



# A guide to...

## Ranibizumab biosimilar (ONGAVIA®)

### *Patient Information*

If you need this leaflet in another language, large print, Braille or audio version, please call **01923 217 198** or email **westherts.pals@nhs.net**



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This leaflet is intended for patients who attend the Ophthalmology Department at West Hertfordshire Teaching Hospitals NHS Trust, who are diagnosed with an eye condition that requires intra-vitreous eye injections and have either been offered to start a medication called ranibizumab (Ongavia®) or previously received ranibizumab as Lucentis® and are now offered to switch to the biosimilar version Ongavia®. It aims to answer some of the questions our patients might have about these medications and what biosimilar medications are. If there is anything you do not understand or if you have further questions after reading this leaflet, please do not hesitate to contact us via the telephone number at the end of this leaflet or speak to a member of staff when you see us again.

### **What is ranibizumab?**

Ranibizumab is a medicine injected into the eye. It is used to treat eye conditions which affect the retina, such as wet age-related macular degeneration (wet AMD) and diabetic eye conditions. It belongs to a group of medicines called anti-VEGF (vascular endothelial growth factor) agents.

### **What is ranibizumab used for?**

If you are receiving treatment with ranibizumab or your ophthalmic healthcare professional is recommending treatment with ranibizumab, it means your eye contains more than normal amounts of a substance called vascular endothelial growth factor (VEGF). Too much VEGF causes leaky, abnormal blood vessels. The excess fluid that comes from these blood vessels can build up in your eye and affect your vision by causing swelling and eventually scarring in your retina.

Ranibizumab blocks the action of VEGF. By blocking VEGF, ranibizumab prevents abnormal blood vessels from growing and stops damaged blood vessels from leaking fluid. Ranibizumab is given as a course of injections into the eye. Over time, the injections can stop the growth of abnormal blood vessels and leakage from these vessels. The aim is to reduce swelling, prevent further loss of vision and sometimes improve vision. Your ophthalmic healthcare professional will advise on the number and frequency of injections you need.

## **How does ranibizumab compare to other anti-VEGF agents prescribed for your condition?**

Other anti-VEGF agents include aflibercept (Eylea®), brolucizumab (Beovu®), bevacizumab and faricimab (Vabysmo®). Your ophthalmic healthcare professional will discuss your treatment options with you and advise which medicine is best for your condition.

## **How is ranibizumab made?**

Ranibizumab is a biological medicine. Biological medicines are medicines made or derived from living cells. Biological medicines were first used to treat people with serious illnesses in the UK over 20 years ago and they have improved the lives of millions of people worldwide.

## **What versions of ranibizumab are available in the UK?**

Until recently, only one pharmaceutical company made ranibizumab. Now another company makes a biosimilar ranibizumab. In the future, other biosimilar versions of ranibizumab will become available.

## **What is biosimilar ranibizumab?**

Biosimilar ranibizumab is a highly similar copy of the original ranibizumab medicine. The World Health Organisation (WHO) defines a biosimilar as a medicine that is similar in terms of quality, safety and effectiveness to the original licensed product.

## **Are biosimilars safe?**

The body in the UK which regulates medicines is the Medicines and Healthcare products Regulatory Agency (MHRA). All medicines have to pass rigorous tests for quality, biological activity, safety and effectiveness. Biosimilar medicines pass the same tests as the original medicine.

## **What does treatment with biosimilar ranibizumab mean for you?**

Whether you are due to start treatment with ranibizumab for the first time or have agreed with your clinician that your treatment will change from Lucentis® to biosimilar ranibizumab (Ongavia®), you can expect the same results.

The National Institute for Health and Care Excellence (NICE) produces guidance for healthcare. If NICE recommends the original biological medicine in their guidance, the same recommendation applies to the biosimilar medicines.

If your treatment with another anti-VEGF agent, such as aflibercept (Eylea®), brolucizumab (Beovu®) or bevacizumab changes to biosimilar ranibizumab, the frequency of injections might change but the effectiveness of treatment should not.

All versions of ranibizumab can cause similar side effects. If you experience any problems with your treatment, report it promptly to your treating ophthalmology clinician, nurse or pharmacist.

### **What are the benefits of biosimilars?**

Many original biological medicines are expensive and the number of conditions they treat is increasing. Biosimilar medicines are highly similar to the original medicines and have the same quality, safety and effectiveness as well as being less expensive. Therefore, the savings made by using biosimilars allows the NHS to treat more patients.

### **Further advice**

If you have further questions about ranibizumab or biosimilars, then please speak to a member of your ophthalmology or pharmacy team. Please contact us if you have any queries or concerns.

**Telephone:** 01923 436 887 – press option 3

You can also find further information on the Macular Society website: [www.macularsociety.org/support](http://www.macularsociety.org/support)