Is the Real-World Evidence for Effectiveness and Safety of Biosimilars Vis-À-Vis Originators FDA Compliant?

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Introduction

- Food and Drug Administration (FDA)'s Biosimilars Action Plan recommends increased use of real-world evidence (RWE) instead of costly clinical outcome studies for biosimilars.
- According to the "Framework for FDA's Real-World Evidence Program, 2018", to consider the RWE robust enough for supporting regulatory decisions, the Real-World Data (RWD) should be fit for use, study design should provide adequate scientific evidence, and study conduct should meet FDA regulatory requirements.

Objective

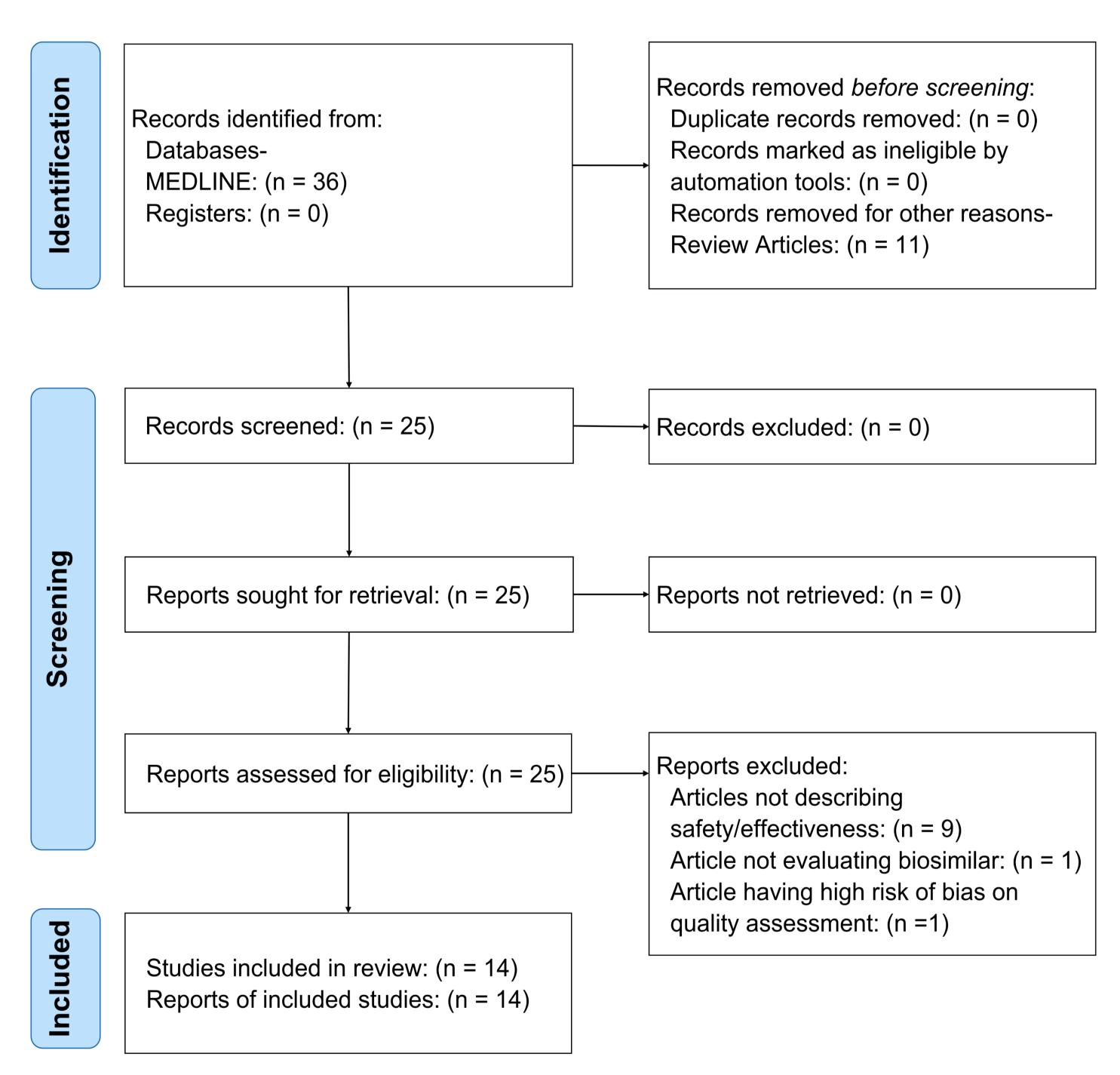
 The purpose of this study was to evaluate whether the published evidence from real-world studies meet these requirements.

Methods

- MEDLINE database was searched systematically for free full articles describing original research and published in English in any region since 2018. Last search was run on 7th May 2022.
- Eligible for inclusion were the real-world evidence studies in humans, which evaluated effectiveness and/or safety of biosimilars in a single arm or vis-à-vis the respective originators in any study population. Systematic reviews, randomized controlled trials, case studies, case series, and article types not describing original research were excluded.
- Two reviewers independently screened the articles in an unblinded standardized manner. "Assessment of Real-World Observational Studies" (ArRoWS) critical appraisal tool was used to assess the risk of bias. One reviewer extracted data from the included studies and the other reviewer validated the same. All the discrepancies were resolved by consensus among the co-authors.

Figure 1. PRISMA Flow-chart: Flow of the studies through the review process

Identification of studies via databases and registers



PRISMA, Preferred Reporting Items for Systematic Reviews and Meta-Analyses

Results

- Out of 36 records retrieved, 21 articles (11 review articles, 9 articles not describing safety/effectiveness, one article not evaluating biosimilar) were excluded and one article did not pass the quality assessment. Eventually, 14 articles were included in the review. (Figure 1)
- The most researched diseases among the included articles were Rheumatoid arthritis (n=4), cancers (n = 4) and ankylosing spondylosis (n=3). Biosimilars of Infliximab (n=4), filgrastim (n=4), and rituximab (n=2) were most investigated. (**Table 1**)

Databases
Registries

Figure 2. Source of the real-world data for the included studies

■ Patient Clinical Records

29% 57%

Source of Real-world Data

Disclosures

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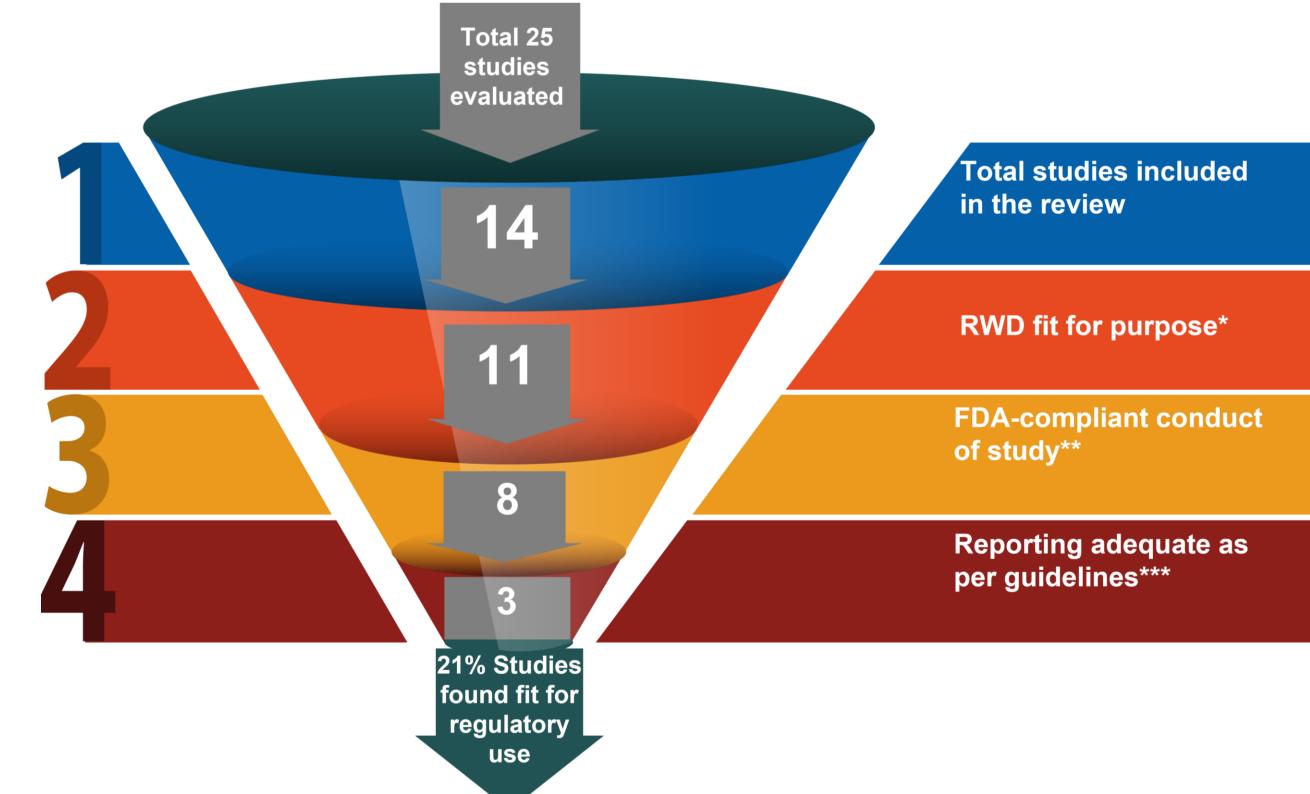
Vienna, Austria and Virtual, 06-09 November 2022.

Table 1. Characteristics of the included studies

Report characteristics	Study characteristics				
Range of years of publications	n	Population under study	n	Epoetin alfa (human erythropoietin)	
2018	2	Adult patients with ankylosing spondylitis	2	Etanercept	
2019	2	Adult patients with rheumatoid arthritis patients	2	Comparator	
2020	3	Adult patients with rheumatoid arthritis or axial spondylarthritis	1	Originator	,
2021	5	Adult patients with inflammatory bowel disease	1	No comparator drug	
2022	2	Adult patients with chronic kidney disease	1	Outcome	
Language	n	Adult patients receiving infliximab for various indications*	1	Both effectiveness and safety	
English	14	Adult patients with malignant solid tumors and on chemotherapy	1	Safety	
Region	n	Adult patients with malignant solid tumors or hematological malignancies and on chemotherapy	1	Effectiveness	
European countries	8	Elderly male patients with hematological malignancies undergoing autologous stem cell transplant	1	Study design	
Korea	2	Adult patients with Gaucher's disease	1	Direction	
Canada	2	Adult patients with non-metastatic breast cancer and Non-Hodgkin's Lymphoma	1	Prospective	
Mexico	1	Women of reproductive age group undergoing infertility treatment with assisted reproductive technology	1	Retrospective	
Japan	1	Intervention (Biosimilar)	n	Design	
Species	n	Infliximab	4	Cohort study	
Human	14	Filgrastim	4	Longitudinal follow-up study	
Article type	n	Rituximab	2	Cross-sectional study	
Original research article	13	Follitropin alfa	1	Safety evaluation study	
Letter to the editor	1	Abcertin and Asbroder	1	Post-marketing surveillance study	

- Majority of the studies were designed as a cohort study (n = 6) or longitudinal follow-up study (n = 4), with eight studies being prospective and six studies being retrospective in nature. (**Table 1**)
- Source of RWD for the studies were patient clinical records (n=8), databases (n=4), and registries (n=2). (Figure 2)
- Majority of articles reported that biosimilars were as effective (n=13) and safe (n=12) as the originators.
- The generated evidence could not conform to the FDA requirements for RWD fitness of use (n=3) and conduct of the study (n=3), in 43% papers, while 36% studies (n=5) did not use a reporting guideline like STROBE. Only 3 (21%) of the included studies conformed to FDA guidance and their findings were fit for regulatory use. (**Figure 3**)

Figure 3. Fitness of evidence for regulatory use as per FDA guidance



RWD, real-world data; RWE, real-world evidence; FDA, food and drug administration.

* One study used questionnaire, one used administrative database and one identified misreporting of records in the database. Hence all three studies were deemed unfit for regulatory use as per FDA framework.

**One study had no predefined visits, tests, or procedures decided at the onset of data collection. One study had no central monitoring of data. The choice of study design for another study suggested slight increase of risk and less precise estimation of the Hazard Ratios. Hence all three studies were deemed unfit for regulatory use as per EDA framework.

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***Five studies did not use any guideline such as STROBE, for reporting the data.

Conclusions

- Majority of the published real-world evidence is not fit for regulatory use in current condition.
- Real-world researchers should conform to FDA framework, guidelines like STROBE, and planning templates like STaRT-RWE to make the evidence fit for regulatory use.

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