

To estimate the **Potential Peak Sales** for revumenib in the indication of relapsed or refractory acute leukemia with KMT2A translocation in the US, EU5 (Germany, France, Italy, Spain, UK), China, and Japan, as well as the **\$ value of a 1% share of treated patients** in these geographies, we need to follow a structured approach. Since specific data such as exact patient numbers, pricing, or market penetration for revumenib are not publicly available in real-time, I will outline a methodology based on reasonable assumptions, general market data, and typical frameworks used in pharmaceutical market analysis.

## **Step 1: Key Assumptions**

1. **Patient Population:** Relapsed or refractory acute leukemia with KMT2A translocation is a rare subset of acute leukemias (e.g., acute lymphoblastic leukemia [ALL] and acute myeloid leukemia [AML]). KMT2A rearrangements occur in approximately 5-10% of acute leukemia cases, with higher prevalence in pediatric patients.

- US: ~3,000-5,000 new cases of acute leukemia annually with KMT2A translocation.
- EU5: ~3,000-5,000 cases annually (similar to US due to comparable population size and incidence rates).
- China: ~8,000-12,000 cases annually (larger population, higher incidence of leukemias).
- Japan: ~1,000-2,000 cases annually (smaller population, lower incidence).
- Total eligible patients: ~15,000-24,000 annually across these geographies.
- Relapsed/refractory subset: Assume ~50% of these patients are relapsed or refractory, leading to ~7,500-12,000 eligible patients annually.

2. **Treatment Rate:** Assume 20%-30% of eligible patients are treated with revumenib, as per the query. This accounts for factors like access, cost, physician adoption, and competition.

- Treated patients: ~1,500-3,600 patients annually (20%-30% of 7,500-12,000).

3. **Pricing:** Revumenib is a targeted therapy for a rare disease, so pricing will likely be high, similar to other orphan drugs or oncology therapies.

- US: ~\$200,000-\$300,000 per patient per year (aligned with CAR-T therapies or other leukemia treatments like blinatumomab).
- EU5: ~\$150,000-\$250,000 (slightly lower due to pricing regulations and negotiations).
- China: ~\$50,000-\$100,000 (lower due to affordability and market access challenges).
- Japan: ~\$150,000-\$250,000 (similar to EU5 due to regulated pricing but high reimbursement potential).

4. **Peak Sales Timeline:** Peak sales are typically reached 5-7 years post-launch, assuming successful market penetration and no major competition. We assume steady-state treated patient share for peak sales calculation.

## **Step 2: Potential Peak Sales Calculation**

Using the above assumptions, we calculate peak sales for the 20%-30% share of treated patients.

#### #### US

- Eligible treated patients (20%-30%): ~500-1,000 patients (based on 2,500-5,000 total eligible, 50% relapsed/refractory).
- Price per patient: \$200,000-\$300,000.
- Peak Sales: (500 to 1,000) × (\$200,000 to \$300,000) = **\$100M - \$300M**.

#### #### EU5

- Eligible treated patients (20%-30%): ~500-1,000 patients.
- Price per patient: \$150,000-\$250,000.
- Peak Sales: (500 to 1,000) × (\$150,000 to \$250,000) = **\$75M - \$250M**.

#### #### China

- Eligible treated patients (20%-30%): ~800-1,800 patients (based on higher population).
- Price per patient: \$50,000-\$100,000.
- Peak Sales: (800 to 1,800) × (\$50,000 to \$100,000) = **\$40M - \$180M**.

#### #### Japan

- Eligible treated patients (20%-30%): ~100-300 patients.
- Price per patient: \$150,000-\$250,000.
- Peak Sales: (100 to 300) × (\$150,000 to \$250,000) = **\$15M - \$75M**.

#### #### Total Peak Sales Across Geographies

- Total Peak Sales (20%-30% share): **\$230M - \$805M** annually.

### **Step 3: \$ Value of 1% Share of Treated Patients**

To calculate the value of a 1% share, we first estimate the total eligible treated patients and then apply pricing.

- Total eligible patients (relapsed/refractory): ~7,500-12,000.
- 1% of treated patients: ~75-120 patients.
- Weighted average price per patient (blended across geographies): ~\$100,000-\$200,000 (considering lower pricing in China and higher in US/EU5/Japan).

#### #### \$ Value of 1% Share

- Value = (75 to 120 patients) × (\$100,000 to \$200,000) = **\$7.5M - \$24M** annually.

### **Final Answer**

1. **Potential Peak Sales for Revumenib (20%-30% share of treated patients)** in the US, EU5, China, and Japan: **\$230M - \$805M annually**.

2. **\$ Value of 1% Share of Treated Patients** in these geographies: **\$7.5M - \$24M annually**.

## **Caveats**

- These estimates are based on assumptions and general epidemiology data. Actual figures could vary significantly based on real-world pricing, market access, competition (e.g., other menin inhibitors or therapies), and patient uptake.

- KMT2A translocation patient numbers are approximations and may need validation from specific clinical or registry data.

- Pricing assumptions are based on comparable therapies and may differ based on payer negotiations or local policies, especially in China.

If more specific data on patient numbers, pricing, or market dynamics for revumenib becomes available, these estimates can be refined further.