

Ustekinumab biosimilar for Crohn's disease – patients' perspective

Grilič Urška¹, Klobasa Karolina¹, Kramberger Alenka¹, Nikolić Sara¹, Bukovnik Nejc¹, Velkovski Cvetanka¹, Pernek Robert¹, Očepek Andreja^{1,2} for IBD Team, ¹Dept. for Gastroenterology, University Division for Internal Medicine, University Medical Centre Maribor, Slovenia; ²Medical Faculty, University of Maribor, Slovenia

Introduction: Since august 2024 ustekinumab (UST) biosimilars have become available for treatment of Crohn's disease (CD) in Slovenia. We performed a prospective single centre cohort study on patient's willingness to switch from originator to biosimilar UST and factors influencing the choice of sc applicator type.

Results: 43 CD patients treated with UST were included. 22 (51.2%) were female, median age 52 (range 23-79) years, median duration of CD was 16 (range 2-40) years. Lines of therapy with UST are shown in figure 1. 11 (25.6%) patients were anti-TNF naïve. In 26 (60.5%) patients UST dosing was optimised, and 18 (39,5%) patients were treated with standard UST dose.

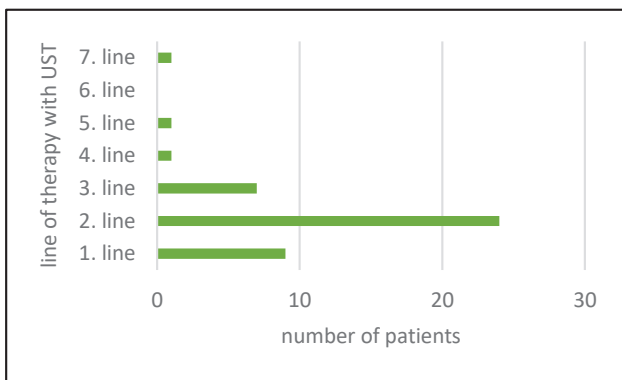


Figure 1: Line of therapy with UST

When offered biosimilar 15 (34.9%) patients agreed to switch and 28 (65.1%) wanted to continue treatment with originator drug. Regarding payment, only 12 (27.9%) patients were willing to pay a possible surcharge to continue treatment with originator UST. Patients were asked which aspects of sc application were most important to them when deciding on sc applicator form, answers are shown in table 1.

31 (73.8%) patients found application with the pen more suitable, 8 (19.1%) preferred the syringe, 3 (7.1%) had no preference (figure 2).

When asked which applicator would they wish to use in the future, 29 (67.4%) patients opted for the pen, 2 (4.7%) for the syringe and 12 (27.9%) did not mind either way (figure 3).

Methods: All patients with CD treated with originator UST were offered a switch to biosimilar for subcutaneous (sc) application. Data on comparable effectiveness and safety of biosimilars was explained to patients in written form in accordance with EMA statement and opinion of The Health Insurance Institute of Slovenia. Patients completed a survey questionnaire regarding sc application, factors influencing the choice of sc applicator type and their decision regarding switching to biosimilar.

Table 1: Factors influencing the choice of applicator type (multiple answers were possible)

Factor	n (%)
Needle is not visible	12 (27.9%)
Easy preparation	22 (51.2%)
Drug solution is clearly visible during application	6 (13.9%)
Easy handling	30 (69.8%)
Sound signal	14 (32.6%)
Safe disposal	14 (32.6%)
Less painful application	20 (46.5%)
Price	1 (2.3%)
Other factors: Effectiveness	2 (4.6%)
Smaller volume of solution	1 (2.3%)

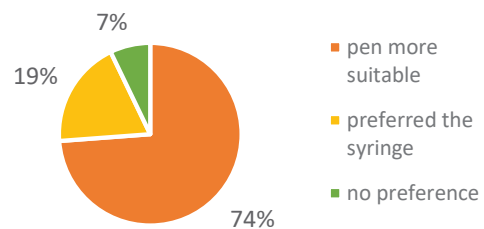


Figure 2: Patients' preferences regarding applicator type

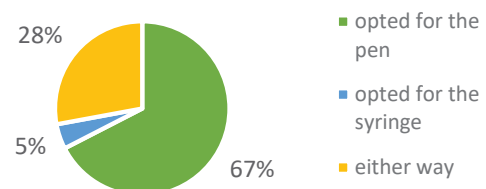


Figure 3: Patients' decision on future applicator use

Conclusions: Almost 2/3 of our CD patients treated with UST did not agree to switch from originator to biosimilar, despite the recommendations of healthcare agencies and expected financial savings. Most patients chose the pen, the lack of which is the leading drawback of currently available biosimilars. Top three factors influencing patients' choice of applicator type were easy handling, easy preparation and less painful application. Additional efforts must be invested in informing patients of the efficacy, safety and expected benefits of biosimilars.