

Press Release: As Ontario Announces Forced Biosimilar Switching, Ophthalmologists Are Latest Specialty to Raise Concerns

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TORONTO, ONTARIO - Physicians and their patients- and not a government - should choose which biologic medicine to use, according to a new survey of Canadian ophthalmologists by the Alliance for Safe Biologic Medicines (ASBM) and the International Foundation on Ageing (IFA).

In the week before the 2022 holiday season, the Ontario government announced that beginning March 31st, it would be requiring thousands of patients to switch from their current, physician-prescribed biologic medicines to government-preferred biosimilar. While safe and effective medicines in their own right, biosimilars are not identical to their reference products, and most physicians are wary of unnecessary switching between medicines. Long available in the areas of arthritis, psoriasis, and cancer, biosimilars are now becoming available for ophthalmic conditions. Most ophthalmologists believe that in consultation with their patients they are in the best position to determine the most appropriate and effective treatment.

The survey of 41 Canadian ophthalmologists revealed that 81% were not comfortable with a third party such as a government switching a patient's medicine for non-medical reasons such as cost, as would occur under the Ontario plan. Ninety percent of respondents said that having sole authority, with the patient, to decide which biologic medicine to use is very important or critical. And 91% considered the ability to prevent a forced switch by a public or private payer very important or critical.

"The Ontario announcement cites 15 years of safe use of biosimilars in Europe as a justification for its forced-switching policy," says Michael Reilly, ASBM's executive director. "The success of biosimilars in European markets has actually shown that countries need not sacrifice physician and patients' choice to enjoy significant savings. This is accomplished through competition between many reimbursed products, rather than forced switches. Patients and physicians in Canada deserve no less – yet they are increasingly seeing choice restricted rather than expanded. With the arrival of ophthalmic biosimilars, we see yet another group of physicians and their patients expressing concerns with unnecessary switching in pursuit of short-term savings."

Seventy-eight percent of respondents said their patients would be best served by a European-style scenario where multiple products including innovator and biosimilars are reimbursed, with biosimilars encouraged for new patients but no automatic substitution. Only 15% preferred a system similar to that of Ontario where only government-chosen biosimilars are reimbursed, new patients must be prescribed these products, and current patients are forced to switch.

"Data on the impact of 'non-medical switching' of ophthalmic medications is not available and as such it remains a point of contention with policies that have already been enacted in other provinces, such as Alberta and British Columbia, observes Dr. Jane Barratt, Secretary General of IFA. The survey's findings are aligned with statements from the Canadian Retina Society (CRS), the Canadian Ophthalmology Society (COS) and American Academy of Ophthalmology (AAO) that call for more data, 'given the unique immunological environment and limited tolerance for inflammation which exists with direct

administration of the medication into the eye.” The CRS asks government to consider that “retinal diseases are sight threatening, and the retina has limited regenerative potential with vision loss often irreversible. As with IFA the CRS advocates that physicians in collaboration with their patients, be able to exercise their clinical judgement when determining how and when to use biosimilars and reference biologics, and that clinical practice and patient outcomes not be impacted primarily by budgetary considerations.”

Ophthalmologists are just the latest group of physicians to raise concerns with the practice of forced switching. The Canadian Association of Gastroenterology released a statement opposing the practice in 2019. Prior ASBM [surveys](#) across many specialties revealed that 83% of Canadian, 82% of European, and 69% of U.S. physicians consider it very important or critical that the physician and patient control treatment decisions, including the decision to switch to a biosimilar. 79% of Canadian, 84% of European, and 67% of U.S. physicians considered the ability to prevent a substitution similarly important.

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About the International Federation on Ageing

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