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# Global Urokinase Supply, Demand and Key Producers, 2026-2032

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## Abstracts

The global Urokinase market size is expected to reach $ 123 million by 2032, rising at a market growth of 5.1% CAGR during the forecast period (2026-2032).

Urokinase is a clot-dissolving medicine. It is a natural enzyme (a protein) that activates the body's own fibrinolytic system by converting plasminogen into plasmin, and plasmin then breaks down fibrin, which is the “mesh” that holds a blood clot together. This is why urokinase is called a thrombolytic or “clot-buster.” The market for urokinase mainly includes injectable products (usually a sterile powder that is dissolved before use) that are given in hospitals, either through a vein or through a catheter directly to the clot area, depending on the indication and local practice. The clinical risk that shapes this market is also simple: because the drug dissolves clots, it can also weaken normal clotting at injury sites, so bleeding is the key safety concern and a major reason urokinase is used in controlled hospital settings.

A practical market definition should also include how urokinase is made, because that affects supply, regulatory burden, and cost. Urokinase products can differ by source. The U.S. Kinlytic label describes production from human neonatal kidney cells grown in tissue culture, and it explains extensive donor screening and virus testing/inactivation steps because it is derived from human source material. In contrast, some European product information describes urokinase that is extracted from human urine. These differences matter commercially: biologic sourcing and validation requirements make it harder for many manufacturers to enter, and they increase the importance of quality systems, change control, and reliable supply chains.

On the demand side, the most basic driver is that blood clots are common, and a subset of them are severe enough that rapid clot removal is lifesaving or limb-saving. The U.S.

CDC says up to 900,000 people in the United States are affected by venous thromboembolism (VTE) each year, and VTE is linked to tens of thousands of deaths. Globally, cardiovascular diseases are still the leading cause of death, and they overlap with clot problems and high-risk hospital populations. These facts do not mean every clot patient needs urokinase. Most patients receive anticoagulants and supportive care, not thrombolytics. But they explain why hospitals continue to need a set of clot-management tools, including thrombolytic drugs, for the most urgent cases.

In 2025, global Urokinase production reached approximately 2736 BIU, with an average global market price of around US$ 30 per MIU. The global single-line production capacity ranges from 100 to 150 BIU per year. The industry's gross profit margin is approximately 25%-35%.

One of the clearest growth “pockets” for urokinase is catheter and access-device management. Modern medicine uses a large volume of central venous catheters for chemotherapy, nutrition, antibiotics, and dialysis. These devices can become blocked by thrombus or fibrin sheaths. In Europe, regulatory summaries describe urokinase use for clots in catheters or cannulae, which is essentially “catheter clearance.” Clinical literature on thrombolytic therapy for catheter occlusion discusses multiple agents and reports that thrombolytics can restore patency in a meaningful share of blocked catheters, with performance differences by drug and dosing strategy; this is a major reason hospitals keep thrombolytic protocols for catheter salvage. When catheter salvage works, it avoids line replacement, reduces procedure risk, and helps preserve access sites—especially important for dialysis and oncology patients. This clinical logic is also why companies publicly frame catheter clearance as an attractive commercial segment when they talk about bringing urokinase products back to market.

A second demand segment is catheter-directed thrombolysis (CDT) for limb-threatening peripheral arterial occlusion or extensive venous thrombosis, where drug is infused locally through a catheter rather than given as a full systemic infusion. Product information for urokinase in Europe explicitly describes acute peripheral arterial occlusions and notes that catheter-directed local lysis is the preferred method of administration for that scenario. More recent reviews also describe CDT as an effective endovascular method for thrombotic peripheral artery occlusions, while emphasizing the need for careful monitoring because bleeding and other complications are real. This creates a steady, procedure-linked demand for urokinase (and competing thrombolytics) in hospitals that perform vascular interventions. The market driver here is not only disease incidence; it is the expansion of interventional capability, better imaging, and more hospitals building vascular teams that can do “minimally invasive” clot removal rather than open surgery in selected patients.

At the same time, a major market trend is that urokinase is not the only clot-buster, and in some very large indications it has been replaced by other approaches. In acute ischemic stroke, for example, many regions use alteplase or tenecteplase, and mechanical thrombectomy has grown for large-vessel occlusions. In myocardial infarction, primary PCI has replaced thrombolysis in many systems where rapid catheterization is available. These shifts matter because they move thrombolytic use toward more specialized niches. In catheter clearance specifically, alteplase has strong clinical adoption in many settings, and reviews discuss its clearance rates and how other agents compare. So, one trend in the urokinase market is “narrower but deeper”: fewer broad, mass-market indications, but ongoing need in hospital procedures and device-related clots where protocols and economics favor certain agents.

Global key players of urokinase include Syner-Med, LIVZON, Wanhua Biochem, etc. The top three players hold a share about 50%.

This report studies the global Urokinase production, demand, key manufacturers, and key regions.

This report is a detailed and comprehensive analysis of the world market for Urokinase and provides market size (US$ million) and Year-over-Year (YoY) Growth, considering 2025 as the base year. This report explores demand trends and competition, as well as details the characteristics of Urokinase that contribute to its increasing demand across many markets.

**Highlights and key features of the study**
Global Urokinase total production and demand, 2021-2032, (BIU)

Global Urokinase total production value, 2021-2032, (USD Million)
Global Urokinase production by region & country, production, value, CAGR, 2021-2032, (USD Million) & (BIU), (based on production site)
Global Urokinase consumption by region & country, CAGR, 2021-2032 & (BIU)
U.S. VS China: Urokinase domestic production, consumption, key domestic manufacturers and share
Global Urokinase production by manufacturer, production, price, value and market share 2021-2026, (USD Million) & (BIU)

Global Urokinase production by Type, production, value, CAGR, 2021-2032, (USD

Million) & (BIU)

Global Urokinase production by Application, production, value, CAGR, 2021-2032, (USD Million) & (BIU)

This report profiles key players in the global Urokinase market based on the following parameters - company overview, production, value, price, gross margin, product portfolio, geographical presence, and key developments. Key companies covered as a part of this study include Syner-Med, Wanhua Biochem, Jiangxi Haoran Bio-Pharma, Jiangsu Aidea Pharmaceutical, Techpool, Microbic Biosystems, LIVZON, Wuhan Humanwell Pharma, Tianjin Biochem Pharma, etc.

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

Stakeholders would have ease in decision-making through various strategy matrices used in analyzing the World Urokinase market

**Detailed Segmentation:**

Each section contains quantitative market data including market by value (US$ Millions), volume (production, consumption) & (BIU) and average price (US$/MIU) by manufacturer, by Type, and by Application. Data is given for the years 2021-2032 by year with 2025 as the base year, 2026 as the estimate year, and 2027-2032 as the forecast year.

Global Urokinase Market, By Region:

United States

China

Europe

Japan

South Korea

ASEAN

India

Rest of World

Global Urokinase Market, Segmentation by Type:

Urokinase Powder

Urokinase Solution

Global Urokinase Market, Segmentation by Clinical Use:

Pulmonary Embolism Thrombolysis

Deep Vein Thrombosis

Peripheral Arterial Occlusion Thrombolysis

Catheter / Cannula Occlusion Clearance

Others

Global Urokinase Market, Segmentation by Administration Approach:

Systemic Infusion

Catheter-directed Thrombolysis (CDT)

Intracatheter Dwell / Lock Technique

Global Urokinase Market, Segmentation by Purity:

Standard Clinical Grade

High-purity / Low-impurity Grade

Low Endotoxin / Low Bioburden Specifications

Global Urokinase Market, Segmentation by Application:

Hospital

Clinic

Others

Companies Profiled:

Syner-Med

Wanhua Biochem

Jiangxi Haoran Bio-Pharma

Jiangsu Aidea Pharmaceutical

Techpool

Microbic Biosystems

LIVZON

Wuhan Humanwell Pharma

Tianjin Biochem Pharma

**Key Questions Answered:**

1. How big is the global Urokinase market?
2. What is the demand of the global Urokinase market?
3. What is the year over year growth of the global Urokinase market?

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4. What is the production and production value of the global Urokinase market?
5. Who are the key producers in the global Urokinase market?
6. What are the growth factors driving the market demand?

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