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IMMUNOGENICITY

Any treatment or medicine that affects the immune system, including biologics and biosimilars, can trigger an immune response.

This is known as immunogenicity.¹⁻³

Immunogenicity caused by the development of ADAs and NAbs **may have no impact** on the clinical efficacy of a medicine and **no apparent clinical manifestations**.

However, **in cases where many ADAs develop**, this may influence the behavior of the medicine, contributing to a **loss of efficacy** and/or the development of – sometimes serious and life-threatening – **side effects**.⁴



Evaluating immunogenicity is essential to assess how the body's immune system responds to a biologic medicine by developing ADAs, which may impact the effectiveness of that medicine.

In a biosimilar development program, immunogenicity is evaluated to determine if the proposed biosimilar matches its reference medicine in its potential to trigger the development of ADAs and NAbs.^{5,6}



The demonstration of **matching minimal potential differences** in immunogenicity using state-of-the-art, high-sensitivity assays is a **critical requirement** for establishing biosimilarity between a **biosimilar** and the **respective reference medicine**, and is subject to specific guidance from the FDA and EMA.^{7,8}

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An **immunogenicity assessment** is a stepwise approach to determine if the **proposed biosimilar matches** its **reference medicine** in its potential to trigger the development of ADAs and NABs, and in the **impact** of any immunogenic potential on humoral response, hypersensitivity reactions, and clinical outcomes.^{2,3,5,6}



The comparison of immunogenicity between a **reference biologic** and a **proposed biosimilar** will evaluate⁵:



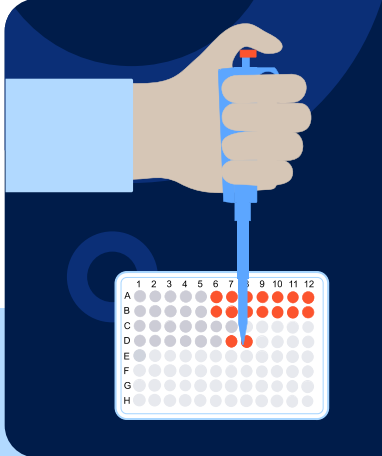
Incidence of immune responses



Nature and severity of the immune response (e.g. anaphylaxis, NABs)



Clinical relevance of the immune response (e.g. loss of efficacy and increased safety risks)



Immunogenicity is evaluated within a biosimilar development program using **'assays'**. These assays are **specialized** and more **sensitive** than the assays used in clinical trials, to detect **potential differences** that could translate to an **impact on efficacy and safety in patients**.^{3,5,6}

Immunogenicity assays are **optimized** to have high sensitivity, specificity, precision, and robustness, and follow **validation standards** as per regulatory guidelines.⁹



If the immune response between a biosimilar and reference medicine is **'highly similar'** or presents **'no clinically meaningful differences'** to each other within the **same assay format**, then this demonstrates that **the two medicines match** in terms of immunogenic potential and can be used with **equal confidence**.^{5,6,10,11}

ADA, anti-drug antibody; EMA, European Medicines Agency; FDA, Food and Drug Administration; NAB, neutralizing antibody.

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