

TREATMENT DISCONTINUATION FOR BIOSIMILAR VERSUS ORIGINATOR IN INFLIXIMAB INITIATORS

Sasha Bernatsky

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Poster

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A Canadian claims-based study of 7,220 infliximab-naïve patients found no significant difference in discontinuation rates between biosimilar and originator infliximab over 2015–2019.

KEY POINTS

- Among 7,220 infliximab-naïve adults across Canadian provincial drug plans (excluding Quebec), 28.3% initiated biosimilar infliximab and 71.7% initiated originator infliximab between January 2015 and December 2019.
- Discontinuation rates (defined as a 90-day gap without restarting) were 15.9% for biosimilar initiators and 23.6% for originator initiators, with an adjusted hazard ratio of 1.09 (95% CI 0.95–1.24), indicating no clear difference between the two groups.
- Ontario province showed higher discontinuation rates (adjusted HR 1.293), which the authors suggest may reflect demographics such as Ontario's public drug plan covering seniors only, or other unidentified factors.
- Study limitations include lack of data on prescribing decisions and inability to control for factors such as race or ethnicity in administrative claims data.
- This real-world evidence may be relevant to clinicians, payers, and policymakers evaluating biosimilar adoption for inflammatory arthritis and inflammatory bowel disease.

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