

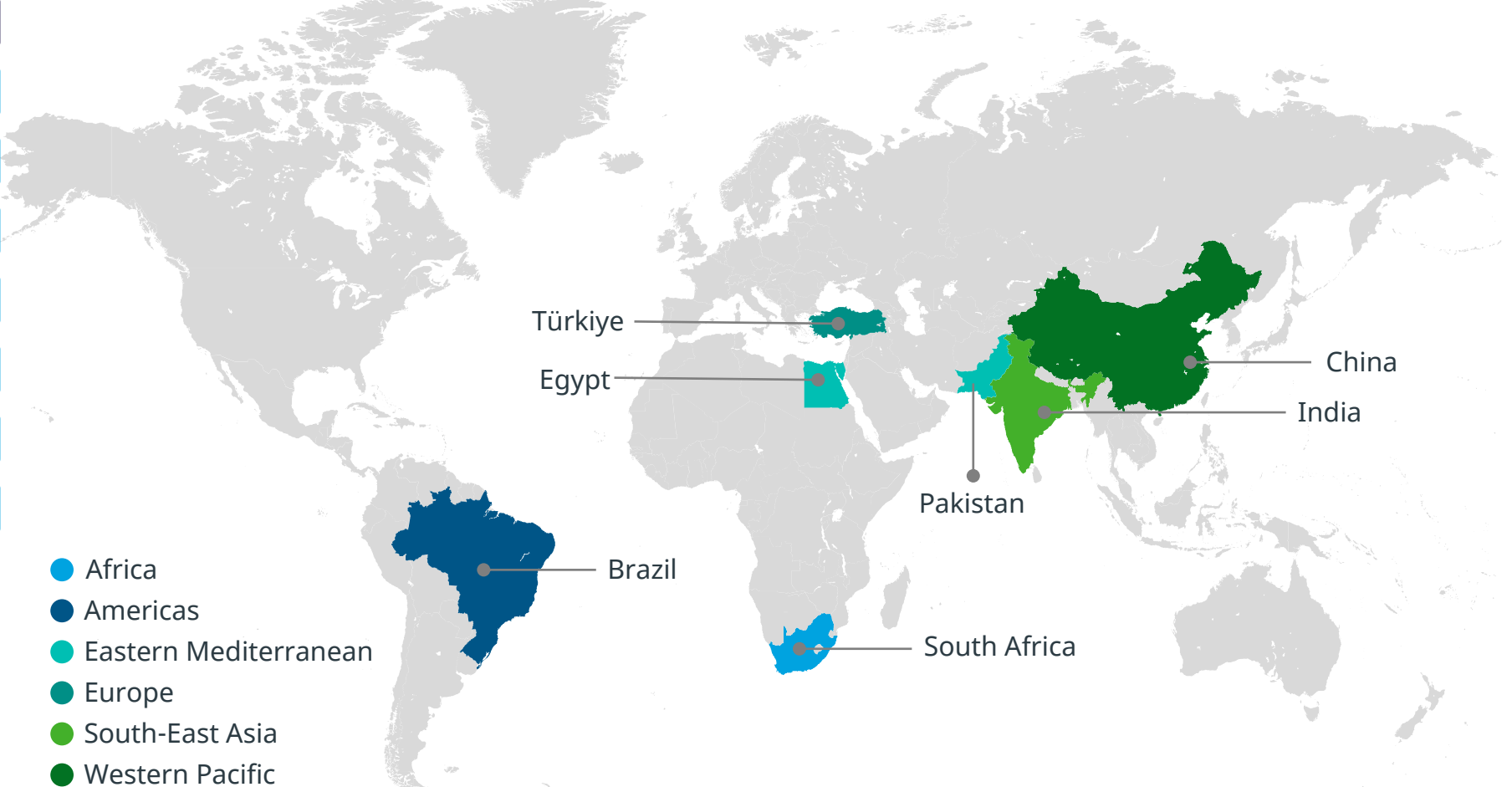
Expanding the toolbox for obesity prevention and treatment in low- and middle-income countries: What does it take to make it happen?

Research objectives:

1. Discuss the current state of obesity as a public health threat in the world's most vulnerable geographies
2. Present the opportunities and challenges that these therapies bring for the treatment and prevention of many conditions beyond obesity
3. Examine the prospects that affordable OMs at scale could generate in LMICs
4. Suggest the potential routes that governments, life science companies, and multilateral organizations could take to support better access and health system readiness

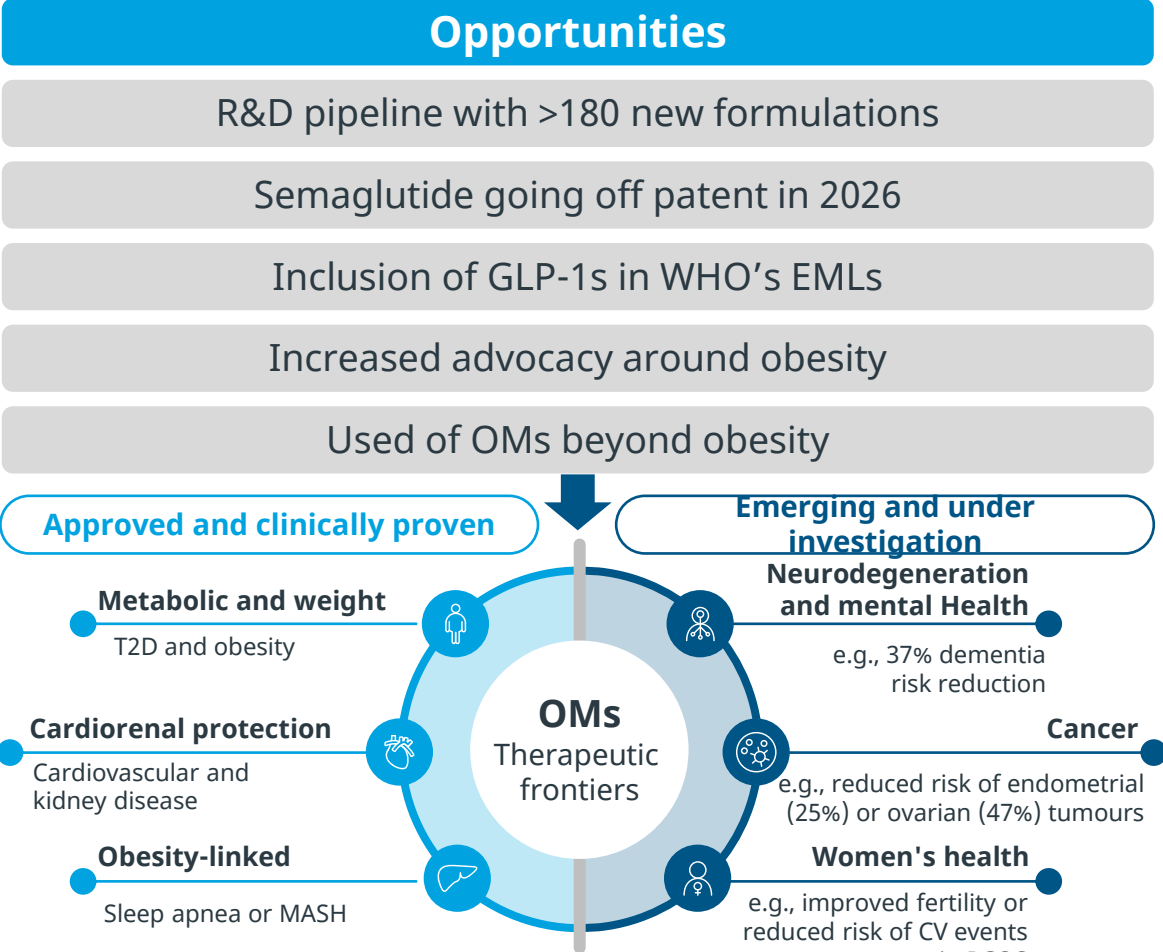
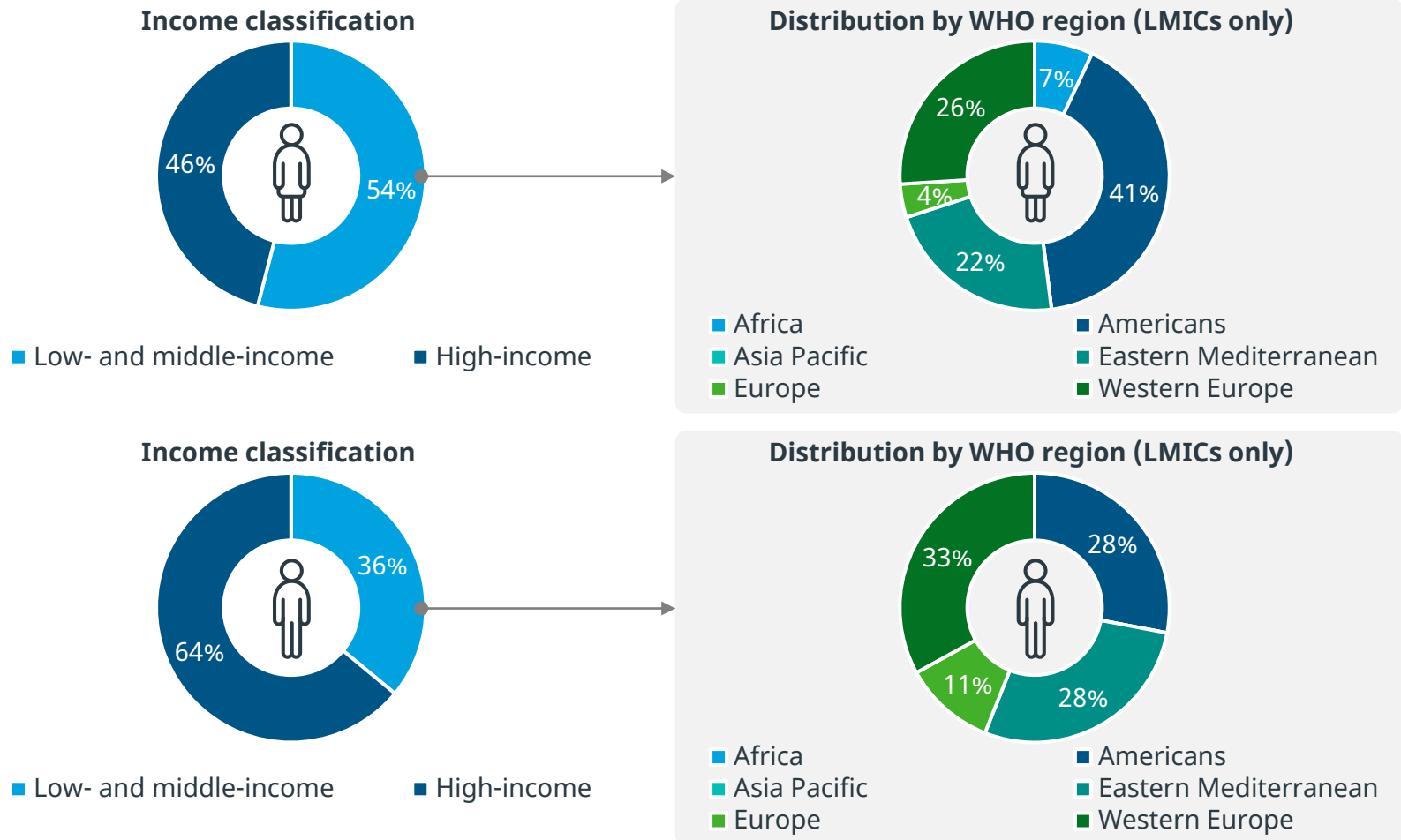
Methods:

The study analyzed IQVIA proprietary data to (1) understand the circulation of OMs in LMICs; (2) standardize the pricing of OMs and other therapies treating diabetes; and (3) set affordability benchmarks based on stratified income and health spending per capita considering a country sample that includes **Brazil, China, Egypt, India, Pakistan, South Africa, and Türkiye**. The study provides a comparative analysis across these countries, covering the capabilities of their health systems, and fiscal and behavioral policies addressing metabolic health. Countries were selected based on the absolute number of people living with obesity in each WHO region. To better characterize obesity in LMICs, a variety of publicly available datasets were used

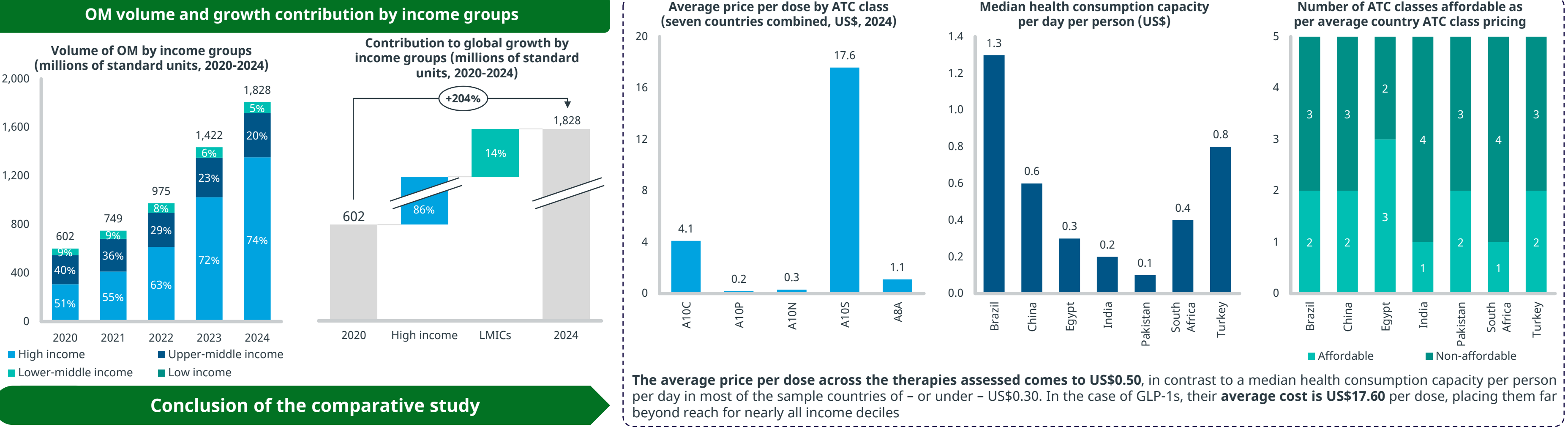


1 Obesity in LMICs is showing concerning trends, but there are new opportunities to tackle the challenge more effectively with therapeutic options as complementary measures to behavioral approaches

- Overall, **obesity is on the rise globally:** 8.8% to 18.5% in women and 4.8% to 14% in men (1990-2022).
- Out of 43 million adults dying globally due to NCDs, **3.5 million have a BMI equal to or above 25**
- The number of people living with obesity **could reach 4 billion in 2035**
- The global economic impact of overweight and obesity **could reach US\$4.32 trillion annually by 2035**
- 78% of NCD-related deaths **linked to overweight and obesity in LMICs**
- 79% of individuals with a BMI over 30 **could be based in LMICs by 2035**

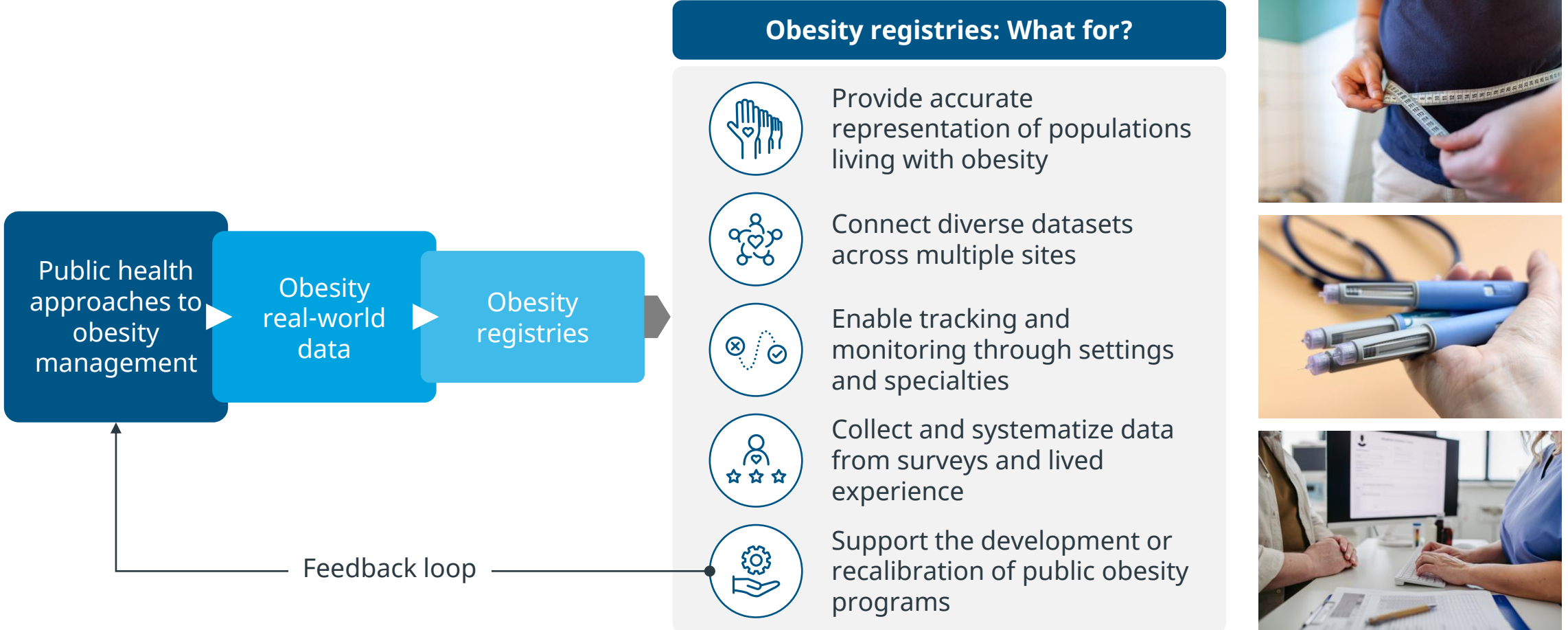


2 LMICs contributed 14% of the growth of total OM sales volume between 2019 and 2024, with these countries capturing 26% of the market share across the most representative obesity agents. However, prices tend to be very high, making access very difficult to people living with obesity



3 In addition to signaling affordability gaps, the study concludes with a series of recommendations to support the sustainable and equitable access to OMs in LMICs. It also highlights the importance of using data repositories for patient segmentation and the understanding of comorbidities and unmet needs

- 1 Embedding access considerations in research and development
- 2 Conducting multi-variate analysis to determine affordability and commercial viability
- 3 Ensuring clinical trials are capturing-the genetic diversity of populations under study
- 4 Advocating for positive effects of OMs to influence decision-making
- 5 Increasing funding and improving capacity of primary care
- 6 Raising awareness about the social and environmental determinants of obesity
- 7 Moving beyond traditional measures of obesity
- 8 Establishing a dual approach to care that includes behavioral components
- 9 Improving pharmacovigilance vis-à-vis substandard/falsified medicines
- 10 Negotiating with key partners to ensure pricing, reimbursements, and rebates



List of acronyms: ATC: Anatomic therapeutic chemical | BMI: Body mass index | EMLs: Essential medicines lists | LMICs: Low- and middle-income countries | NCD: Noncommunicable diseases | OMs: Obesity medicines | WHO: World Health Organization

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A research piece conducted by IQVIA | Thought Leadership Team