ARTHRITIS PATIENTS SAVE WITH GENERIC DRUGS

$3.3 Billion Per Year

Generics saved patients with arthritis $3.3 billion in 2020, and savings for the past 10 years total $14.6 billion. Affecting more than 54 million adults in the U.S., arthritis is the leading cause of disability in the nation. Generic drugs can reduce the inflammation commonly associated with many varieties of the disease.

Conditions That Often Accompany Arthritis

Many arthritis patients also take generic medications for other conditions:

47% have diabetes,
for which they saved
$881M

49% have cardiovascular disease,
for which they saved
$1.7B

Generics and Biosimilar Medicines Deliver More Savings Every Year

Because tens of millions of Americans entrust their health to generics and biosimilars, they saved $338 billion in 2020, and nearly $2.4 trillion in the last decade.

TOP 10 GENERIC SAVINGS BY CONDITION IN 2020

CONDITION	GENERIC SAVINGS
HEART DISEASE	$88,062,760,793
MENTAL HEALTH	$56,069,886,013
DIABETES	$53,214,066,373
EPILEPSY	$36,692,231,940
CANCERS	$15,972,778,545
ALLERGIES & ASTHMA	$13,640,813,324
CHRONIC OBSTRUCTIVE PULMONARY DISEASE	$5,674,341,924
ALZHEIMER'S DISEASE	$5,279,870,992
HIV/AIDS	$4,786,180,477
CROHN'S & COLITIS	$4,591,855,045

Source: IQVIA, National Sales Perspectives, Dec 2020.

BIOSIMILAR ACCESS DRIVES SAVINGS

31 Approvals

Projected Savings Through 2025
$133 Billion

20 Launched

Biosimilars have been used in more than **121 million days** of patient therapy and have resulted in almost **10 million incremental days** of therapy.

As of October, 2021.
Source: U.S. FDA.

AAM 2021 U.S. Generic and Biosimilar Medicines Savings Report: Methodological Overview

This report estimates savings from generic drugs for the 10-year period between 2011 - 2020, as well as a single year estimate for 2020.

Base Savings Estimates: The base savings were calculated by IQVIA. We generated condition-level savings by assigning drugs to a list of common conditions, as well as a list of conditions provided by AAM and aggregating savings for all drug that are used to treat these conditions. Product condition assignments were conducted by a Doctor of Pharmacy. Importantly, many products treat multiple conditions. For purposes of this analysis, we ensured that the most common used of the product was the condition into which it was assigned.

Comorbidity Estimates: We used published epidemiological data to determine the 3 most common comorbidities for each of the index conditions provided by AAM. We calculated the base savings for the primary condition in the same manner as described above, and then assigned a weighted savings to each of the 3 selected comorbid conditions based on published prevalence data. Because the IQVIA data provided units rather than patients, we used units as a proxy for the number of patients treated and adjusted the units, and thus savings, in proportion to the published prevalence of each comorbid condition. Importantly, this methodology, due to the differences in units utilized by patients for specific conditions, could occasionally lead to estimates of comorbidity savings that exceed the total savings for that stand alone condition. In these cases, the savings were either capped, when the total numbers were relatively low relative to the main condition or, more commonly, the incidence rate for the comorbidity was applied again, to ensure a lower savings estimate. While this is a methodological choice and likely underestimates the savings from the comorbidity, it effectively assumes that the comorbidity requires more units per patient treated than the main condition.