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Physician Views: What role will device development play in the future GLP-1 agonist market?

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Abstracts

Positioned frequently as a transitional diabetes therapy between oral agents and insulin – and like insulin requiring administration via an injection – device development appears set to play a key role in the evolution of the GLP-1 agonist market over the next 12 to 18 months.

Other factors – primarily the launch of additional products such as Eli Lilly's dulaglutide, GlaxoSmithKline's albiglutide and the continued global roll-out of Sanofi's Lyxumia, coupled with the scope that this will provide payers to extract greater discounting and rebates – will also play a role in market development.

Nevertheless, AstraZeneca is hoping that a new pen device will boost sales of its GLP-1 agonist Bydureon, while familiarity with Novo Nordisk's devices (not to mention the Danish company's experience with such technologies) has at least played some role in establishing its Victoza brand as the market leader. Furthermore, Eli Lilly is looking to bring dulaglutide to market in an auto-injector device, use of which precludes the patient to touch or even see the needle – see Spotlight On: Too little too late? – Intensifying competition and pricing pressure likely to limit AstraZeneca's progress via new Bydureon device.

Initial development of the GLP-1 agonist market has at least been partially shaped by device design. There is a broad perception, for example, that the commercial uptake of Bydureon has been limited by both the requirement of patients to reconstitute the drug prior to self administration, which then occurs with a needle that is larger than that used with Novo Nordisk's Victoza device. Hence ongoing efforts by AstraZeneca (and previous partner Bristol-Myers Squibb) to develop a more patient-friendly device.

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To gain a better understanding of the role that devices play/will play in the GLP-1 agonist market, FirstWord is polling US and EU5 based endocrinologists with the following five questions:

To what extent they believe that the injectable delivery of GLP-1 agonist products has acted to reduce usage and/or patient preference towards this drug class as a whole?

What advantage they perceive would be provided by an auto-injector pen device for a GLP-1 agonist therapy where the needle is not seen/touched by the patient?

Whether the Bydureon device has limited their uptake of this product relative to other factors?

By what percentage they expect the availability of a new Bydureon device to increase their usage of this drug?

How advances in delivery devices will likely have in dictating prescription trends moving forward?

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