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Branded generics to accelerate adoption of anti-obesity drugs as prescribing expands to GPs: Sheetal Sapale

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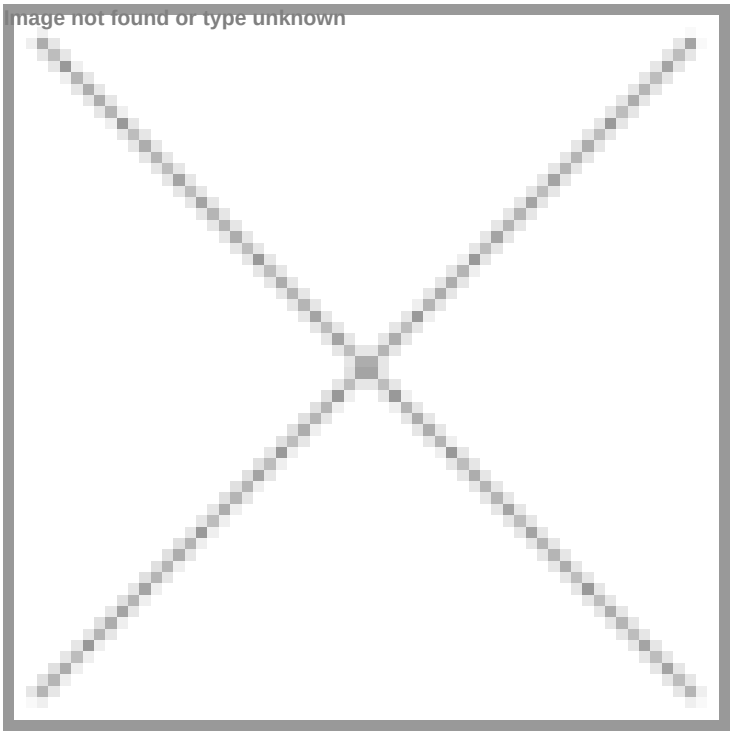
Prescribing is expected to expand significantly to consulting physicians and general practitioners



The anti-obesity therapy segment is set for a major commercial inflection point with the expected patent expiry of semaglutide, which is likely to trigger a wave of branded generic launches and significantly expand access to treatment, according to data and insights from Pharmarack.

Lower prices are expected to be a key driver of adoption. Branded generics typically enter the market at nearly one-third to one-fifth the price of innovator products, often resulting in a two-to-threefold jump in monthly sales during the initial three to four months following launch, according to Pharmarack market observations. However, the report also noted that while affordability will improve access, the eligible patient pool for anti-obesity therapy will remain broadly the same.

A major structural change expected in the market is the expansion of the prescribing base. Until now, anti-obesity therapies have largely been prescribed by speciality and super-speciality doctors. With the entry of branded generics, prescribing is expected to expand significantly to consulting physicians and general practitioners (CPs/GPs).

“Affordability and awareness are already driving interest in anti-obesity therapies. With branded generics entering the market, we expect a clear shift in prescribing patterns toward consulting physicians and general practitioners,” said Sheetal Sapale, Vice President – Commercial at Pharmarack Technologies. She further added that the shift in prescriber base makes patient

profiling and therapy monitoring even more important.

“Before launching an innovator molecule, multinational companies typically spend over a year conducting scientific education with speciality and super-speciality doctors on disease understanding, patient selection and therapy management. When branded generics enter the market, that structured education often does not reach the wider CP/GP base,” she said.

Sheetal further said that inadequate patient profiling and monitoring may lead to higher therapy dropout rates, suboptimal dose titration and challenges in side-effect management. Patients need continuous monitoring to ensure adherence to therapy along with recommended lifestyle modifications for effective outcomes.