

## Global breast cancer treatment market to reach \$17.2 bn by 2021

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The global breast cancer therapeutics market is set to increase in value from \$10.4 billion in 2014 to \$17.2 billion by 2021, at a Compound Annual Growth Rate (CAGR) of 7.3%, according to business intelligence provider GBI Research.

The company's latest report states that this strong growth will be primarily due to substantial increases in the prevalence of breast cancer, with rates of the disease expected to rise over the forecast period due to an aging population, changing lifestyles and higher survival rates.

Furthermore, Ms Deekshita Allavarapu, Analyst for GBI Research, says that the introduction of several new therapies will help to drive breast cancer treatment market growth by 2021.

She explains: "In terms of upcoming breast cancer treatments, the overall pipeline is strong, with 743 products, and the early pipeline has many experimental molecules designed to target novel pathways.

"Promising pipeline drugs include abemaciclib, buparlisib, LEE 011, Olaparib and NeuVax, all of which are expected to be approved within the forecast period and have demonstrated significant clinical benefits in trials. In addition, rapid uptake of premium-priced biologics, such as Perjeta and Kadcyla, in all settings of the disease will contribute to the market growth."

Despite this, the analyst notes that the late-stage breast cancer pipeline is weak, with only 6% of candidates in Phase III of development, and targeted therapies, currently unrepresented by marketed products, almost non-existent within this phase.

GBI Research's report also states that the market will face some limitations due to patent expirations creating substantial opportunity for generic and biosimilar manufacturers.

She continues: "The patents for a number of key breast cancer drugs, including Afinitor, Avastin and Herceptin, are expected

to expire during the forecast period. However, the use of combinations of branded therapies in both the early-stage and metastatic settings will increase the Annual Cost of Therapy (ACoT) and offset the impact of patent expiries.

"For example, the ACoT for the combination of Perjeta with Herceptin is three times that of Herceptin monotherapy in both adjuvant and metastatic settings in the US. Therefore, even though Herceptin is set to expire in the near future, this will be offset by the approval of newer combination therapies and the growth of current premium therapies."