PMS25  CLINICAL RESEARCH FOR THE EFFECTIVENESS AND ECONOMIC VALUE OF QIXINTONG IN THE PATIENTS WITH RA IN CHINA

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OBJECTIVES: To observe the clinical efficacy and economic value of Qixintong (QXT) during the long-term treatment for patients of RA. METHODS: Causal Sinomenii (CS) has been recognized as an effective medicinal plant for arthritis. The Fifth Hospital of Xi’an developed water extract from CS to a novel kind of drug naming QXT. RA was diagnosed in 200 patients referred to Department of Rheumatology. All the patients were classified according to their different areas. They were respectively evaluated by the score of VAS, DAS28 and the response rates of ACR20/70. We also follow up the patients for the usage rate, treatment compliance and satisfaction of QXT. We count the cost of patients and the income of self-made Chinese traditional medicine in order to analyze the economic value of QXT. RESULTS: We found that: 1) There were 140 out of 200 who were from 14 provinces of China with RA using QXT.2. Percentage of the satisfaction and compliance with the treatment of QXT+MTX group were higher than MTX group, satisfaction rates (94.2% vs. 67.1%, X^2=11.7, P=0.001), compliance rates (91.4% vs. 62.9%, X^2=16.2, P=0.001), respectively. 3)Statistical result of year 2 showed: Compared with pretherapy, QXT+ MTX group scored significantly lower of VAS, while achieving higher level of ACR20 and ACR70. 4)QXT was safe and well tolerated in this trial, difference of adverse events was not statistically significant. 5)The statistics showed the mean cost for QXT only occupied 9.2%(78/856)of patient’s expenses for the treatment of RA. CONCLUSIONS: It is the first time to study the economic value of QXT in a randomized clinical trial for 2 years, and QXT can contribute to the health of RA patients. RA is a chronic disease. A muti-pronged approach including drug therapy, and patient education, and became less important once the patient had established new normality of life accompanying RA diagnosis (n=3). The need for psycho-emotional support to manage the emotional problems (n=5), the need for peer support to learn “how other people live with RA” (n=8), physical activity (n=9), Pain and Physical function (n=9). The transcripts and notes were analysed using NVivo 10 to identify major areas of interest.

PMS26  EXPLORING THE WILLINGNESS-TO-PAY FOR BIOLOGIC TREATMENTS IN IMMUNOLOGY DISEASES IN CHINA

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OBJECTIVES: Biologic treatments have improved outcome for immunology diseases in the last decades globally. However, biologic penetration in China is lower compared to the major economy countries, which is important for capturing the economic value of WTP for biologics in immunology diseases in China by understanding decisions driving physicians’ prescribing behavior and patients’ payment. METHODS: Primary market research was done by interviewing 160 physicians with biologic experience, and followed by in-depth interviews with 20 patients of RA. RESULTS: The results show that patients rely on physicians for treatment recommendation. For rheumatoid arthritis, the top four factors driving physicians’ recommendation are drug cost, patients’ ability-to-pay, safety of treatment and physicians’ treatment experience. For ulcerative colitis (UC) and Crohn’s Disease (CD), the top four factors were safety, efficacy, patients’ affordability followed by drug cost. The difference in pattern for UC and CD is likely attributed to the more severe nature of these diseases. Other factors such as injection frequency and mode of administration ranked lower for all indicators. CONCLUSIONS: Patients interview results show that ~60% of bio-naive patients were rejected biologic treatment due to cost. ~30% of bio-experienced patients stopped biologic treatments due to cost. This confirms that affordability considerations do limit the potential benefit that biologic treatments can provide. Interestingly, ~30% of bio-experienced patients have stopped biologic treatment as it was perceived that treatment course was completed. Thus this is attributed to how physicians perceive biologics to be used. While affordability limits biologic penetration in auto-immune diseases in China, there are other considerations e.g. the severity of diseases and physician perception of treatment paradigm.

PMS27  EXPLORING THE WILLINGNESS-TO-PAY FOR INNOVATIVE TREATMENTS FOR IMMUNOLOGY AND ONCOLOGY IN CHINA

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OBJECTIVES: Use of innovative medicines in oncology and immunology is relatively lower in China compared to developed countries. This study aims to explore the willingness-to-pay (WTP) for these two therapeutic areas by understanding drivers and factors influencing physician prescription choices. METHODS: In oncology, primary market research was done by interviewing 140 oncologists with a diverse set of affordability as measured by household incomes. For immunology, 20 patients of RA were interviewed. RESULTS: The results show that patients rely on physicians for treatment recommendation. For rheumatoid arthritis, the top four factors driving physicians’ recommendation are drug cost, patients’ ability-to-pay, safety of treatment and physicians’ treatment experience. For ulcerative colitis (UC) and Crohn’s Disease (CD), the top four factors were safety, efficacy, patients’ affordability followed by drug cost. CONCLUSIONS: It is the first time to study the economic value of QXT in a randomized clinical trial for 2 years, and QXT can contribute to the health of RA patients. RA is a chronic disease. A muti-pronged approach including drug therapy, and patient education, and became less important once the patient had established new normality of life accompanying RA diagnosis (n=3). The need for psycho-emotional support to manage the emotional problems (n=5), the need for peer support to learn “how other people live with RA” (n=8), physical activity (n=9), Pain and Physical function (n=9). The transcripts and notes were analysed using NVivo 10 to identify major areas of interest.

PMS28  SCAFFOLD EVIDENCE REQUIREMENTS AND PRICE EXPECTATIONS FOR BIOSIMILARS IN THREE ASIAN MARKETS

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OBJECTIVES: Between 2011 and 2015, 32 biologics valued at more than $55 billion are expected to lose patent protection across the world (Datamonitor 2011). The biologics patent cliff has presented a huge opportunity for biosimilar manufacturers. In the context of this growing biosimilars market, this research aimed to investigate the regulatory environments and the evidence (clinical, economic