



Global Healthy Living Foundation
515 North Midland Avenue
Upper Nyack, New York 10960 USA
+1 845 348 0400
+1 845 348 0210 fax
www.ghlf.org



TESTIMONY - STATE BIOSIMILAR SUBSTITUTION

Louisiana State Senate Health and Welfare Committee

Senate Health and Welfare Committee consideration of HB 319

Speaker:

Candice Dusset

Patient Advocate

Global Healthy Living Foundation

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Disclosure: I have no disclosures to make regarding my travel here today. The Global Healthy Living Foundation accepts grants and charitable contributions from pharmaceutical companies, government, private foundations and individuals. We have received scientific briefings from pharmaceutical companies, as well as from our independent medical advisory board.

Good morning Mr. Chairman and committee members.

My name is Candice Dusset. I'm a patient advocate and member of the Global Healthy Living Foundation's 50-State Network. I am a New Orleans native and the surgery manager at LSU's Veterinary Teaching Hospital here in Baton Rouge. My legislators are Representative Walt Leger III and Senator Karen Carter Peterson. I want to thank you for allowing me to speak today in support of the passage of HB 319.

When most people meet me, they might assume I am an average, healthy, and active young adult. Maintaining a full-time job, hanging out with friends, and entertaining hobbies in my free time should take little to no effort. However, despite the smile I often display, I am fighting for all of these precious moments. Travel, social engagements, and even trips to the grocery store can be quite overwhelming, as I am often exhausted and in varying degrees of constant pain. I am in pain as I speak to you now.

The onset of my arthritis symptoms began at age 19 in my shoulders. Today, at age 34, it takes less time to mention which joints are *not* affected by my disease than listing the ones that are. After several years of being misdiagnosed, rheumatologists have concluded that I suffer from Calcium Pyrophosphate Dihydrate Deposition Disease (CPPD). CPPD is often referred to as pseudogout, as their main difference is the type of crystals that form in the joints. These crystals cause inflammation and constant pain, with bouts of flare-ups, which can last days, weeks or months. Ultimately, my radiographs tend to show joints that resemble osteoarthritis, but at an alarmingly progressive rate and with no cure.



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There is no treatment specific to CPPD, so I take medications intended for someone with rheumatoid arthritis (RA). I have tried countless medications, therapies, and treatments with a goal to maintain a reasonable quality of life. I have accepted the fact that I will live in continuous pain, however, certain medications like biologics have the potential to greatly improve my mobility and inflammation.

It has been suggested by rheumatologists that I try a biologic, as my current medication only provides limited relief. However, I haven't been able to explore this treatment, as it is completely cost prohibitive, even with a great health insurance plan. For someone like me, interchangeable biosimilars represent hope. Hope for a treatment I can afford.

As I age and continue to have degeneration in my affected joints (shoulders, spine, hips, knees, hands, and feet), biologics could mean the difference between putting off major surgeries. I received my first total hip replacement this past New Year's Eve, which allows me to stand before you today. I believe in surgery, as it is my specialization in my career, however I would like to delay or avoid it until I have had the chance to truly try *everything* available which might help. As my treatment options are already limited, it is incredibly disheartening to know there is an available option I am unable to try due to cost alone. Biosimilars could be the option I have desperately been seeking to improve my daily life.

However, without laws in place to require communication to occur between my pharmacist and physician, I would fear my medication could be substituted without my entire treatment team knowing. This step is critical, as it allows the opportunity to discuss potential side effects with my doctor. Also, the record keeping will allow me to accurately reference any adverse reactions, or alternatively, successful relief provided with the use of a new biosimilar. As a patient with a chronic illness and other medical issues such as high blood pressure, migraines, and allergies, communication between my treatment team could mean the difference between me being at work or in the emergency room.

At its core, HB 319 boils down to one word: Trust. The patient-physician relationship does not exist without trust.

The value that biosimilars represent for Louisiana patients like me, namely expanded access and cost savings, will never be realized if patients and physicians do not first trust each other and second trust this class of product. Trust is achieved through transparency. HB 319 with its communication provisions intact achieves that needed transparency and ensures that the patient-physician relationship is strong. GHLF and I urge the members of this Committee to support House Bill 319. I appreciate your thoughtful consideration of my remarks and I would be pleased to provide any further information that you may require. Thank you for your time and attention.

