

# Switching to Biosimilars

## What is the difference between a biologic and a biosimilar medicine?

Biologic (sometimes known as biological) medicines, have been used to treat people for many years. Biosimilars are newer versions of the original biologics. They are very similar in terms of quality, safety and how well they work to the original biologic. They work in the same way.

## Why are the changes happening?

All medicines made by drug companies have a patent that lasts several years. The patent means that only the company who made the medicine is allowed to sell it. The patent on many biologics has ended. Other drug companies now make biosimilars and these are now available to the NHS.

## What does this mean for the NHS?

Biosimilars are less expensive for the NHS to buy. As many drug companies are now making biosimilars, there is competition between them. This helps to lower the cost of the new medicine. It makes sense to offer patients these medicines as they work just as well and can also save the NHS millions of pounds.

## Are biosimilars as safe as the original biologic medicines?

Yes. There are strict rules and testing in place to make sure biosimilars are of a high quality, are safe and work as well as the original biologics.

## How will this affect me?

- If you switch, there's only a small chance that you'll experience a difference in the way your body responds to the new medicine.
- If you do notice a difference, please ask your doctor, nurse or specialist for further advice.

## What other help and advice can I get?

- Please feel free to contact our IBD team to arrange a call back on 01273 664427 or [uhsussex.ibdnursingservice@nhs.net](mailto:uhsussex.ibdnursingservice@nhs.net)

## Examples of biosimilars:

Infliximab (Remicade): Inflectra, Remsima, and Flixabi.

Adalimumab (Humira): Amgevita, Imraldi, Hyrimoz, Yuflyma, Idacio and Hulio.

Ustekinumab(Stelara): Wezenla