

Middle East Thyroid Cancer Diagnostics Market Size, Share & Trends Analysis Report By Cancer Type (Papillary Carcinoma, Follicular Carcinoma), By Technique (Imaging, Biopsy), By End Use, By Country, And Segment Forecasts, 2025 - 2033

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Abstracts

Middle East Thyroid Cancer Diagnostics Market Summary

The Middle East thyroid cancer diagnostics market size was estimated at USD 89.64 million in 2024 and is projected to reach USD 142.27 million by 2033, growing at a CAGR of 5.4% from 2025 to 2033. The market shows rising demand, driven by gender-skewed incidence, with female rates notably higher, especially in the UAE. Current practice relies on ultrasound, FNA, and cytology, while molecular testing adoption remains low (~20%), leaving significant growth potential for NGS panels and mutation/fusion assays. Regulatory oversight varies across countries, and reimbursement challenges slow uptake. However, opportunities exist in precision oncology, Bethesda III/IV nodule classifiers, and partnerships with local hospitals and labs to expand access and reduce overtreatment.

The thyroid cancer burden in the Middle East, particularly across the Gulf Cooperation Council (GCC), is significant and disproportionately affects women, driving demand for diagnostic testing. A 2024 analysis estimates the GCC age-standardized incidence rate (ASR) at ~6.1 per 100,000, with variations by country-highest in Saudi Arabia (~7.5), Kuwait (~5.2), and lowest in Bahrain (~2.4). In the UAE, the female ASR is markedly higher (~13.6/100,000) compared to ~1.9/100,000 in males, underscoring strong gender disparities and informing screening and triage practices in women's health pathways. Combined with population growth and wider imaging availability, these trends support sustained demand across ultrasound, cytology, and molecular assays.

Current clinical practice continues to rely on neck ultrasound (TI-RADS), fine-needle aspiration (FNA) with Bethesda cytology, and selective IHC. Yet molecular diagnostics remain underutilized; a regional survey found only ~20% of clinicians refer suspicious nodules for molecular testing, while most still default to surgery. This points to significant growth potential for next-generation sequencing (NGS)-based classifiers and mutation/fusion panels, including BRAF, RAS, RET, and NTRK. In addition, guidance from the European Thyroid Association discouraging routine ultrasound in asymptomatic adults is influencing regional practices, shifting emphasis toward risk-adapted triage rather than over-imaging.

The market reflects this pathway structure, encompassing three core areas: imaging (ultrasound and emerging AI triage tools), cytology (FNA kits, liquid-based cytology, IHC), and molecular diagnostics (NGS panels, targeted PCR, fusion assays). Of these, molecular testing is the fastest-growing segment, driven by precision oncology requirements for RET/NTRK fusions and BRAFV600E, alongside tertiary centers establishing in-house NGS capacity or send-out programs. Afirma remains largely U.S.-based as a CLIA LDT, so Middle Eastern uptake generally depends on regional NGS panels or international reference labs.

Regulation and reimbursement are governed nationally, with oversight by agencies such as the SFDA (Saudi Arabia), MOHAP/DHA/DOH (UAE), MoPH (Qatar), NHRA (Bahrain), and EDA (Egypt). Nationals generally access diagnostics through publicly funded systems, while expatriates rely on private insurance, which may only partially cover molecular assays-explaining slower adoption than imaging or cytology. Nonetheless, increasing alignment with international guidelines and the growing need for companion diagnostics in targeted therapies are gradually improving payer acceptance.

The competitive landscape features IVD leaders in imaging, IHC, and immunoassays alongside genomics-focused companies offering NGS instruments and panels. Key opportunities include expanding molecular classifiers for Bethesda III/IV nodules to avoid unnecessary surgeries, deploying mutation/fusion panels to guide advanced treatment, and forging local partnerships with hospitals, labs, and distributors to speed regulatory approval, reduce turnaround times, and strengthen reimbursement viability. Regional clinical data further highlight that recurrent differentiated thyroid cancer is linked to poorer outcomes than persistent disease, reinforcing the importance of longitudinal molecular monitoring and advanced risk stratification solutions.

Middle East Thyroid Cancer Diagnostics Market Report Segmentation

This report forecasts revenue growth at regional and country level and provides an analysis of the latest industry trends in each of the sub-segments from 2021 to 2033. For this study, Grand View Research has segmented the Middle East thyroid cancer diagnostics market report based on cancer type, technique, end use, and country.

Cancer Type Outlook (Revenue, USD Million, 2021 - 2033)

Papillary carcinoma

Follicular carcinoma

Others

Technique Outlook (Revenue, USD Million, 2021 - 2033)

Blood Test

Imaging

Biopsy

Others

End Use Indication Outlook (Revenue, USD Million, 2021 - 2033)

Hospital Laboratories

Cancer Diagnostic Centers

Research Institutes

Others

Regional Outlook (Revenue, USD Million, 2021 - 2033)

Middle East

Saudi Arabia

UAE

Kuwait

Qatar

Oman

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