

Europe Breast Cancer Drug Pipeline Analysis

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Abstracts

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The pharmaceutical companies have recently been focusing increasingly on women's health. Among the diseases specific to women, breast cancer has become one of the leading causes of death for the women population globally and accounts for almost 3 per cent of the causes of death in women. It has been estimated that one in every 12 women is most likely to develop breast cancer at some point in her life, owing to risk factors such as hormonal effects, age and genetic predisposition.

In Europe, breast cancer has been the most diagnosed form of cancer and the deaths due to this disease have increased by 16% during the previous two years. Though the incidence rate has significantly increased, on the other side, there has also been an increase of treatment and survival rates in the European region in the recent years.

"Europe Breast Cancer Drug Pipeline Analysis" by PNS Pharma gives comprehensive insight on the various drugs being developed for the treatment of Breast Cancer. Research report covers all the ongoing drugs being developed in various clinical development phases. This report enables pharmaceutical companies, collaborators and other associated stake holders to identify and analyze the available investment opportunity in the Breast Cancer drug market based upon development process. Following parameters for each drug profile in development phase are covered in "Europe Breast Cancer Drug Pipeline Analysis" research report:

Drug Profile Overview

Alternate Names for Drug

Active Indication



Phase of Development
Mechanism of Action
Brand Name
Patent Information
Country for Clinical Trial
Owner / Originator/ Licensee/Collaborator
Administrative Route
Drug Class
ATC Codes
Europe Breast Cancer Drug Pipeline by Clinical Phase:
Europe Breast Cancer Drug Pipeline by Clinical Phase: Unknown: 1
Unknown: 1
Unknown: 1 Research: 5
Unknown: 1 Research: 5 Preclinical: 10
Unknown: 1 Research: 5 Preclinical: 10 Clinical: 5
Unknown: 1 Research: 5 Preclinical: 10 Clinical: 5 Phase-I: 11

Phase-III: 10



Preregistration: 1

Registered: 2

Marketed: 30



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EACH DRUG PROFILE HAS TABLES REPRESENTING FOLLOWING INFORMATION:

Alternate Names

Originator & Owner

Collaborator

Technology Provider

Licensee

Highest Development Phase



Indications
Class
Mechanism of Action
ATC Code
Designated Brand Name



About

The pharmaceutical companies have recently been focusing increasingly on women's health. Among the diseases specific to women, breast cancer has become one of the leading causes of death for the women population globally and accounts for almost 3 per cent of the causes of death in women. It has been estimated that one in every 12 women is most likely to develop breast cancer at some point in her life, owing to risk factors such as hormonal effects, age and genetic predisposition.

In Europe, breast cancer has been the most diagnosed form of cancer and the deaths due to this disease have increased by 16% during the previous two years. Though the incidence rate has significantly increased, on the other side, there has also been an increase of treatment and survival rates in the European region in the recent years.

Cost of Cancer in the European Union

Across the European Union region, the cost of cancer has been spiraling very high. It was estimated to be approximately €126 billion including healthcare and productivity losses, in 2009. Across the EU the health-care costs of cancer were approximately €102 per citizen, but varied significantly from €16 per person in Bulgaria to €184 per person in Luxembourg. The cost of breast cancer specifically was estimated to be approximately 12% of the total cancer cost amounting to €15.0 billion.

The drug market for breast cancer in the EU region (5 countries including France, Germany, Italy, Spain and the United Kingdom), in 2010 was estimated to be approximately USD 4 billion. This market is expected to record a CAGR of 4-6% to cross approximately USD 5 billion by 2016.

The sales of HER2-targeted monoclonal antibody (MAb) Herceptin (trastuzumab) launched by Roche/Genentech/Chugai accounted for more than one-third of the total market. Herceptin, was approced a decade back and has since faced limited competition from GlaxoSmithKline's Tyverb (lapatinib), which has struggled to compete for share of the HER2-positive population. However with the expected entry of biosimilar trastuzumab in 2014 and by the potential approval of competing HER2- targeted agents such as Pfizer's neratinib, the dominance of Herceptin in the HER2- positive breast cancer market in Europe is threatened.

Another launch by Roche/Genentech/Chugai called the VEGF MAb inhibitor Avastin



(bevacizumab) has also been considerably successfull since its approval for first-line metastatic breast cancer in Europe in 2007. However, following the FDA's decision in 2010 to remove Avastin's breast cancer label in the United States, Avastin's presence in the European breast cancer market has become increasingly vulnerable. Although still approved in Europe, sales of Avastin in this market has declined as a result of increased reimbursement restrictions throughout the EU5, and more discerning prescribing by oncologists.



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