

Physician Views: Can Bayer deliver on its Xarelto bullishness?

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Abstracts

Last week, FirstWord identified Bayer and Johnson & Johnson's anticoagulant Xarelto as the industry's leading product-level sales growth driver in 2013. Furthermore, in announcing its Q4 results, Bayer increased its own peak revenue forecast for the drug, from around \$2.7 billion to approximately \$5 billion.

Xarelto has defied commercial expectations, particularly regarding how it has fended off competition from Bristol-Myers Squibb and Pfizer's Eliquis, which is widely considered to have the best clinical profile among the new generation of anticoagulants.

Recent analysis of US prescription trends by analysts at Bloomberg Industries appears to suggest that Xarelto is once again expanding its lead over Eliquis; an impressive performance if accurate, given that Bristol-Myers Squibb and Pfizer's drug had appeared to be mounting something of a recovery in the latter months of 2013, based on the same data.

Thus Xarelto has the momentum to support Bayer's bullish outlook, but analysts at Barclays argue that a number of additional factors will have to fall the company's way if peak revenues are to shift as aggressively as the German company is anticipating.

Most significantly, argues Barclays analyst Michael Leuchten, appears to be the assumptions that the ex-US market for novel anticoagulants will triple in size (driven by continued displacement of warfarin) with Xarelto retaining its current level of market share. Bayer's confidence in Xarelto is clearly high, adds Leuchten, pointing to the fact that market dynamics may shift later this year if Eliquis and Boehringer Ingelheim's Pradaxa gain additional indications, thus moving their clinical profiles closer to that of Xarelto.



Although there is much debate as to what specifically has driven Xarelto's success – a previous poll of physicians run by FirstWord suggests that its status as the only once-daily novel anticoagulant has played an integral role – Leuchten argues that the breadth of Xarelto's profile (i.e. number of indications) is often underestimated in driving it usage. See ViewPoints: Agree to disagree – Bristol-Myers Squibb plays down once-daily dosing of Bayer's Xarelto as Eliquis continues to slow burn.

Xarelto is approved for both the chronic indications of stroke prevention and deep vein thrombosis (DVT), with Eliquis and Pradaxa only approved for the former. Leuchten estimates, for example, that the DVT setting accounts for more than 50 percent of sales in the US and ex-US markets; a setting that has not only driven acceleration of Xarelto revenue expansion but that is obviously insulated from Eliquis and Pradaxa competition.

With these questions in mind, this week's Physician Views poll revisits the novel anticoagulant market and surveys cardiologists and general practioners/primary care physicians (GP/PCPs) based in both the US and EU5 markets. Specifically the poll asks.

Of the 'new-generation' anticoagulant drugs, which is your overall preferred choice?

What is your primary factor in selecting this choice?

Based on your experience to date, and potential indication expansion for alternative products (future approval of Eliquis and Pradaxa for DVT in the EU and US; approval of Eliquis for hip and knee surgery patients in the US), how do you anticipate your usage of Xarelto will have changed in 18 months' time?

What percentage of your Xarelto usage would you estimate occurs in patients with DVT?

By what percentage do you anticipate the current switching rate of patients from warfarin to new generation anticoagulants will have increased by in three years' time?



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