Market size and changes in the rheumatoid arthritis medications dispensing patterns in the Public Health System from Brazil (SUS) from 2019 to 2023

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Poster code
RWD26

INTRODUCTION

The treatment guidelines of rheumatoid arthritis in the Brazilian Public Health System were updated in 2021, incorporating a broader range of disease-modifying anti rheumatic drugs (DMARDs), including synthetic (sDMARDs), biologic (bDMARDs), and target-specific synthetic DMARDs (tsDMARDs).

This study aimed to describe the number of patients treated for rheumatoid arthritis (RA) in the Brazilian Public Health System (SUS) and to analyze changes in medication prescribing patterns between 2019 to 2023.

METHODS

Inclusion criteria

ICD 10 Codes
M05.0-5.3, M5.8, M6.0 & M6.8

5 years Period
2019 – 2023

RWE analyzed
Prescriptions in SIA-SUS

Study Location
Brazil

- Changes in medication dispensing patterns were assessed by evaluating the variation in the proportion of patients who received at least one dose of the treatment within each year.
- Included medications were:
  - Non-steroid anti-inflammatory drugs (NSAIDs).
  - sDMARD: chloroquine, hydroxychloroquine, leflunomide, methotrexate, sulfasalazine.
  - bDMARDs: abatacept, adalimumab, certolizumab, etanercept, golimumab, infliximab, rituximab, tocilizumab.
  - tsDMARDs: tofacitinibe, baricitinib, upadacitinib.
  - Immunosuppressants: azathioprine, cyclosporine.

RESULTS

- Between 2019 and 2023, 8,076,398 RA medication dispensations were provided for 289,188 patients in SUS. The number of patients increased from 152,198 in 2019 to 205,299 in 2023 (+34.9%).
- Throughout the period, the majority of patients received sDMARDs (67-68%), primarily leflunomide and/or methotrexate. The proportion of patients using bDMARD decreased from 39.6% to 33.2%
- In contrast, the use of tsDMARDs increased from 2.5% to 10.1%, driven by an increase in the dispensing of tofacitinib and the incorporation of baricitinib (2020) and upadacitinib (2021).

Figure 1. Number of patients with at least one prescription of rheumatoid arthritis drug per year in the Brazilian public healthcare system

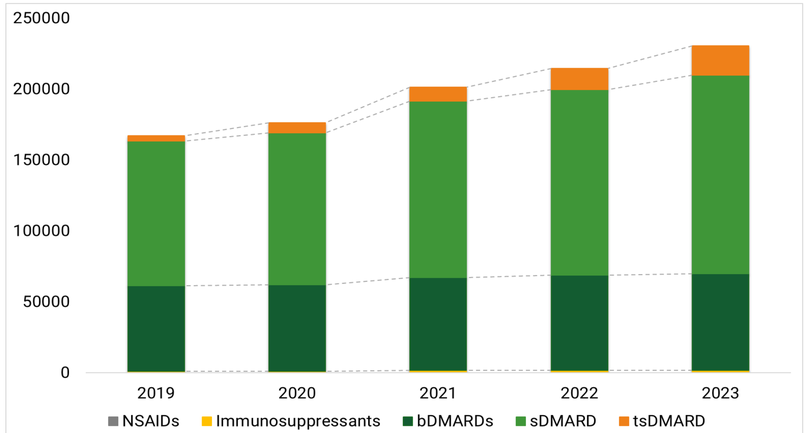


Figure 2. Market shares of the biologic disease-modifying anti rheumatic drugs per year in the Brazilian public healthcare system

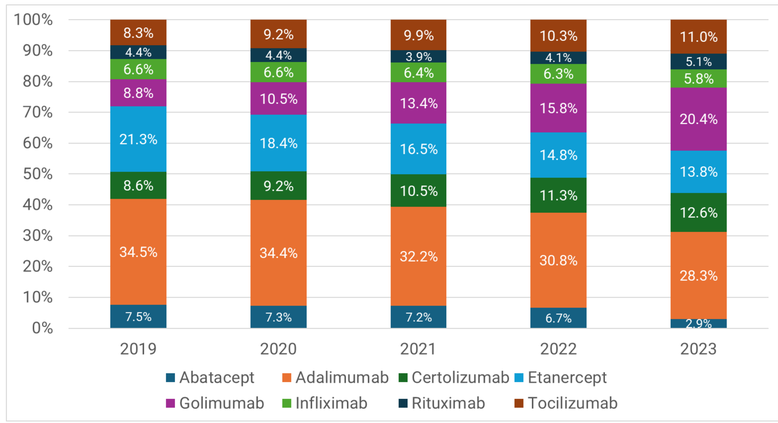
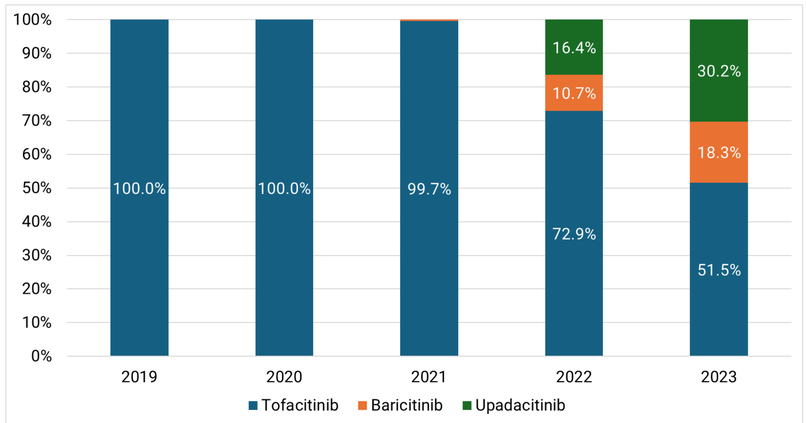


Figure 3. Market shares of the target specific disease-modifying anti rheumatic drugs per year in the Brazilian public healthcare system



CONCLUSIONS

From 2019 to 2023, there was an increase of almost 35% in the number of patients retrieving RA medication in SUS. With the expansion of advanced treatment options in SUS, target-specific synthetic DMARDs demonstrated a substantial rise in dispensing, accompanied by a concurrent reduction in the use of biologic DMARDs.

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