#### Intro Time: 1 minutes

#### Generic vs. Brandname

When does it really matter?

Marc R Bloomenstein, OD, FAAO

#### Marc R. Bloomenstein

- Speaker's Panel: Alcon, J& J, Allergan, B+L, BioTissue, Bruder, Reichert, OcuSoft, Sun, Tarusus, Pompe', Tear Science
- President of MRB Eye Consultants
- Past President OCRT
- **VE Director of Education**
- No Financial Interest in any product

#### Generic Time: 5 minutes

#### Generics

According to the FDA website- "A generic is identical or bioequivalent- to a brand-name drug in dosage
form, safety, strength, route of administration,
quality, performance characteristics and intended
use."

#### Making of a Generic

- Orug companies must submit an abbreviated new drug application (ANDA)
- The Drug Price Competition and Patent Term Restoration Act of 1984, more commonly known as the Hatch-Waxman Act, made ANDAs possible by creating a compromise in the drug industry.
- Generic drug companies gained greater access to the market for prescription drugs, and innovator companies gained restoration of patent life of their products lost during FDA's approval

#### Same as in "Ways that Matter"

- \* in their price,
- \* Color
- \* size
- shape
- place of manufacture
- The specific dyes used to create them,
- · Filling agents
- The chemical binders that hold their active components together,
- The lacquered coatings that they employ

#### **Generic Information**

- Generic drugs must have systemic bioavailability similar to that of the original drugs
- « Similar Therapeutic bioequivalence
- FDA requires that you get 80-125% of the drug into your blood stream from a generic medication, compared to the original
- \* 1984 < 19% of all Rx's in US
- \* Today 54% of all Rx's in US

#### **Generic Information**

- Many different generics and not all the same
- As stated Not all generics have the same buffer or vehicles
- Generics are NOT tested like name brands
- Labels on most generics can be misleading and incorrect

#### More generic Information

- Yes, the active ingredients are regulated and they do have to show bioequivalence
- BUT... the inactive ingredients
  - \* (Buffers, preservatives, viscosity agents)
- \* Are NOT regulated...

#### Generics can be Scary...

- . 2005 J. Ophthalmol reported that 20% of generic ciprofloxacin in India was under-potent
- The sufficiently low antibiotic content could have potentially lead to resistant isolates in patients
- Generics are not tested the same as brand name and thus may fall short
- Manufacturing may impede efficacy
- Particles in Pred Forte were smaller and more uniform
- Staying in the suspension longer resulting in greater drop homogeneity
- Providing better bioavailability
- Overseas manufacturing plants are rarely inspected by USFDA (less than 10%)
- Generic companies can not be held liable for adverse reactions caused by their product!!!

#### Generics can be inconsistent...

- The composition, packaging and manufacturing of brand products are strictly controlled in the manufacturing process
- \* That is not the case for generic counterparts

## These differences are particularly magnified in ophthalmic meds

- Size (of the drop) does matter
- Preservatives matter
- Ability of drop to get to desired receptor sites is affected by inactive ingredients
- Tolerability is affected by inactive ingredients
- Up to 99% of an ophthalmic drug can be the inactive ingredient

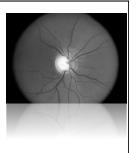
#### When to consider a Generic

- NOT an extended release medication
- Mhen you can ID the manufacturer to get the consistency
- · When you know there is an authorized generic
- When there are few manufacturers of the generic product
- . When you gain clinical proof that a generic is comparable

### Glaucoma Time: 14 minutes

#### Glaucoma

Glaucoma meds are uniquely affected by the inactive ingredient differences



#### **Beta Blockers**

- Excretion into human milk detected-PI
   Timolol OK for nursing Tarascon Pharmacopeia \$8.50



#### Xalatan

- 0.005% latanoprost
- Prostaglandin analog
- Generic: \$18.19
- Branded: \$67.00



#### Lumigan

- 0.01%
- Bimatoprost
- Prostaglandin analog
- 5ml \$127.07



#### **Travatan**

- 0.004% travoprost
- Prostaglandin analog
- Travatan Z
- 5ml \$114.78



#### XLT Study - Parrish, Palmberg, et. al. (AJO, May 2003, Vol. 135, No.5)

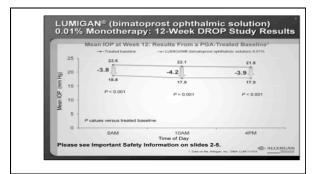
- Multicenter study to compare IOP lowering efficacy of Bimatoprost vs Latanoprost vs Travaprost
- Also compared safety profiles of the 3 drugs
- Conclusions: All 3 drugs were comparable in their ability to lower IOP at all time
  - Latanoprost exhibited greater ocular tolerability

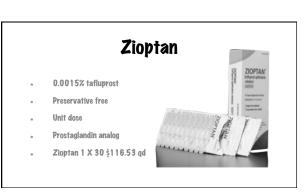
## The Branded PGAs are similar in efficacy and side effects

\* But how do they compare to the Generics?

#### DROP Study - Meyer, 2014

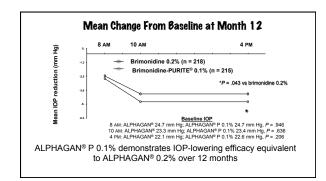
- \* All pts were started on Latanoprost
- \* Avg IOP dropped to 22.6 in 1 month
- \* Half were then switched to Lumigan .01%,
- Switch group IOP reduced by 4mm Hg (19%) (17.9mm Hg) at 12 weeks

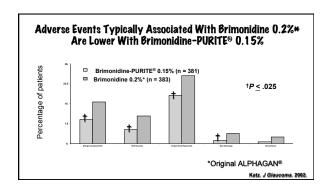




## Brimonidine Alphagan P 0.15% Bromonidine Tartrate 0.2% Generic \$23.10

Brimonidine Formulation Comparison			
	ALPHAGAN® P		<b>ALPHAGAN</b> ®
Concentration of Brimonidine	0.1%	0.15%	0.2%
рН	7.7	7.2	6.3-6.5
Preservative	PURITE®		BAK
Viscosity agent	Carboxymethylcellulose		Polyvinyl alcohol
Electrolytes	Potassium chloride, calcium chloride dihydrate, magnesium chloride hexahydrate		-





### Effect of Brimonidine-PURITE® 0.1% Formulation on Safety

- Ocular surface exposed to 50% less drug with new formulation
  - \* Less allergy, redness, irritation
- Lower concentration also means fewer systemic effects as less drug enters nasolacrimal duct

Katz. J Glaucoma. 2002

## Combigan Brimonidine 0.2%/timolol 0.5% 5ml \$112.84

## Porzolamide Trusopt 10ml § 25.65 Cosopt 10ml § 30.45



#### Glaucoma

- Yearly costs of glaucoma meds:
  - \$ \$150.81 vs. \$203.47 generic to branded timolol
- \$352.89 vs \$529.34 (bid/tid) generic brimonidine
- \* \$559.08 vs \$873.98 (bid/tid) Alphagan P
- \$427.69 Travatan Z
- \* \$577.62 Lumigan

Rylander NR, Void SD. Cost analysis of glaucoma medications. AmJ Opthalmol. 2008. Jan: 145 (1): 106-13.

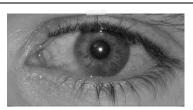
#### New Study - Singh 2014

- 20 new start patients were all placed on generic latanoprost for 30 days
- · They were all subsequently switched to branded
- Costs between the 2 drops were compared
  - · After cost comparison 13 remained on branded (Dr recommended) drug
- Branded choosers showed a \$35 difference between the drugs
- . Generic choosers showed \$65 difference between the 2 drugs

#### Conjuntivits Time: 15 minutes

#### SO... this study showed that

- \* If Drs advocate for the recommended drops the majority will choose those
- \*\* Drs need to educate pxs on the difference between branded bvs generic drops
- It may be beneficial to point out the actual differnce in cost between the 2 drops
- $\bullet$  There is a price point difference that will sway pxs to choose generic product despite what the Dr says
- \* We (the doctors) have to place value on the meds we Rx



## Conjunctivitis "Is that a pink eye?"

#### Conjunctivitis Factoids

- The annual cost of treating patients with bacterial conjunctivitis in the US-\$589 million
- Need to treat bacteria rapidly to decrease transmission and shorten symptom duration and minimize resistance
- 1:8 US kids develop bacterial conjunctivitis
- 1.4% of all family doctor appointment

# Need to differentiate Viral Conjunctivitis Upper Respiratory Infection Viral 5569 Bacterial 5-5690 Unmbadeenpathry Viral 5376 Bacterial 5-5890 Unmbadeenpathry Viral 5376 Bacterial 509-1469 Unit 5096 Bacterial 3996 Bacterial 3996 Bacterial 1796 Bacterial 1796

#### Conjunctivitis

- Finding diagnostic indicators provides optimal results
- Study found viral conjunctivitis has a stronger tendency to recur
- Itch indicates allergic source
- Mild bacterial conjunctivitis will have particulates in the tear film



#### Conjunctivitis

- Meta-analysis indicates bacterial conjunctivitis is frequently self-limiting
- Clinical remission occurred in 2-5 days in 64% of those treated with placebo
- Treatment with antibiotics had significantly better rates of remission

#### Delayed Approach to Treatment

- Promote supportive care
- Eye cleansing
- Change CL solutions
- Hand and eye cleanser
- Palliative tears
- No improvement start delayed approach



#### **RPS AdenoPlus**

- \* RPS Adeno detector
- . 10 tests \$135
- \* CPT 7809QW CLIA
- \* CMS \$17.52







Medications For the Infection

#### Fourth Gen' Quinolones

- Zymaxid
- Moxeza
- Besivance



#### Third Gen Quinolones

- Ciprofloxacin (Ciloxan)
- . Ofloxacin (Ocuflox)



#### **36's**

- Ciprofloxacin (Ciloxan)
  - Branded- 5ml \$51.00
- \* Generic- \$12.87
- Ofloxacin (Ocuflox)
- \* Branded- 5ml \$47.00
- \* Generic-\$9.90



#### Tobramycin

- \* Tobramycin
- \* Pregnancy Category B
  - **\$4**.00



#### Gentamicin

- Garamycin 0.3%
- 5ml \$4.00
- \* Pregnancy Category C



#### Resistance

- Staph aureus is the most common pathogen in bacterial conjunctivitis
- High levels of resistance: tetracycline, erythromycin and Septra/Bactrim (trimethaprim/sulfamethoxazole)

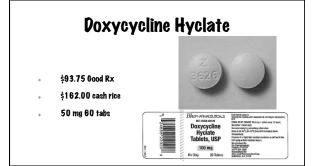
#### **Relative Cost Study**

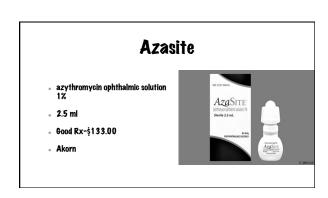
- "Sulfacetamide covers 84% of susceptible isolates and an average cost of §1 3.11 is the most cost-effective for bacterial conjunctivitis"
- Sulfa works by competitive inhibition of PABA, and thus are bacterial static
- "Despite a reputation for broad spectrum activity, sulfa-baseed med's are often ineffective since many organisms have developed resistance to sulfa drugs"

### Blepharitis Time: 10 minutes











## Topicals Cromolyn - Azelastine (Optivar) Levocabastine (Livostine) Pemirolast (Alamasat) Nedocromil (Alocril) - Loteprednol Olopatadine (Patanol) Epinastine (Elestat) Ketotifen fumarate (Zaditor)

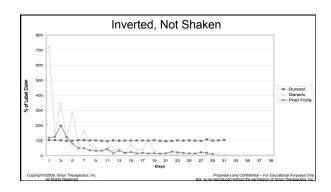
#### Steroids Time: 5 minutes

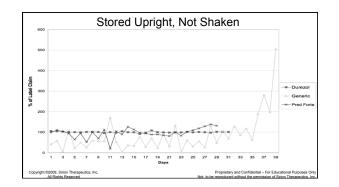


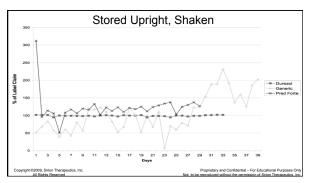
### Steroids

#### Prednisolone acetate 1%

- Is there really a difference?
- \* In price?
- In efficacy?







Thank you....