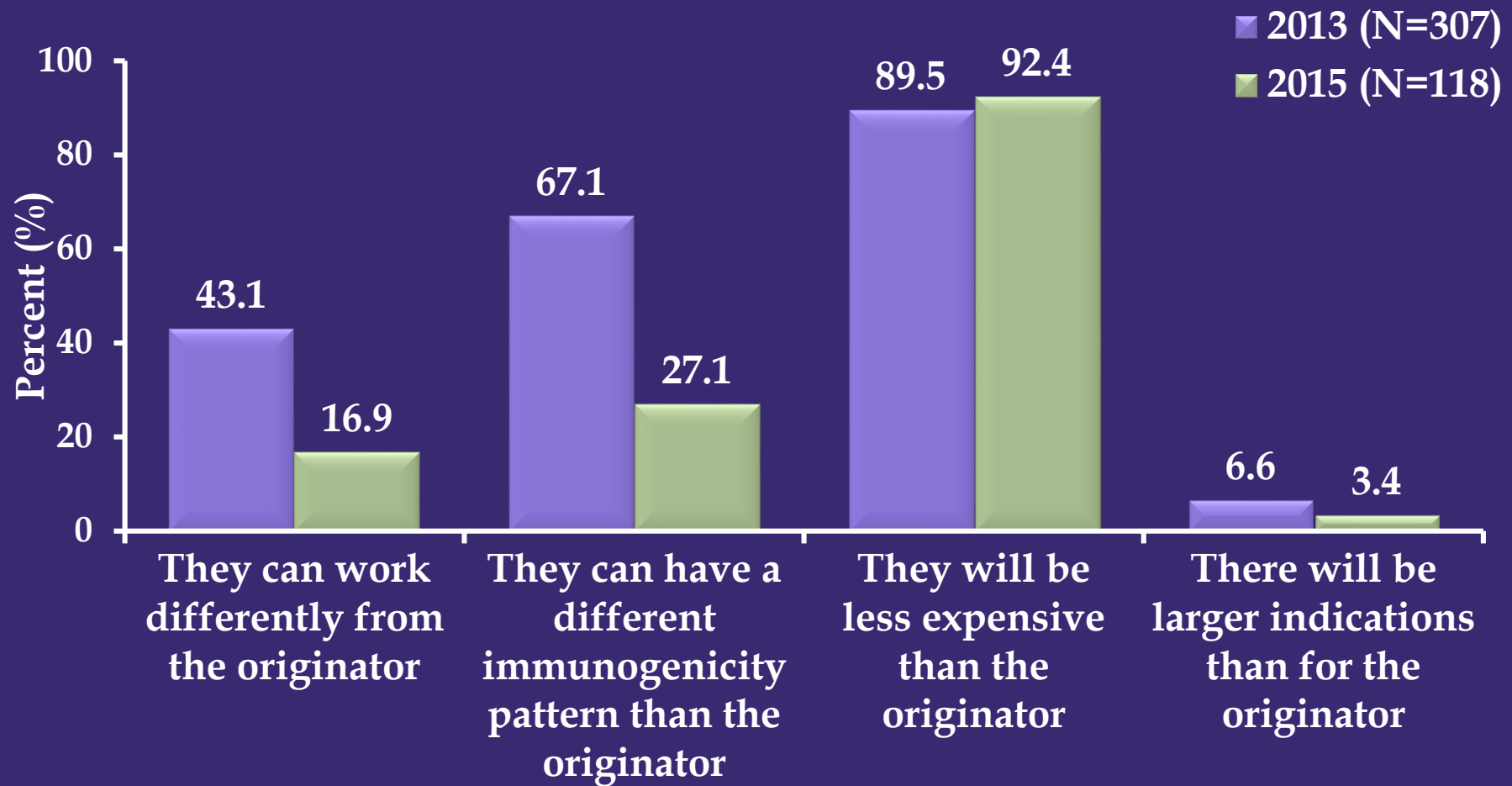
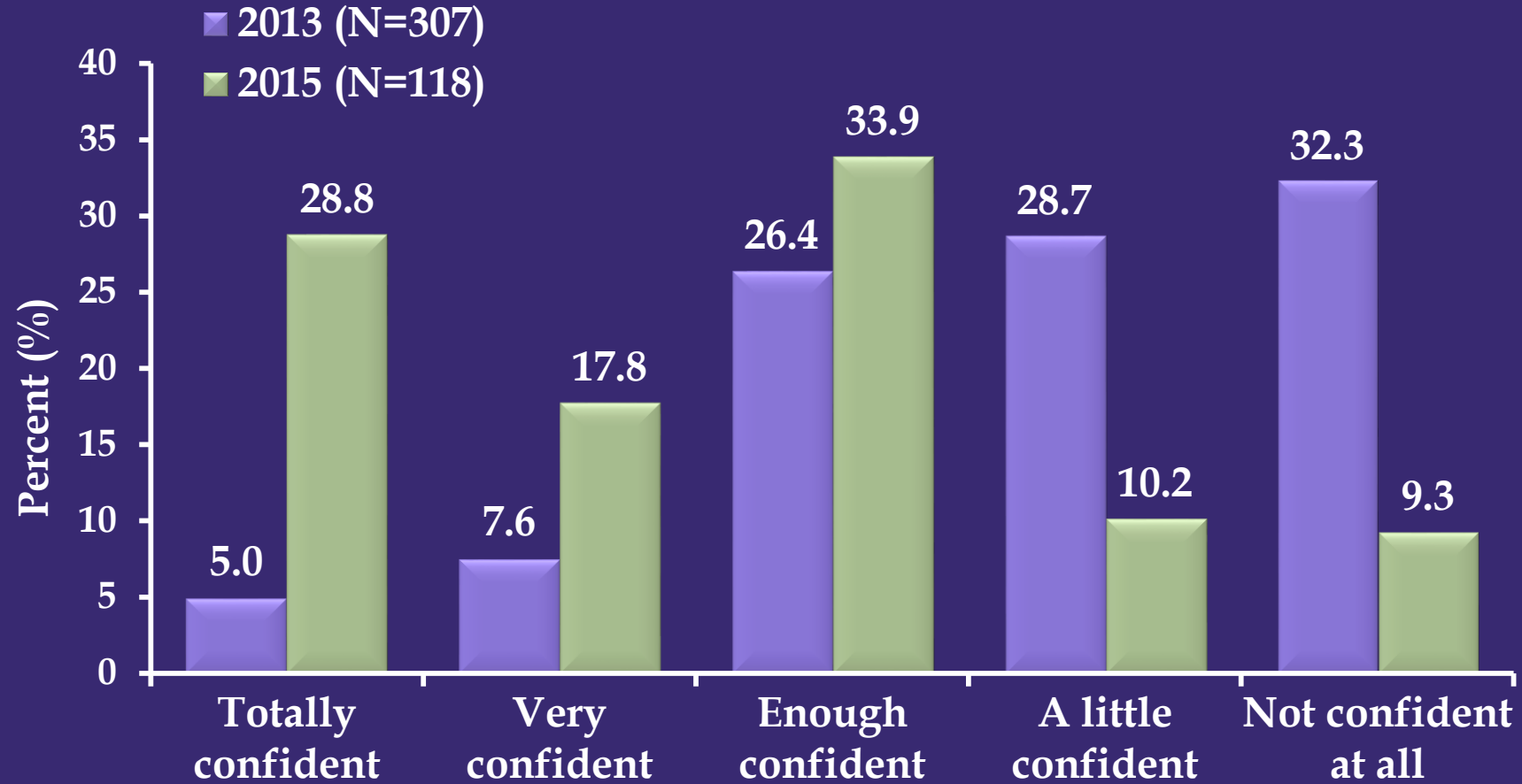


ECCO survey on biosimilars

Advantages and issues with biosimilars



ECCO survey on biosimilars



Κλινικές μελέτες σε ΙΦΝΕ όπου μελετήθηκε η μετάβαση σε CT-P13 από Remicade

Study (Country)	Publication Date	Centers	Total Patients (No. Switched)	Indication/Use	Duration
Kang et al (Republic of Korea) ¹	2014	1	17 (9)	CD, UC	~52 weeks ^a
Jung et al (Republic of Korea) ²	2015	6	110 (36)	CD, UC	54 weeks
Park et al (Republic of Korea) ³	2015	15	173 (60)	CD, FCD, UC	30 weeks
PROSIT-BIO (Italy) ⁴	2016 (Abstract)	30	397 (93)	CD, UC	26 weeks ^a
Betty et al (United Kingdom) ⁵	2016 (Abstract)	1	134 (134)	IBD	Not stated
Kolar et al (Czech Republic) ⁶	2016 (Abstract)	1	74 (74)	CD, UC	24 weeks
Smits et al (Netherlands) ⁷	2016	1	83 (83)	CD, UC, unclassified IBD	16 weeks
Díaz Hernández et al (Spain) ⁸	2016 (Abstract)	1	72 (72)	CD, UC	26 weeks ^a

^aCalculated from reported numbers.

1. Kang YS, et al. *Dig Dis Sci*. 2015;58(4):931-936. 2. Jung YS, et al. *J Gastrointest Hepatol*. 2015;30(12):1705-1711. 3. Park SH, et al. *Expert Rev Gastrointest Hepatol*. 2015;9(9):1135-44. 4. Fiorino G, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016, Poster P241. 5. Betty M, et al. *J Crohns Colitis*, 2016;10:S43-S44. 6. Kolar M, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016, Abstract P2301. 7. Smits LL, et al. *J Crohns Colitis*. 2016;10:1087. [Epub ahead of print]. 8. Díaz Hernández L, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016, Abstract P449.

Κλινικές μελέτες σε ΙΦΝΕ όπου μελετήθηκε η μετάβαση σε CT-P13 από Remicade

Study (Country)	Publication Date	Centers	Total Patients (No. Switched)	Indication/Use	Duration
Hlavaty et al (Slovakia) ¹	2016 (Abstract)	1	25 (12)	CD, UC	~52 weeks ^a
Guerra Veloz et al (Spain) ^{2,3}	2016 (Abstract)	1	CD: 75 (71) UC: 40 (31)	CD, UC	26 weeks ^b
Hamanaka et al (Japan) ⁴	2016 (Abstract)	1	20 (3)	CD, UC	24 weeks
Sieczkowska et al (Poland) ⁵	2016 (Abstract)	Not stated	16 (16)	CD (pediatric)	Not stated
Sieczkowska et al (Poland) ⁶	2016	3	39 (39)	CD,UC (pediatric)	39 weeks ^b

^aCalculated from reported numbers.

^bIncludes case, cohort, pediatric, or immunogenicity studies.

1. Hlavaty J, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016. Abstract P457. 2. Guerra Veloz, MI, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016. Abstract P457. 3. Guerra Veloz, MI, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016. Abstract P460. 4. Hamanaka S, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016. Abstract P229. 5. Sieczkowska I, et al. Presented at 11th Congress of the European Crohn's and Colitis Organization (ECCO) 2016. Abstract P417. 6. Sieczkowska I, et al. J Crohn's Colitis. 2016;10(2):177-182.

Κλινικές μελέτες σε εξέλιξη σε ΙΦΝΕ στις οποίες μελετείται η μετάβαση σε CT-P13 από Remicade

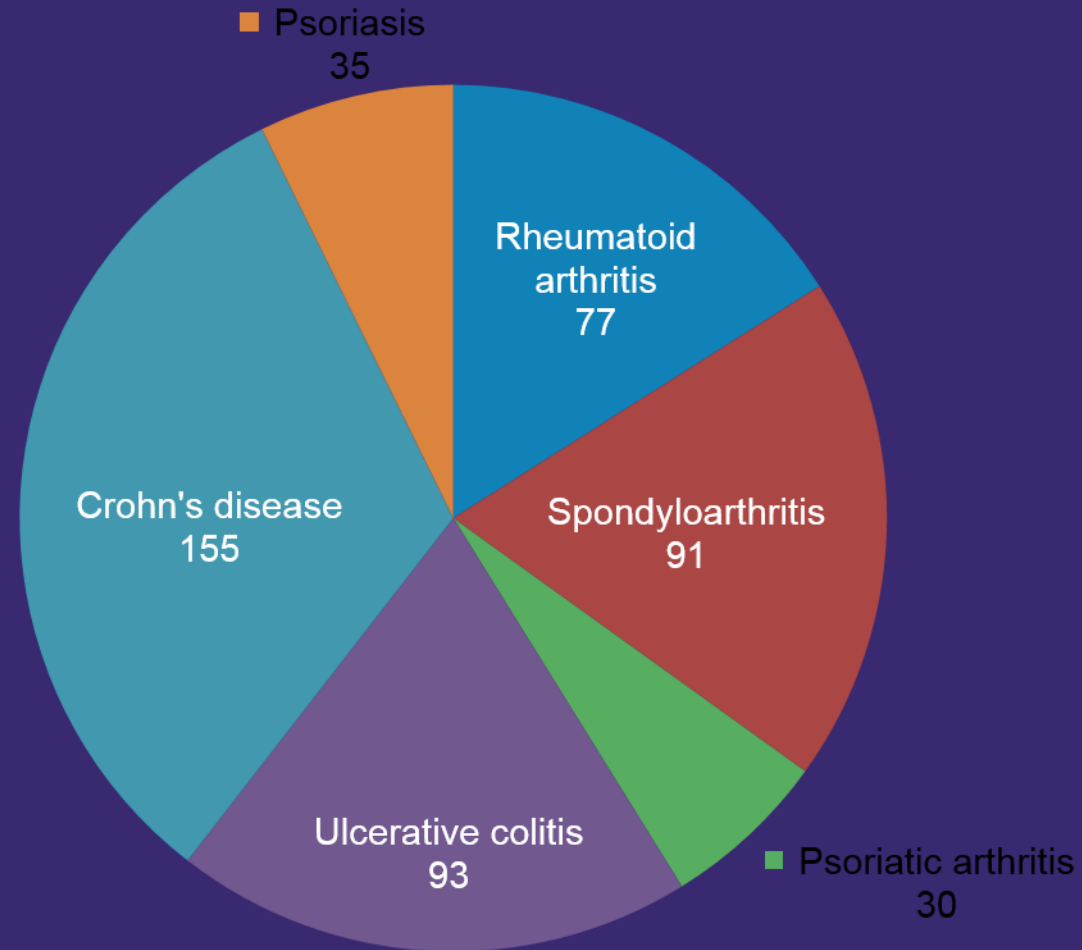
^{ε1} Study (Country)	Publication Date	Centers	Total Patients (No. Switched)	Indication/Use	Duration
CONNECT-IBD (Europe) ¹	Ongoing (Planned June 2019)	128	3300 (Estimated)	IBD, CD, UC	104 weeks ^a
CT-P13 3.4 (International) ²	Ongoing (Planned February 2017)	~100	~214	CD	54 weeks
NOR-SWITCH ³ (Norway)	Ongoing (Planned January 2017)	30	500 (Estimated)	AS, CD, PsA, PsO, RA, UC	52 weeks

^aCalculated from reported numbers.

1. Post-marketing use of Inflectra (infliximab) for standard of care treatment of inflammatory bowel disease (CONNECT-IBD). ClinicalTrials.gov. Last updated: March 28, 2016. <https://clinicaltrials.gov/ct2/show/study/NCT01253948?term=CT-P13&rank=1>. Accessed April 11, 2016. 2. Study CT-P13 3.4. Protocol version 2.2. February 10, 2015. Data on file. Celltrion, Inc., Incheon, South Korea; 2015:10-17. 3. The NOR-SWITCH Study (NOR-SWITCH). Clinicaltrialsregister.eu. <https://www.clinicaltrialsregister.eu/cti/search/study/2014-002056-40/NL>. Last updated: June 13, 2015. Accessed June 9, 2016.

Diagnosis Distribution (Number of Patients)

NOR-SWITCH



Primary Endpoint:

Disease Worsening Across Indications

	INX (N=202)	CT-P13 (N=206)	Adjusted Rate Difference (95% CI)
Disease worsening (all indications)*	53 (26.2%)	61 (29.6%)	-4.4 (-12.7-3.9)

The authors concluded that switch from INX to CT-P13 was not inferior to continued treatment with INX

Antidrug Antibodies (ADAs)

	INX (N=241)	CT-P13 (N=240)
Incidence of ADAs	17 (7.1%)	19 (7.9%)

Trough drug levels and frequencies of adverse events, including infusion reactions, were similar between INX and CT-P13

Cross-immunogenicity: antibodies to infliximab in Remicade-treated patients with IBD similarly recognise the biosimilar Remsima

Shomron Ben-Horin,¹ Miri Yavzori,¹ Itai Benhar,² Ella Fudim,¹ Orit Picard,¹ Bella Ungar,¹ SooYoung Lee,³ SungHwan Kim,³ Rami Eliakim,¹ Yehuda Chowers⁴

Conclusions Anti-Remicade antibodies in patients with IBD recognise and functionally inhibit Remsima to a similar degree, suggesting similar immunogenicity and shared immunodominant epitopes on these two infliximab agents. In contrast, anti-adalimumab antibodies do not cross-react with Remsima or Remicade.

Harmonization of Infliximab and Anti-Infliximab Assays Facilitates the Comparison Between Originators and Biosimilars in Clinical Samples

Ann Gils, PharmD, PhD, Thomas Van Stappen, PharmD,* Erwin Dreesen, PharmD,* Ruth Storme, PharmD,* Séverine Vermeire, MD, PhD,[†] and Paul J. Declerck, PharmD, PhD**

Conclusions: The assay for therapeutic drug monitoring of Remicade can also be used to determine Remsima and Inflectra concentrations. Anti-drug antibody assays for biosimilars were developed. Anti-Remicade antibodies cross-react with infliximab biosimilars and reveal consistent negative/positive anti-drug antibody responses and highly correlated titers.