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Management model to replace an
original high cost drug with a
non-original formulation.
Evaluation, monitoring and
results

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NATIONAL RESOURCES FUND

URUGUAY

NATIONAL RESOURCES FUND

- * National Agency for Highly Specialized Medical Procedures**
- * Created by law in 1980**
- * *Guarantees universal* access to highly specialized medicine (HSM).**

NATIONAL RESOURCES FUND

*** Budget**

*** U\$S 150,000,000 /year**

(6% of health expenditure)

*** U\$S 24,000,000 / year on medicines in 2010**

*** U\$S 30,000,000 expected for 2011**

•It is anticipated that if the current trends continue from 2011 onwards, up to 10% of the country's drug spending will go to the NRF

Management model to replace an original high cost drug with a non-original formulation.

Evaluation, monitoring and results.

Tacrolimus

- * Tacrolimus is financed for immunosuppressive treatment in solid organ transplantation.
- The original trademark was exclusive until May 2009, when a non – original formulation was introduced.
- This change was resisted by patients and physicians and a process was designed to follow up the change .
- The new trademark was given to new patients and to those already in treatment who accepted the change.

- The drug's plasmatic measurements for patients who change to the new trademark started to be paid by the NRF
- Patients who decide to use the original drug continued paying a contribution for plasmatic measurements.
- Results are registered online on the NRF database.
- If patients are not within therapeutic levels, an email is automatically sent to the physicians who monitor the process. Then they contact the corresponding physician treating the patient.

Research Background

- At month four and at month ten after the start of the treatment with non-original Tacrolimus, all the available data on patients who changed was analyzed.
- In 93 patients analyzed there was a significant drop in Tacrolimus plasmatic levels (7.62/6.14 ng/ml, $p < 0.001$) explained by a drop in given dose (5.59/4.81 mg, $p < 0.001$).
- Normally, the dose is gradually reduced within the months following the transplatation

Current Evaluation

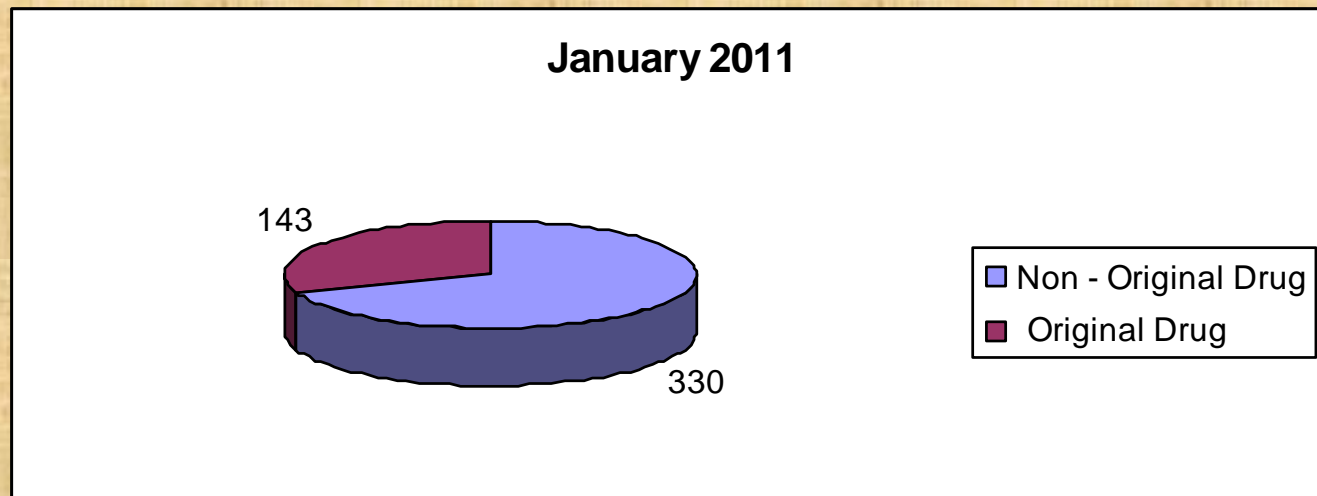
- An evaluation was made on 408 patients using both trademarks.
 - The differences between consecutive plasmatic measurements with the same trademarks (2,172 cases) were compared with correlative differences between doses.
- * An ANCOVA test was run.

FINDINGS

- Plasmatic values decreased with both trademarks (0.094 ng/ml the original and 0.099 ng/ml the generic)
- The decrease was associated with dose reduction (Beta 0.674 , $p < 0.001$)
- The trademarks were not associated with the difference in the plasmatic values ($p = 0.972$).

Current Situation

- With the available information, we haven't found differences in terms of plasmatic values between both trademarks.
- More time is needed to evaluate the impact on grafts and patients survival.



Thanks