**Biologic and Biosimilar Medicines – Information for Patients**

This information has been developed to provide information for patients starting a biologic or biosimilar medicine, including what they are and switching treatment.

**What is a biologic medicine?**

Biologic (sometimes known as biological) medicines are different to commonly used chemically made medicines such as paracetamol. Biologic medicines are complex, and often expensive, medicines made or derived from a biological source. These medicines have been used for many years in the treatment of diseases including psoriasis, rheumatoid arthritis, Crohn’s disease, ulcerative colitis and diabetes (insulin is a biologic medicine).

All new medicines made by pharmaceutical companies have a patent that lasts a number of years. The patent allows only the company which originally developed the medicine to provide it for use on the NHS. When the patent on an original biologic has ended, other pharmaceutical companies are able to make a newer version which is called a biosimilar.

Biosimilars are not the same as generic medicines which are exact copies of a chemically made medicine.

**What is a biosimilar medicine?**

Biosimilar medicines are new versions of the original biologic. They are very similar in terms of quality, safety and clinical effectiveness to the original biologic. They work in the same way.

There are strict rules to make sure that biosimilars are clinically effective and of a high quality. Biosimilars are fully tested by the pharmaceutical companies that develop them to show they work as well and are as safe as the original biologics, before being authorised for use by the UK medicines regulator.

Once authorised, a biosimilar product is considered therapeutically equivalent and interchangeable with the original biologic. Different biosimilars made by different pharmaceutical companies of the same original biologic medicine, are also considered interchangeable. This is supported by the UK and European medicines regulators.

**Why are biosimilars important to the NHS?**

Biosimilars are usually less expensive for the NHS to fund. As many pharmaceutical companies are now making biosimilars, there is competition between companies, which helps to lower the cost. By offering biosimilar medicines, patients receive treatment that is effective and safe while also being more cost effective for the NHS. As the cost of biosimilars is lower, this allows more patients to access treatment sooner, release funding for new treatments and improve pathways of care.

Biosimilars have been widely used by hospitals in Hertfordshire and West Essex, other hospitals in the UK, and also internationally, for a number of conditions for many years. Switching patients from one product to another (original biologic or biosimilar) has become clinical practice.

**What will happen when a biologic or biosimilar is started?**

Before you start a new biologic or biosimilar your specialist will ensure this is appropriate for you. The advantages and disadvantages of treatment will be explained, and a joint decision made on suitable treatment.

If more than one treatment is considered suitable the least expensive will be used. This will most often be the best value biosimilar medicine available at the time.

**Will I be asked to change to a biosimilar in the future?**

When your treatment with a biologic or biosimilar is started, your specialist will discuss and seek your consent for possible future switches to a biosimilar or to an alternative biosimilar. Your agreement ensures that you will continue to receive an effective and safe treatment, while supporting savings for the NHS which could be used to treat more patients.

You will be contacted before any future switch happens to ensure you are fully aware of the change. This will include:

* providing information on the new biosimilar medicine
* confirming the brand name of the new medicine
* when the switch will take place
* support if you have any questions.

Within hospitals in Hertfordshire and West Essex and other hospitals across the UK, many patients have been successfully started on, or switched to, biosimilar medicines.

**Will I notice any difference with the new biosimilar medicine?**

The brand name and appearance of the biosimilar may be different, but the active substance medicine name will remain the same. The biosimilar will be prescribed by brand name.

If the medicine has been delivered directly to your home, then the company which provides this service may change.

If there are any changes to how the new biosimilar medicine is taken, then information will be provided to you about this.

You should not notice a difference in the way your body responds to the new biosimilar medicine.

If you do notice a difference, you must ask your specialist for advice.

**Is further information available?**

Please refer to the following resources:

* [NHS England guidance. What is a biosimilar medicine?](https://www.england.nhs.uk/publication/what-is-a-biosimilar-medicine/)
* [The British Biosimilars Association. Facts about biosimilars, including helpful references](https://britishbiosimilars.co.uk/facts-about-biosimilars.html)
* [The Patients Association. Guide to switching to biosimilars](https://www.patients-association.org.uk/switchingtobiosimilars)

Your specialist may also be able to provide this information, and further information from the NHS and national support organisations about your condition.

This information has been adapted with acknowledgement from biosimilar medicines resources from NHS England and the Patients Association.

|  |  |
| --- | --- |
| Version  | 1.0 |
| Developed by | Hertfordshire and West Essex ICB Pharmacy and Medicines Optimisation Team with local stakeholders including East and North Hertfordshire NHS Trust, The Princess Alexandra Hospital NHS Trust and West Hertfordshire Teaching Hospitals NHS Trust |
| Approved by | Hertfordshire and West Essex Area Prescribing Committee |
| Date approved/updated | 08/02/2024 |
| Review date:  | The document is based upon the evidence available at the time of publication. This recommendation will be reviewed upon request in the light of new evidence becoming available.  |