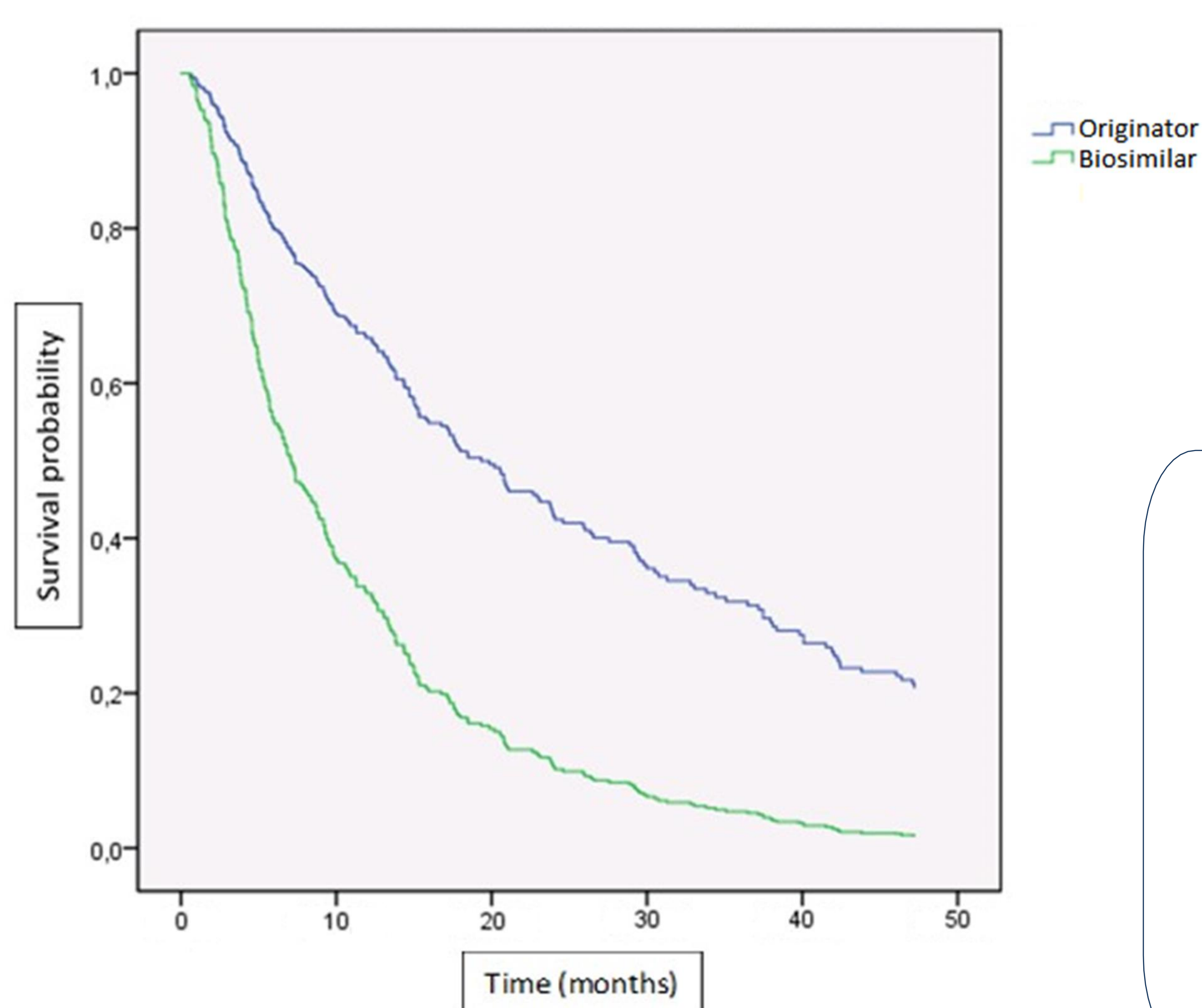
Sex
Age
Treatment
Indication
Starting and ending date
Previous treatments
Reason for interruption

### RESULTS

**401**  
**PATIENTS**  
**INCLUDED**



222 (55.4%) women; age: 54.0 (43.0-63.0) years old  
137 (34.2%) rheumatoid arthritis, 74 (18.5%) psoriasis, 63 (15.7%) Chron disease, 50 (12.5%) spondyloarthritis, 21 (5.2%) hidradenitis suppurativa, 3 (0.7%) ulcerative colitis, 2 (0.5%) juvenile idiopathic arthritis, 1 (0.2%) SAPHO



	Treatment duration (months)	Estimated patient proportion after 48 months
Originator	21.9 (5.7-61.8)	30.1%
Biosimilar	9.3 (5.0-20.7)	2.2%

Originator showed a higher survival retention (HR 0.42, 95% CI 0.34-0.53, p<0.0001)

Main reasons for stopping adalimumab: 74 (18.5%) no response, 58 (14.5%) adverse affect, 47 (11.7%) loss of effectiveness and 33 (8.2%) remission

The Cox proportional hazard regression showed that the predictors significantly associated with adalimumab discontinuation were age, reason for discontinuation and year of prescription

### CONCLUSIONS

- Biosimilar persistence was lower than expected. Probable reasons were lack of clinician's confidence and the increasing variability of treatments.
- The duration of treatment with originator was more than twice longer than biosimilar.
- The highest number of discontinuations took place in the first 12 months.
- The high number of discontinuations causes a lot of biological turnover.

