

# Study on the **biosimilars market** in the Spanish **National Health System** 2016-2022



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## OBJECTIVES

- To assess the **uptake, evolution** and **level of competition**.
- Evaluate the influence of **factors** such as setting, type of disease...
- To analyse consumption by **Autonomous Community** (CCAA).



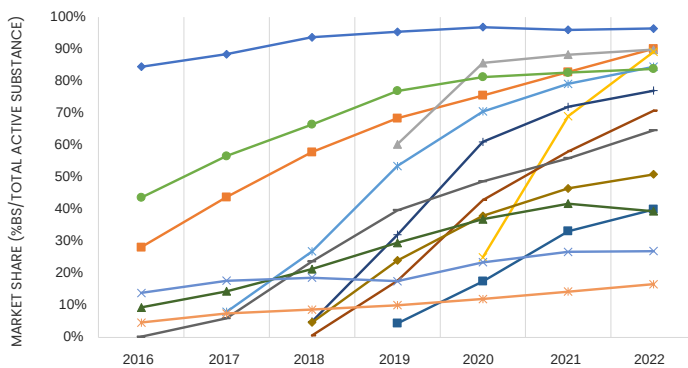
## METHODOLOGY

- Data** from the **Ministry of Health** for the period **2016-2022** (units and DDD)
- 51 biosimilars** of **14 active substances** with  $\geq 1$  biosimilar marketed before January 2022.



## RESULTS

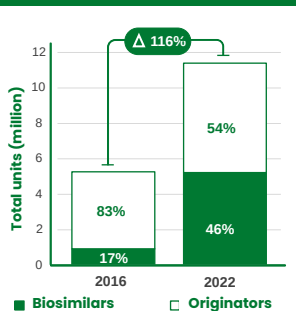
### EVOLUTION OF EACH ACTIVE SUBSTANCE



2022			
	Market share	Brands *	CI**
FIL	96%	5	0,19
INF	90%	5	0,21
PEG	90%	4	0,21
BEV	89%	6	0,17
RIT	84%	2	0,38
ERI	84%	3	0,26
TRA	77%	6	0,15
ADA	71%	7	0,17
ETA	65%	2	0,33
ENO	51%	5	0,31
TER	40%	2	0,45
FOL	39%	4	0,41
SOM	27%	1	0,61
INS	17%	2	0,71

\*Number of biosimilar brands marketed for each active substance in 2022. \*\*CI: competition index in 2022. CI>0.25 concentrated market; CI (0,15-0,25), competitive market; CI<0,15 highly competitive market).

### BIOLOGICS (AND BIOSIMILARS) MARKET SIZE

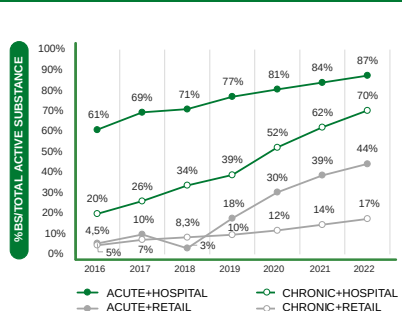


### TOTAL REGIONAL MARKET SHARE (2022)

Galicia	59%
Castilla-La Mancha	54%
Andalucía	53%
Cataluña	52%
La Rioja	49%
Asturias	47%
Comunidad de Madrid	46%
Islas Baleares	45%
Castilla y León	44%
Región de Murcia	44%
Aragón	43%
Cantabria	41%
Extremadura	39%
Comunidad Valenciana	37%
Navarra	36%
Islas Canarias	34%
País Vasco	31%

**NATIONAL AVERAGE 46%**

### DO THE TYPE OF DISEASE AND THE SETTING PLAY ANY ROLE?



## CONCLUSIONS

- Rapid uptake** of monoclonal antibodies in **oncology**.
- There is **great room for improvement** in the **pharmacy setting**.
- Great **variability** across the **Autonomous Communities**.
- Adoption** has been **faster** in biosimilars used in the **hospital setting** and in **acute diseases**.