Longitudinal Trends in Biosimilar Uptake in France (2019–2024): Insights by Dispensing Pathway and Prescribing Origin

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Introduction

Biosimilars (BS) help optimize healthcare resources while ensuring treatment continuity.

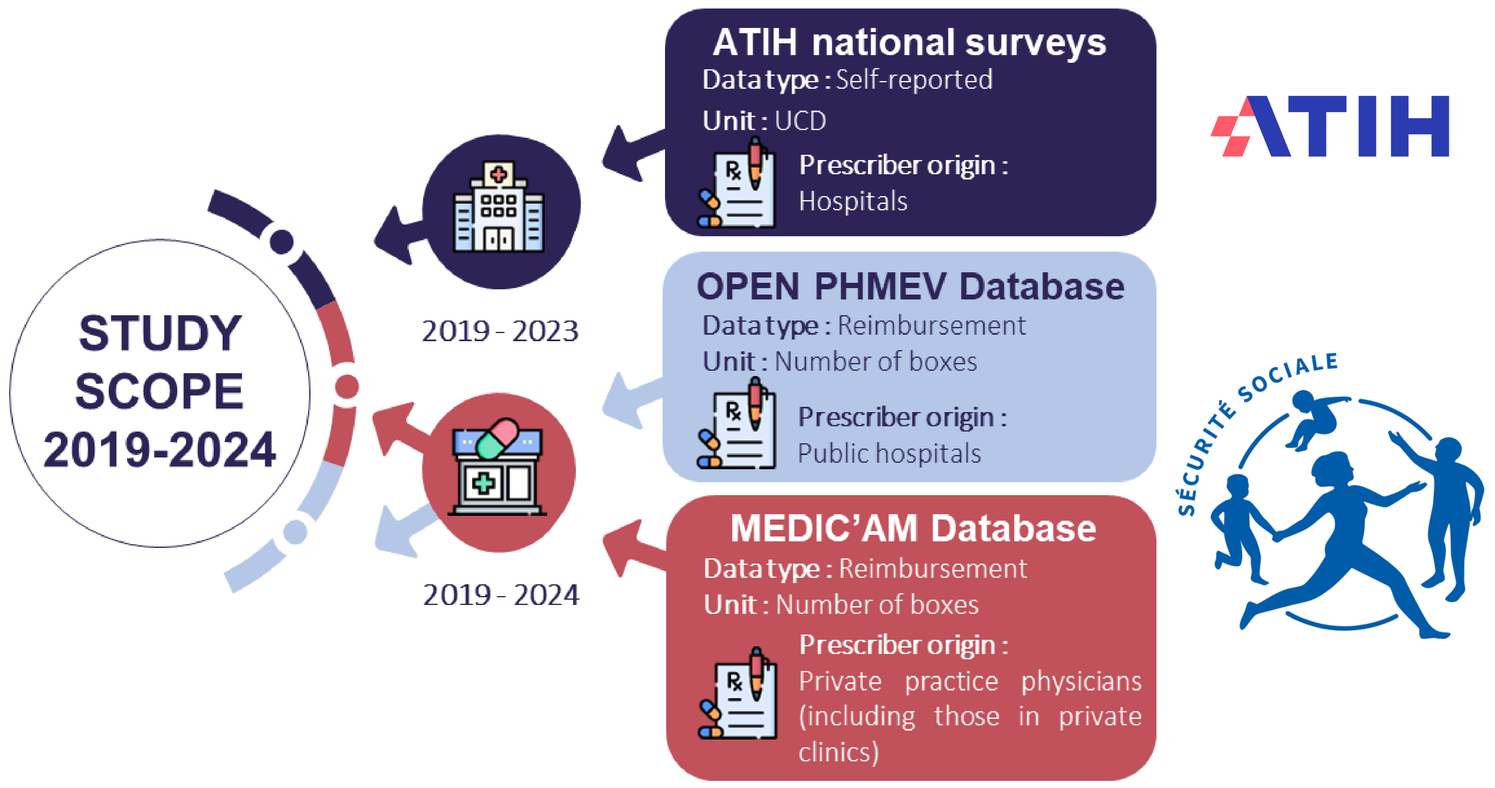
Implementation of financial incentives and pricing strategies has been carried out to support their use. Yet, uptake remains uneven across care settings.

Objective : This study aims to analyze and compare BS penetration trends across outpatient and hospital sectors, and by prescribers' origin, to identify potential policy levers.

$$BS_{rate} = \left(\frac{BS}{(BS + REF)}\right) \times 100$$

In percentage of volume.
BS = Biosimilar ; REF = Reference product.

Methods



Uptake rates were calculated as the share of BS relative to total consumption per biologic product. Hospital data were sourced from **annual ATIH surveys**, while outpatient data came from the **Medic'AM database** supplemented by the **OPEN PHMEV database**. Analyses were based on unweighted rates, regardless of the presentation or dosage per calculation unit.

Results

Fig. 1: Evolution of biosimilar uptake rates in France in hospital and community settings, based on the type of prescribers (private practice physicians or hospital-based prescriptions) between 2019 and 2024.

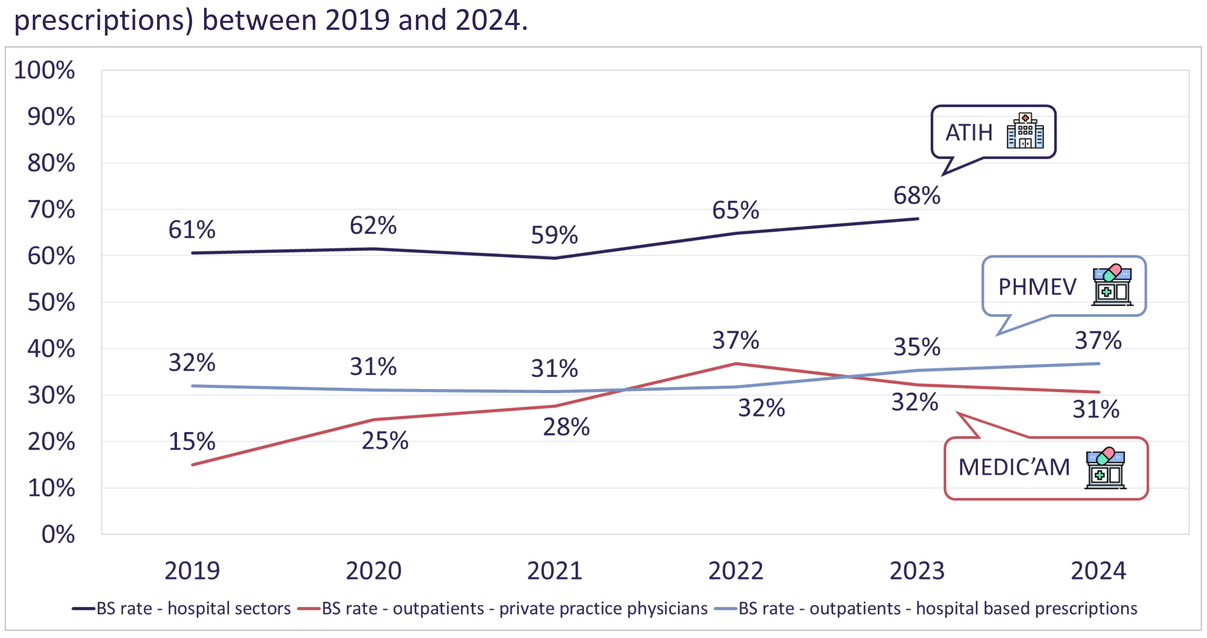


Fig. 2: Trends in biosimilar uptake in public hospitals (2019-2023), by medicine and volume (UCD)

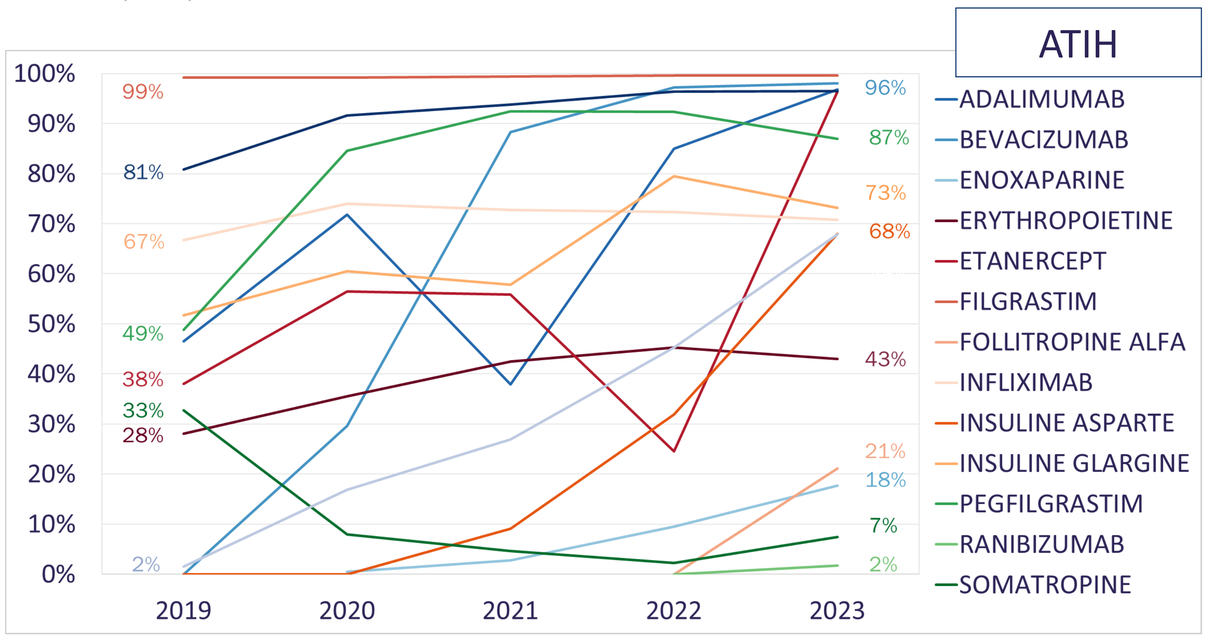


Fig. 3: Trends in biosimilar uptake from community-based private prescriptions (2019–2024), in number of reimbursed boxes

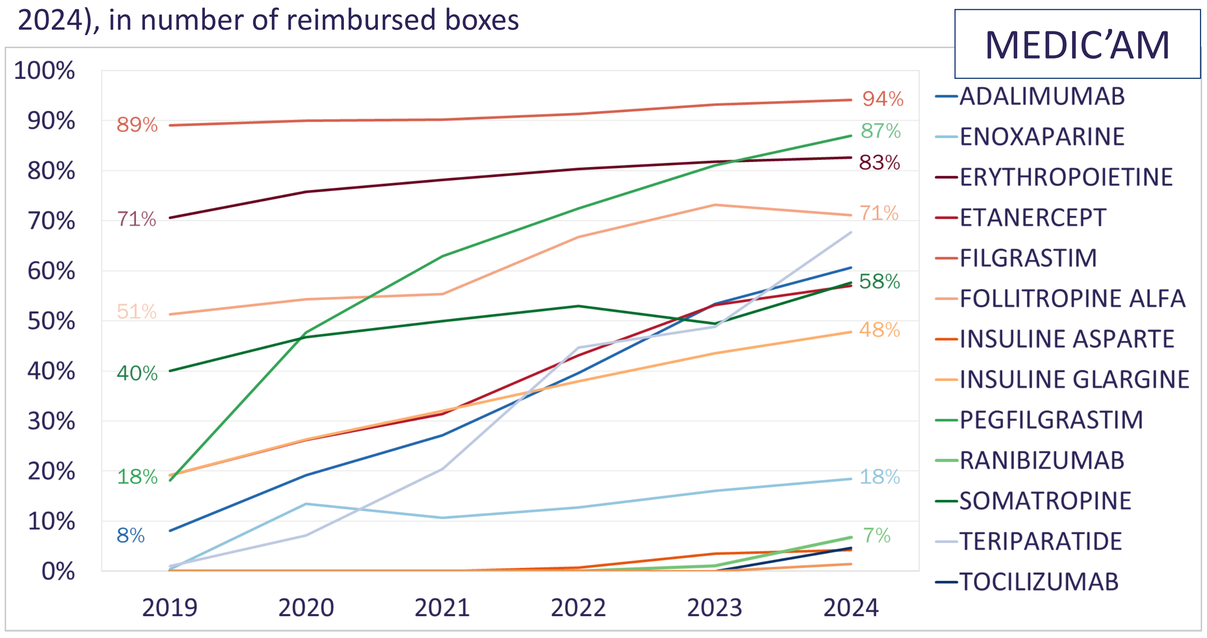
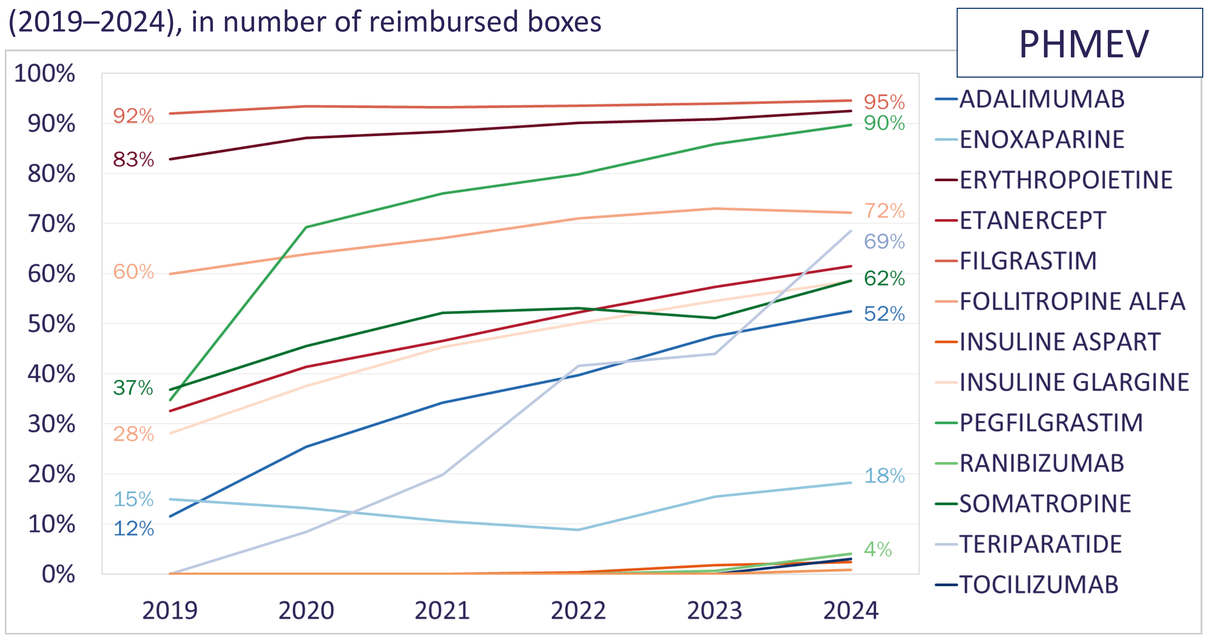


Fig. 4: Trends in biosimilar uptake from community-based public hospital prescriptions (2019–2024), in number of reimbursed boxes



Biosimilar uptake increased overall across all sectors, with non-linear growth observed between 2019 and 2024 in dispensed volumes. Based on 2023 ATIH declarative data, **hospital BS uptake was 68% excluding enoxaparin; with it, 22% (cf fig.1).** Some molecules show excellent uptake, such as bevacizumab (98%) or filgrastim (100%) (cf fig.2). In **retail pharmacies, when prescriptions originate from private practice, 2024 uptake remains modest (31%) (cf fig.1)**, though older BS like filgrastim or EPO perform well (≥83%) (cf fig.3). **PHMEV show intermediate results (37%) (cf fig.1).**

Biosimilars such as filgrastim and EPO show high uptake rates, reaching 95% and 92%, respectively (cf fig.4). These variations reflect the influence of the prescriber's sectoral origin, prescribing conditions at initiation and renewal, the dispensation setting, and time on market in shaping biosimilar diffusion across France.

Conclusion

Despite some limitations (ATIH surveys are self-reported, with some manifest data inconsistencies, and data sources differ in scope and methodology), this study highlights sectoral nuances that can inform targeted policy interventions.