

# Letters to the Editors

## Is Etanar a new biologic?

Sirs,

The paper recently published by Santos-Moreno *et al.* although interesting, needs additional clarification going from the published title to some of the presented results (1).

Etanar has been available in China for over a decade as a new biologic and in some countries with legislation for the approval of biosimilars not fully established yet, as an intended copy of etanercept. I would thus like to suggest that the title presenting Etanar as a new biologic maybe inappropriate (2, 3).

The results published are also surprising, as the percentage of patients presenting ACR 20 and ACR 50 (90.5 and 86%, respectively) are almost the same, and ACR 70 is extremely high compared to what is available in the extensive literature on this field (4). The first truly biosimilar comparing etanercept with a biosimilar SB4 shows results in the expected range with percentages of patients with ACR 20, 50 and 70, respectively 78.46 and 25% (4). While one of the possible explanations for this degree of discrepancy could be the fact that

the study by Emery *et al.* was randomised and more rigid in control of the evaluation of the results, while the Colombian study was an open study where external influences may play a role (5). The authors of the Colombian cohort could elaborate on details of the patient population for such exceptional results and whether patients receiving Etanar were aware of the nature of the biologic they were being prescribed, particularly when it is well known that the price difference between the brand and the "new biologic" is or was minimal, and the brand is a weekly injection while the "new biological" is twice weekly.

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## References

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