

Preclinical CRO Services Demand Outlook, Customer Purchasing Behavior and Competitor Benchmarking **Syndicated Research Report** SAMPLE PAGES

October 2025

About the Authors



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Mr. Meyer is a Founder and Managing Member with the Life Science Strategy Group, LLC (LSSG). Mr. Meyer leads LSSG's biopharmaceutical services consulting division which serves the leading global contract research organizations (CROs), contract drug manufacturing organizations (CDMOs), drug discovery and diagnostics companies globally across all phases of the biopharmaceutical discovery, development and commercialization lifecycle.

Prior to LSSG, Mr. Meyer was a Director in the Life Sciences Division at Navigant Consulting, Inc. and conducted preclinical drug development in the department of inflammatory disease at Roche Bioscience. Mr. Meyer holds Masters Degrees in Biomedical Science and Business Administration.



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Mr. Graham is a Senior Consultant with Life Science Strategy Group (LSSG), where he provides operational support and delivers strategic insights to the firm's consulting teams. He has extensive experience leading and collaborating on engagements across the biopharmaceutical value chain from discovery and preclinical development through commercialization. His core expertise spans data analysis, project management, and strategic execution within the life sciences sector. Mr. Graham holds dual Bachelor's degrees in Biological Sciences and Economics from the University of California, Davis.

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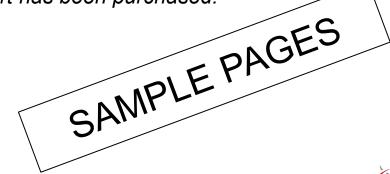
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Report Methodology

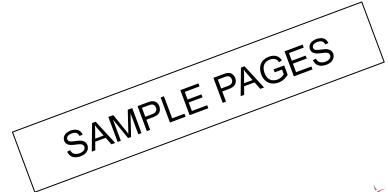
Methodology

The primary research for this report was fielded via an internet survey in September 2025 and draws from N=150 biopharmaceutical industry professionals from the United States and Europe responsible for preclinical development and services outsourcing across a variety of activities. Respondent position titles include Director/Senior Director, Vice President and C-Suite with functional responsibilities in preclinical development. All study participants were prescreened by LSSG to ensure a high level of involvement, knowledge, and decision-making influence or authority for preclinical services outsourcing to CROs. This included confirming consistency of answers for related questions, validation of companies, and knowledge-based quality control questions.

LSSG also included its experience and knowledge about the global biopharmaceutical and CRO industries, preferences and outsourcing practices.

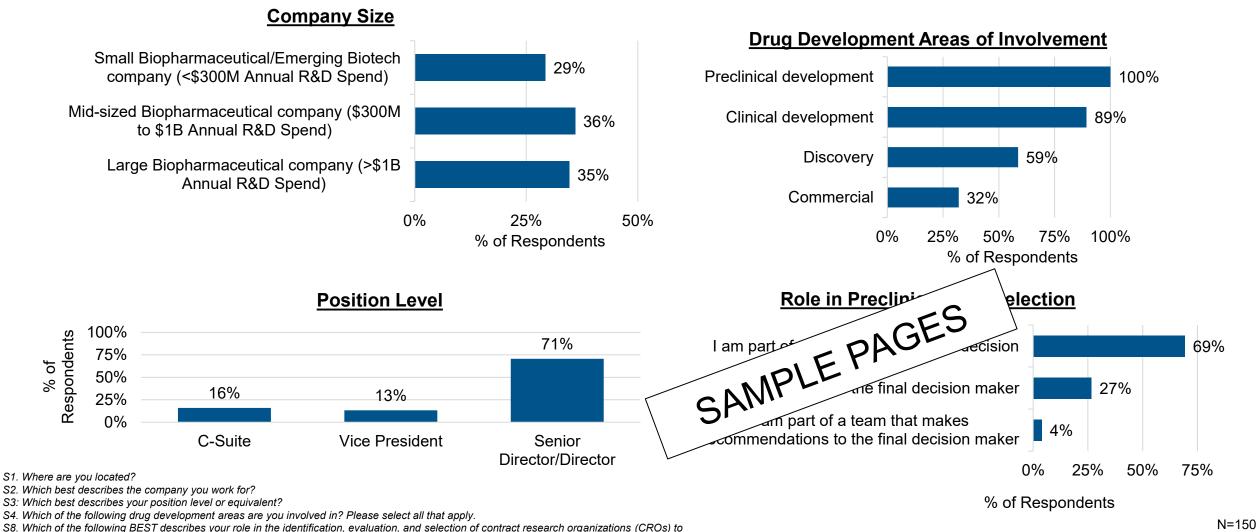
All data analysis and reporting was performed by LSSG consultants with significant ment data (geographic and company size) noted in the report. All segment data is purchase.

III. Demographics



Respondent Demographics

All respondents work in Biopharmaceutical or Biotech companies in North America (58%) or Europe (42%) and visibility into external spend with preclinical CROs in 2025.

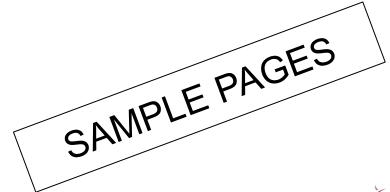


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S7. Does your budget responsibility include visibility into external spend with preclinical CROs in 2025?

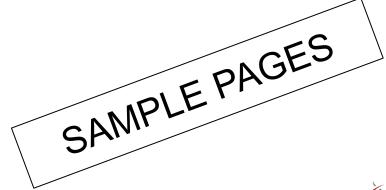
support your company's preclinical development needs?

IV. Detailed Findings



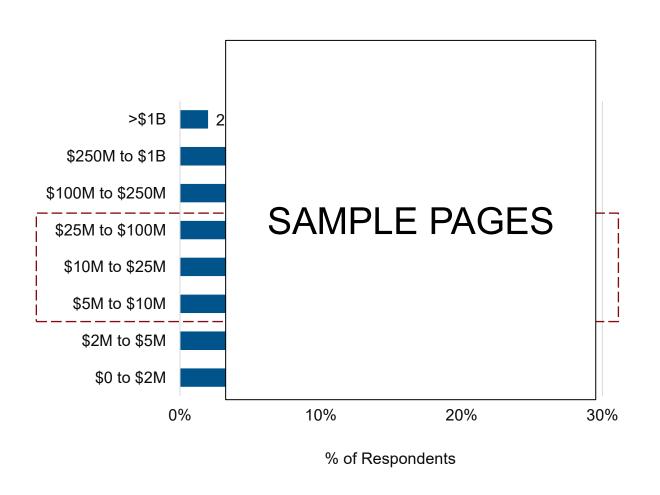


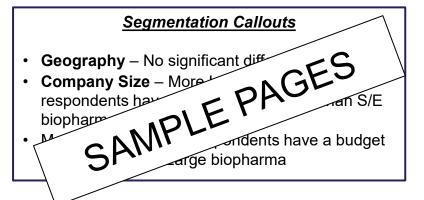
Preclinical Outsourcing Demand and Expected Growth



Estimated preclinical budgets for 2025 primarily fall between \$X Million to \$Y Million with ZZ biopharma more likely to have budgets above \$XXM than YY biopharma.

Estimated Preclinical Budget for 2025

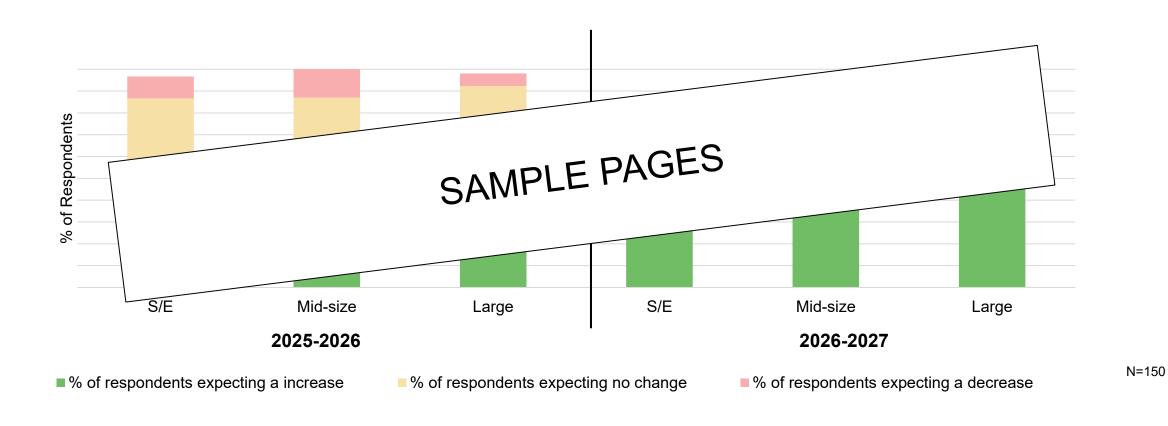




N=150

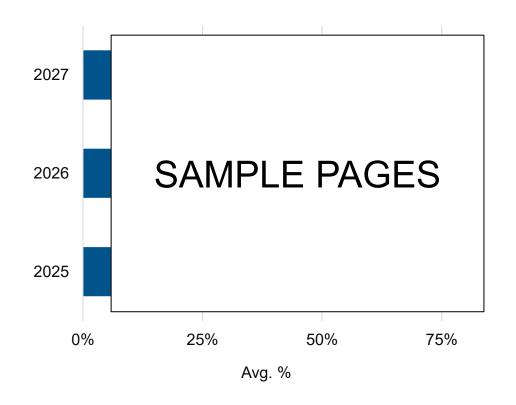
From 2025 to 2026, more XX biopharma respondents expect increases in preclinical budgets than YY and ZZ biopharma respondents.

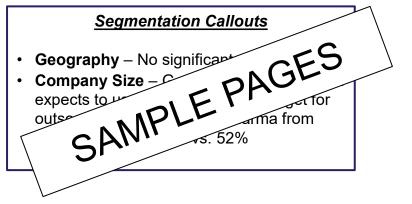
Expected Change in Preclinical Budgets Over Time – By Company Size



Respondents currently allocate XX of their preclinical budgets to CROs/vendors with this percentage expected to remain YY in the next two years.

% of Preclinical Budget Outsourced to CROs/Vendors Over Time

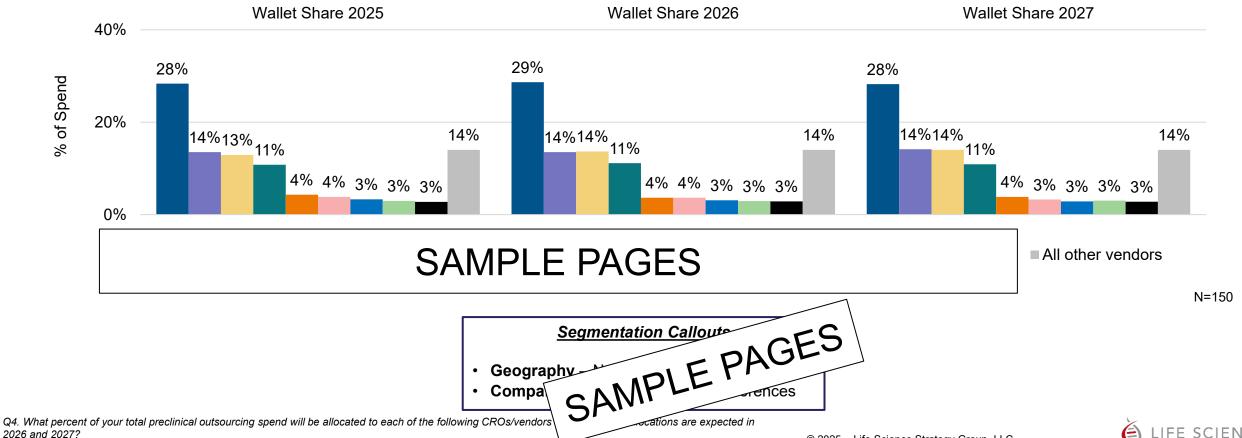




N=150

Preclinical outsourcing spend across CROs/vendors is expected to remain XX over the next two years, with YY accounting for roughly ZZ of the wallet share, followed by AA, BB, and CC.

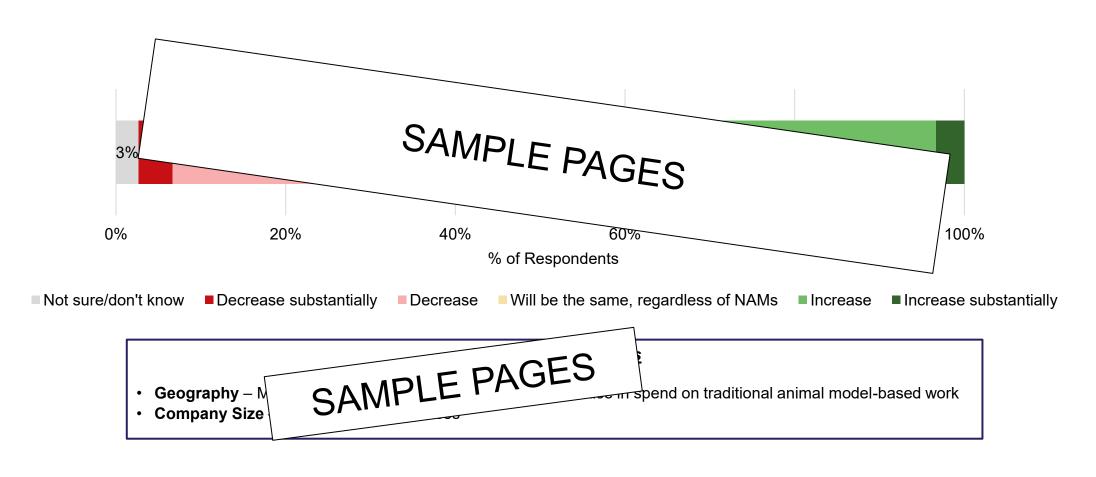
Preclinical Outsourcing Wallet Share Over Time



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Respondents are XXed on how NAMs will impact spend on traditional animal-based models, with YY expecting spend to decrease, ZZ predicting no change, and about AA anticipating an increase.

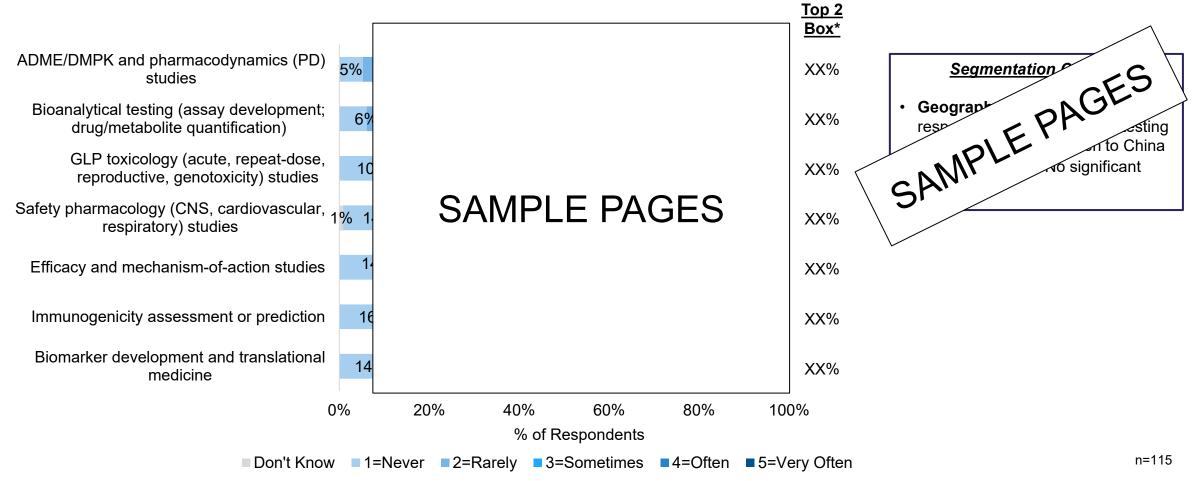
Impact of NAMs on Spend for Traditional Animal Model-Based Preclinical Work



N=150

Preclinical services are XX outsourced to China in general, with AA and BB being outsourced to China more frequently than other preclinical services.

<u>Frequency of Preclinical Services Outsourced to China</u>



*Top-2 Box = Sum of options 4 & 5.



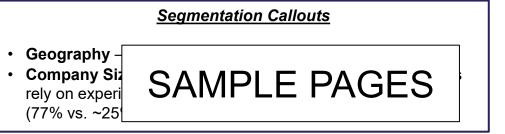
Customer Purchasing Behavior and Vendor Selection



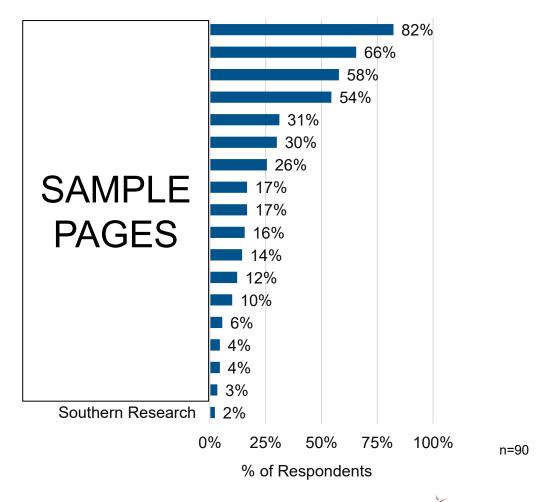
More than XX of respondents report their company maintains a preferred vendor list, while YY% are required to select vendors "On-List". Among those with preferred vendor lists, AA is cited most often, followed by BB, CC, and DD.

Use of Preferred Vendors Lists

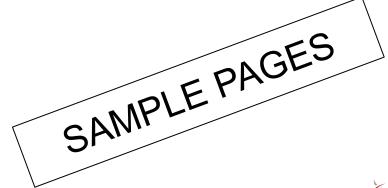
We are required to use vendors from our preferred list and rarely make exceptions SAMPLE We have a preferred list but can choose off-list vendors when there's a strong **PAGES** justification We don't use a preferred list and select vendors based on experience, referrals, fit, etc. 0% 25% 50% 75% % of Respondents N=150



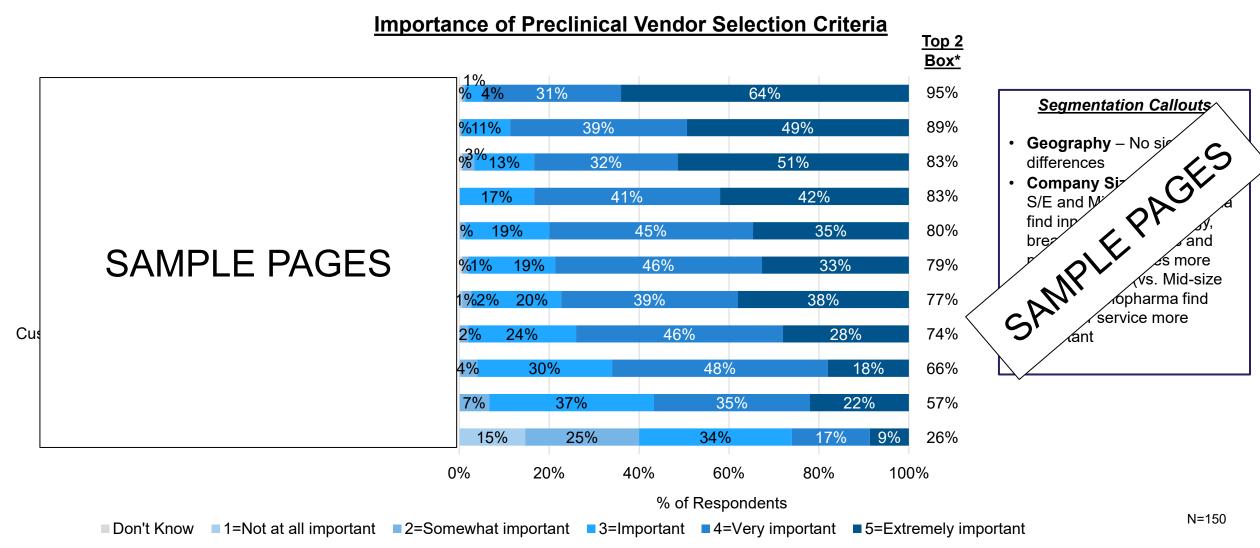
Vendors on Preferred Lists



Preclinical Vendor Performance and Brand Benchmarking



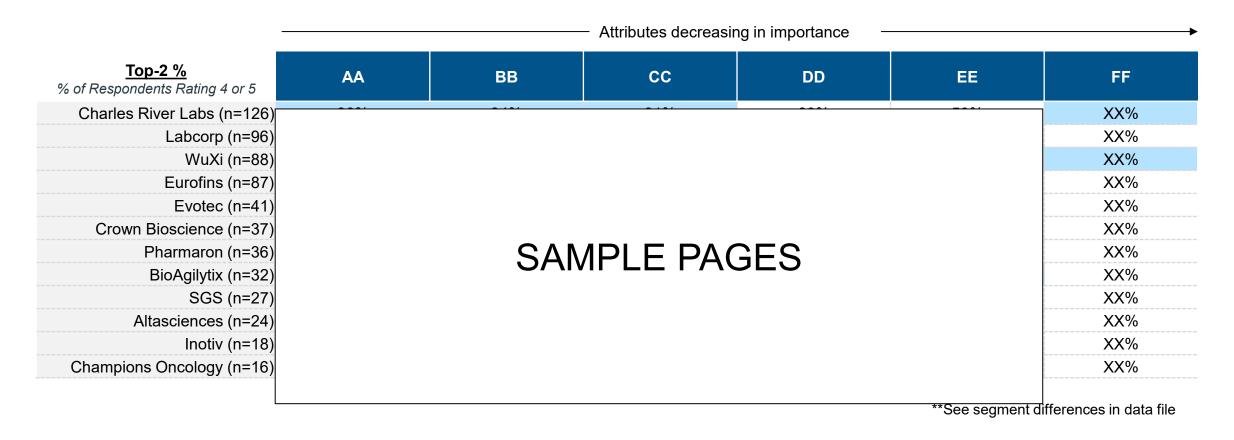
XX is the most important preclinical vendor selection criteria, followed by YY, ZZ, and AA.



*Top-2 Box = Sum of options 4 & 5.

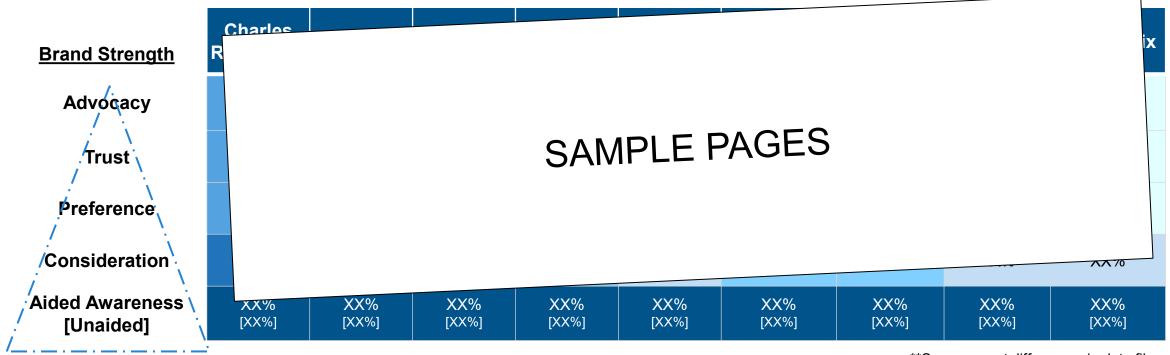
XX has the highest perceived performance across the most important selection criteria (AA, BB, and CC), while YY scores highest for less important attributes.

Preclinical Vendor Performance^



AA has the strongest overall brand strength across consideration, preference, trust, and advocacy, followed by BB, CC, and DD.

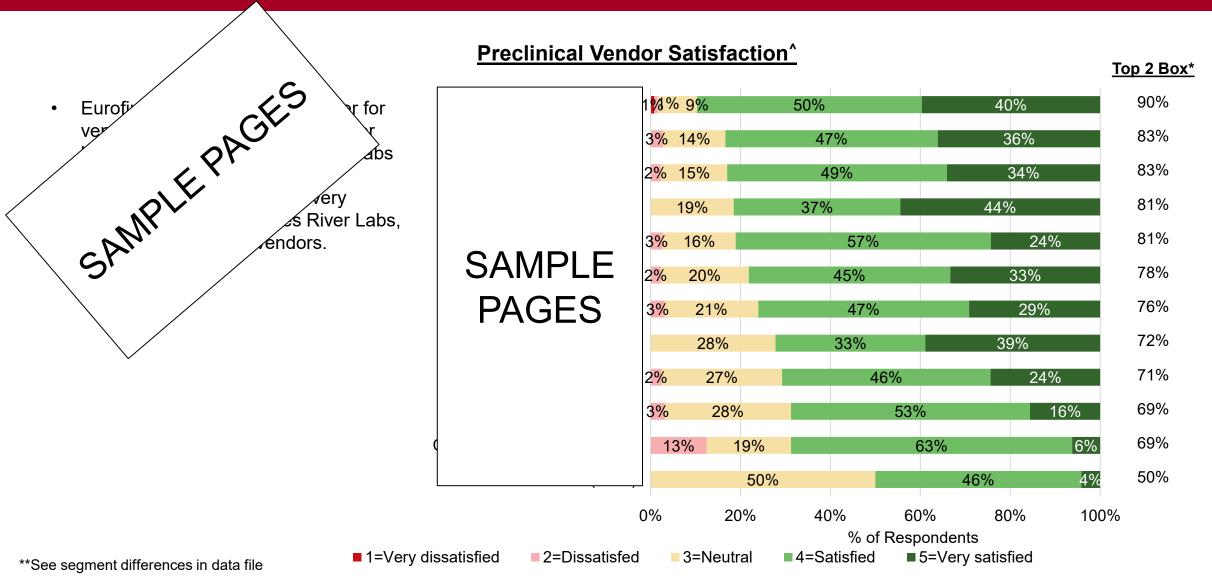
Brand Strength - Preclinical Vendors



**See segment differences in data file

N=150

AA scores highest for vendor satisfaction, followed by BB, CC, DD, and EE.



Q25. How would you rate your overall satisfaction (e.g., based on your experience, quality etc.) with each of the following preclinical services vendors? Please rate on a scale from 1 to 5 where 1=Very dissatisfied, 2=Dissatisfied, 3=Neutral, 4=Satisfied and 5=Very satisfied.

*Top 2 Box = "Satisfied" + "Extremely Satisfied"

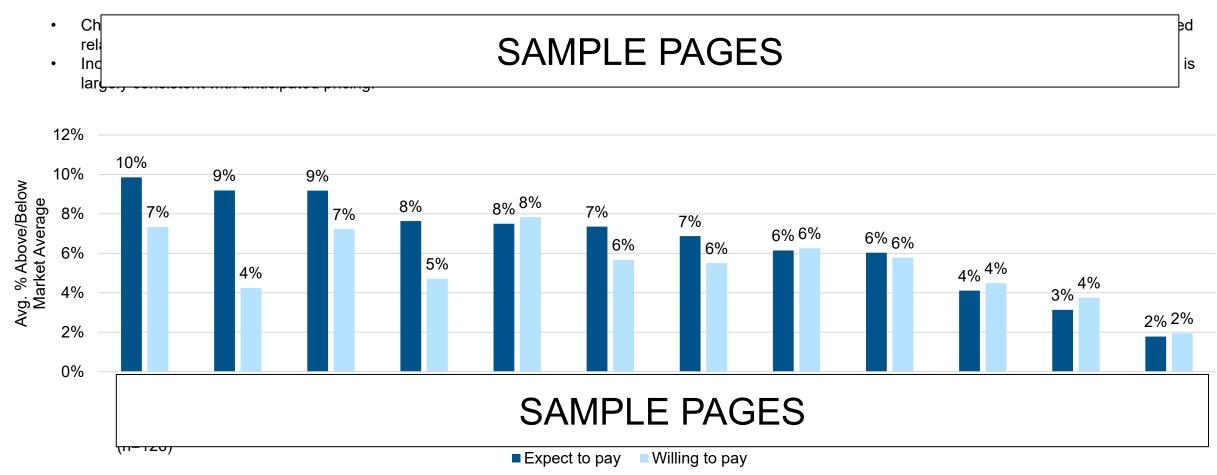
^See Directional Vendors in data file



AA and BB are relatively premium-priced vendors, with sponsors expecting to pay nearly 10% above the market average. CC captures only a modest premium, while DD sits at the bottom of the spectrum with the lowest perceived pricing relative to competitors.

Preclinical Vendor Pricing/Value

(Expect to Pay and Willing to Pay vs. Market Average)



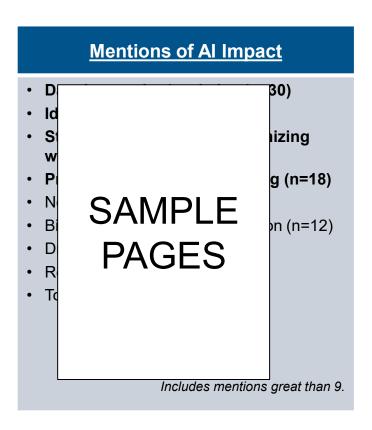
^{**}See segment differences in data file

^Vendors with n<15 excluded from analysis due to directionality



All is having the greatest impact on preclinical programs through AA and BB, followed by CC, DD, and EE.

Greatest Impacts of AI on Preclinical Development Programs



"Faster data handling, predictive modelling, data integration, model selection"

- Sr Director/Director, Biopharma-Large EU

"Data flow and vendor data analysis, and comparisons with previous studies"

- Sr Director/Director, Biopharma-Mid EU

"The greatest impact today is in predictive toxicology/ADME, AI-assisted PK/PD modeling, and biomarker data analysisareas that cut study time, reduce animal use."

- Sr Director/Director, Biopharma-Mid EU

"Predict outcomes with greater accuracy, and accelerate the identification and optimization of drug candidates"

- Sr Director/Director, Biopharma-Mid NA

"Target identification and validation, preclinical safety and toxicology prediction" - Vice President, Biopharma-Mid EU

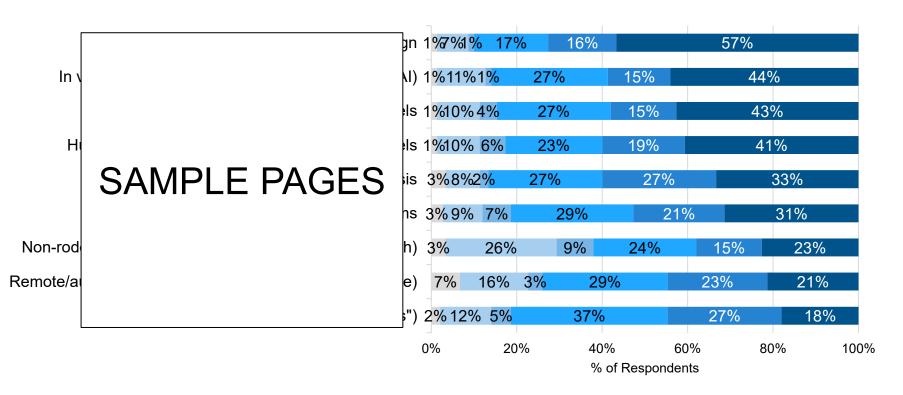
"Organization of work flow, predictions based on in silico modeling/data integration to refine study designs and focus on specific risk mitigation elements"

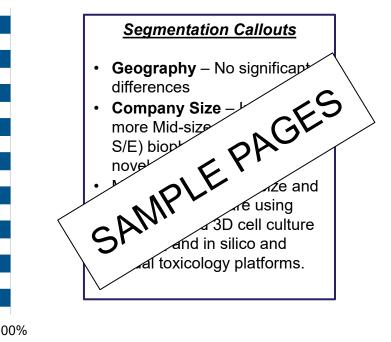
- C-suite, Biopharma-Small NA



Outside of NAMs, AA is the novel preclinical method most used or in process of being implemented, followed by BB, CC, and DD.

Use of Novel Preclinical Methods





■Don't know ■Not used/not planning to use ■Used in the past but no longer using ■Considering for future use ■In process of implementing within the next 12 months ■Currently using

N=150

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VI. About Life Science Strategy Group, LLC



About Life Science Strategy Group, LLC

Life Science Strategy Group, LLC (LSSG) is a life science consultancy specializing in strategic consulting and market research engagements across a variety of service, therapeutic and technology markets. Our core leadership team brings more than 30 years of combined experience conducting strategic consulting engagements in the following areas:

- Biopharmaceutical
- Contract Research
- Contract Drug Manufacturing
- Biotechnology
- Diagnostics
- Drug Discovery

LSSG brings extensive breadth and depth of life science knowledge combined with seasoned copy services industry market research and strategy. They provide actionable and insightful strategy. SAMPLE PAGES research.

ants specializing in the biopharmaceutical ting results backed by data-driven market

"Solid, responsive, and dependable. That's why we wor

VP Business Intelligence, Global Top-5 CRO

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