

# MARKET REPORT



## Ulcerative Colitis: KOL Insight

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# Ulcerative Colitis: KOL Insight

Are UC biosimilars a real or perceived threat to branded drugs?

Ulcerative colitis (UC) treatment is on the brink. Patents are ending on various branded drugs and clearing the way for an influx of biosimilars; first-mover, Entyvio has a direct competitor coming on stream; and there is even talk of combination therapies and natural treatments in some quarters. What are the most influential key opinion leaders (KOLs) saying about market dynamics for UC drug therapies? How do they expect the market to flex and adapt? Are the new arrivals likely to face an enthusiastic welcome or more of a tepid reception?

Covering 5 marketed drugs and 9 pipeline therapies, this report gives the viewpoint from 12 KOLs in North America and Europe. Find out what they think about prescribing trends for different patient segments, the various products coming through the pipeline, and the key issues influencing treatment choices.

Take a tour of the report now:

The table of contents >

The key questions answered >

The key KOL quotes >

See the 14 therapies covered >

Find out who the 12 EU & US KOLs are >

Review an extract from the report - 1 drug profile >

Sample of brands covered:

Uceris/Cortiment (budesonide MMX; Cosmo/Santarus/Ferring)

Entyvio (vedolizumab; Takeda)

Etolizumab (RG 7413, rhuMab beta7; Roche)

Stelara (ustekinumab; Johnson & Johnson)

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Sample of KOLS interviewed

Dr. Adam Cheifetz, MD, Director of the Center for Inflammatory Bowel Disease at Beth Israel Deaconess Medical Center and Associate Professor of Medicine at Harvard Medical School.

Prof Jean-Frédéric Colombel, MD, Professor of Medicine and Director of the Susan and Leonor Feinstein IBD Center at Icahn School of Medicine in New York, NY.

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Prof Gerhard Rogler, MD, PhD, Professor of Gastroenterology and Hepatology and Ordinarius ad personam at the University of Zürich, based at the University hospital of Zurich.

Prof Laurent Peyrin-Biroulet, MD, PhD, Department of HepatoGastroenterology, University Hospital of Nancy, Vandoeuvre-les-Nancy, France.

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## Top Takeaways

Possible change to mild-to-moderate UC treatment: What difference will LT 02 (controlled-release phosphatidylcholine) make to entrenched 5-ASA prescribing habits? Do KOLs see LT 02 as an alternative or an add-on for early stage patients?

One brand is still the preferred TNF inhibitor, but for how long? How do gastroenterologists feel about switching to biosimilars and are they 100% confident about efficacy? Should originators be concerned for their market share?

Patient education: Is patient perception that non-branded drugs are inferior a real problem or a perceived one? Do KOLs believe pharma is helping or hindering patient views on biosimilars? Could (and should) more be done to educate patients about treatment choices?

Views on a crowded moderate-to-severe drug pipeline: One trial has recently halted but with 8 more still actively progressing, which hold most promise for KOLs? Conversely, which head-to-head trial is viewed as 'risky' and which current study is described as 'completely uninteresting'?

Two in-trial drugs are prompting more excitement than the rest: Which two potential new arrivals are viewed positively, but for different reasons? Could these be game changers for the severe patient segment?

Safety and cost dominate the debate: KOLs express cynicism about various pipeline drugs and possible treatment pathways, primarily due to side effect profiles and cost. The latter may also impact appetite for combination therapies, even though many KOLs are calling for this.

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