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Chemotherapy-induced Neutropenia Treatment Market Size, Share & Trends Analysis Report By Treatment (Growth Factors, Antibiotics), By Drug, By Route of Administration, By Distribution Channel, By Region, And Segment Forecasts, 2025 - 2030

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Abstracts

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Chemotherapy-induced Neutropenia Treatment Market Growth & Trends

The global chemotherapy-induced neutropenia treatment market is anticipated treach USD 1.51 billion by 2030 and is expected tdecline at a CAGR of -0.48% from 2025 t2030, according ta new report by Grand View Research, Inc. This decline can be attributed tmultiple factors, including the growing adoption of targeted cancer therapies and immunotherapies, which reduce the incidence of chemotherapy-induced neutropenia (CIN) compared ttraditional chemotherapy. As precision medicine advances, oncologists are increasingly shifting towards treatment modalities that minimize myelosuppressive effects, thereby reducing the demand for CIN treatments. However, the rise of home healthcare and self-administrable therapies alspresents an opportunity for pharmaceutical companies tdevelop user-friendly formulations that improve patient convenience.

Chemotherapy-Induced Neutropenia (CIN), a severe side effect of cancer treatment, poses significant risks for patients undergoing chemotherapy. As the prevalence of cancer cases continues trise, the demand for effective CIN treatments is driving substantial growth in the healthcare sector. Businesses are capitalizing on advancements in treatment modalities, novel drug developments, and improved patient care solutions taddress this critical condition. The market is witnessing increased

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investments in growth factors, antibiotics, antifungal agents, and other supportive therapies, ensuring better management of CIN and reducing associated complications.

Tcombat CIN effectively, growth factors play a vital role in stimulating white blood cell production, reducing the risk of infections in affected patients. Granulocyte Colony-Stimulating Factors (G-CSFs) are the primary treatment option, enhancing neutrophil recovery and minimizing chemotherapy delays. Leading pharmaceutical companies such as Amgen Inc., Sandoz, Teva Pharmaceutical Industries Ltd., Coherus BioSciences, Viatris Inc., and Biocon Biologics Inc. are at the forefront of G-CSF development.

Filgrastim is a widely used recombinant G-CSF that accelerates neutrophil recovery. Pegfilgrastim, a longer-acting version of Filgrastim, reduces the frequency of administration, while Lipegfilgrastim offers sustained neutrophil stimulation. Eflapegrastim is a novel, long-acting G-CSF providing effective prophylaxis against CIN, and Efbemalenograstim alfa is a next-generation therapy under development for enhanced neutrophil support. Additionally, Granulocyte-Macrophage Colony-Stimulating Factors (GM-CSFs) are expanding the therapeutic potential in neutrophil recovery. Key market players, including Pfizer Inc., Spectrum Pharmaceuticals, Inc., Evive Biotech, and G1 Therapeutics, Inc., are actively investing in research and development timprove the efficacy of these treatments.

However, even with the use of growth factors, CIN patients remain highly susceptible tbacterial and fungal infections, making the use of prophylactic and therapeutic antibiotics crucial. Prophylactic antibiotics play a key role in preventing infections in high-risk patients, while therapeutic antibiotics are administered when infections develop. Similarly, antifungal agents help combat opportunistic infections, ensuring comprehensive patient care. These treatments collectively form a multi-layered defense system against the risks posed by CIN. Prophylactic antibiotics serve as a preventive measure treduce infection rates in neutropenic patients, whereas therapeutic antibiotics help manage bacterial infections that arise due tthe weakened immune system. Meanwhile, antifungal agents provide an added layer of protection against invasive fungal infections, which can be life-threatening for patients undergoing chemotherapy.

In addition tthese conventional treatment options, emerging therapies such as granulocyte transfusions and immunomodulatory agents are gaining attention as potential solutions for severe cases of neutropenia. Ongoing research and innovation are expected tenhance the effectiveness and accessibility of these treatment options,

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further strengthening the market landscape. The CIN treatment market is divided intbranded drugs and biosimilars. Branded drugs continue tdominate due ttheir established efficacy, but biosimilars are rapidly gaining traction due ttheir cost-effectiveness and increasing adoption. As regulatory approvals expand and healthcare accessibility improves, biosimilar options are becoming more widely available, allowing more patients tbenefit from advanced therapies without the financial burden of high-priced branded drugs.

Along with the development of new drug options, treatment delivery methods are alsevolving. Parenteral administration remains the gold standard for CIN management, with intravenous (IV) and subcutaneous (SC) routes being preferred for G-CSFs and antibiotics tensure rapid and effective results. However, oral options for prophylactic antibiotics and immunomodulatory agents are gaining popularity, offering greater convenience for outpatient care. This shift in administration methods aligns with the broader healthcare trend of enhancing patient accessibility and reducing hospital dependency for chronic care management.

As the burden of cancer continues tgrow worldwide, the CIN treatment market is poised for substantial expansion. The increasing adoption of biosimilars, continuous advancements in drug development, and ongoing research intinnovative therapies are collectively shaping the future of CIN management. With enhanced awareness, improved treatment protocols, and growing investment in supportive care, the future of CIN treatment is set twitness significant progress. These developments not only ensure better patient outcomes but alscontribute tthe overall advancement of global healthcare solutions.

Chemotherapy-induced Neutropenia Treatment Market Report Highlights

On the basis of treatment, the growth factors segment dominated the market in 2024. The segment's dominance is attributable tits proven efficacy, widespread adoption in cancer treatment protocols, and continuous advancements in biosimilars.

Biosimilars led the drug type segment in market in 2024, driven by increasing regulatory approvals, cost-effectiveness, and growing adoption by healthcare providers..

On the basis of the route of administration, the parenteral segment dominated the market in 2024. Injectable formulations,

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particularly intravenous and subcutaneous G-CSFs, remain the primary mode of administration due tthe rapid onset of their action and higher bioavailability compared toral alternatives.

On the basis of distribution channel, the hospital pharmacies segment held the largest market share in 2024, driven by the high volume of chemotherapy conducted in hospital settings. Hospital pharmacies are the primary source of CIN treatment drugs, ensuring immediate availability and administration of critical medications

North America led the CIN treatment market, attributed tfactors such as a well-established healthcare infrastructure, high awareness of cancer, and the availability of advanced treatment options. The region’s strong focus on research and innovation further supports market growth.

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CHAPTER 9. COMPETITIVE LANDSCAPE

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