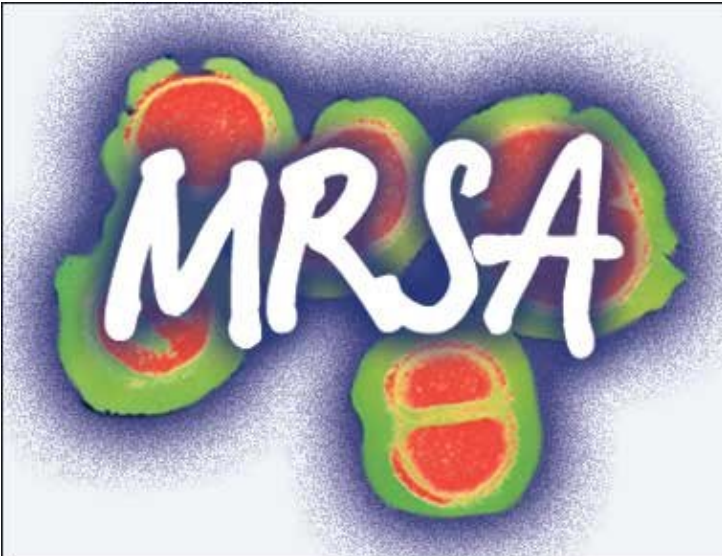


## Despite minimal growth in MRSA treatment space to 2024, opportunities will exist for new entrants

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The Methicillin-Resistant Staphylococcus Aureus ([MRSA](#)) treatment market will experience very limited growth over the next decade, rising from \$1.4 billion in 2014 to \$1.45 billion by 2024, according to research and consulting firm GlobalData.

The company's latest report states that the \$50 million increase, which will occur across the seven major markets (7MM) of the US, Japan, the UK, France, Italy, Spain, and Germany, represents a very modest Compound Annual Growth Rate (CAGR) of 0.4%.

This minimal increase will be largely the product of a treatment space dominated by three primary agents, namely vancomycin, Zyvox (linezolid), and Cubicin (daptomycin).

However, Dr Christopher J Pace, GlobalData's Director of Infectious Diseases, emphasizes that opportunities within the market are rife, even with its ostensible homogeneity.

Dr Pace says: "Despite its status as the most commonly prescribed antibiotic for [MRSA](#) infections, vancomycin has a substantial number of clinical drawbacks.

"These include cumbersome dosing criteria, a lack of effectiveness in difficult-to-treat cases, and growing concerns surrounding treatment-emergent [resistance](#). This leaves vancomycin vulnerable to competition from approved and experimental agents."

At the same time, Pfizer's Zyvox and Merck's Cubicin, which are frequently employed in MRSA treatment, are both threatened by imminent patent expiries, further opening the market to new and improved players, in addition to increased competition from generics.

Furthermore, a number of marketed drugs already indicated for certain types of MRSA infections will achieve label expansions, such as Allergan's Dalvance (dalbavancin) and Merck's Sivextro (tedizolid phosphate) to treat Community-Acquired Bacterial Pneumonia (CABP), and Allergan's Teflaro (ceftaroline fosamil) and Theravance's Vibativ (telavancin) to treat bacteremia.

GlobalData's report also states that while cost-effective generic drugs such as vancomycin will curtail substantial growth of the MRSA treatment space over the forecast period, the pipeline features exciting developments.

Dr Pace concludes: "While there are no blockbusters on the horizon, the clinical-stage pipeline contains highly innovative approaches to combatting MRSA, as well as novel versions of the existing drug classes.

"However, GlobalData anticipates that many new players will establish niches in the MRSA treatment landscape, and will also realize their commercial potential outside of the MRSA therapeutics space."