

BRAF Mutated Non-small Cell Lung Cancer (NSCLC) - Epidemiology Forecast to 2030

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Abstracts

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DelveInsight's 'BRAF Mutated Non-small Cell Lung Cancer (NSCLC)- Epidemiology Forecast to 2030' report delivers an in-depth understanding of the disease, historical and forecasted BRAF Mutated NSCLC epidemiology in the 7MM, i.e., the United States, EU5 (Germany, France, Italy, Spain, and the United Kingdom), and Japan.

BRAF Mutated NSCLC Understanding

Non-small cell lung cancer (NSCLC) is the most common type of lung cancer accounted for approximately 85% of all lung cancers. It can be defined as any type of epithelial lung cancer other than SCLC. It is mainly subcategorized into adenocarcinomas, squamous cell carcinomas, large cell carcinomas and several other types that occur less frequently include adenosquamous carcinomas, and sarcomatoid carcinomas. In these subtypes adenocarcinoma accounts for highest number of cases, i.e., approximately 47% followed by Squamous Cell Carcinoma and Large Cell Carcinoma.

There are several mutation associated with NSCLC but the most common are EGFR, KRAS, ROS-1 , BRAF , BRAF , PD-L1 expression and others. Among all the mutations BRAF accounted for approximately 5% of the total cases of NSCLC.

BRAF mutated NSCLC is now recognized as a rare form of lung cancer. The biologic behavior of BRAF mutated lung tumors tends to be more aggressive. The one unique aspects of BRAF mutated NSCLC, which differentiates it from other molecularly driven tumors such as EGFR, ALK, and ROS1, is that patients with BRAF V600E-mutant NSCLC tend to be patients with a smoking history. The BRAF gene encodes for a

serine/threonine kinase that belongs to the RAS-RAF-MEK-ERK axis that regulates cellular growth.

For diagnosis of mutation associated with NSCLC a laboratory test is done to check for certain genes, proteins, or other molecules in a sample of tissue, blood, or other body fluid. Molecular tests check for certain gene or chromosome changes that occur in NSCLC.

Epidemiology Perspective by DelveInsight

The BRAF mutated NSCLC epidemiology division provides the insights about historical and current patient pool and forecasted trend for each seven major countries. The BRAF mutated NSCLC epidemiology data are studied through BRAF mutated NSCLC possible division to give a better understanding of the Disease scenario in the 7MM.

The disease epidemiology covered in the report provides historical as well as forecasted BRAF mutated NSCLC epidemiology [segmented as Total Incident Cases of NSCLC, Total Incident Cases of NSCLC Patients by Histology, Total Diagnosed Cases of NSCLC Patients by Stages, Total NSCLC Cases of Patients by Genetic mutation/Biomarkers, and Treated Patient Pool of NSCLC] scenario of BRAF mutated NSCLC in the 7MM covering United States, EU5 countries (Germany, France, Italy, Spain, and United Kingdom), and Japan from 2017 to 2030.

BRAF Mutated NSCLC Detailed Epidemiology Segmentation

In histology-specific cases of NSCLC, Adenocarcinoma accounts for highest number of cases, i.e., approximately 47% followed by Squamous Cell Carcinoma and Large Cell Carcinoma.

In genetic-mutation specific cases of NSCLC, most number of cases is from PD-L1 followed by KRAS, and EGFR. On the other hand, ROS-1 accounted for least number of cases whereas BRAF accounted for approximately 5% of cases.

The total incident cases of BRAF mutated NSCLC in the 7MM were found to be 19,275 in 2017 which is expected to grow during the study period, i.e., 2017–2030

Estimates shows that the highest incident population of BRAF mutated NSCLC are in the United States, followed by Germany, United Kingdom, and France in

2017.

The United States accounted for approximately 8,979 cases of BRAF NSCLC in 2017.

The total cases of BRAF mutated NSCLC in Germany, France, Italy, Spain and the UK was found to be around 2,666, 1,880, 1,592, 1,083, and 2,075, respectively in 2017.

Scope of the Report

The BRAF mutated NSCLC report covers a detailed overview explaining its causes, symptoms, classification, pathophysiology, diagnosis and treatment patterns.

The BRAF mutated NSCLC Report and Model provide an overview of the risk factors and global trends of BRAF mutated NSCLC in the seven major markets (7MM: United States, Germany, France, Italy, Spain, and the United Kingdom, and Japan)

The report provides insight about the historical and forecasted patient pool of BRAF mutated NSCLC in seven major markets covering the United States, EU5 (Germany, France, Italy, Spain, and the United Kingdom), and Japan.

The report helps to recognize the growth opportunities in the 7MM with respect to the patient population.

The report assesses the disease risk and burden and highlights the unmet needs of BRAF mutated NSCLC.

The report provides the segmentation of the NSCLC epidemiology by incident cases of NSCLC patients by histology in the 7MM.

The report provides the segmentation of the NSCLC epidemiology by diagnosed cases of NSCLC patients by stages in the 7MM.

The report provides the segmentation of the NSCLC epidemiology by genetic mutation/biomarkers in the 7MM.

The report provides the segmentation of the NSCLC epidemiology by treated patient pool of NSCLC in the 7MM.

Report Highlights

11-Year Forecast of BRAF mutated NSCLC epidemiology

7MM Coverage

Total Incident Cases of NSCLC

Incident Cases according to segmentation: Histology, Stage, Genetic Mutation/Biomarker

Treated cases of NSCLC

KOL-Views

We interview, KOL's and SME's opinion through primary research to fill the data gaps and validate our secondary research. The opinion helps to understand the total patient population and current treatment pattern. This will support the clients in potential upcoming novel treatment by identifying the over BRAF mutated NSCLC scenario of the indications.

Key Questions Answered

What will be the growth opportunities in the 7MM with respect to the patient population pertaining to BRAF mutated NSCLC?

What are the key findings pertaining to the BRAF mutated NSCLC epidemiology across the 7MM and which country will have the highest number of patients during the study period (2017–2030)?

What would be the total number of patients of BRAF mutated NSCLC across the 7MM during the study period (2017–2030)?

Among the EU5 countries, which country will have the highest number of patients during the study period (2017–2030)?

At what CAGR the patient population is expected to grow in the 7MM during the study period (2017–2030)?

What are the various recent and upcoming events which are expected to improve the diagnosis of BRAF mutated NSCLC?

Reasons to buy

The BRAF mutated NSCLC Epidemiology report will allow the user to -

- Develop business strategies by understanding the trends shaping and driving the global BRAF mutated NSCLC market

- Quantify patient populations in the global BRAF mutated NSCLC market to improve product design, pricing, and launch plans

- Organize sales and marketing efforts by identifying the age groups and sex that present the best opportunities for BRAF mutated NSCLC therapeutics in each of the markets covered

- Understand the magnitude of BRAF mutated NSCLC population by its severity

The BRAF mutated NSCLC epidemiology report and model were written and developed by Masters and PhD level epidemiologists

The BRAF mutated NSCLC Epidemiology Model developed by DelveInsight is easy to navigate, interactive with dashboards, and epidemiology based with transparent and consistent methodologies. Moreover, the model supports data presented in the report and showcases disease trends over 11-year forecast period using reputable sources

Key Assessments

Patient Segmentation

Disease Risk and Burden

Risk of disease by the segmentation

Factors driving growth in a specific patient population

Geographies Covered

The United States

EU5 (Germany, France, Italy, Spain, and the United Kingdom)

Japan

Study Period: 2017–2030

Total cases of BRAF mutated NSCLC in the 7MM was assessed to be 19,275 in 2017, and are expected to increase during the study period. Among the European 5 countries, the Germany had highest incident population of BRAF NSCLC, followed by United Kingdom and France. On the other hand, Spain had the lowest incident population of BRAF NSCLC, in 2017 among EU-5 countries. Furthermore, Japan accounts for about 5% of the total 7MM incident population of BRAF NSCLC (in 2017).

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