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DCVax-L to boost GBM market to $623M by 2020

12 June 2014 | Features | By BioSpectrum Bureau

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The company's latest report states that this significant growth comes despite patent expiration of Temodar (temozolomide) and will be driven primarily by the market entry of DCVax-L vaccine.

This follows clinical trials showing that DCVax-L produces an Overall Survival (OS) of around 2.3 times longer than the current standard of care for newly diagnosed patients.

Ms Angel Wong, analyst, GBI Research, says, "The current standard treatment of surgery, radiotherapy and chemotherapy, in combination with Temodar, has an OS of less than 15 months. As DCVax-L has been shown to extend OS substantially, the vaccine will demand a premium price once it hits the market."

GBI Research expects DCVax-L, which has recently received early approval in Germany, to be approved in the US and EU in 2015 and 2016, respectively, ahead of less efficacious treatments Cotara and Rindopepimut (CDX-110), which will enter the global GBM treatment market in 2016 and 2017, respectively.

DCVax-L has the added advantage of facing few other active competitors in the current GBM therapeutics market, an investment which is regarded as high-risk.

Ms Wong further commented, "Clinical trials for new GBM treatments are extremely time consuming and have a high attrition rate. There are limitations in drug delivery techniques and the disease has low prevalence rates, making trial recruitment difficult. As a consequence, drug development is very costly.

However, there remains a significant demand for therapies that show high potency against chemotherapy-resistant tumors,

due to the limited OS benefits provided by current treatments.

"As such, there are some attractive opportunities, particularly for recurrent GBM, as the unmet needs of these patients are not expected to be addressed by current players in the market," she concluded.