Biosimilar and Interchangeable Biological Products: An Overview of Scientific Concepts and Practical Resources

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Presenters



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Sabiha Khan, MD



Sabiha Khan, MD, is a Scientific Reviewer at the U.S. Food and Drug Administration's (FDA's) Office of Therapeutic Biologics and Biosimilars (OTBB). She is a part of the interdisciplinary team which supports communicating clear, consistent scientific advice for biosimilar and interchangeable product development. Dr. Khan completed her rheumatology fellowship at the Johns Hopkins University, prior to which she completed her residency in internal medicine at Rush University Medical Center. She received her medical degree from the University of Virginia, and her Bachelor of Science in Biological Psychology from the College of William and Mary.

After completing her rheumatology fellowship, Dr. Khan established and grew her practice in general rheumatology with Johns Hopkins Community Physicians and also served as the Director of the Rapid Arthritis Care and Evaluation Clinic for the Division of Rheumatology at Johns Hopkins Hospital. Dr. Khan joined the Agency as a medical officer with the Division of Pulmonary, Allergy, and Rheumatology Products in 2020. Since then, she has worked in the Division of Rheumatology and Transplant Medicine (DRTM) and in OTBB.

Sarah Ikenberry, MA





Ms. Sarah Ikenberry is the Associate Director for Stakeholder Engagement and Clinical Outcomes at the Office of Therapeutic Biologics and Biosimilars (OTBB) in the U.S. Food and Drug Administration's (FDA's) Center for Drug Evaluation and Research (CDER). She leads OTBB's stakeholder engagement and education program, and FDA's activities related to biosimilars communication activities. This includes providing communication advice and support to senior leaders and the agency about communicating strategic priorities, initiatives, and educational information about biosimilar and interchangeable products. Ms. Ikenberry received her Master of Arts in Communication from Johns Hopkins University.

Disclosures



- Dr. Khan and Ms. Ikenberry have no relevant financial or non-financial relationships to disclose relating to the content of this activity.
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Learning Objectives



At the conclusion of this activity, participants will be able to:

- 1. Describe how biologics differ from small molecules (size, complexity, inherent variation) and explain why some biologics cannot be copied exactly.
- 2. Compare and contrast the development, statutory requirements, and approval process for new biologics and for biosimilars/interchangeables.
- 3. Explain the requirements for generics and biosimilars/interchangeables.
- 4. Identify resources available for health care professionals to learn more about biosimilar and interchangeable products through the Purple Book Database Licensed Biological Products and other FDA educational resources.

Overview

- U.S. Biosimilars Market Overview
- Scientific Concepts and Regulatory Framework
- Overview of Biosimilar Development Programs
- Using biosimilar and interchangeable products
- Biosimilar Educational Materials and Resources



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BIOSIMILAR AND INTERCHANGEABLE PRODUCTS

U.S. Biosimilars Market Overview

FDA

Biosimilar Program Approvals by Therapeutic Area

Biosimilar Interchangeable



Approvals

- 70 Total Approvals51 Biosimilar19 Interchangeable
- 19 Reference Products (RP) 49 Products Marketed
- 12 Unique RPs Marketed

Reference Products and Approved Biosimilars as of April 9, 2025 (70 total)

Oncology

<u>Avastin</u>

Mvasi (bevacizumab-awwb) Zirabev (bevacizumab-bvzr) Alymsys (bevacizumab-maly) Vegzelma (bevacizumab-adcd) Avziri (bevacizumab-tnjn) Jobevne (bevacizumab-nwgd)

Herceptin

Ogivri (trastuzumab-dkst) Herzuma (trastuzumab-pkrb) Ontruzant (trastuzumab-dttb) Trazimera (trastuzumab-dyyp) Kanjinti (trastuzumab-anns) Hercessi (trastuzumab-strf)

<u>Rituxan</u>

Truxima (rituximab-abbs) Ruxience (rituximab-pvvr) Riabni (rituximab-arrx)

Supportive Care

Neulasta Fulphila (pegfilgrastim-jmdb) Udenyca (pegfilgrastim-cbqv) Ziextenzo (pegfilgrastim-bmez) Nyvepria (pegfilgrastim-apgf) Fylnetra (pegfilgrastim-pbbk) Stimufend (pegfilgrastim-fpgk)

<u>Neupogen</u>

Zarxio (filgrastim-sndz) Nivestym (filgrastim-aafi) Releuko (filgrastim-ayow) Nypozi (filgrastim-txid)

Epogen/Procrit Retacrit (epoetin alfa-epbx)

Osteoporosis/ Oncology

Prolia and Xgeva Jubbonti and Wyost* (denosumab-bbdz) Ospomyv and Xbryk (denosumab-dssb) Stoboclo and Osenvelt (denosumab-dmwo) Bomyntra and Conexxence (denosumab-bnht)

Autoimmune

Humira Amjevita* (adalimumab-atto) Cyltezo* (adalimumab-adbm) Hyrimoz* (adalimumab-adaz) Hadlima* (adalimumab-bwwd) Abrilada* (adalimumab-bwwd) Hulio* (adalimumab-afzb) Fusimry (adalimumab-aqvh) Idacio (adalimumab-aacf) Yuflyma* (adalimumab-aatv)

Tysabri Tyruko (natalizumab-sztn)

Simlandi* (adalimumab-ryvk)

<u>Stelara</u>

Wezlana* (ustekinumab-auub)
Selarsdi* (ustekinumab-aekn)
Pyzchiva* (ustekinumab-ttwe)
Otulfi* (ustekinumab-aauz)
Imuldosa (ustekinumab-srlf)
Yesintek* (ustekinumab-kfce)
Steqeyma* (ustekinumab-stba)

Remicade Inflectra (infliximab-dyyb) Renflexis (infliximab-abda) Ixifi (infliximab-qbtx) Avsola (infliximab-axxq)

Actemra Tofidence (tocilizumab-bavi) Tyenne (tocilizumab-aazg) Avtozma* (tocilizumab-anoh)

<u>Novolog</u> Merilog (insulin aspart-szjj)

Lantus Semglee* (insulin glargine-yfgn) Rezvoglar* (insulin glargine-aglr)

Enbrel Erelzi (etanercept-szzs) Eticovo* (etanercept-ykro)

<u>Soliris</u> Bkmev* (eculizumab-aeeb) Epysqli (eculizumab-aagh)

Xolair Omlyclo* (omalizumab-igec)

Ophthalmology

FDA

Eylea Opuviz* (aflibercept-yszy) Yesafili* (aflibercept-jbzf) Ahzantive (aflibercept-mrbb) Enzeevu (aflibercept-abzv) Pavblu (aflibercept-ayyh)

Lucentis Byooviz* (ranibizumab-nuna) Cimerli* (ranibizumab-eqrn)

> 25 Reference Products

49 Marketed

Note: Products with an asterisk have the 351(k) Interchangeable designation.

Biosimilars Are Delivering Savings and Expanding Patient Access





Biosimilar savings since 2015 \$36 BILLION



Biosimilars have been used in almost 2.7 BILLION DAYS of patient therapy and have resulted in more than 495 MILLION INCREMENTAL DAYS of therapy



Biosimilar competition is driving lower prices among biosimilars and their reference products



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BIOSIMILAR AND INTERCHANGEABLE PRODUCTS

Scientific Concepts and Regulatory Framework

Biological Products

- Biologics are generally large and produced from living systems
- They range in size and complexity
- Examples: therapeutic proteins (hormones, growth factors, monoclonal antibodies), vaccines, blood products



(Modified from Mellstedt H, EJC Supplements II, 2013, 3, I – II)

Therapeutic Proteins: Complexity

- Cells can make exact copies of a protein in terms of its amino acid sequence, but other add-ons and changes may occur, resulting in different versions of the molecule (inherent variation)
- Millions of slightly different versions of the same protein or antibody per dose or batch
- Biologics manufacturers establish processes that produce a consistent mix of variants across batches of their products and over time





(FDA, n.d.)

Biological Product Regulation



- **351(a) "stand alone" Biologics License Application (BLA):** contains all information and data necessary to demonstrate that the proposed biological product is safe, pure, and potent
- The Biologics Price Competition and Innovation Act of 2009 (BPCI Act)
 - Created an abbreviated licensure pathway (351(k)) for biological products shown to be biosimilar to or interchangeable with an FDAlicensed reference product (originator biological product)

Key Definitions from the BPCI Act





Reference Product

A reference product is the single biological product, already approved by FDA, against which a proposed biosimilar product is compared



Biosimilar Product





Biosimilar Product

A biosimilar is a biological product that is **highly similar to and has no clinically meaningful differences from** an existing FDA-approved reference product

Interchangeable Product

- Is a biosimilar
- Expected to produce the same clinical result as the reference product (RP) in any given patient
- Switching between the proposed product and the RP does not ↑safety risks or ↓effectiveness compared to using the RP without switching

General Requirements



A 351(k) application must include information demonstrating that the biological product:

- Is **biosimilar** to a reference product
 - Highly similar to and has no clinically meaningful differences from the FDA-approved reference product
- Utilizes the same mechanism(s) of action for the proposed condition(s) of use -but only to the extent the mechanism(s) are known for the reference product;
- Condition(s) of use proposed in labeling have been previously approved for the reference product;
- Has the same route of administration, dosage form, and strength as the reference product; and
- Is manufactured, processed, packed, or held in a facility that meets standards designed to assure that the biological product continues to be safe, pure, and potent.



Different Goals for "Stand-alone" vs. Biosimilar Development

"Stand-alone": 351(a) BLA
Goal: To establish *de novo* safety and efficacy of a new product

Clinical Safety & Efficacy Study for Each Indication

Clinical Pharmacology

Animal

Product Quality

"Abbreviated": 351(k) BLA

Goal: To demonstrate biosimilarity (or interchangeability) to a reference product based on comparative assessments

Additional Clinical Studies

Clinical Pharmacology

Comparative Analytical Assessment

Product Quality

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Regulatory Framework for Generics vs. Biosimilars



	Generic Drug (<mark>Orange Book</mark>)	Biosimilar Biologic (Purple Book)			
Assessment	"Same" Active Ingredient Pharmacokinetic (PK) Bioequivalence	"Highly Similar" No Clinically Meaningful Differences			
Illustrative Schematic of Product Comparisons Note: Comparative analytical data expected for both products	Image: space with the space with t	Image: constraint of the permission from the European Medicines Agency			
Clinical Pharmacology Studies	Compare PK, when applicable	Compare PK, and when applicable, pharmacodynamic (PD)			
Other Clinical Study(ies)	Rarely, when PK is not applicable	Assess immunogenicity; may further evaluate safety and efficacy			

Both are "abbreviated" development pathways that have distinct statutory requirements and scientific considerations supporting their approval.

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DEVELOPING BIOSIMILARS Overview of Biosimilar Development Programs

Comparative Analytical Assessment (CAA) is the Foundation

- Compare multiple physicochemical and biological attributes of each product
 - Analytical studies are generally more sensitive than clinical studies in detecting differences between products, should differences exist
 - A biosimilar product with highly similar structure and function to the reference product should behave like the reference product
- Analyze multiple lots of the reference product and proposed biosimilar for product quality attributes, including:
 - Primary amino acid sequence
 - Higher order structure (protein folding)
 - Post-translational modifications (glycosylation, etc.)
 - Heterogeneity (charge, size, aggregates, etc.)
 - Biological activity evaluation of attributes that affect the known mechanism of action(s)



Key Takeaways about Analytical Comparisons

- Normal and expected for <u>all biological products</u> to have minor differences (i.e., inherent variations) within each dose and between batches
- Biosimilars can have minor differences from their reference products in clinically inactive components
- Analytical comparisons are state-of-the-art, precise, and reliable, conferring high confidence about the similarity of a proposed product to its reference product
- No matter the small molecular variations observed, biosimilars are analytically highly similar to their reference product and so they will behave the same as the reference product clinically, <u>with the same treatment risks</u> <u>and benefits</u>

Role of Clinical Studies

- As a scientific matter, FDA expects an adequate clinical PK, and PD if relevant, comparison between the proposed biosimilar product and reference product and a clinical immunogenicity assessment
- Additional clinical studies are not considered "pivotal" in the way Phase 3 clinical trials are for standalone development
- Add to the totality-of-the-evidence that supports a demonstration of biosimilarity



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Key Takeaways about Clinical Comparisons

- Often some baseline scientific expectations for a given class of products (e.g., showing of PK similarity, where relevant) but no one-size-fits-all approach
- Applicants may choose to do or submit more data than what FDA expects to support approval
- More clinical data in a package does not mean that one approved 351k product is "better" than another approved 351k product



FDA Efforts to Streamline Biosimilar Development



Increasing the Efficiency of Biosimilar Development Programs--Reevaluating the Need for Comparative Clinical Efficacy Studies

SEPTEMBER 12 - 13, 2023



IPRP Biosimilars Working Group Workshop: "Increasing the Efficiency of Biosimilar Development Programs-Re-evaluating the Need for Comparative Clinical Efficacy Studies (CES)"

- Date: September 12 13, 2023
- Day1: Tue, Sep 12 7:00 AM 10:00 AM ET
- Day2: Wed, Sep 13 7:00 AM 10:00 AM ET

Increasing the Efficiency of Biosimilar Development Programs--Reevaluating the Need for Comparative Clinical Efficacy Studies - 09/12/2023 | FDA FDA and the International Pharmaceutical Regulators Program (IPRP) hosted a virtual workshop "Increasing the Efficiency of Biosimilar Development Programs--Reevaluating the Need for Comparative Clinical Efficacy Studies" on September 12-13, 2023.

- Recordings and slides from public portion of the meeting online
- Regulator only sessions Sept. 19-21, 2023
- Workshop Summary

Why Seek Interchangeability?

FDA

An interchangeable biosimilar product can be **substituted for the reference product at pharmacies** without the intervention of the prescribing healthcare provider, subject to state pharmacy laws.



Biosimilars and Interchangeable Biosimilars



- Applicants can request licensure as a biosimilar or interchangeable biosimilar
- The analytical similarity and product quality standards are <u>the same</u> for biosimilars and interchangeable biosimilars
- Statutory criteria related to the potential for substitution without the intervention of the prescriber
- FDA initially recommended switching studies to assess PK, safety and immunogenicity between 2 treatment arms:
 - Patients on reference product only
 - Patient on reference product → proposed biosimilar (1 or more times)

PLOS ONE



3 October 2023 <u>published online</u> and freely available

Safety outcomes when switching between biosimilars and reference biologics A systematic review and meta-analysis

Thomas M. Herndon¹, Cristina Ausin¹, Nina N. Brahme¹, Sarah J. Schrieber¹, Michelle Luo¹, Frances C. Andrada¹, Carol Kim¹, Wanjie Sun², Lingjie Zhou², Stella Grosser², Sarah Yim¹, M. Stacey Ricci¹

¹Office of Therapeutic Biologics and Biosimilars, Office of New Drugs, CDER, U.S. FDA ²Office of Biostatistics, Office of Translations Sciences, CDER, U.S. FDA

Also see FDA's summary of this research conducted by FDA staff: *Spotlight on CDER Science*: <u>Safety Outcomes When</u> <u>"Switching" Between Biosimilars and Reference Products</u>

Cavazzoni P, Yim S. The Science of Biosimilars—Updating Interchangeability. JAMA. Published online September 18, 2024.

Summary of Major Results from FDA Analyses



- <u>5,252 patients</u> underwent at least one switch to or from a biosimilar and its reference biologic were identified—results compared for <u>5,770 patients</u> who were not switched
 - 28 STPs had a single switch; 16 STPs had multiple switches (3-5 switches within STP)
- **Safety data** showed an overall risk difference (95% CI) across STPs of:
 - 0.00 (-0.00, 0.00) for **deaths**,
 - 0.00 (-0.01, 0.01) for serious adverse events, and
 - 0.00 (-0.01, 0.00) for treatment discontinuation
- Immunogenicity data showed similar incidence of anti-drug antibodies and neutralizing antibodies in patients within a STP who were switched to or from a biosimilar to its reference biologic and patients who were not switched.
- Immune related adverse events such as anaphylaxis, hypersensitivity reactions, and injection site reactions were similar in switched and non-switched patients.

2024 Interchangeability Draft Guidance Update

- Experience has shown that for the products approved as biosimilars to date, the risk in terms of safety or diminished efficacy is insignificant following single or multiple switches between a reference product and a biosimilar product.
- This draft guidance:
 - Outlines a revised approach where switching studies will generally not be needed
 - Provides clarity and transparency about the FDA's thinking
 - Aligns the review and approval process with existing and emerging science
- FDA has generally recommended switching studies in the past as part of the data package needed to demonstrate interchangeability of a biosimilar; however, they would all have been approved without additional clinical (switching study) data following the new guidance.
- Both biosimilars and interchangeable biosimilars meet the same high standard of biosimilarity for FDA approval and both are as safe and effective as the reference product.

Considerations in Demonstrating Interchangeability With a Reference Product: Update

Guidance for Industry

DRAFT GUIDANCE

This guidance document is being distributed for comment purposes only.

Comments and suggestions regarding this draft document should be submitted within 60 days of publication in the Foderal Register of the notice announcing the availability of the draft guidance. Submit electronic comments to <u>Birly/Iwww regulations</u>.gov. Submit written comments to the Dockets Management Staff (HEA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability that publishes in the Foderal Register.

For questions regarding this draft document, contact (CDER) Office of Communications, Division of Drug Information at (855) 543-3784 or (301) 796-3400, or (CBER) Office of Communication, Outreach and Development, 800-833-4709 or 240-403-8010.

> U.S. Department of Health and Human Services Food and Drug Administration Center for Drug Evaluation and Research (CDER) Center for Biologics Evaluation and Research (CBER)

> > June 2024 Biosimilars

Key Takeaways about Interchangeability

 Greater understanding of immunogenicity associated with biosimilars

 Risks in terms of safety and diminished efficacy is insignificant following single or multiple switches between a reference product and a biosimilar product

 Because of the science and the Agency's evolved thinking, the interchangeability guidance has been updated



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CLINICAL RELEVANCE

Using Biosimilar and Interchangeable Products

Using Reference, Biosimilar, and Interchangeable Products

- Patients and healthcare providers can be confident in the safety and effectiveness of a biosimilar and interchangeable product and prescribe them by name, just as for the reference product
- Biosimilar and interchangeable biosimilar products can be used in patients who have previously been treated with the reference product (i.e., treatmentexperienced), and in patients who have not previously been treated with the reference product (i.e., treatment-naïve)
- Interchangeable biosimilars may be substituted for the reference product without the intervention of the prescribing healthcare provider, subject to state laws



Biosimilar and Interchangeable Labeling

- The labeling summarizes the scientific information healthcare practitioners need for safe and effective use of the product
- A biosimilar is not required to have the same labeling as its reference product (e.g., a biosimilar can be labeled for fewer than all conditions of use or there may be differences in storage/preparation, or presentation)
- Healthcare professionals are advised to review the labeling (i.e., prescribing information) of the biosimilar to determine the conditions of use (e.g., indications, dosing regimens) and routes of administration for which the biosimilar is approved



FDA



Biosimilar Product



The FDA Purple Book



Purple Book Database of Licensed Biological Products



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The Purple Book also contains information about all FDA-licensed allergenic, cellular and gene therapy, hematologic, and vaccine products regulated by the Center for Biologics Evaluation and Research (CBER).

Enter a product's proprietary (brand) name or the nonproprietary (proper) name to find biological products. As you type, a list of potential results will begin to appear below the search box based on what you are typing. Click on a product from the auto-populated results list below to view the results page. The results page for your selected product will include all biological products that share a core name (*i.e.*, biosimilar, interchangeable, reference, and related biological products).



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Database last updated: April 22, 2025

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	Q etan	
5	Enbrel (etanercept)	
	BLA Number: 103795	351(a)
	Enbrel Mini (etanercept)	
	BLA Number: 103795	351(a)
	Erelzi (etanercept-szzs)	
	BLA Number: 761042	351(k) Biosimilar
	Erelzi Sensoready (etanercept-szzs)	
	BLA Number: 761042	351(k) Biosimilar
	Eticovo (etanercept-ykro)	
	BLA Number: 761066	351(k) Biosimilar
<u></u>	Advanced Search	Database last updated: April 22, 2025

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www.PurpleBookSearch.fda.gov



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Purple Book Database of Licensed Biological Products



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User Guide	Product Label				Grayed out Product Label links indicate			that there is no product label available for the product.	
FAQs	Droduct Number	Decoge Form	Pouto of Administration	Strength	Braduat Presentation			Markating Status	
Patent List	Product Number	Dosage Form	Route of Administration	Strength	Froduct Fresentation	License Type	Proprietary Name	Marketing Status	
Download Purple Book Data 001 Injection		Injection	Subcutaneous	25MG/0.5ML	Pre-Filled Syringe	351(k) Biosimilar	Erelzi	Disc	
	002	Injection	Subcutaneous	50MG/ML	Pre-Filled Syringe	351(k) Biosimilar	Erelzi	Disc	
	003	Injection	Subcutaneous	50MG/ML	Autoinjector	351(k) Biosimilar	Erelzi Sensoready	Disc	
	004	For Injection	Subcutaneous	25MG	Multi-Dose Vial	351(k) Biosimilar	Erelzi	Disc	
	Proper Name etanercept-szzs		Reference Product Pro etanercept	oper Name	Reference Product P Enbrel	roprietary Name	BLA Number 761042		
	Applicant Sandoz Inc.		Original Approval Date August 30, 2016	Original Approval Date August 30, 2016		Date of First Licensure			
			< RETURN TO S	EARCH RESULTS					

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Product Label	Applicant	Proprietary Name	Proper Name	License Type	Strength 🕴	Dosage Form	Route of Administration	Product Presentation	Status
(i	Immunex Corporation	Enbrel	etanercept	351(a)	25MG	For Injection	Subcutaneous	Single-Dose Vial	Disc
<i>₫</i> ĕ	Immunex Corporation	Enbrel	etanercept	351(a)	25MG	For Injection	Subcutaneous	Multi-Dose Vial	Rx
(jà	Immunex Corporation	Enbrel	etanercept	351(a)	50MG/ML	Injection	Subcutaneous	Pre-Filled Syringe	Rx
(jā	Immunex Corporation	Enbrel	etanercept	351(a)	25MG/0.5ML	Injection	Subcutaneous	Pre-Filled Syringe	Rx
(jè	Immunex Corporation	Enbrel	etanercept	351(a)	25MG/0.5ML	Injection	Subcutaneous	Single-Dose Vial	Rx
€ ê	Immunex Corporation	Enbrel	etanercept	351(a)	50MG/ML	Injection	Subcutaneous	Autoinjector	Rx
(jà	Immunex Corporation	Enbrel Mini	etanercept	351(a)	50MG/ML	Injection	Subcutaneous	Single-Dose Cartridge	Rx
(ja	Sandoz Inc.	Erelzi	etanercept-szzs	351(k) Biosimilar	25MG/0.5ML	Injection	Subcutaneous	Pre-Filled Syringe	Rx
(à	Sandoz Inc.	Erelzi	etanercept-szzs	351(k) Biosimilar	50MG/ML	Injection	Subcutaneous	Pre-Filled Syringe	Rx

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Resources for Patients and Healthcare Providers

Biosimilar Education Resources



Overview for Health Care Professionals

Learn about biologics, including biosimilars and interchangeables



Curriculum Materials for Health Care Programs



Review and Approval

Review and approval for biosimilars and interchangeables



Product Information

Information about FDA-approved biosimilar products



Basics for Patients



Multimedia Education Materials

Explore materials to help promote understanding of biosimilars

For more information, visit: <u>www.fda/gov/biosimilars</u>

Health Care Provider Materials

Biosimilar Regulatory Review and Approval

Biological products (biologics) are the fastest-gr and account for a substantial and growing portio Competition and Innovation Act of 2009 created a patients with greater access to safe and effective reduce the time and cost of development withou

Overview of the Approval Process

CA FDA U.S. FOOD & DRUG

- All FDA-approved biologics undergo a rigorous evaluation so that health care providers and patients can be confident of the safety, effectiveness, and quality of these products.
- A biosimilar is a biologic that is highly similar to and has no clinically meaningful differences from an existing FDA-approved biological medication, called a reference product.
- A reference product is approved in a standalone application that must contain all data and information necessary to demonstrate the product's safety and effectiveness.
- The geal of a biosimilar development program is to domonstrate biosimilarity between the proposed biosimilar and its reference product, not to independently establish the safety and effectiveness of the proposed biosimilar. This generally means that biosimilar manufacturers do not need to conduct as many expensive and lengthy clinical triats.



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effective

Overview of Biosimilar Products

Biosimilars are safe and effective biological n chronic skin diseases, such as psoriasis; infla and ulcerative colitis; arthritis; kidney conditi provide more treatment options and potentia

Biosimilars Are Biological Products

 Biological products, or biologics, are generally large, complex molecules that are made from living source such as bacteria, yeast, and animal cells. On the other hand, drugs made from chemicals are smaller molecules and easier to copy.
 Bacause they generally come from living organisms,

biologics inherently contain many slight variations fr batch to batch, and their structures are generally mo



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Interchangeable Biological Products

An interchangeable biological product is a biosimilar that meets additional requirements and may be substituted for the reference product at the pharmacy, depending on state pharmacy laws. Interchangeable biological products [abc called interchangeable biosimilars or interchangeable products] may help increase patient access to biologics.

Interchangeable Biosimilars

 An interchangeable biosimilar may be substituted at the pharmacy for the reference product without the intervention of the prescribing health care provider – much like how generic drugs are routinely substituted for brand-name drugs.

www.lda.go



Interchangeable Biosimilar Approval Process

· Unlike a reference product, which is approved To assess the safety of switching, manufacturers in a standalone application, all biosimilar and interchangeable biosimilars are approved through generally conduct studies in which patients alternate between the reference product and the interchangeable biosimilar and compare those patients to patients who an abbreviated pathway that compares the product to the reference product to show biosimilarity. are just being treated with the reference product. The results must show no decrease in effectiveness or · For approval as an interchangeable biosimilar, increase in safety risk associated with switching. manufacturers must provide additional data that reflect how the interchangeable biosimilar may be While this additional information helps FDA to used in the marketplace with patients. Like generic determine the safety of pharmacy-level substitution, drugs, patients receiving their medications through this does not mean that an interchangeable biosimilar eir pharmacies may switch between a brand-name is safer or more effective than other biosimilars. biologic and an interchangeable biosimilar

All biological products are approved only after they meet FDA's rigorous approval standards, so health care professionals and patients can be confident in the safety and effectiveness of a biosimilar product, whether or not it has also been approved as an interchangeable bioimiliar, just as they would be for a reference product.

Explore FDA's biosimilar resources for health care professionals at www.fda.gov/biosimilars.

Interchangeable Biological Products |

Not all biosimilars are interchangeable. Companies

must submit an application with adequate information to support an interchangeability determination for their product to be approved as an interchangeable biosimilar







fda.gov/biosimilars

Biosimilar Education Resources: CME

110,493 TOTAL LEARNERS

26,672 TOTAL MD LEARNERS

81,665 TOTAL OTHER HCP LEARNERS

> 49,540 TOTAL TEST TAKERS

MD Learner Specialties

3,104	Dermatologists
404	Diabetologists & Endocrinologists
1,126	Hem/Onc Specialists
545	Neurologists
1,634	Ophthalmologists
3,240	Rheumatologists
577	Obstetricians & Gynecologists
2,215	Gastroenterologists
113	Nephrologists
10,147	Primary Care Physicians
3,567	Other Physicians

Top Other MD Specialties

396	Cardiologists
343	Plastic Surgery & Aesthetic Medicine
334	Orthopaedists & Orthopaedic Surgeon
301	Anesthesiologists
285	Psychiatrists



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Biosimilar Education Resources: CME, continued



- <u>The Road to Biosimilars in Rare Hematologic Conditions</u>
- Biosimilars in Rheumatology: Building Certainty and Reducing Reluctance
- Biosimilars in Multiple Sclerosis: Are We Ready?
- Overcoming Reluctance and Enhancing Biosimilar Adoption
- Biosimilars for the Management of Eye Conditions
- Developing a Plan of Care That Includes Biosimilars When Uncertainty Is Present
- <u>Biosimilars 102: Interchangeability, Extrapolation, and Immunogenicity -- A Regulatory Process</u> <u>Primer</u>
- Biosimilars in the Real World: Perspectives for Staying Within the Scope of Care
- Biosimilars 101: A Primer for Your Practice
- <u>Test Your Skill: Incorporating Biosimilars Into the Management of Patients With Immunological</u> <u>Conditions</u>
- Putting the Patient Into Perspective: Strategies for Educating Patients About Biosimilars

Curriculum for Healthcare Professional Programs

- The Biosimilar Curriculum Toolkit contains multiple types of materials to help faculty integrate biosimilars and interchangeable products into the education and professional training of healthcare students.
- Goal is to increase knowledge and realworld application of concepts among students in healthcare degree programs (Medicine, Nursing, Physician Associate/ Assistant, and Pharmacy).
- Materials are designed to meet a variety of needs and are divided into 2 levels of content.

DA U.S. FOOD & DRUG Interchangeable **Biosimilars Biosimilar Products Reference Products** https://www.fda.gov/drugs/biosimilars/curriculum-materialshealth-care-degree-programs-biosimilars



Curriculum for Healthcare Professional Programs, continued

- Materials include a teaching guide, slide decks, videos, information sheets, case studies, discussion questions, exercises, and more.
- Topics covered include:
 - Biologics, Biosimilars and Interchangeability
 - Approval pathways for biological products
 - Manufacturing and variation in biological products
 - Comparative Analytical Assessment
 - Labeling and prescribing of biosimilar and interchangeable biosimilar products



Resources/References

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Center for Drug Evaluation and Research

THANK YOU

Visit www.FDA.gov/biosimilars to learn more about biosimilars.



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Questions?

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2025 JUNE CCSS: Evidence-Based Approaches for Advancing Excellence in Primary Care

Credits are awarded by session. To claim CE/CME credit or certificate of attendance for the session(s) you attend, you must register by 4:00 p.m. ET on June 6, and then you must complete the course evaluation and posttest for each session by 11:59 p.m. ET on Thursday, June 19, 2025.

- 1. Visit the main event page at https://www.dhaj7-cepo.com/content/2025-jun-ccss to register for the live event or to log in to your account if already registered.
- 2. On the main event page, select the "Get Started" tab (located in the menu below the event title on the desktop and at the bottom of the page on mobile devices). Note: This tab will not appear unless you are registered and logged in to your account.
- 3. Under the "Get Started" tab, scroll down to a session you attended and select "Claim credit."
- 4. Proceed to take the evaluation and posttest to obtain your certificate after the session has ended.

All completed courses and certificates are available in <u>your account</u>. Refer to your <u>Pending Activities</u> for sessions you have yet to complete. You must complete the required course items by <u>Thursday, June 19</u> to receive credit.

Questions? Email DHA, J-7, CEPO at <u>dha.ncr.j7.mbx.cepo-cms-support@health.mil</u>.

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