Conclusion: AS-related work disability and healthcare resource utilization have an enormous economic impact in Portugal. Investment in strategies that encourage early referral, diagnosis and treatment is fundamental to mitigate such burden.

Disclosure of Interests: None declared


THU0634 PHYSICIAN PERCEPTIONS OF BIOLOGICS VERSUS THEIR BIOSIMILAR COUNTERPARTS IN RHEUMATOLOGY: A MULTICOUNTRY STUDY IN EUROPE

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Background: Following LOE for the originator brand of etanercept in 2016 and the subsequent launch of its first biosimilar version, several other biosimilars have arrived in the rheumatoid arthritis treatment space. Due to their potential for reducing healthcare spend and their supposed equivalence, biosimilars are expected to be of rising relevance and impact in the following years. 12 biosimilar brands of biologic originator treatments are now available in Europe to treat rheumatoid arthritis; it will be crucial to understand physician perceptions of biosimilars relative to branded products and the impact such views have on potential prescribing decisions.

Objectives: The objective of the study was to assess perceptions of efficacy and safety for biosimilars relative to branded biologic originator products among treating Rheumatologists in the EU5 countries (United Kingdom (UK), France (FR), Italy (IT), Spain (SP) and Germany (DE)).

Methods: A cross-sectional survey was conducted in Q3 2018 in the EU5 among national, regional and hospital physicians who had been practicing between 3-30 years. Respondents completed a Physician Perceptual Questionnaire online, which assessed the overall perception of biologic brands and anti-TNF biosimilars, important attributes for treatments, and specific barriers to prescribing them. Data were analyzed using descriptive statistics.

Results: A total of 261 rheumatologists in the EU5 were recruited as part of the study (with almost equal numbers of rheumatologists representing each EU5 country). Treating rheumatologists were practicing for an average of 17.4 years, mainly in teaching hospitals (50.2%) and urban hospitals (20.7%). Physicians consistently expressed greater satisfaction for branded products, with 73.9% (range: 63.5% DE to 90.6% FR) of physicians having rated satisfaction with the originator brand of etanercept as a 6 or 7 (on a 7-point scale where 7 corresponded to highest satisfaction), biosimilars are expected to be of rising relevance and impact in the following years. 12 biosimilar brands of biologic originator treatments are now available in Europe to treat rheumatoid arthritis; it will be crucial to understand physician perceptions of biosimilars relative to branded products and the impact such views have on potential prescribing decisions.

Conclusion: Biosimilars score lower on overall satisfaction and are less frequently associated with specific efficacy attributes relative to branded products. This is possibly due to their relatively short time in clinical practice, and the resulting lack of experience and supporting data compared to the older branded equivalents. Proof of concept may be essential to close the perceptual gap that still exists between branded products and biosimilars.

REFERENCES:
[1] Ipsos RA Therapy Monitor (261 sampled rheumatologists reporting on RA patients in EUS in Q3 2018)

Disclosure of Interests: None declared


THU0635 REAL WORLD PHYSICIAN SATISFACTION WITH SECUKINUMAB IN PSORIATIC ARTHRITIS AND ANKYLOSING SPONDYLITIS IN EUROPE

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Background: Psoriatic arthritis (PsA) and ankylosing spondylitis (AS) can lead to reduced physical functioning and quality of life. Secukinumab has demonstrated clinical benefits in PsA and AS, however little is known about physician satisfaction with its ability to control disease in the real world.

Objectives: Assess physician satisfaction with secukinumab’s ability to control disease in a real-world setting.

Methods: This was a cross-sectional survey of rheumatologists and dermatologists (PsA only) in France, Germany, Italy, Spain, and UK. Data were collected from Jun-Aug 2018 via physician-completed patient record forms. Patients receiving any treatment were included in the survey. Patients receiving secukinumab >1 month were included in this analysis. Physicians rated satisfaction on a 5-point scale (Very satisfied to very dissatisfied), a binary variable of satisfied/not satisfied was created by grouping “Very satisfied” and “Satisfied” responses as satisfied and “Neutral”, “Dissatisfied”, and “Very dissatisfied” as not satisfied. Data were reported by disease, then stratified by overall physician-rated disease severity (mild/moderate/severe) at initiation of secukinumab, prior biologic use, treatment duration, and concomitant medication.

Results: 438 PsA and 277 AS patients were receiving secukinumab >1month at time of data collection. Patient mean age was 46.3 years (48.2 PsA; 44.8 AS) with 35.2% female (41.8% PsA; 24.9% AS). On average, patients had received secukinumab for 8.8 months (9.2 PsA; 8.2 AS). At secukinumab initiation, 44.2% of patients were rated by their physician as severe vs. 3.5% at the current consultation (39.3% vs. 2.7% PsA; 52.0% vs. 4.7% AS).

Overall, 87.6% of physicians were satisfied with the ability of secukinumab to control disease (87.9% PsA; 86.3% AS). Physicians report high satisfaction across each stratification (Table 1).