Biologic medicines developed to be highly similar to an approved reference biologic, with no clinically meaningful differences in terms of safety, potency and purity

- Provide potential cost benefits to the healthcare system
- Increase availability of treatment options to those who rely on them for chronic or potentially life-threatening diseases

Most physicians are extremely or moderately familiar with the FDA’s definition of a biosimilar

74% indicated that an interchangeable designation was very or moderately important

71% aware that an approved biosimilar was not automatically deemed interchangeable by the FDA

66% extremely likely or likely to initiate biosimilar treatment if the approval included efficacy and safety studies in the same indication

5% extremely likely
29% likely

To initiate biosimilar treatment for a biologic treatment-naïve patient with a different rheumatologic condition than the one on which the biosimilar approval was based

131 physicians participated in a 20-question survey, administered by WebMD, between December 9 and 14, 2016. All participants were self-identified rheumatologists, practicing in the U.S. for more than 1 year.

Boehringer Ingelheim