To estimate the **Potential Peak Sales** for quizartinib (Vanflyta) in the indication of newly diagnosed acute myeloid leukemia (AML) with FLT3-ITD mutation 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 specific data on patient numbers, pricing, and market penetration may not be publicly available in full detail, I will base this analysis on reasonable assumptions, industry benchmarks, and available epidemiology data for AML with FLT3-ITD mutation. Let's break this down step by step.

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## **Step 1: Define the Target Patient Population**

- Indication: Newly diagnosed AML with FLT3-ITD mutation.
- **Epidemiology**: FLT3-ITD mutations occur in approximately 25-30% of AML cases. AML incidence varies by region.
- Annual Incidence of AML (approximate figures based on publicly available data and estimates):
- **US**: ~20,000 new cases per year.
- EU5: ~18,000 new cases per year (combined).
- China: ~25,000 new cases per year (based on population size and incidence rates).
- Japan: ~6,000 new cases per year.
- FLT3-ITD Positive Cases (assuming 25% of AML cases):
- US: 5,000 patients/year.
- EU5: 4,500 patients/year.
- China: 6,250 patients/year.
- Japan: 1,500 patients/year.
- Total Target Population (annual new cases): 5,000 (US) + 4,500 (EU5) + 6,250 (China) + 1,500 (Japan) = 17,250 patients/year.

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## **Step 2: Estimate the Share of Treated Patients**

- The problem states a **20% to 30% share of treated patients**. This likely refers to quizartinib's market penetration among eligible FLT3-ITD positive AML patients.
- For peak sales estimation, we will assume:
- Low-end penetration (20%): 20% of 17,250 = 3,450 patients treated annually.
- High-end penetration (30%): 30% of 17,250 = 5,175 patients treated annually.

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# Step 3: Estimate Annual Treatment Cost per Patient

- Quizartinib is a targeted therapy for a rare mutation in a serious condition (AML), so pricing is expected to be high, similar to other oncology drugs.
- Based on pricing benchmarks for AML therapies (e.g., midostaurin, another FLT3 inhibitor), the annual cost per patient is estimated as follows (hypothetical, as exact pricing may vary):
- **US**: ~\$150,000 per patient per year (higher due to pricing dynamics).
- EU5: ~\$100,000 per patient per year (lower due to price negotiations and healthcare systems).
- China: ~\$50,000 per patient per year (lower due to pricing controls and generics competition).
- Japan: ~\$120,000 per patient per year (similar to US but slightly lower).
- For simplicity, we can calculate a **weighted average cost per patient** based on patient distribution across regions (or use region-specific costs for precision). For now, let's compute region-specific sales.

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### **Step 4: Calculate Potential Peak Sales**

Peak sales are typically calculated based on the maximum market penetration and annual revenue at steady state. We will calculate for both **20% and 30% penetration**.

#### #### Low-End Penetration (20%)

- **US**: 5,000 patients  $\times 20\% = 1,000$  patients  $\times $150,000 = $150$  million.
- **EU5**: 4,500 patients  $\times 20\% = 900$  patients  $\times $100,000 = $90$  million.
- China: 6,250 patients  $\times 20\% = 1,250$  patients  $\times $50,000 = $62.5$  million.
- Japan: 1,500 patients  $\times$  20% = 300 patients  $\times$  \$120,000 = **\$36 million**.
- Total Peak Sales (20%): \$150M + \$90M + \$62.5M + \$36M = \$338.5 million.

#### #### High-End Penetration (30%)

- **US**: 5,000 patients  $\times 30\% = 1,500$  patients  $\times $150,000 = $225$  million.
- **EU5**: 4,500 patients  $\times 30\% = 1,350$  patients  $\times $100,000 = $135$  million.
- **China**: 6,250 patients  $\times 30\% = 1,875$  patients  $\times $50,000 = $93.75$  million.
- **Japan**: 1,500 patients  $\times 30\% = 450$  patients  $\times $120,000 = $54$  million.
- Total Peak Sales (30%): \$225M + \$135M + \$93.75M + \$54M = \$507.75 million.

#### Range of Potential Peak Sales: \$338.5 million to \$507.75 million annually.

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

A 1% share of treated patients refers to 1% of the total target population (17,250 patients/year) = **172.5** patients treated annually.

- **US**:  $5,000 \times 1\% = 50$  patients  $\times $150,000 = $7.5$  million.
- **EU5**:  $4,500 \times 1\% = 45$  patients  $\times $100,000 = $4.5$  million.
- China:  $6,250 \times 1\% = 62.5$  patients  $\times $50,000 = $3.125$  million.
- Japan:  $1,500 \times 1\% = 15$  patients  $\times $120,000 = $1.8$  million.
- Total \$ Value of 1% Share: \$7.5M + \$4.5M + \$3.125M + \$1.8M = \$16.925 million.

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### **Final Answer**

- 1. **Potential Peak Sales for Quizartinib** in the US, EU5, China, and Japan for newly diagnosed AML with FLT3-ITD mutation (assuming 20% to 30% market share of treated patients):
- Range: \$338.5 million to \$507.75 million annually.
- 2. \$ Value of 1% Share of Treated Patients in these geographies:
- Total: \$16.925 million annually.

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### **Notes and Caveats**

- These estimates are based on assumptions about patient numbers, market penetration, and pricing. Actual figures may vary depending on real-world data, competition (e.g., midostaurin, gilteritinib), reimbursement policies, and treatment duration.
- Peak sales may also be influenced by factors such as off-label use, combination therapies, or expanded indications.
- Pricing in China and EU5 may be lower than estimated due to government negotiations or access programs.
- If you have access to specific data (e.g., exact pricing, patient numbers, or market research), these estimates can be refined further.