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Executive Summary

Named from the Greek word psōra meaning "itch," the term ‘psoriasis’ encompasses a set of chronic inflammatory autoimmune dermatoses which requires lifelong care. It is a chronic, non-communicable inflammatory disease which is often mistaken for contagious diseases, such as leprosy, syphilis and even HIV/AIDS. In 2014, WHO member states recognized psoriasis as a serious non-communicable disease (NCD) in the World Health Assembly resolution WHA67.9. The resolution highlighted that many people in the world suffer needlessly from psoriasis due to incorrect or delayed diagnosis, inadequate treatment options and insufficient access to care, and because of social stigmatization. There are no special blood tests or tools to diagnose psoriasis.

There are several clinical types of psoriasis including plaque psoriasis, guttate psoriasis, Intertriginous psoriasis / inverse psoriasis, pustular psoriasis and erythrodermic psoriasis. Although clinical findings in patients frequently overlap in different types of psoriasis, each type of psoriasis may require different treatment approach. The exact cause of psoriasis isn’t fully understood, but researchers believe psoriasis is the result of several factors, including genetics, environmental factors, and the immune system. Researchers come to an understanding that psoriatic disease is an autoimmune inflammatory disease which means that psoriasis and psoriatic arthritis are actually caused by an overactive immune system. The immune stimulation of epidermal keratinocytes; T cells appear to play a key role. There is emerging evidence that psoriasis patients have a higher prevalence of associated comorbid disease with cardiometabolic dysfunction and psoriatic arthritis being at the forefront. Between 1.3 percent and 34.7 percent of individuals with psoriasis develop chronic, inflammatory arthritis (psoriatic arthritis) that leads to joint deformations and disability. Between 4.2 percent and 69 percent of all patients suffering from psoriasis develop nail changes.

There are more than 140 million people, or nearly 3 percent of the world's population, men, women, and children, even newborn babies, who suffer from psoriasis. As per 2016 WHO report on psoriasis, the reported prevalence of psoriasis in countries ranges between 0.09 percent and 11.4 percent, making psoriasis a serious global problem. It is estimated that at least 10 percent of psoriasis sufferers have a severe form that causes
disability and exclusion from a normal life. Economically, in the U.S. alone, impact is estimated that Americans with psoriasis lose approximately 56 million hours of work and spend in billions to treat the disease every year.

There are no curative treatments available for many chronic dermatological conditions, like psoriasis. Psoriasis is a clinically heterogeneous disease, and its individual presentation can make the selection of the most appropriated treatment difficult. The best treatment is individually determined by the treating doctor and depends, in part, on the type of disease, the severity, and amount of skin involved. Inflammation plays an important role in the pathophysiology of Psoriasis and hence most of the treatment options are targeted towards alleviating inflammation in psoriasis.

The global psoriasis market size was valued at USD9.62 billion in 2017 and is estimated to grow at a rate of 8.7 percent during the forecast period and will reach USD20.3 billion by 2026. The currently available therapeutic options for psoriasis include several treatment approaches such as topical corticosteroids, vitamin D derivatives, retinoids, systemic small molecule immunosuppressing agents, phototherapy, and systemic biologics. The market is driven by increasing prevalence of psoriasis and psoriatic arthritis, although the exact pathologic reason for this is not clear, the rising prevalence of risk factors and co-morbidities over the same time period is another likely contributory factor. In addition to this, we see improved diagnostic and patient awareness playing a critical role in increasing prevalence of psoriasis and favorable regulatory and reimbursement policy modifications over the past five years. However, high out-of-pocket costs, restrictive coverage policies, frequent denials and an overall lack of understanding about treatment options create roadblocks for patients trying to access treatments and medications for psoriasis. The market has witnessed the ‘blockbuster’ success of Stelara, Enbrel and Humira, which is motivating the Psoriasis market players to develop newer, more efficacious biologics having improved efficacy and safety parameters compared to earlier ‘blockbuster’ biologics.

Even though past few years have seen the advent of numerous new medications for the treatment of psoriasis, there still is considerable room for improvement in our treatment of this condition. Novel insights into the underlying mechanisms of psoriasis have yielded exciting new potential medications, many with promising preliminary efficacy data. There are multiple new breakthroughs we may see in the near future which may
include molecules with novel mechanisms and more effective dosage forms. Global psoriasis pipeline comprised of total 224 programs at various stages of clinical development.

Key Questions Answered

1. Detailed disease overview of psoriasis.
2. Global epidemiology of psoriasis. (major regions covered are the US, EU5, Japan, and India)
3. Global dermatology market; 2016-2026. (major regions covered are the US, EU5, Japan, and India)
4. Global psoriasis market; 2016-2026. (major regions covered are the US, EU5, Japan, and India)
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