

Global Asthma Biologics Market 2026 by Company, Regions, Type and Application, Forecast to 2032

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Abstracts

According to our (Global Info Research) latest study, the global Asthma Biologics market size was valued at US\$ 7422 million in 2025 and is forecast to a readjusted size of US\$ 14696 million by 2032 with a CAGR of 10.1% during review period.

Asthma Biologics refers to marketed monoclonal antibody medicines used as add-on maintenance therapy for patients with moderate-to-severe or severe asthma that remains uncontrolled despite optimized inhaled controller treatment. These therapies act on defined immune pathways involved in allergic and type 2 airway inflammation, principally immunoglobulin E, interleukin-5, interleukin-5 receptor alpha, interleukin-4 receptor alpha and thymic stromal lymphopoietin. Commercial products are supplied mainly as subcutaneous injections in vials, prefilled syringes or other ready-to-use presentations, while intravenous infusion remains relevant for selected anti-IL-5 therapy. Treatment selection is guided by clinical phenotype and biomarkers, including allergic sensitization, serum IgE, blood eosinophils, exacerbation history, oral corticosteroid dependence and broader type 2 inflammatory characteristics. The research scope covers approved and commercially available omalizumab, omalizumab alfa, mepolizumab, reslizumab, benralizumab, dupilumab, tezepelumab and depemokimab products across adult, adolescent and pediatric asthma settings, with analysis organized by molecule, immune target, clinical phenotype and administration route.

Key Findings

The average gross profit margin of this product is 84%

Severe uncontrolled asthma remains the core commercial treatment setting

Type 2 inflammation underpins most approved biologic treatment pathways

Subcutaneous administration dominates marketed asthma biologic formulations globally

Anti IgE therapy is entering an active biosimilar competition phase

Longer dosing intervals are becoming a major product differentiator

China is expanding access through approvals and domestic biologic launches

Market Trends

The Asthma Biologics market is moving from basic target expansion toward comprehensive treatment optimization across response depth, dosing burden, patient selection and continuity of care. Earlier products established anti-IgE and eosinophil-directed treatment, while IL-4R α and upstream TSLP inhibition broadened the range of addressable severe-asthma phenotypes. The latest commercial shift is toward longer dosing intervals, illustrated by the introduction of six-month anti-IL-5 administration, alongside wider adoption of prefilled devices and selected self-administration pathways. Biomarker results and clinical history are also being combined more systematically to improve initial biologic matching and subsequent switching decisions. Product value is increasingly evaluated through exacerbation reduction, oral corticosteroid sparing, lung-function preservation, pediatric applicability, treatment persistence and the potential to support clinical remission. Biosimilar entry in omalizumab is beginning to reshape the mature anti-IgE segment, increasing price competition and access while preserving the need for specialist-led treatment selection and monitoring.

Market Dynamics

Drivers

Demand for Asthma Biologics is supported by the persistent population of patients whose disease remains uncontrolled despite optimized inhaled therapies and who continue to experience recurrent exacerbations, hospitalization risk or maintenance oral corticosteroid exposure. Clinical guidance provides an increasingly structured pathway

for selecting anti-IgE, anti-IL-5 or anti-IL-5R, anti-IL-4R and anti-TSLP therapies using phenotype, biomarkers, exacerbation history and relevant comorbidities. Broader pediatric approvals, expanding specialist severe-asthma networks and increasing recognition of corticosteroid-related burden are enlarging the addressable treatment population. Commercial adoption is further supported by evidence that appropriately selected biologic therapy can reduce exacerbations and improve disease control. Recent approvals of long-acting products and additional injection presentations have also widened the available treatment choices in major pharmaceutical markets.

Restraints

High acquisition costs and variable reimbursement criteria remain the principal restraints on broader biologic penetration. Access frequently depends on prior treatment failure, documented exacerbations, biomarker thresholds and specialist authorization, which can delay initiation even where clinical need is substantial. The market is also constrained by phenotype overlap, incomplete response among some patients and the absence of a universally accepted treatment sequence when several biologics appear clinically suitable. Injection logistics, cold-chain requirements and periodic monitoring add operational costs, while intravenous treatment requires infusion capacity. As biosimilars and locally manufactured anti-IgE products enter selected markets, lower prices may improve access but also intensify formulary-driven switching and place pressure on the commercial returns of established products.

Opportunities

Future opportunities are concentrated in treatment convenience, earlier patient identification and broader geographic access. Longer-interval dosing can reduce administration burden and improve persistence, while prefilled and self-administration formats can move suitable patients away from repeated facility-based injections. Upstream targets capable of treating a wider severe-asthma population create opportunities beyond narrowly defined allergic or eosinophilic phenotypes. Additional potential exists in pediatric treatment, oral corticosteroid-dependent asthma, recurrent exacerbations despite standard therapy and integrated management of asthma with related type 2 inflammatory conditions. In emerging markets, locally produced antibodies and biosimilars may reduce affordability barriers, provided that quality consistency, specialist education, biomarker testing and reimbursement pathways develop in parallel.

Challenges

The central market challenge is demonstrating durable comparative value in a field containing multiple effective mechanisms but limited direct head-to-head evidence in asthma. Treatment choice is complicated by overlapping biomarkers, changing eosinophil levels, comorbid disease and previous corticosteroid exposure, while inadequate response requires timely reassessment and switching. Manufacturers must generate long-term real-world evidence covering treatment persistence, clinical remission, safety and healthcare-resource utilization to support premium pricing and favorable reimbursement. They must also manage biologics manufacturing complexity, cold-chain reliability, pharmacovigilance and differing regional regulatory requirements. As anti-IgE biosimilars expand and new long-acting products enter, competition will increasingly center on net treatment cost, dosing convenience, clinical breadth and payer-defined outcomes rather than target novelty alone.

Industry Chain Analysis

The upstream chain for Asthma Biologics consists of antibody discovery technologies, expression cell lines, culture media, single-use bioprocess equipment, bioreactors, purification resins, filtration materials, analytical reagents, primary packaging components and cold-chain infrastructure. The midstream segment covers target validation, cell-line and process development, clinical research, regulatory registration, drug-substance manufacturing, purification, sterile fill-finish, device assembly, batch release and pharmacovigilance. Manufacturing economics are shaped by biologic yield, purification efficiency, facility utilization, quality-control intensity, formulation stability and production scale. Products with established platforms and multiple indications can distribute development and commercial infrastructure costs across a broader revenue base, while new entrants must initially absorb substantial clinical, regulatory and market-access expenditure.

Downstream distribution is centered on hospitals, severe-asthma centers, respiratory and allergy specialists, specialty pharmacies, infusion facilities and payer-authorized treatment networks. Value creation depends on identifying appropriate patients, matching biological mechanisms to phenotypes, securing reimbursement, delivering therapy consistently and documenting clinical outcomes. Specialty-care capabilities and biomarker testing therefore influence commercial performance alongside the medicine

itself. Profitability is generally stronger where a product combines differentiated efficacy, convenient administration, broad age coverage and multiple approved indications, while mature anti-IgE products face increasing price and contracting pressure from biosimilars and locally manufactured alternatives.

Segment Insights

By molecule and immune target, omalizumab and omalizumab alfa constitute the most established anti-IgE segment, supported by long clinical use and the emergence of biosimilar and domestic alternatives. The IL-5 pathway represents the broadest product group in the confirmed portfolio, covering mepolizumab, reslizumab, benralizumab and depemokimab, with differentiation based on ligand versus receptor targeting, administration route and dosing frequency. Dupilumab extends treatment through IL-4R β blockade for type 2 inflammatory asthma, while tezepelumab targets the upstream epithelial cytokine TSLP and supports treatment across a broader severe-asthma phenotype. These mechanisms increasingly compete on clinical fit rather than functioning as direct substitutes for every patient.

By clinical group, allergic asthma and eosinophilic asthma remain the core biologic treatment settings, while type 2 inflammatory and broad-phenotype severe asthma are enlarging the addressable population. By administration route, subcutaneous injection is the dominant commercial format because it supports regular outpatient treatment and, for selected products and patients, home administration. Intravenous infusion remains a smaller, specialized segment associated primarily with reslizumab. The most important product-development opportunities lie in extended dosing intervals, convenient ready-to-use presentations, pediatric eligibility and therapies capable of retaining efficacy across less narrowly defined biomarker groups.

Downstream Market Opportunities

The principal downstream opportunity lies in patients with moderate-to-severe or severe asthma who remain inadequately controlled despite optimized inhaled corticosteroid-based therapy. Severe-asthma centers and specialist respiratory or allergy practices are the main adoption channels because treatment requires diagnostic confirmation, phenotype assessment, biomarker testing and follow-up evaluation. Commercial expansion can come from earlier referral of frequently exacerbating patients, improved identification of allergic and eosinophilic phenotypes, reduced long-term dependence on oral corticosteroids and wider pediatric access. Additional value can be created through

coordinated management of type 2 inflammatory comorbidities, although asthma control remains the central treatment objective within this market scope. Products that reduce appointment frequency or enable appropriate self-administration are positioned to address adherence and capacity constraints in downstream care.

Regional Insights

North America represents the most commercially mature regional market for Asthma Biologics, supported by broad regulatory coverage, established severe-asthma referral networks, specialty-pharmacy infrastructure and access to the full range of major immune targets. The region also remains an important launch market for new formulations, biosimilars and extended-interval products. Europe has a similarly broad treatment portfolio, but market access varies more visibly by national health-technology assessment, reimbursement criteria and specialist prescribing rules. Biosimilar omalizumab is expected to have a more pronounced effect in price-sensitive and tender-oriented European channels.

China is among the fastest-developing access markets, driven by approvals of additional global biologics, domestic omalizumab products and expanding clinical recognition of phenotype-guided severe-asthma treatment. Mabpharm Limited and CSPC Pharmaceutical Group Limited have strengthened the local anti-IgE supply base, while recent approval of an ultra-long-acting anti-IL-5 product has broadened the available mechanism and dosing portfolio. Japan is also extending treatment access through new long-acting and pediatric approvals. Across other emerging markets, growth remains closely linked to reimbursement development, specialist capacity, biomarker availability and cold-chain coverage rather than disease prevalence alone.

Report Scope

This report is a detailed and comprehensive analysis for global Asthma Biologics market. Both quantitative and qualitative analyses are presented by company, by region & country, by Type and by Application. As the market is constantly changing, this report explores the competition, supply and demand trends, as well as key factors that contribute to its changing demands across many markets. Company profiles and product examples of selected competitors, along with market share estimates of some of the selected leaders for the year 2025, are provided.

Key Features:

Global Asthma Biologics market size and forecasts, in consumption value (\$ Million), 2021-2032

Global Asthma Biologics market size and forecasts by region and country, in consumption value (\$ Million), 2021-2032

Global Asthma Biologics market size and forecasts, by Type and by Application, in consumption value (\$ Million), 2021-2032

Global Asthma Biologics market shares of main players, in revenue (\$ Million), 2021-2026

The Primary Objectives in This Report Are:

To determine the size of the total market opportunity of global and key countries

To assess the growth potential for Asthma Biologics

To forecast future growth in each product and end-use market

To assess competitive factors affecting the marketplace

This report profiles key players in the global Asthma Biologics market based on the following parameters - company overview, revenue, gross margin, product portfolio, geographical presence, and key developments. Key companies covered as a part of this study include Novartis, Roche, GSK, AstraZeneca, Teva Pharmaceutical, Sanofi, Regeneron Pharmaceuticals, Amgen, Celltrion, Mabpharm Limited, etc.

This report also provides key insights about market drivers, restraints, opportunities, new product launches or approvals.

Asthma Biologics market is split by Type and by Application. For the period 2021-2032, the growth among segments provides accurate calculations and forecasts for Consumption Value by Type and by Application. This analysis can help you expand

your business by targeting qualified niche markets.

Market segmentation

Market segment by Type

Omalizumab

Mepolizumab

Reslizumab

Benralizumab

Dupilumab

Other

Market segment by Route of Administration

Subcutaneous Injection

Intravenous Infusion

Market segment by Antibodies

Anti-IgE Monoclonal Antibodies

Anti-IL-5 Monoclonal Antibodies

Anti-IL-5 Receptor Alpha Monoclonal Antibodies

Market segment by Application

Allergic Asthma Biologics

Eosinophilic Asthma Biologics

Other

Market segment by players, this report covers

Novartis

Roche

GSK

AstraZeneca

Teva Pharmaceutical

Sanofi

Regeneron Pharmaceuticals

Amgen

Celltrion

Mabpharm Limited

CSPC Pharmaceutical

Market segment by regions, regional analysis covers

North America (United States, Canada and Mexico)

Europe (Germany, France, UK, Russia, Italy and Rest of Europe)

Asia-Pacific (China, Japan, South Korea, India, Southeast Asia and Rest of Asia-Pacific)

South America (Brazil, Rest of South America)

Middle East & Africa (Turkey, Saudi Arabia, UAE, Rest of Middle East & Africa)

Chapter Outline

Chapter 1, to describe Asthma Biologics product scope, market overview, market estimation caveats and base year.

Chapter 2, to profile the top players of Asthma Biologics, with revenue, gross margin, and global market share of Asthma Biologics from 2021 to 2026.

Chapter 3, the Asthma Biologics competitive situation, revenue, and global market share of top players are analyzed emphatically by landscape contrast.

Chapter 4 and 5, to segment the market size by Type and by Application, with consumption value and growth rate by Type, by Application, from 2021 to 2032.

Chapter 6, 7, 8, 9, and 10, to break the market size data at the country level, with revenue and market share for key countries in the world, from 2021 to 2026. and Asthma Biologics market forecast, by regions, by Type and by Application, with consumption value, from 2027 to 2032.

Chapter 11, market dynamics, drivers, restraints, trends, Porters Five Forces analysis.

Chapter 12, the key raw materials and key suppliers, and industry chain of Asthma Biologics.

Chapter 13, to describe Asthma Biologics research findings and conclusion.

Contents

1 MARKET OVERVIEW

1.1 Product Overview and Scope

1.2 Market Estimation Caveats and Base Year

1.3 Classification of Asthma Biologics by Type

1.3.1 Overview: Global Asthma Biologics Market Size by Type: 2021 Versus 2025 Versus 2032

1.3.2 Global Asthma Biologics Consumption Value Market Share by Type in 2025

1.3.3 Omalizumab

1.3.4 Mepolizumab

1.3.5 Reslizumab

1.3.6 Benralizumab

1.3.7 Dupilumab

1.3.8 Other

1.4 Classification of Asthma Biologics by Route of Administration

1.4.1 Overview: Global Asthma Biologics Market Size by Route of Administration: 2021 Versus 2025 Versus 2032

1.4.2 Global Asthma Biologics Consumption Value Market Share by Route of Administration in 2025

1.4.3 Subcutaneous Injection

1.4.4 Intravenous Infusion

1.5 Classification of Asthma Biologics by Antibodies

1.5.1 Overview: Global Asthma Biologics Market Size by Antibodies: 2021 Versus 2025 Versus 2032

1.5.2 Global Asthma Biologics Consumption Value Market Share by Antibodies in 2025

1.5.3 Anti-IgE Monoclonal Antibodies

1.5.4 Anti-IL-5 Monoclonal Antibodies

1.5.5 Anti-IL-5 Receptor Alpha Monoclonal Antibodies

1.6 Global Asthma Biologics Market by Application

1.6.1 Overview: Global Asthma Biologics Market Size by Application: 2021 Versus 2025 Versus 2032

1.6.2 Allergic Asthma Biologics

1.6.3 Eosinophilic Asthma Biologics

1.6.4 Other

1.7 Global Asthma Biologics Market Size & Forecast

1.8 Global Asthma Biologics Market Size and Forecast by Region

- 1.8.1 Global Asthma Biologics Market Size by Region: 2021 VS 2025 VS 2032
- 1.8.2 Global Asthma Biologics Market Size by Region, (2021-2032)
- 1.8.3 North America Asthma Biologics Market Size and Prospect (2021-2032)
- 1.8.4 Europe Asthma Biologics Market Size and Prospect (2021-2032)
- 1.8.5 Asia-Pacific Asthma Biologics Market Size and Prospect (2021-2032)
- 1.8.6 South America Asthma Biologics Market Size and Prospect (2021-2032)
- 1.8.7 Middle East & Africa Asthma Biologics Market Size and Prospect (2021-2032)

2 COMPANY PROFILES

2.1 Novartis

- 2.1.1 Novartis Details
- 2.1.2 Novartis Major Business
- 2.1.3 Novartis Asthma Biologics Product and Solutions
- 2.1.4 Novartis Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.1.5 Novartis Recent Developments and Future Plans

2.2 Roche

- 2.2.1 Roche Details
- 2.2.2 Roche Major Business
- 2.2.3 Roche Asthma Biologics Product and Solutions
- 2.2.4 Roche Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.2.5 Roche Recent Developments and Future Plans

2.3 GSK

- 2.3.1 GSK Details
- 2.3.2 GSK Major Business
- 2.3.3 GSK Asthma Biologics Product and Solutions
- 2.3.4 GSK Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.3.5 GSK Recent Developments and Future Plans

2.4 AstraZeneca

- 2.4.1 AstraZeneca Details
- 2.4.2 AstraZeneca Major Business
- 2.4.3 AstraZeneca Asthma Biologics Product and Solutions
- 2.4.4 AstraZeneca Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.4.5 AstraZeneca Recent Developments and Future Plans

2.5 Teva Pharmaceutical

- 2.5.1 Teva Pharmaceutical Details
- 2.5.2 Teva Pharmaceutical Major Business

- 2.5.3 Teva Pharmaceutical Asthma Biologics Product and Solutions
- 2.5.4 Teva Pharmaceutical Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.5.5 Teva Pharmaceutical Recent Developments and Future Plans
- 2.6 Sanofi
 - 2.6.1 Sanofi Details
 - 2.6.2 Sanofi Major Business
 - 2.6.3 Sanofi Asthma Biologics Product and Solutions
 - 2.6.4 Sanofi Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
 - 2.6.5 Sanofi Recent Developments and Future Plans
- 2.7 Regeneron Pharmaceuticals
 - 2.7.1 Regeneron Pharmaceuticals Details
 - 2.7.2 Regeneron Pharmaceuticals Major Business
 - 2.7.3 Regeneron Pharmaceuticals Asthma Biologics Product and Solutions
 - 2.7.4 Regeneron Pharmaceuticals Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
 - 2.7.5 Regeneron Pharmaceuticals Recent Developments and Future Plans
- 2.8 Amgen
 - 2.8.1 Amgen Details
 - 2.8.2 Amgen Major Business
 - 2.8.3 Amgen Asthma Biologics Product and Solutions
 - 2.8.4 Amgen Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
 - 2.8.5 Amgen Recent Developments and Future Plans
- 2.9 Celltrion
 - 2.9.1 Celltrion Details
 - 2.9.2 Celltrion Major Business
 - 2.9.3 Celltrion Asthma Biologics Product and Solutions
 - 2.9.4 Celltrion Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
 - 2.9.5 Celltrion Recent Developments and Future Plans
- 2.10 Mabpharm Limited
 - 2.10.1 Mabpharm Limited Details
 - 2.10.2 Mabpharm Limited Major Business
 - 2.10.3 Mabpharm Limited Asthma Biologics Product and Solutions
 - 2.10.4 Mabpharm Limited Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
 - 2.10.5 Mabpharm Limited Recent Developments and Future Plans
- 2.11 CSPC Pharmaceutical
 - 2.11.1 CSPC Pharmaceutical Details

- 2.11.2 CSPC Pharmaceutical Major Business
- 2.11.3 CSPC Pharmaceutical Asthma Biologics Product and Solutions
- 2.11.4 CSPC Pharmaceutical Asthma Biologics Revenue, Gross Margin and Market Share (2021-2026)
- 2.11.5 CSPC Pharmaceutical Recent Developments and Future Plans

3 MARKET COMPETITION, BY PLAYERS

- 3.1 Global Asthma Biologics Revenue and Share by Players (2021-2026)
- 3.2 Market Share Analysis (2025)
 - 3.2.1 Market Share of Asthma Biologics by Company Revenue
 - 3.2.2 Top 3 Asthma Biologics Players Market Share in 2025
 - 3.2.3 Top 6 Asthma Biologics Players Market Share in 2025
- 3.3 Asthma Biologics Market: Overall Company Footprint Analysis
 - 3.3.1 Asthma Biologics Market: Region Footprint
 - 3.3.2 Asthma Biologics Market: Company Product Type Footprint
 - 3.3.3 Asthma Biologics Market: Company Product Application Footprint
- 3.4 New Market Entrants and Barriers to Market Entry
- 3.5 Mergers, Acquisition, Agreements, and Collaborations

4 MARKET SIZE SEGMENT BY TYPE

- 4.1 Global Asthma Biologics Consumption Value and Market Share by Type (2021-2026)
- 4.2 Global Asthma Biologics Market Forecast by Type (2027-2032)

5 MARKET SIZE SEGMENT BY APPLICATION

- 5.1 Global Asthma Biologics Consumption Value Market Share by Application (2021-2026)
- 5.2 Global Asthma Biologics Market Forecast by Application (2027-2032)

6 NORTH AMERICA

- 6.1 North America Asthma Biologics Consumption Value by Type (2021-2032)
- 6.2 North America Asthma Biologics Market Size by Application (2021-2032)
- 6.3 North America Asthma Biologics Market Size by Country
 - 6.3.1 North America Asthma Biologics Consumption Value by Country (2021-2032)
 - 6.3.2 United States Asthma Biologics Market Size and Forecast (2021-2032)

6.3.3 Canada Asthma Biologics Market Size and Forecast (2021-2032)

6.3.4 Mexico Asthma Biologics Market Size and Forecast (2021-2032)

7 EUROPE

7.1 Europe Asthma Biologics Consumption Value by Type (2021-2032)

7.2 Europe Asthma Biologics Consumption Value by Application (2021-2032)

7.3 Europe Asthma Biologics Market Size by Country

7.3.1 Europe Asthma Biologics Consumption Value by Country (2021-2032)

7.3.2 Germany Asthma Biologics Market Size and Forecast (2021-2032)

7.3.3 France Asthma Biologics Market Size and Forecast (2021-2032)

7.3.4 United Kingdom Asthma Biologics Market Size and Forecast (2021-2032)

7.3.5 Russia Asthma Biologics Market Size and Forecast (2021-2032)

7.3.6 Italy Asthma Biologics Market Size and Forecast (2021-2032)

8 ASIA-PACIFIC

8.1 Asia-Pacific Asthma Biologics Consumption Value by Type (2021-2032)

8.2 Asia-Pacific Asthma Biologics Consumption Value by Application (2021-2032)

8.3 Asia-Pacific Asthma Biologics Market Size by Region

8.3.1 Asia-Pacific Asthma Biologics Consumption Value by Region (2021-2032)

8.3.2 China Asthma Biologics Market Size and Forecast (2021-2032)

8.3.3 Japan Asthma Biologics Market Size and Forecast (2021-2032)

8.3.4 South Korea Asthma Biologics Market Size and Forecast (2021-2032)

8.3.5 India Asthma Biologics Market Size and Forecast (2021-2032)

8.3.6 Southeast Asia Asthma Biologics Market Size and Forecast (2021-2032)

8.3.7 Australia Asthma Biologics Market Size and Forecast (2021-2032)

9 SOUTH AMERICA

9.1 South America Asthma Biologics Consumption Value by Type (2021-2032)

9.2 South America Asthma Biologics Consumption Value by Application (2021-2032)

9.3 South America Asthma Biologics Market Size by Country

9.3.1 South America Asthma Biologics Consumption Value by Country (2021-2032)

9.3.2 Brazil Asthma Biologics Market Size and Forecast (2021-2032)

9.3.3 Argentina Asthma Biologics Market Size and Forecast (2021-2032)

10 MIDDLE EAST & AFRICA

10.1 Middle East & Africa Asthma Biologics Consumption Value by Type (2021-2032)

10.2 Middle East & Africa Asthma Biologics Consumption Value by Application (2021-2032)

10.3 Middle East & Africa Asthma Biologics Market Size by Country

10.3.1 Middle East & Africa Asthma Biologics Consumption Value by Country (2021-2032)

10.3.2 Turkey Asthma Biologics Market Size and Forecast (2021-2032)

10.3.3 Saudi Arabia Asthma Biologics Market Size and Forecast (2021-2032)

10.3.4 UAE Asthma Biologics Market Size and Forecast (2021-2032)

11 MARKET DYNAMICS

11.1 Asthma Biologics Market Drivers

11.2 Asthma Biologics Market Restraints

11.3 Asthma Biologics Trends Analysis

11.4 Porters Five Forces Analysis

11.4.1 Threat of New Entrants

11.4.2 Bargaining Power of Suppliers

11.4.3 Bargaining Power of Buyers

11.4.4 Threat of Substitutes

11.4.5 Competitive Rivalry

12 INDUSTRY CHAIN ANALYSIS

12.1 Asthma Biologics Industry Chain

12.2 Asthma Biologics Upstream Analysis

12.3 Asthma Biologics Midstream Analysis

12.4 Asthma Biologics Downstream Analysis

13 RESEARCH FINDINGS AND CONCLUSION

14 APPENDIX

14.1 Methodology

14.2 Research Process and Data Source

14.3 Disclaimer

List Of Tables

LIST OF TABLES

Table 1. Global Asthma Biologics Consumption Value by Type, (USD Million), 2021 & 2025 & 2032

Table 2. Global Asthma Biologics Consumption Value by Route of Administration, (USD Million), 2021 & 2025 & 2032

Table 3. Global Asthma Biologics Consumption Value by Antibodies, (USD Million), 2021 & 2025 & 2032

Table 4. Global Asthma Biologics Consumption Value by Application, (USD Million), 2021 & 2025 & 2032

Table 5. Global Asthma Biologics Consumption Value by Region (2021-2026) & (USD Million)

Table 6. Global Asthma Biologics Consumption Value by Region (2027-2032) & (USD Million)

Table 7. Novartis Company Information, Head Office, and Major Competitors

Table 8. Novartis Major Business

Table 9. Novartis Asthma Biologics Product and Solutions

Table 10. Novartis Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 11. Novartis Recent Developments and Future Plans

Table 12. Roche Company Information, Head Office, and Major Competitors

Table 13. Roche Major Business

Table 14. Roche Asthma Biologics Product and Solutions

Table 15. Roche Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 16. Roche Recent Developments and Future Plans

Table 17. GSK Company Information, Head Office, and Major Competitors

Table 18. GSK Major Business

Table 19. GSK Asthma Biologics Product and Solutions

Table 20. GSK Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 21. AstraZeneca Company Information, Head Office, and Major Competitors

Table 22. AstraZeneca Major Business

Table 23. AstraZeneca Asthma Biologics Product and Solutions

Table 24. AstraZeneca Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 25. AstraZeneca Recent Developments and Future Plans

Table 26. Teva Pharmaceutical Company Information, Head Office, and Major Competitors

Table 27. Teva Pharmaceutical Major Business

Table 28. Teva Pharmaceutical Asthma Biologics Product and Solutions

Table 29. Teva Pharmaceutical Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 30. Teva Pharmaceutical Recent Developments and Future Plans

Table 31. Sanofi Company Information, Head Office, and Major Competitors

Table 32. Sanofi Major Business

Table 33. Sanofi Asthma Biologics Product and Solutions

Table 34. Sanofi Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 35. Sanofi Recent Developments and Future Plans

Table 36. Regeneron Pharmaceuticals Company Information, Head Office, and Major Competitors

Table 37. Regeneron Pharmaceuticals Major Business

Table 38. Regeneron Pharmaceuticals Asthma Biologics Product and Solutions

Table 39. Regeneron Pharmaceuticals Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 40. Regeneron Pharmaceuticals Recent Developments and Future Plans

Table 41. Amgen Company Information, Head Office, and Major Competitors

Table 42. Amgen Major Business

Table 43. Amgen Asthma Biologics Product and Solutions

Table 44. Amgen Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 45. Amgen Recent Developments and Future Plans

Table 46. Celltrion Company Information, Head Office, and Major Competitors

Table 47. Celltrion Major Business

Table 48. Celltrion Asthma Biologics Product and Solutions

Table 49. Celltrion Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 50. Celltrion Recent Developments and Future Plans

Table 51. Mabpharm Limited Company Information, Head Office, and Major Competitors

Table 52. Mabpharm Limited Major Business

Table 53. Mabpharm Limited Asthma Biologics Product and Solutions

Table 54. Mabpharm Limited Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 55. Mabpharm Limited Recent Developments and Future Plans

Table 56. CSPC Pharmaceutical Company Information, Head Office, and Major Competitors

Table 57. CSPC Pharmaceutical Major Business

Table 58. CSPC Pharmaceutical Asthma Biologics Product and Solutions

Table 59. CSPC Pharmaceutical Asthma Biologics Revenue (USD Million), Gross Margin and Market Share (2021-2026)

Table 60. CSPC Pharmaceutical Recent Developments and Future Plans

Table 61. Global Asthma Biologics Revenue (USD Million) by Players (2021-2026)

Table 62. Global Asthma Biologics Revenue Share by Players (2021-2026)

Table 63. Breakdown of Asthma Biologics by Company Type (Tier 1, Tier 2, and Tier 3)

Table 64. Market Position of Players in Asthma Biologics, (Tier 1, Tier 2, and Tier 3), Based on Revenue in 2025

Table 65. Head Office of Key Asthma Biologics Players

Table 66. Asthma Biologics Market: Company Product Type Footprint

Table 67. Asthma Biologics Market: Company Product Application Footprint

Table 68. Asthma Biologics New Market Entrants and Barriers to Market Entry

Table 69. Asthma Biologics Mergers, Acquisition, Agreements, and Collaborations

Table 70. Global Asthma Biologics Consumption Value (USD Million) by Type (2021-2026)

Table 71. Global Asthma Biologics Consumption Value Share by Type (2021-2026)

Table 72. Global Asthma Biologics Consumption Value Forecast by Type (2027-2032)

Table 73. Global Asthma Biologics Consumption Value by Application (2021-2026)

Table 74. Global Asthma Biologics Consumption Value Forecast by Application (2027-2032)

Table 75. North America Asthma Biologics Consumption Value by Type (2021-2026) & (USD Million)

Table 76. North America Asthma Biologics Consumption Value by Type (2027-2032) & (USD Million)

Table 77. North America Asthma Biologics Consumption Value by Application (2021-2026) & (USD Million)

Table 78. North America Asthma Biologics Consumption Value by Application (2027-2032) & (USD Million)

Table 79. North America Asthma Biologics Consumption Value by Country (2021-2026) & (USD Million)

Table 80. North America Asthma Biologics Consumption Value by Country (2027-2032) & (USD Million)

Table 81. Europe Asthma Biologics Consumption Value by Type (2021-2026) & (USD Million)

Table 82. Europe Asthma Biologics Consumption Value by Type (2027-2032) & (USD Million)

Million)

Table 83. Europe Asthma Biologics Consumption Value by Application (2021-2026) & (USD Million)

Table 84. Europe Asthma Biologics Consumption Value by Application (2027-2032) & (USD Million)

Table 85. Europe Asthma Biologics Consumption Value by Country (2021-2026) & (USD Million)

Table 86. Europe Asthma Biologics Consumption Value by Country (2027-2032) & (USD Million)

Table 87. Asia-Pacific Asthma Biologics Consumption Value by Type (2021-2026) & (USD Million)

Table 88. Asia-Pacific Asthma Biologics Consumption Value by Type (2027-2032) & (USD Million)

Table 89. Asia-Pacific Asthma Biologics Consumption Value by Application (2021-2026) & (USD Million)

Table 90. Asia-Pacific Asthma Biologics Consumption Value by Application (2027-2032) & (USD Million)

Table 91. Asia-Pacific Asthma Biologics Consumption Value by Region (2021-2026) & (USD Million)

Table 92. Asia-Pacific Asthma Biologics Consumption Value by Region (2027-2032) & (USD Million)

Table 93. South America Asthma Biologics Consumption Value by Type (2021-2026) & (USD Million)

Table 94. South America Asthma Biologics Consumption Value by Type (2027-2032) & (USD Million)

Table 95. South America Asthma Biologics Consumption Value by Application (2021-2026) & (USD Million)

Table 96. South America Asthma Biologics Consumption Value by Application (2027-2032) & (USD Million)

Table 97. South America Asthma Biologics Consumption Value by Country (2021-2026) & (USD Million)

Table 98. South America Asthma Biologics Consumption Value by Country (2027-2032) & (USD Million)

Table 99. Middle East & Africa Asthma Biologics Consumption Value by Type (2021-2026) & (USD Million)

Table 100. Middle East & Africa Asthma Biologics Consumption Value by Type (2027-2032) & (USD Million)

Table 101. Middle East & Africa Asthma Biologics Consumption Value by Application (2021-2026) & (USD Million)

Table 102. Middle East & Africa Asthma Biologics Consumption Value by Application
(2027-2032) & (USD Million)

Table 103. Middle East & Africa Asthma Biologics Consumption Value by Country
(2021-2026) & (USD Million)

Table 104. Middle East & Africa Asthma Biologics Consumption Value by Country
(2027-2032) & (USD Million)

Table 105. Global Key Players of Asthma Biologics Upstream (Raw Materials)

Table 106. Global Asthma Biologics Typical Customers

List Of Figures

LIST OF FIGURES

Figure 1. Asthma Biologics Picture

Figure 2. Global Asthma Biologics Consumption Value by Type, (USD Million), 2021 & 2025 & 2032

Figure 3. Global Asthma Biologics Consumption Value Market Share by Type in 2025

Figure 4. Omalizumab

Figure 5. Mepolizumab

Figure 6. Reslizumab

Figure 7. Benralizumab

Figure 8. Dupilumab

Figure 9. Other

Figure 10. Global Asthma Biologics Consumption Value by Route of Administration, (USD Million), 2021 & 2025 & 2032

Figure 11. Global Asthma Biologics Consumption Value Market Share by Route of Administration in 2025

Figure 12. Subcutaneous Injection

Figure 13. Intravenous Infusion

Figure 14. Global Asthma Biologics Consumption Value by Antibodies, (USD Million), 2021 & 2025 & 2032

Figure 15. Global Asthma Biologics Consumption Value Market Share by Antibodies in 2025

Figure 16. Anti-IgE Monoclonal Antibodies

Figure 17. Anti-IL-5 Monoclonal Antibodies

Figure 18. Anti-IL-5 Receptor Alpha Monoclonal Antibodies

Figure 19. Global Asthma Biologics Consumption Value by Application, (USD Million), 2021 & 2025 & 2032

Figure 20. Asthma Biologics Consumption Value Market Share by Application in 2025

Figure 21. Allergic Asthma Biologics Picture

Figure 22. Eosinophilic Asthma Biologics Picture

Figure 23. Other Picture

Figure 24. Global Asthma Biologics Consumption Value, (USD Million): 2021 & 2025 & 2032

Figure 25. Global Asthma Biologics Consumption Value and Forecast (2021-2032) & (USD Million)

Figure 26. Global Market Asthma Biologics Consumption Value (USD Million) Comparison by Region (2021 VS 2025 VS 2032)

Figure 27. Global Asthma Biologics Consumption Value Market Share by Region (2021-2032)

Figure 28. Global Asthma Biologics Consumption Value Market Share by Region in 2025

Figure 29. North America Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 30. Europe Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 31. Asia-Pacific Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 32. South America Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 33. Middle East & Africa Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 34. Company Three Recent Developments and Future Plans

Figure 35. Global Asthma Biologics Revenue Share by Players in 2025

Figure 36. Asthma Biologics Market Share by Company Type (Tier 1, Tier 2, and Tier 3) in 2025

Figure 37. Market Share of Asthma Biologics by Player Revenue in 2025

Figure 38. Top 3 Asthma Biologics Players Market Share in 2025

Figure 39. Top 6 Asthma Biologics Players Market Share in 2025

Figure 40. Global Asthma Biologics Consumption Value Share by Type (2021-2026)

Figure 41. Global Asthma Biologics Market Share Forecast by Type (2027-2032)

Figure 42. Global Asthma Biologics Consumption Value Share by Application (2021-2026)

Figure 43. Global Asthma Biologics Market Share Forecast by Application (2027-2032)

Figure 44. North America Asthma Biologics Consumption Value Market Share by Type (2021-2032)

Figure 45. North America Asthma Biologics Consumption Value Market Share by Application (2021-2032)

Figure 46. North America Asthma Biologics Consumption Value Market Share by Country (2021-2032)

Figure 47. United States Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 48. Canada Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 49. Mexico Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 50. Europe Asthma Biologics Consumption Value Market Share by Type (2021-2032)

Figure 51. Europe Asthma Biologics Consumption Value Market Share by Application (2021-2032)

Figure 52. Europe Asthma Biologics Consumption Value Market Share by Country (2021-2032)

Figure 53. Germany Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 54. France Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 55. United Kingdom Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 56. Russia Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 57. Italy Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 58. Asia-Pacific Asthma Biologics Consumption Value Market Share by Type (2021-2032)

Figure 59. Asia-Pacific Asthma Biologics Consumption Value Market Share by Application (2021-2032)

Figure 60. Asia-Pacific Asthma Biologics Consumption Value Market Share by Region (2021-2032)

Figure 61. China Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 62. Japan Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 63. South Korea Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 64. India Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 65. Southeast Asia Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 66. Australia Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 67. South America Asthma Biologics Consumption Value Market Share by Type (2021-2032)

Figure 68. South America Asthma Biologics Consumption Value Market Share by Application (2021-2032)

Figure 69. South America Asthma Biologics Consumption Value Market Share by Country (2021-2032)

Figure 70. Brazil Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 71. Argentina Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 72. Middle East & Africa Asthma Biologics Consumption Value Market Share by Type (2021-2032)

Figure 73. Middle East & Africa Asthma Biologics Consumption Value Market Share by Application (2021-2032)

Figure 74. Middle East & Africa Asthma Biologics Consumption Value Market Share by Country (2021-2032)

Figure 75. Turkey Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 76. Saudi Arabia Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 77. UAE Asthma Biologics Consumption Value (2021-2032) & (USD Million)

Figure 78. Asthma Biologics Market Drivers

Figure 79. Asthma Biologics Market Restraints

Figure 80. Asthma Biologics Market Trends

Figure 81. Porters Five Forces Analysis

Figure 82. Asthma Biologics Industrial Chain

Figure 83. Methodology

Figure 84. Research Process and Data Source

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