Our Ref: 060/2020 February 2020



## Re: Your request made under the Freedom of Information Act 2000

- 1) Is the branded biosimilar AMGEVITA listed on your formulary for (a) rheumatology **Yes**, (b) dermatology **Yes**, and (c) gastroenterology **Yes**
- 2) Please complete the number of patients prescribed with the following products in the last 12 months:

AMGEVITA first-line\*
AMGEVITA second-line\*
HUMIRA first-line\*
HUMIRA second-line\*
HYRIMOZ first-line\*
IMRALDI first-line\*

Within (a) Rheumatology, (b) Dermatology and (c) Gastroenterology:

We do not have sufficient access to this information.

\*How many patients receive the listed therapies as a first or second treatment once they reach the biologic/biosimilar part of their treatment pathway. For example, according to the NICE Pathway, psoriasis patients should receive topical therapy, then systemic non-biological therapy, then systemic biological therapy. We would like to know which therapies are received first and second in the biological therapy part of the pathway.

3) Are any local guidelines followed that recommend earlier use of anti-TNF biologics/ biosimilars in the treatment pathway for:

We do not have sufficient access to this information.

Dermatology:

a) Psoriasis

Rheumatology:

- b) Psoriatic arthritis
- c) Rheumatoid arthritis
- d) Ankylosing spondylitis

Gastroenterology:

- e) Crohn's disease
- f) Ulcerative colitis

Are there occasions where patients can receive adalimumab outside of NICE/SMC/AWMSG/National criteria for?

## Dermatology:

a) Psoriasis

Rheumatology:

- b) Psoriatic arthritis
- c) Rheumatoid arthritis
- d) Ankylosing spondylitis

Gastroenterology:

- e) Crohn's disease
- f) Ulcerative colitis
- 4) What is the contractual agreement for seeing and treating patients with anti-TNF biologics between you and your referring CCGs/Health Boards?

Block contracts? No

Fixed price on a patient-by-patient basis? Yes