



Current prospective in new version of biologics treatment: Biosimilars

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Abstract

A biosimilar medicine is a biological medicine that is developed to be highly similar and clinically equivalent to an existing biological medicine. A biosimilar contains a version of an active substance of an already approved biological medicine, which is referred to as the 'reference medicine' or 'originator medicine'. A biosimilar item is a natural item that is endorsed in light of a demonstrating that it is profoundly like a FDA-approved biologics, known as a kind of perspective item, and has no clinically significant contrasts as far as wellbeing and viability from the reference item. Just minor contrasts in clinically insignificant parts are reasonable in biosimilar items. A strict regulation is needed to encircle all the activities concerning biosimilars. Different countries have different regulation for the biosimilars to ensure a safe and effective medicine at lowest price.

Keywords: biosimilars, regulation, reference product, market growth

Introduction

- A biosimilar medicine is a biological medicine that is developed to be highly similar and clinically equivalent to an existing biological medicine. A biosimilar contains a version of an active substance of an already approved biological medicine, which is referred to as the 'reference medicine' or 'originator medicine'.
- A biosimilar item is a natural item that is endorsed in light of a demonstrating that it is profoundly like a FDA-approved biologics, known as a kind of perspective item, and has no clinically significant contrasts as far as wellbeing and viability from the reference item. Just minor contrasts in clinically insignificant parts are reasonable in biosimilar items.
- Biologics are very touchy expansive atoms with complex structure, hard to describe and duplicate, got from living cells; utilized for treatment, conclusion or anticipation of illness.
- Examples are therapeutic hormones, vaccines, monoclonal antibodies etc.
- Biological are helpful in the administration of a few wellbeing conditions which were quite a long time ago hard to oversee like malignancy, numerous sclerosis, Alzheimer's sickness, rheumatoid joint pain, diabetes and so forth. Biosimilars are not the correct imitations of originator biologic and are subsequently not generics. Biosimilars for their endorsement are not required to experience serious clinical trials as trend-setter biologic yet are required to create information that shows its closeness to a unique biologic as far as clinical adequacy and security. In any case, produces of both the biologics and biosimilars are required to submit Pharmacovigilance and hazard administration designs as a component of their application.

- Different names of biosimilars throughout different Jurisdictions:

1. Follow-on Biologics/protein products (USA, Japan)
2. Biosimilar Products (EU)
3. Subsequent-entry Biologics (Canada)
4. Bio generic products (India)

- Based on these different terminologies, there are three determinants for the biosimilars:

1. It should be a biologic product.
2. The reference product should be an already licensed biologic product.
3. The demonstration of high similarity in safety, efficacy, and quality is necessary

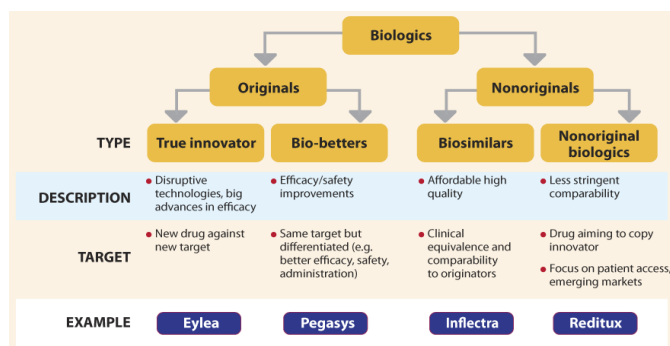
History of biosimilars

- In April 2006, the European Medicines Agency (EMA) authorized for marketing in Europe the first biosimilar product, Omnitrope, a human growth hormone. The EMA has authorized a total of 21 biosimilars for the European market. The introduction of biosimilars in Europe has reduced prices for biologics overall, in some cases by 33% compared with the original price of the brand name product.
- In contrast, the pathway to marketing biosimilars in the United States has had several barriers. FDA approved Omnitrope in June 2006, following an April 2006 court ruling that the FDA must move forward with consideration of the application. At the time Omnitrope was approved, FDA indicated that this action "does not establish a pathway" for approval of other follow-on biologic drugs and stated that Congress must change the law before the agency can approve copies of nearly all other biotech products.
- In India there are about 100 biopharmaceutical companies

actively involved in research and development, manufacturing and marketing of biosimilar therapeutic products. There were 14 therapeutic drugs (similar biologics) available in 50 brands in 2005; The number has increased to 20 therapeutic drugs in 250 brands in 2011. Biosimilar therapeutic products include insulin, erythropoietin, chorionic gonadotropin, streptokinase, interferon, and heparin. The growing biosimilars market offers huge potential for companies involved in manufacturing, research, and development.

- In Saudi Arabia. Remsima was the first biosimilar registered for Infliximab. The reference product, Remicade, is priced at Saudi Riyals 2,127.95 whilst Remsima is priced at Saudi Riyals 1,362.50, which is about 36% cheaper than Remicade. Applying this pricing system should reduce the price of biosimilars in Saudi Arabia when compared to innovator reference products, allowing for more patient accessibility and affordability. Hence biosimilars are at high demand in Saudi Arabia.

Classification of Biosimilars



Regulatory framework concerning biosimilars

- European medical agency (EMA) was the first regulatory agency to articulate guidelines for biosimilars in 2005.
- The first biosimilar to enter the market was Omnitrope (biosimilar to genotropin) and valtropin (biosimilar to humatrope) in 2006, both were recombinant human growth hormone (somatropin).
- As of February 2015, of the 21 biosimilar approved by European medical agency, two have been withdrawn (filgrastin in 2011 and valtropin in 2012) leaving nineteen biosimilars approved for use in European market.
- The European medical agency on biosimilar are widely regarded as the highly standardized and many countries including Australia, Canada, and Japan have adopted the same without making major changes.
- The WHO released an arrangement of standard in 2009 guaranteeing the wellbeing, viability, and nature of biosimilar went for giving a reliable logical standard over the globe.
- Fascinatingly, while the European Union with its European medical agency (EMA) has been a pioneer in regulations of biosimilar, US in May 2014 drafted first guidelines on “biosimilars” also called “follow on biologics”. On March 6, 2015 zarxio (filgrastim-sandz) became the first biosimilar to be approved by US-FDA.
- The principle thought process of the biosimilar rules is not

to continue quiet profit but rather to outline high likeness with the reference natural specialist. Along these lines, showing phase 3 trials are not expected to assess biosimilars, paying the route for abbreviated pathway for biosimilar endorsement.

- Both European medical agency (EMA) and US-FDA require atleast one clinical trial regarding sufficient size, and power to illustrate clinical equivalence or non-inferiority for each available formulation.
- However, because a biosimilar by definition has to be “similar” to innovator drug and should not be either “substandard” or “superior” to the original drug but concerns have been raised for not to exclude superior efficacy of the biosimilar to the innovator product.
- Hence these stringent rules are vital necessity to guarantee great quality and controls on biosimilars to meet all past neglected needs and guarantee the clinical wellbeing.

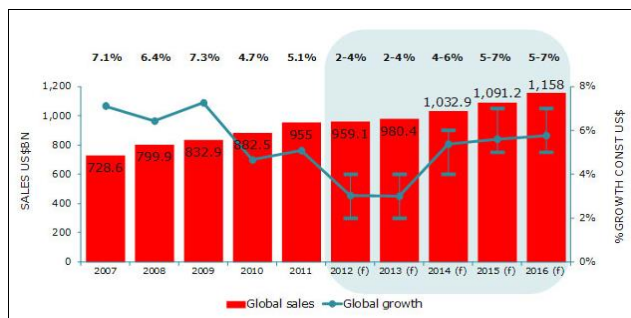
Characteristics of Biosimilars

- The characteristics of biosimilars which makes its entry a boon to pharmaceuticals are:
 1. Biotechnologically high-tech products
 2. Does not require extensive clinical trials as reference product need
 3. Products have same safety, efficacy, and quality demonstrated in reference product
 4. They highly contribute to healthcare by reducing cost
 5. They are manufactured once the patent gets expired.

Market growing demand of Biosimilars

- ✓ Marketing approval for biosimilars was surprisingly encircled by EMA alongside the rules for creating them. As biologics and biosimilars are inferred proteins they have immunogenic potential and danger of antagonistic occasions which alerts their utilization. Pharmacovigilance is expected to guarantee that unfriendly occasions are immediately identified, detailed and credited to the right item and producer. Directions are executed to enhance recognizable proof and traceability of biologics. Programmed substitution ought not to be allowed for biosimilars.
- ✓ Biologics represent a large and growing share of global pharmaceuticals spending worldwide revenue from biologic drugs quadrupled from US \$46 billion in 2002 to over US \$200 billion in 2013.
- ✓ The costs of these medications are normally high because of the blend of components including high assembling costs, sicknesses seriousness.
- ✓ The ability to charge high prices for treatments for serious diseases allow innovators to return on R&D spending even in smaller markets.
- ✓ Biologics speak to the quickest developing portion of pharmaceutical fragment and development rate twofold than that of aggregate pharmaceutical development.
- ✓ High and quickly developing consumption on biologics is one of the principle reason that numerous social insurance frameworks are keen on biosimilars.
- ✓ The section of biosimilars into advertise have unexpected impacts in comparison to that of little particles generics as a result of their costs structure i.e. 10% to 35% lower than

- their individual reference items and level of separation.
- ✓ when considering market entry for biosimilars, 2007 is considered, a year in which quantity of biosimilars sold were greater than or equal to 0.05% of total units sold for that class of drugs was categorized as having biosimilars entry.
- ✓ From the above importance that is highlighted in the literature we can conclude that biologics is the big boom in the pharmaceutical market and has changed its verge to treat all the previously unmet needs in healthcare sector and the cost factor that was barrier has now solved by the entry of biosimilars in pharmaceuticals market.



- In developed countries like US and Europe biosimilars have taken 5% market of originator biologics. In contrast, emerging nations like India and Saudi Arabia allowed biosimilars to occupy 20-60% of total cost in biologics. Nevertheless, it is expected that once block buster's goes off-patent, biosimilars will be cheaper than biologics.
- Market competition will play a pivotal role in favour of biosimilars. The sole purpose of biosimilars development is lowering the cost of original biologics and take their market share. Currently, biosimilars occupied 1% of global sale in biologics. By 2020 biosimilars are likely to occupy 4-10% which accounts for about \$10-\$25 billion.
- Currently remedies with small generic molecule cannot tackle the underlying ailment state. Inflammatory disorders like Crohn's diseases, Psoriasis, Arthritis, Muscular degeneration, Cancer are some examples which may also be dealt with through regenerative medicines that are the way forward for pharma for the subsequent 30 years.
- Thus, from above literature we can conclude that biosimilars are on the top of the pharma vision and regulations for them is a critical requirement for each country. Above literature review illustrates different regulations and increasing demand of biosimilars. So, the present focus of the study is to have comprehensive study of biosimilars in different countries and to compare the regulations of these countries to make global harmonisation and make easy to use.

Conclusion

As the market demand of biosimilars is increasing on pace the regulations of biosimilars are of utmost importance. In this study, it is observed that countries like United States, Europe, are having a stringent regulations to be followed and countries like India and Saudi Arabia are developing its way for its regulation. Hence, to have assurance of safe, effective, and quality biologic for lower price biosimilar has come as a

boon to pharmaceutical industry and hence regulations are needed to be followed.

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