IBS-D is a highly prevalent disorder regularly encountered in general practice that is marked by excessive defecation and abdominal pain/discomfort. Currently, its etiology and pathophysiology are poorly characterized, and there are no objective means to diagnose the disease (a biomarker), guide development of new therapeutic approaches, or target IBS-D patients who are likely to respond adequately to treatment. Current treatments for IBS-D and clinical investigations of new therapies focus on amelioration of symptoms (decreased pain, reduced frequency of defecation). However, this market is highly underserved, with the majority of available agents offering suboptimal efficacy or being associated with undesirable side effects. Thus, unmet need is high in this indication, leaving significant commercial opportunity for novel IBS-D therapies. The Unmet Need content provides quantitative insight into and European physician perceptions of key treatment drivers and goals and the current level of unmet need in IBS-D. We analyze the commercial opportunities in the IBS-D therapy market and discuss how emerging therapies may be able to capitalize on these opportunities. Questions Answered: What are the treatment drivers and goals for IBS-D? What attributes are key influencers, which have limited impact, and which are hidden opportunities? How do current therapies perform on key treatment drivers and goals for IBS-D? What are the prevailing areas of unmet need and opportunity in IBS-D? What trade-offs across different clinical attributes and price are acceptable to and European gastroenterologists for a hypothetical new IBS-D drug? Markets covered: United States, France, Germany, United Kingdom Primary research: Survey of 61 and 32 European gastroenterologists fielded in February 2017 Key companies: Allergan, Sebela Pharmaceuticals, Valeant Pharmaceuticals Key drugs: Viberzi, Xifaxan, Lotronex, Imodium

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