SPINAL FUSION – GLOBAL ANALYSIS AND MARKET FORECASTS
The table above provides an overview of the global spinal fusion market during the forecast period from 2013–2020.

**Overview**

GlobalData estimates that the spinal fusion market in 2013 was valued at $4,775m across the 10 regions covered in this report, which include the United States (US), France, Germany, Italy, Spain, the United Kingdom (UK), Japan, Brazil, India and China. By the end of the forecast period in 2020, sales will have grown to $6,982m, with a Compound Annual Growth Rate (CAGR) of 5.58%.

**Global Outlook**

GlobalData forecasts that the United States will continue to occupy the majority of the global spinal fusion market through 2020. The figure below illustrates the composition of the global spinal fusion market in 2013 and 2020. The country’s global market share will decline over the forecast from 71% in 2013 to 63% in 2020. It will also experience one of the lowest CAGRs over the forecast given how mature the market is in the country and newly enacted reimbursement hurdles from public health payers.

Like other medical device markets, emerging economies will be a source of large growth rates over the forecast period. For example, China will experience double digit growth rates through 2020 and this will increase its global market share from 5% in 2013 to 10% in 2020. Additionally, select established economies in the European Union will...
Executive Summary

experience large growth rates over the forecast period including the United Kingdom and Italy. The primary reason for their growth is the increasing procedure volumes for spinal fusion surgeries owing to favorable reimbursement levels and patient’s willingness to undergo surgery with minimally invasive techniques.

Future Outlook

While the spinal fusion market is expected to see growth over the forecast period, there are several barriers that are dampening the intervention’s potential adoption levels. Most notably in the US, public payers are beginning to implement strict measures on reimbursement documentation in an effort to eliminate medically unnecessary procedures. For example, Medicare will now require spine surgeons to document prolonged periods of conservative treatment to alleviate the patient’s symptoms prior to undergoing surgery. Another market barrier is the emergence of a new class of medical device technologies that seek to capitalize on one of the persistent weaknesses of spinal fusions. Non-fusion technologies are designed to retain motion at the operated level and reduce stresses experienced by adjacent segments. This is meant to eliminate the progression of symptomatic adjacent segment disease, which still troubles spinal fusion’s effectiveness to this day.

However, despite these barriers the spinal fusion market will experience growth over the forecast. One of primary drivers is the well-known phenomenon of nearly every global economy having a larger proportion of a country’s age demographics shift toward the later years in life. This means that the potential patient population that could develop the conditions the procedure treats will increase. Another market driver is that minimally invasive techniques are being utilized
Executive Summary

during spinal fusion surgery to reduce the damage done to the patient while maintaining or improving surgeon visualization. Studies have found that these techniques result in faster return to work/play, better long-term patient function, and a decreased hospital stay. Minimally invasive techniques have appealed to spinal surgery candidates and have increased the patient population to include people that would have declined the operation given its invasiveness and risks.

What Do Physicians Think?

One of the major barriers affecting the spinal fusion market in the US is the increasing public payer scrutiny of the procedure being overused. Medicare has made its criteria for reimbursement much more stringent.

“They have very tight rules and [they are] even hard enough for a surgeon to read. It goes down as tight as if you fuse for a 3mm instability you are committing fraud but 4mm instability is okay.”

- Key Opinion Leader

Non-compliance with these measures has worried the surgical community given its dramatic repercussions that will follow.

“But not only do you pay back the professional fee but the hospital has to pay back the hospital fee and anything that is wheeled in around the surgery (i.e., surgery, rehab, PT, imaging, or complication), all have to get paid back. It’s a full payback. So for those in the know this has been concerning. It has been rolled back but there has been substantial education within the community that you better have your ducks in a row.”

- Key Opinion Leader

However, this increased payer scrutiny has only been seen in the US. Surgeons in the other countries covered in the report have not seen the same reimbursement push back.

“There are no restrictions concerning indications, and pretty much every surgeon – either working in the private sector or the hospital, public hospital – will be able to operate on whatever he thinks needs to be operated on.”

- Key Opinion Leader

Surgeons across the covered geographies would agree that health insurance agencies are dictating the techniques that they utilize.

“I think that the problem is that technology is not driving this anymore, it’s the government.”

- Key Opinion Leader
Executive Summary

This is especially true with minimally invasive techniques. The current reimbursement structure does not incentivize surgeons to perform spinal fusions with this technique.

“Today, there is no reimbursement difference between, let’s say a single-level TLIF, done minimally invasively or open, concerning the reimbursement. That means that the hospital and the surgeon will earn exactly the same money.”

- Key Opinion Leader

Despite these reimbursement hurdles, medical device manufacturers continue to innovate and create more advanced spinal fusion implantables. One area of significant development is expandable interbody cages.

“These cages can adapt better to the disc space because usually the space you have to put the cage in is usually very narrow.”

- Key Opinion Leader

Despite the long history and technological advancements in spinal fusion procedures, the degree of fusion remains a fundamental issue.

“In terms of medical development] everything that goes in the path of enhancing bone fusion I think would be helpful. I know there have been many issues about BMP in the United States but I think that those kind of products, I think that we have to continue with the biologic side of bone fusion to try to help us help our patients fuse faster and better.”

- Key Opinion Leader

While spinal fusion surgery has several medically necessary indications, there are some conditions in which the surgery has recently been found to not achieve desirable patient outcomes.

“All of us would probably tell you that spinal fusion for axial back pain (or neck pain) has a poor outcomes track record.”

- Key Opinion Leader

However there are other indications that have seen immense adoption by spinal surgeons recently that have a much better track record.

“I think there is ample evidence that the biggest growth in fusion are in patients who have neurogenic claudication or spinal stenosis secondary to a primary instability. They have got a 350% growth rate since 1997 through 2007. Yeah, the clinical outcomes for that indication are good.”

- Key Opinion Leader
# Table of Contents

1 Table of Contents ....................................................................................................................... 6

1.1 List of Tables .................................................................................................................... 10

1.2 List of Figures ................................................................................................................... 13

2 Introduction ............................................................................................................................... 15

2.1 Overview ........................................................................................................................... 15

2.2 Catalyst............................................................................................................................. 15

3 Industry Overview ..................................................................................................................... 17

3.1 Indications......................................................................................................................... 17

3.2 Types of Devices .............................................................................................................. 19

3.2.1 Spinal Plating Systems .................................................................................................. 19

3.2.2 Interbody Cages ............................................................................................................ 20

3.2.3 Pedicle Screw Systems ................................................................................................. 21

3.3 Procedure Trends ............................................................................................................. 22

3.3.1 US ................................................................................................................................. 22

3.3.2 5EU ............................................................................................................................... 24

3.3.3 South America ............................................................................................................... 29

3.3.4 APAC ............................................................................................................................ 31

3.4 Market Access .................................................................................................................. 36

3.4.1 Regulation ..................................................................................................................... 36

3.4.2 Adoption ........................................................................................................................ 42

3.4.3 Reimbursement Trends ................................................................................................. 48

4 Market Dynamics: Mergers, Acquisitions and Key Partnerships ................................................ 52

4.1 Overview........................................................................................................................... 52

4.1.1 Amedica Corporation Acquires US Spine ...................................................................... 53

4.1.2 Alphatec Spine Acquires Scient’x Group ....................................................................... 53

4.1.3 Biomet Acquires Lanx, Inc. .......................................................................................... 53
# Table of Contents

4.1.4 Globus Medical Acquires Facet Solutions ................................................................. 53  
4.1.5 Integra LifeSciences Holdings Corporation Acquires SeaSpine, Inc. ......................... 54  
4.1.6 Medtronic Acquires Advanced Medical Technologies and China’s Kanghui ............. 54  
4.1.7 Nuvasive Acquires ANC ............................................................................................ 54  
4.1.8 TranS1 Inc. Acquires Baxano Inc. .............................................................................. 54  
4.2 Economic Impact .......................................................................................................... 55  

5 Unmet Needs .................................................................................................................. 58  
5.1 Improved Reimbursement Coverage for Minimally Invasive Surgical Procedures ....... 58  
5.2 Lack of Definitive Methods to Determine Fusion Performance ................................... 59  
5.3 Technological Developments in the Use of Long Fusions ........................................... 59  
5.4 Research and Development into Fusion Enhancers ..................................................... 61  
5.5 Improve Osseointegration of Bone and Screw Interface ............................................. 62  

6 Market Opportunity Analysis ....................................................................................... 64  
6.1 Develop Signature Minimally Invasive Technique ...................................................... 64  
6.2 Market Minimally Invasive Training Opportunities to Fellowship Programs ................ 65  
6.3 Increased Collaboration of Medical Device Implants and Biologics ......................... 66  
6.4 Develop a Device that Provides Real-Time Fusion Updates ..................................... 67  
6.5 Increased Customization of Spinal Implants to Patient Anatomy ............................... 67  

7 Market Drivers ............................................................................................................... 69  
7.1 Aging Patient Populations ......................................................................................... 69  
7.2 Growth in the Spinal Stenosis Indication .................................................................... 71  
7.3 Gold Standard for Treating Spinal Instability and Degenerative Conditions ................ 73  
7.4 Treatment for a Variety of Indications ....................................................................... 73  
7.5 Preference for Minimally Invasive Techniques ......................................................... 74  
7.6 Advances in Navigation Technology ......................................................................... 76  

8 Market Barriers ............................................................................................................. 77  
8.1 Incidence of Adjacent Segment Disease .................................................................... 77
## Table of Contents

8.2 Performance of Non-Fusion Technologies ................................................................. 77
8.3 Increased Scrutiny over Spinal Fusion’s Necessity in the US ................................... 79
8.4 Restricted Reimbursement from Private Payers .......................................................... 80
8.5 Performance in Treating Axial Back Pain ................................................................. 81

9 Pipeline Assessment ......................................................................................................... 82

10 Clinical Trial Analysis ................................................................................................... 85

11 Current and Future Players ............................................................................................. 87

11.1 Overview ..................................................................................................................... 87
11.2 Trends in Corporate Strategy ...................................................................................... 87
11.3 Company Profiles ........................................................................................................ 87
11.3.1 Aesculap ................................................................................................................... 87
11.3.2 Alphatec Spine ......................................................................................................... 90
11.3.3 Amedica Corporation ............................................................................................... 93
11.3.4 Medtronic Spinal and Biologics .............................................................................. 95
11.3.5 DePuy Spine ........................................................................................................... 98
11.3.6 Globus Medical ....................................................................................................... 100
11.3.7 K2M ....................................................................................................................... 103
11.3.8 Biomet ..................................................................................................................... 105
11.3.9 Stryker .................................................................................................................... 108
11.3.10 Zimmer .................................................................................................................. 111
11.3.11 Nuvasive ............................................................................................................... 115
11.3.12 Orthofix ............................................................................................................... 118
11.3.13 Integra LifeSciences ............................................................................................. 121

12 Market Outlook .............................................................................................................. 125

12.1 Company Market Share .............................................................................................. 125
12.1.1 US ............................................................................................................................ 125
12.1.2 EU ........................................................................................................................... 126
# Table of Contents

12.1.3 APAC .......................................................................................................................... 128  
12.1.4 South America ............................................................................................................. 129  
12.2 By Segment .................................................................................................................... 130  
12.2.1 Spinal Plating Systems ............................................................................................. 130  
12.2.2 Interbody Cages ......................................................................................................... 132  
12.2.3 Pedicle Screw Systems ............................................................................................ 133  
12.3 By Geography ................................................................................................................. 135  
12.3.1 Global .......................................................................................................................... 135  
12.3.2 US ............................................................................................................................... 136  
12.3.3 France ......................................................................................................................... 138  
12.3.4 Germany ..................................................................................................................... 139  
12.3.5 Italy ............................................................................................................................ 141  
12.3.6 Spain ........................................................................................................................... 142  
12.3.7 UK ............................................................................................................................... 144  
12.3.8 Japan .......................................................................................................................... 145  
12.3.9 Brazil .......................................................................................................................... 147  
12.3.10 China .......................................................................................................................... 148  
12.3.11 India ........................................................................................................................... 150  

13 Appendix .......................................................................................................................... 152  
13.1 Bibliography .................................................................................................................... 152  
13.2 Abbreviations .................................................................................................................. 162  
13.3 Report Methodology ........................................................................................................ 163  
13.3.1 Overview ..................................................................................................................... 163  
13.3.2 Coverage .................................................................................................................... 163  
13.3.3 Primary Research ....................................................................................................... 163  
13.3.4 Secondary Research ................................................................................................... 164  
13.3.5 Forecasting Methodology ............................................................................................ 165
Table of Contents

13.4 Key Opinion Leaders Included in this Study ................................................................. 166
13.5 About the Authors .......................................................................................................... 167
  13.5.1 Joseph A. Gregory, Analyst, Surgical Devices ......................................................... 167
  13.5.2 Derek Archila, MBA, Director of Research and Analysis, Medical Devices ......... 167
13.6 Global Head of Healthcare ............................................................................................ 168
  13.6.1 Bonnie Bain, Ph.D., Global Head of Healthcare ...................................................... 168
13.7 About MediPoint ............................................................................................................ 169
13.8 About GlobalData .......................................................................................................... 169
13.9 Disclaimer ...................................................................................................................... 169

1.1 List of Tables

Table 1: Indications for Lumbar Spinal Fusion .................................................................. 18
Table 2: Adoption of Spinal Fusion and Spinal Non-Fusion, US, 2013 and 2020 ............. 23
Table 3: Adoption of Spinal Fusion and Spinal Non-Fusion, 5EU, 2013 and 2020 .......... 24
Table 4: Spinal Plating Systems CAGR, 5EU, Based on 2013 and 2020 Procedure Volumes ...................................................................................................................... 25
Table 5: Interbody Cages CAGR, 5EU, Based on 2013 and 2020 Procedure Volumes ........ 26
Table 6: Pedicle Screw Systems CAGR, 5EU, Based on 2013 and 2020 Procedure Volumes .......................................................................................................................... 28
Table 7: Adoption of Spinal Fusion and Spinal Non-Fusion, Brazil, 2013 and 2020 .......... 30
Table 8: Adoption of Spinal Fusion and Spinal Non-Fusion, APAC, 2013 and 2020 ........ 32
Table 9: Spinal Plating Systems CAGR, APAC, Based on 2013 and 2020 Procedure Volumes ............................................................................................................................ 32
Table 10: Interbody Cages CAGR, APAC, Based on 2013 and 2020 Procedure Volumes ... 34
Table 11: Pedicle Screw Systems CAGR, APAC, Based on 2013 and 2020 Procedure Volumes ............................................................................................................................. 35
Table 12: Adoption of Spinal Implants for Cervical Fusion Procedures, 5EU, 2013 ......... 44
Table 13: Adoption of Spinal Implants for Thoracolumbar Fusion Procedures, 5EU, 2013 .. 45
Table 14: Adoption of Spinal Implants for Cervical Fusion Procedures, APAC, 2013 ...... 47
Table of Contents

Table 15: Adoption of Spinal Implants for Thoracolumbar Fusion Procedures, APAC, 2013 ......................... 48
Table 16: Mergers & Acquisitions, 2010–2014 ........................................................................................................ 52
Table 17: Population Aged 60 Years Old or Over, 1950–2050 (in millions) (percentage in older ages) .......... 69
Table 18: Overall Perceived Advantages of Minimally Invasive Surgery Techniques, 2007 ......................... 75
Table 19: Overall Perceived Limitations of Minimally Invasive Surgery Techniques, 2007 ......................... 75
Table 20: Company Portfolio – Aesculap .............................................................................................................. 88
Table 21: Product Portfolio – Aesculap ................................................................................................................ 89
Table 22: Company Portfolio – Alphatec Spine ................................................................................................ 91
Table 23: Product Portfolio – Alphatec Spine ..................................................................................................... 92
Table 24: Company Portfolio – Amedica ............................................................................................................. 94
Table 25: Product Portfolio – Amedica ................................................................................................................ 95
Table 26: Company Portfolio – Medtronic Spinal and Biologics ..................................................................... 96
Table 27: Product Portfolio – Medtronic Spinal and Biologics ........................................................................ 97
Table 28: Company Portfolio – DePuy Spine .................................................................................................. 99
Table 29: Product Portfolio – DePuy Spine ....................................................................................................... 99
Table 30: Company Portfolio – Globus Medical ............................................................................................ 101
Table 31: Product Portfolio – Globus Medical ................................................................................................. 102
Table 32: Company Portfolio – K2M .................................................................................................................. 104
Table 33: Product Portfolio – K2M .................................................................................................................... 104
Table 34: Company Portfolio – Biomet ............................................................................................................ 106
Table 35: Product Portfolio – Biomet ............................................................................................................... 107
Table 36: Company Portfolio – Stryker ............................................................................................................ 109
Table 37: Product Portfolio – Stryker ............................................................................................................... 110
Table 38: Company Portfolio – Zimmer ......................................................................................................... 113
Table of Contents

Table 39: Product Portfolio – Zimmer ................................ ................................ ................................ ........ 114
Table 40: Company Portfolio – Nuvasive ................................ ................................ ................................ ... 116
Table 41: Product Portfolio – Nuvasive ................................ ................................ ................................ ..... 117
Table 42: Company Portfolio – Orthofix ................................ ................................ ................................ ..... 119
Table 43: Product Portfolio – Orthofix ................................ ................................ ................................ ........ 120
Table 44: Company Portfolio – Integra LifeSciences ................................ ................................ ................. 122
Table 45: Product Portfolio – Integra LifeSciences ................................ ................................ .................... 123
Table 47: Spinal Surgery, 5EU Company Market Share, 2012 ................................ ................................ ... 127
Table 48: Spinal Surgery, APAC Company Market Share, 2012 ................................ ................................ 128
Table 49: Spinal Surgery, South American Company Market Share, 2012 ................................ ................. 130
Table 50: Global Spinal Plating Systems Sales ($m) Forecast, 2011–2020 ................................ ............... 131
Table 51: Global Interbody Cages Sales ($m) Forecast, 2011–2020 ................................ ......................... 132
Table 52: Global Pedicle Screw Systems Sales ($m) Forecast, 2011–2020................................ ............... 134
Table 53: Global Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ .............................. 135
Table 54: US Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ................................ ... 137
Table 55: France Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ............................. 138
Table 56: Germany Spinal Fusion Sales ($m) Forecast, 2011–2020................................ .......................... 140
Table 57: Italy Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ................................ . 141
Table 58: Spain Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ............................... 143
Table 59: UK Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ .............................. 144
Table 60: Japan Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ............................... 146
Table 61: Brazil Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................ ............................... 147
Table 62: China Spinal Fusion Sales ($m) Forecast, 2011–2020............................................................. 149
Table of Contents

Table 63:  India Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 150

1.2 List of Figures

Figure 1:  Spinal Fusion Procedure Volumes, US, 2011–2020 ................................................................. 23
Figure 2:  Spinal Plating Procedure Volumes, 5EU, 2011–2020 ................................................................. 25
Figure 3:  Interbody Cages Procedure Volumes, 5EU, 2011–2020 ............................................................... 27
Figure 4:  Pedicle Screw Systems Procedure Volumes, 5EU, 2011–2020 ....................................................... 29
Figure 5:  Spinal Fusion Procedure Volumes, Brazil, 2011–2020 ................................................................. 31
Figure 6:  Spinal Plating Procedure Volumes, APAC, 2011–2020 ................................................................. 33
Figure 7:  Interbody Cages Procedure Volumes, APAC, 2011–2020 .............................................................. 34
Figure 8:  Pedicle Screw Systems Procedure Volumes, APAC, 2011–2020 ................................................... 36
Figure 9:  Adoption of Spinal Implants for the Fusion Procedures, US, 2013 ................................................. 43
Figure 10: Adoption of Spinal Implants for the Fusion Procedures, South America, 2013 ......................... 46
Figure 11: Spinal Fusion Procedure Volumes, US, 2002–2011 ................................................................. 56
Figure 12: Spinal Surgery, US Company Market Share, 2012 ................................................................. 126
Figure 13: Spinal Surgery, 5EU Company Market Share, 2012 ................................................................. 127
Figure 14: Spinal Surgery, APAC Company Market Share, 2012 ................................................................. 129
Figure 15: Spinal Surgery, South American Company Market Share, 2012 .................................................. 130
Figure 16: Global Spinal Plating Systems Sales ($m) Forecast, 2011–2020 .................................................. 131
Figure 17: Global Interbody Cages Sales ($m) Forecast, 2011–2020 ......................................................... 133
Figure 18: Global Pedicle Screw Systems Sales ($m) Forecast, 2011–2020 ................................................. 134
Figure 19: Global Spinal Fusion Sales ($m) Forecast, 2011–2020 ............................................................... 136
Figure 20: US Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 137
Figure 21: France Spinal Fusion Sales ($m) Forecast, 2011–2020 ............................................................... 139
Table of Contents

Figure 22: Germany Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 140
Figure 23: Italy Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 142
Figure 24: Spain Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 143
Figure 25: UK Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 145
Figure 26: Japan Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 146
Figure 27: Brazil Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 148
Figure 28: China Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 149
Figure 29: India Spinal Fusion Sales ($m) Forecast, 2011–2020 ................................................................. 151
Introduction

2 Introduction

2.1 Overview

Spinal fusion surgery is a well-established procedure that has been performed since the early 1900s. The procedure has benefited immensely from its long history of use, investments in advancing technologies, and its clinical success in a growing variety of spinal conditions. These traits have led spinal fusion surgery to become one of the most frequently performed surgeries in the United States, undoubtedly the largest geographic market for this procedure. Given the global phenomenon of an aging society and the associated increasing incidences of degenerative spinal conditions, the spinal fusion market is expected to remain strong over the forecast period.

This market encompasses a variety of implantable medical technologies, where multiple devices can be utilized in a single procedure. For this research report, the three leading device categories are covered: spinal plating systems, interbody cages, and pedicle screw systems. Additionally, the specific anatomical regions being operated on are covered, including cervical and thoracolumbar. Furthermore, this report analyzes the adoption of these implantables in single-, double-, and triple-level surgeries, creating the most comprehensive and accurate market valuations and coverage. The report analyzes how these surgical trends vary in the major global markets, the United States (US), France, Germany, Italy, Spain, the United Kingdom (UK), Japan, Brazil, China, and India.

2.2 Catalyst

Spinal fusion surgeries have experienced immense growth in the major developed economies. In the US, for example, the number of spinal fusion procedures increased 77% between 1996 and 2001. This growth rate is even larger than two of the most frequently performed orthopedic surgeries; during the same period, hip replacement surgeries grew 13% and knee arthroplasties grew 14%. The medical necessity of these procedures has remained relatively unquestioned by health regulators and insurance agencies in the US for a large portion of the procedure’s history. Recently, this procedure has been under scrutiny as the burden to the healthcare system increases, and the medical necessity of some procedures has been questioned. Significant measures are being put into place that seek to curb procedures with questionable medical importance. Additionally, the market for the procedure, in general, has been impacted by the emergence of a new class of technologies that aim to capitalize on the intervention’s most frequently cited weaknesses: imperfect fusion rates and adjacent segment disease. While the
Introduction

procedure has seen great clinical success, the degree of fusion obtained and the impact of the procedure on adjacent levels have led researchers and companies to develop devices that retain the motion at the operated level, which and minimizes the negative impacts on the adjacent levels. Given the presence of these significant market barriers, and in light of the globally expanding patient base, the spinal fusion market is dynamic and ever-evolving, necessitating up-to-date market analysis for all players involved.
Appendix

13.7 About MediPoint

MediPoint is the flagship product for GlobalData’s Medical team. Each MediPoint report is built from the ground up by our team of healthcare analysts in the US and UK. Each report includes input from experienced physicians and leading Key Opinion Leaders (KOL). Running throughout each report in the series, “What Physicians Think” quotes provide a unique insight into how healthcare professionals are reacting to events within the industry, and what their responses could mean for industry strategists.

13.8 About GlobalData

GlobalData is a leading global provider of business intelligence in the Healthcare industry. GlobalData provides its clients with up-to-date information and analysis on the latest developments in drug research, disease analysis, and clinical research and development. Our integrated business intelligence solutions include a range of interactive online databases, analytical tools, reports and forecasts. Our analysis is supported by a 24/7 client support and analyst team. GlobalData has offices in New York, Boston, London, India and Singapore.

13.9 Disclaimer

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