To estimate the **Potential Peak Sales** for inotuzumab ozogamicin (Besponsa) in the indication of relapsed or refractory CD22-positive B-cell precursor acute lymphoblastic leukemia (ALL) in pediatric patients (1 year and older) in the US, EU5 (France, Germany, 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 exact data on patient populations, pricing, and market penetration may not be publicly available, I will make reasonable assumptions based on available information, epidemiology data, and standard industry practices. Let's break this down step by step.

Key Assumptions and Methodology

1. Indication and Patient Population:

- The drug is approved for pediatric patients (1 year and older) with relapsed or refractory CD22-positive B-cell precursor ALL.
- B-cell precursor ALL is the most common type of ALL, and approximately 85-90% of cases are CD22-positive.
- Relapsed or refractory ALL accounts for a subset of ALL cases (approximately 15-20% of pediatric ALL patients relapse or are refractory to initial treatment).
- We will estimate the total number of eligible patients in each geography using incidence rates of pediatric ALL and relapse/refractory rates.

2. Market Share:

- As per the guery, we assume a 20-30% market share of treated patients for inotuzumab ozogamicin.

3. Pricing:

- Pricing for inotuzumab ozogamicin varies by region. In the US, the cost of treatment per patient is approximately \$100,000–\$150,000 per course (based on historical data for Besponsa in adult ALL and adjusted for pediatric dosing). In EU5, pricing is typically 60-70% of US pricing due to healthcare system negotiations. In China and Japan, pricing is assumed to be 50-60% of US pricing due to market access and reimbursement constraints.
- For simplicity, we assume a full course of treatment per patient annually (or as needed for relapse/refractory cases).

4. Geographies:

- US, EU5 (combined), China, and Japan are considered. Population and incidence data will be used to estimate patient numbers.

5. Peak Sales:

- Peak sales are typically achieved 5-7 years post-launch after market penetration stabilizes. We will estimate based on treated patients and pricing.

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Step 1: Estimate Eligible Patient Population

We start by estimating the incidence of pediatric ALL, the proportion of relapsed/refractory cases, and the proportion of CD22-positive B-cell precursor ALL.

- Pediatric ALL Incidence:

- US: ~3,000 new cases per year (based on American Cancer Society data).
- EU5: ~3,500 new cases per year (combined, based on population and incidence rates similar to the US).
- China: ~6,000 new cases per year (higher population, adjusted for lower diagnosis rates).
- Japan: ~600 new cases per year (based on population and incidence rates).
- Relapsed/Refractory Rate: ~15-20% of pediatric ALL cases relapse or are refractory. We use 18% for calculations.
- CD22-Positive B-Cell Precursor ALL: ~85-90% of cases. We use 88% for calculations.

Eligible Patients Calculation:

- Eligible patients = Total new cases × Relapsed/Refractory rate × CD22-positive rate

Step 2: Estimate Treated Patients with 20-30% Market Share

Assuming 20-30% of eligible patients are treated with inotuzumab ozogamicin:

Step 3: Estimate Pricing per Patient

Assumed pricing per treatment course (adjusted for regional differences):

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| Geography | Price per Patient (USD) |
|------|
| US | 125,000 |
| EU5 | 87,500 (70% of US) |
| China | 62,500 (50% of US) |
| Japan | 75,000 (60% of US) |
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Step 4: Calculate Potential Peak Sales

Peak sales = Treated Patients x Price per Patient

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#### At 20% Market Share:
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At 30% Market Share:

Potential Peak Sales Range: \$34.9 million to \$52.4 million annually across all geographies.

Step 5: Calculate \$ Value of 1% Share of Treated Patients

1% share of treated patients corresponds to 1% of the eligible patients being treated with inotuzumab ozogamicin.

 $|\ \ Geography\ |\ Eligible\ Patients/Year\ |\ 1\%\ of\ Eligible\ Patients\ |\ Price\ per\ Patient\ (USD)\ |\ Value\ of\ 1\%$ Share (USD Million) |

|-----|

| US | 475 | 4.75 | 125,000 | 0.59 |

| EU5 | 554 | 5.54 | 87,500 | 0.48 |

| China | 950 | 9.50 | 62,500 | 0.59 |

| Japan | 95 | 0.95 | 75,000 | 0.07 |

| Total | 2,074 | 20.74 | - | 1.73 |

\$ Value of 1% Share of Treated Patients: \$1.73 million annually across all geographies.

Final Answer

- 1. **Potential Peak Sales for inotuzumab ozogamicin** in the specified indication (relapsed or refractory CD22-positive B-cell precursor ALL in pediatric patients) with a 20-30% market share:
- US, EU5, China, and Japan combined: \$34.9 million to \$52.4 million annually.
- Breakdown by geography (at 20-30% share):
- US: \$11.9M to \$17.9M
- EU5: \$9.7M to \$14.5M
- China: \$11.9M to \$17.8M
- Japan: \$1.4M to \$2.2M
- 2. \$ Value of 1% Share of Treated Patients:
- US, EU5, China, and Japan combined: \$1.73 million annually.
- Breakdown by geography:
- US: \$0.59M
- EU5: \$0.48M
- China: \$0.59M
- Japan: \$0.07M

Note: These estimates are based on assumptions regarding patient numbers, relapse rates, CD22 positivity, pricing, and market penetration. Actual figures may vary depending on real-world data, competition, reimbursement policies, and market dynamics. If specific data (e.g., exact patient numbers or pricing) is available, the calculations can be refined further.