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Indian **HEALTHCARE**

Sector – poised to grow

THE LAST MILE

The Future of
Healthcare:
Smartphones

OUT OF THE BOX

Challenges and
Opportunities in
Indian Healthcare

IN FOCUS

Rural
Vs.
Urban



PLUS

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The Future of HEALTHCARE

The Indian healthcare industry is still in a developing stage with the country's robust economy and that being said that there is great divergence in the quality and coverage of medical treatment in India.

THE HEALTH CARE system in India is universal. The Indian healthcare industry has mixed service providers that include public, private and charitable healthcare service providers. Mostly, the public healthcare system comprises limited secondary and tertiary care institutions in the metro cities and focuses on providing primary healthcare services in the form of primary healthcare centres (PHCs) in rural areas. The public sectors have healthcare systems that are run by the central and state governments and the facilities provided are generally free of costs or at subsidized rates for the citizens, particularly the poor or low-income families. Conversely, the private sector provides majority of secondary, tertiary and quaternary care institutions with a major concentration in the sub-urban areas and metros cities.

The Indian healthcare industry is still in a developing stage with the country's robust economy and that being said that there is great divergence in the quality and coverage of medical treatment in India. Healthcare between states and rural and urban areas can be vastly different. Due to lack of sufficient coverage by the public healthcare

system in India, many Indians turn to private healthcare providers, although this is an option generally inaccessible to the poor. The situation is further complicated by inequality in healthcare access across the states and the demographic divisions within the population. It is abundantly clear that a status quo approach will be derisory to tackle this challenging situation. Government annual expenditure on healthcare system will need to be increased to at least 5% of GDP. Infrastructure gaps, workforce utilization and scarcity will need to be addressed and in order to achieve the Universal Health Coverage for all, the proper participation of public and private will need to work together.

India is a land full of opportunities for players in the healthcare industry. The country has also become one of the leading destinations for improved healthcare and high-end diagnostic services with tremendous capital investment offering world-class services to a greater portion of the population.

“ Let's
Not Fall
Victims
to Fraud
Be Aware ”

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JAGAT PRAKASH NADDA

UNION MINISTER, HEALTH & FAMILY WELFARE, GOVERNMENT OF INDIA

9th annual Global Healthcare Summit (GHS) 2015:

"You are leading luminaries, excelling in the medical field, contributing to make a positive impact in the healthcare sector through your dedication, commitment, knowledge and skills."

THEY SAID IT



ROUNDUP



India is cost competitive compared to its peers in Asia and Western countries. The cost of surgery in India is about one-tenth of that in the US or Western Europe.

HEALTHCARE industry in India

INDIA HAS A huge healthcare system. Healthcare services have considerably improved over some decades, however, substantial challenges still remain, particularly in rural India. Accessibility and affordability to healthcare, healthcare financing and ensuring equitable services are a major concern. It is estimated that 45% population travel more than 20 miles to access a better healthcare facility. There are many dissimilarities in the quality of public and private healthcare system as well as in the rural and urban areas. Despite this, the Indian healthcare system attracts the overseas patients and is a popular destination for medical tourists, particularly low treatment costs and high quality of its private hospitals.

According to National Family Health Survey-3, the private healthcare sector remains the prime source of health care for 70% of families in urban areas and 63% of families in rural areas. In India, one can

have numerous reasons for relying on private healthcare systems rather than the public one; the key reason at the national level is deprived quality of healthcare services in the public sector, with more than 57% of families pointing to this as the reason for a preference for the private healthcare facility. Most of the public healthcare centers in the rural areas do not have primary healthcare amenities. Therefore, the public healthcare system in the rural and remote areas relies on poor healthcare quality and on unskilled and new interns who are assigned to spend time in public healthcare centers as part of their academics. Other reasons are distance of the public healthcare facility, long queues, and inconvenient timing hours. The study conducted by IMS Institute for Healthcare Informatics in 2013, across 12 states in over 14,000 families stated a steady growth in availing the services at private healthcare facilities

DATA BRIEFING

It is estimated that **45%** population travel more than 20 miles to access a better healthcare facility.

Health and Climate Change



CLIMATE CHANGE has an important impact on our health and wellbeing. The major public health organizations of the world have said that climate change is a critical public health issue. Climate change makes many existing diseases and conditions worse. The most vulnerable people are children, the elderly, the poor, and those having existing health problems are at increased risk for health effects from climate change. For example: Air pollution; we all are familiar with the consequences of air-borne diseases, as it is considered one of the most significant cause of climate change and its adverse effect on our health. Climate change also stresses our healthcare infrastructure and services.

The healthcare sector is also just beginning to understand that climate change will have major impacts on healthcare and its services. The adverse impacts of climate change can have several health issues such as dehydration, fever, mosquito-borne diseases, water-borne diseases, cardiovascular diseases, stress-related and mental health disorders

Several steps can be taken to mitigate the adverse impacts of climate change on healthcare. All together, the government, community and individual, must do and support the adaptation and mitigation of climate change problems to create a healthier and more sustainable environment for the future. ▶

Problems in Indian

AFTER INDEPENDENCE there has been a substantial development in the healthcare system of India. Then again, the position is not much improved as per the recent study of the World Health Organization (WHO). India has positioned 112th among 190 countries in the World Health Organization's ranking of the world's healthcare systems.

Following are the major problems of healthcare system:

1. Carelessness to Rural Populace

A serious problem of India's healthcare system is the carelessness to the rural populace. As there are non-availability of primary healthcare centers and hospitals in rural areas, yet the urban bias is obvious. Today, the healthcare system is generally focused on the urban areas. According to a health information only 31.5% of hospitals and 16% hospital beds are located in rural areas where 70% of total population reside.

2. Social Inequality

The development of healthcare services has been extremely disproportionate in India. Rural, mountainous and remote areas of the country are underserved while in urban areas and metro cities, healthcare services is extremely advanced. The deprived poor people are way beyond these modern healthcare services.

3. Emphasis on Ethical Values

The healthcare system mostly depends on advanced technology and scientific research. The healthcare system has no roots in the ethical and cultural values and tradition of the people. As the cost of medical treatment is getting high, people in rural areas often choose these traditional practices and has totally neglected the preventive, pro-motive, rehabilitative and health measures.

Continued from page 7

over the last 25 years for both Outdoor and Indoor Patient services, across rural and urban areas.

After the 2014 election, and Narendra Modi, sworn in as the Prime Minister of India, the central government launched a nationwide healthcare program known as the National Health Assurance Mission (NHAM), which would facilitate each citizen with free hospitalizations and medicines, diagnostic treatments, and insurance for serious diseases. In 2015, the execution of a universal healthcare system was postponed because of some monetary concerns.

In April 2005, the government of India has launched National Rural Health Mission (NRHM) under the program National Health Mission to provide better and effective healthcare facilities to the rural people with a focus on 18 states which have poor healthcare infrastructure. While, In May 2013, the central government approved the National Urban Health Mission (NUHM) as a part of the National Health Mission to provide enhanced healthcare needs of the urban population with the focus on the urban poor, and by lessening their out-of-pocket expenses on medical treatment. ▶



Healthcare system

4. Shortage of Medical Personnel

In India unavailability of medical professionals like doctors, surgeons, nurses, caregivers, etc. are a basic problem in the healthcare sector. According to World Health Organization's Global Health Workforce Statistics, OECD, there are only 7 doctors per 10,000 population in India, the same is 25 in the USA and 15 in China. Similarly the number of hospitals and dispensaries is insufficient in comparison to our massive population.



5. Insufficient Budget for Healthcare

According to the World Health Organization Global Health Expenditure database 2014, the government of India contribution to health sector constitutes less than 2% percent of the GDP. This is quite insufficient. In India, public expenditure on health is 30% of the total health expenditure while in China, the same is 55.8% and in Sri Lanka and USA, the same is 56.1% and 48.3% respectively. Thus, one of the most leading reasons of low health standards in our country is insufficient budget for healthcare sector. It is demanded that this figure should be significantly increased to 5% in order to provide for Universal Health Coverage and Access. ▶



Quality of Healthcare

IN THE METRO CITIES, the quality of healthcare is close to and sometimes exceeds world-class standards. In India, medical professionals have the benefit of working in a vast biological zone exposing them to do treatment procedures on various kinds of diseases. The quality and amount of experience is arguably unmatched in most other countries.

Despite limited access to hi-tech diagnostic equipment in rural areas, physicians rely on their extensive expertise in rural areas. However, shortage of diagnostic equipment and absence of qualified and experienced medical practitioners to practice in rural, under-equipped and fiscally less profitable rural areas has become a big challenge.

Last year, the British Medical Journal published a report which revealed the volume of unethical and irrational practices in the Indian healthcare system. It interviewed 78 doctors and found that kickbacks for referrals, irrational drug prescribing and unnecessary interventions were common. ▶



Public and Private Healthcare Systems

IN INDIA, some of the government or public hospitals provide world-class medication and is best among the hospitals nationwide. Generally, public hospitals provide treatment at taxpayer expense. Most of the treatments and essential medicines are provided free of cost to all patients in these public hospitals. In some cases public hospitals provide treatment at nominal charges. For example, an outdoor patient card at AIIMS (one of the best hospitals in India) costs a onetime registration fee of Rs.10.

Usually, the cost of treatment in these hospitals depends on the economic condition of the patient and the services utilized by them, but these expenses are generally much less than the private sector. For instance, a BPL patient is waived full treatment costs in the public hospitals. While some patient may seek for an air-conditioned room, if they are willing to pay extra for it. Generally, the cost of basic medication and diagnostic procedures are much less in public hospitals than in private hospitals as these hospitals are funded from the central and state governments.

The non-government or private healthcare provider is another part of the Indian healthcare system. Mostly, people select these private hospitals for seeking a medical treatment as these hospitals are well equipped with world-class technologies and experienced medical professionals. In a private healthcare system, one is open to select any healthcare provider and the services they wish and then pay-out of their own pocket or through their healthcare insurer. Government does not pay reimbursement for any class of the society seeking medical attention in these private hospitals. ▶

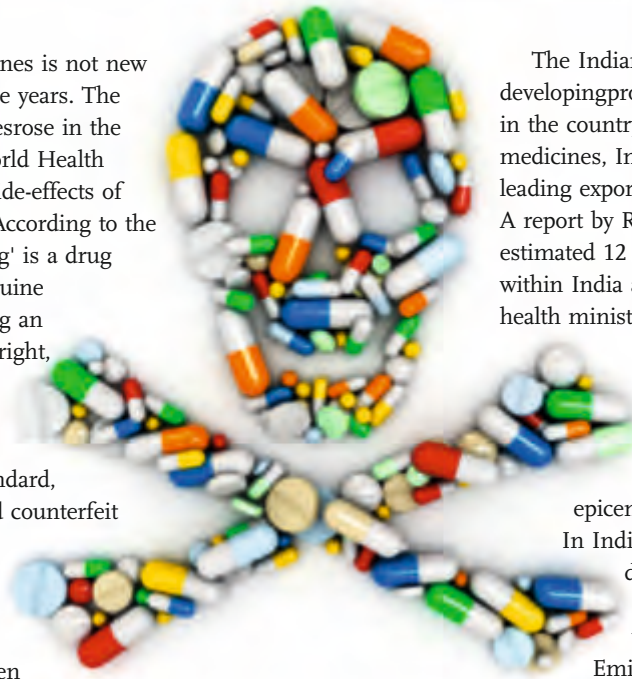


Fake medicines market forms a big portion of India's domestic drug market, and it is one of the highest growing markets in the country. Estimates indicate that fake medicines constitute nearly one-third of all drugs sold in Delhi NCR.

THE MARKET OF counterfeit medicines is not new to the world as it continues during the years. The concern over the counterfeit medicines rose in the 1980s, when the members of the World Health Organization (WHO) indicated the side-effects of counterfeit medicines in the society. According to the Black Law Dictionary 'Counterfeit drug' is a drug made by someone other than the genuine manufacturer, by copying or imitating an original product without authority or right, with a view to deceive or defraud.

World Health Organization (WHO) has given a new name to counterfeit medicines i.e. the substandard, spurious, falsely labeled, falsified and counterfeit (SSFFC) medicines. A counterfeit medicine is one which is intentionally and fraudulently mislabeled as the authentic one.

The term 'Spurious Drug' has been defined under Section 17-B of the Drugs and Cosmetics Act, 1940 as a drug which is a fake of another drug or manufactured under a name which belongs to another drug, or if it has been substituted wholly or partly by another drug or if it wrongly claims to be the product of another manufacturer.



The Indian Pharmaceutical industry is developing progressively and playing a key role in the country's economy. In the production of medicines, India is ranked 4th globally and a leading exporter of medicines around the world. A report by Rama Lakshmi suggests that an estimated 12 to 25 percent of all drugs sold within India are supposed to be counterfeit. The health ministry estimates that 5% of medicines in India are counterfeit, while 0.3% is spurious.

India, being the world's largest exporter of generic medicines, has become an epicenter for counterfeit and fake drugs. In India, most cases of fake and spurious drugs were found in Bihar, West Bengal, Uttar Pradesh and Gujarat while China, the United Arab Emirates and India witnessed the most incidences of counterfeit medicines.

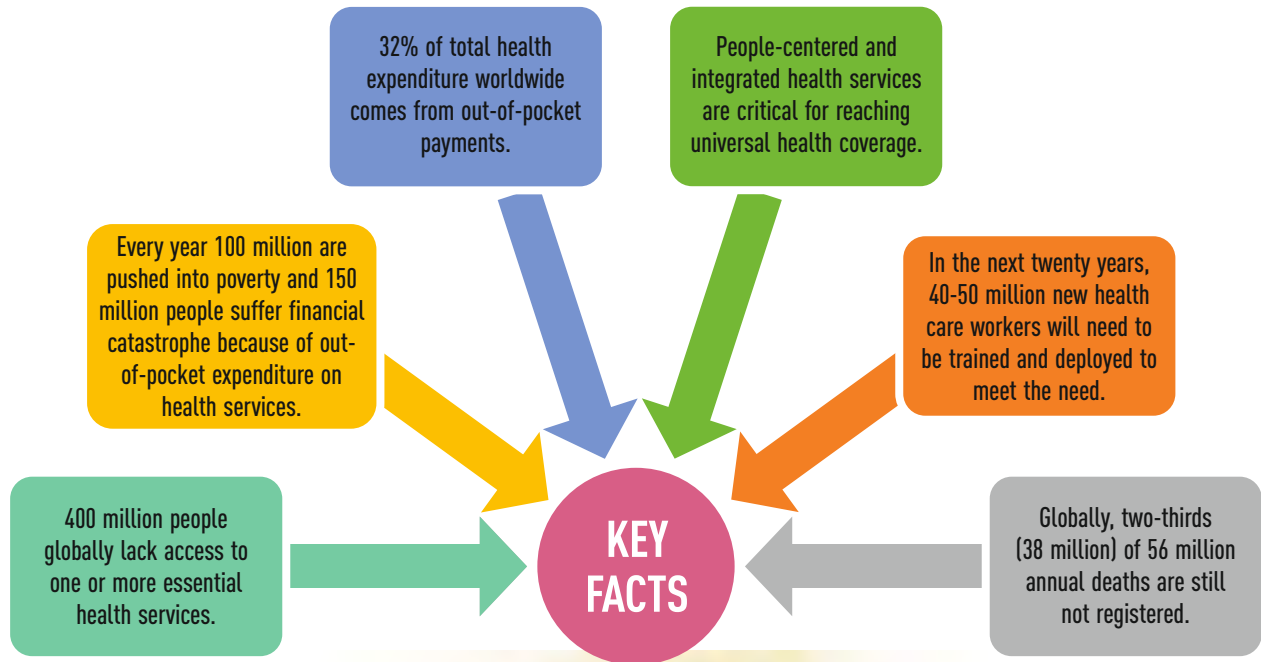
Subscribe to our fortnightly newsletter "The Prescription" for recent and informative articles from health and medicine world. Check out our latest issue at; <http://www.safemedicinesindia.in/PSMNewz/1Sep16/>



A MEDICAL PROFESSIONAL'S duty of care is the responsibility to avoid initiating harm towards a patient. If a medical professional fails to provide such responsibility, they may be charged with medical negligence.

Medical Professionals always ensure their patient's need and help them to recover soon. The duty of a medical professional includes patient's care with competence and diligence. They also hold a set of healthcare ethics, which are standards of conduct and moral conclusion. They must follow the proper decision to determine a fair amount of time and attention paid to each patient and do respect patients' decisions. They must concentrate on risk-management skills to minimize the liability during any emergency. When a nurse does not meet the standards of care, she causes a breach in her duty.

Universal Health Coverage (UHC)



UNIVERSAL HEALTH COVERAGE

(UHC) means when everyone is having the essential accessibility and affordability of the quality healthcare service around the world. It includes health promotion, diagnostic procedure, prevention and treatment, rehabilitation and consoling care.

Today, to avail a quality healthcare service, one needs to pay high out-of-their pocket. It is difficult for the poor or low-income people to pay these out-of-pocket expenses to access such advanced treatment. Thus, the main objective of UHC is to provide a quality healthcare service to poor people. Universal Health Coverage is firmly based on the 1948 WHO Constitution, which declares health a fundamental human right and commits to ensuring the highest attainable level of health for all.



In 2015, our organization (PSM India) in collaboration with IIT-Banaras has launched a healthcare initiative 'Patient Safety and Accessibility to Quality healthcare' at Varanasi.

India is a vast country, where most of the population does not have better access to medical treatment. In 2015, our organization (PSM India) in collaboration with IIT-Banaras has launched a healthcare initiative 'Patient Safety and Accessibility to Quality healthcare' at Varanasi. The prime objective of this initiative is to provide a quality healthcare services to one who is deprived of such facilities, especially poor and elderly citizen of our country. It was estimated that approx. 1 lakh deprived people will be benefited in one year and will provide better healthcare services to poor and elderly people in the next future. This initiative was an approach to WHO's Universal Health Coverage program, ensuring better healthcare services for all. ▶

Overview on Indian Healthcare System

Rising population; at present around 1,336,286,256 (estimated till July 2016) and increasing life expectancy put stress on the high demand for an adequate healthcare service around the country. The universal healthcare system is offered by both the central and state governments in order to establish a supportive healthcare system in rural and in urban areas. The key challenges healthcare system faces are generous; from the need to reduce infant mortality rates, proper sanitation, improve physical infrastructure, the necessity to provide healthcare insurance, access to the affordable hospitalization and clinical care and the rise in both communicable and



non-communicable diseases, including chronic diseases. As Indians live more affluent lives and adopt unhealthy diets that are high in fat and sugar, the country is experiencing a rapidly rising trend in lifestyle diseases such as hypertension, cancer, and diabetes that is expected to grow at a faster rate than communicable diseases.

The Indian healthcare system is growing at a brisk pace. The sector is one of the preferred destinations for foreign direct investment. Low cost medical innovation is an Indian specialty too, attracting investment from both domestic sources and foreign companies. As per the data released by the Department of Industrial Policy and Promotion (DIPP), the Indian healthcare sector received a FDI worth of US\$3.39 billion between April 2000 and March 2016. As a result, many corporations have stepped into the sector, offering multi-specialty healthcare, diagnosis and healthcare insurances. However, there are sizeable shortages of hospital beds and trained medical professional

such as doctors and nurses, and as a result public accessibility is reduced. There is also an extensive rural-urban discrepancy in which accessibility is considerably lower in rural compared to urban areas. As a result, about 70% of the urban and about 63% of the rural population prefer to access private healthcare services in India. In India, most of the Hi-tech and super-specialty hospitals are concentrated near metro cities. The Indian healthcare systems consist of both Allopathy and AYUSH (Ayurveda, Yoga, Unani, Siddha and Homeopathy).

Today, India stands at a junction of well-managed, multi-specialty private healthcare systems on one end and the absence of doctors, medical staffs, medicines and other basic amenities at the other. According to the WHO report 2012, Doctor-nurse density per 10,000 persons of the Indian population is 19 with 6.5 doctors and 13 nurses, while another report by World Health Organization suggests that only 26% of the medical professional were available to provide medical assistance to about 72% of the country's population.

The Union Ministry of Health and Family Welfare (MoHFW), and the Department of Health and Family Welfare in the state are the organizations to regulate the healthcare services inside the country. Compliance to regulations is still a cause for concern in both government as well as private-run organizations. What's more the system suffers from the lack of a quick response and redressal system, with matters related to medical negligence and failure largely relegated as consumer affairs troubles.

Further, we need an effective mechanism to address demand for safe, affordable and quickly available healthcare for all. ▶

The Indian healthcare sector received a FDI worth of US\$3.39 billion between April 2000 and March 2016. As a result, many corporations have stepped into the sector, offering multi-specialty healthcare, diagnosis and healthcare insurances.

An Analysis of the Indian Healthcare Industry

A HEALTHCARE SYSTEM is basically comprised of all organizations, institutions and resources whose central purpose is to improve health. A healthcare system needs to provide services that are reliable with the necessities and fiscally fair, for the recipients and should treat people decently. The Indian healthcare system is built on the advanced frame of workforce, technology, information and organizational capacity.

Universal access to healthcare is one of the fundamental provisions for any society to achieve development. There is substantial empirical evidence about a good health system's ability to improve people's lives tangibly every day. Strengthening health systems and making them more equitable has been recognized as a key strategy for fighting poverty and fostering development. A health system with considerable inequities in service provision will constantly struggle to keep pace with the rising demand for healthcare.

A quick look-up on Indian healthcare system:

- The doctor-to-patient ratio for rural India, as per the Health Ministry statistics, stands at 1:30,000, well below the WHO's recommended 1:1,000.
- Healthcare Market Size in 2015- US\$100 Billion.
- Hospital Beds per 10000 population- 9
- Number of Sub-centers in 2015-156926.
- Number of Hospitals in 2015- 196312
- AYUSH Hospitals in 2015- 3601
- Blood Bank till February, 2015- 2760

The healthcare market functions through six segments. They are:

1. Hospitals

Government Hospitals- It comprises of public healthcare centers, district hospitals and general hospitals.

Private Hospitals- It comprises of private clinical care, nursing homes, mid-tier and top-tier private hospitals.

2. Pharmaceutical

It includes manufacturing, extraction, processing, purification and packaging of chemical materials for use as medications for humans or animals.

3. Diagnostics

It comprises businesses and laboratories that offer analytical or diagnostic services, including body fluid analysis.

4. Medical device and Supplies

It includes establishments' primarily manufacturing medical equipment and supplies, e.g. surgical, dental, orthopedic, ophthalmologic, laboratory instruments, etc.

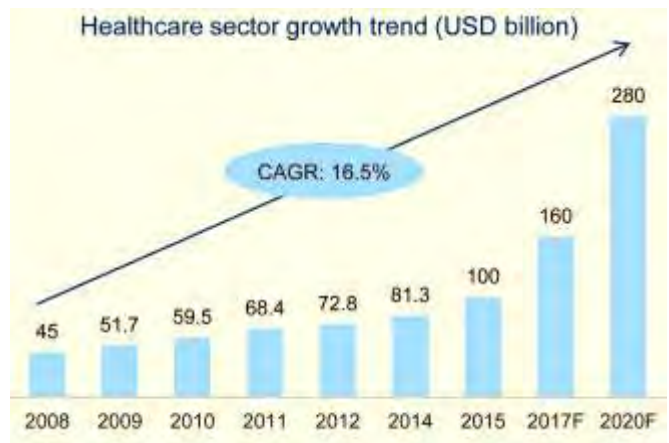
5. Medical Insurance

It includes health insurance and medical reimbursement facility, covering an individual's hospitalization expenses incurred due to sickness.

6. Telemedicine

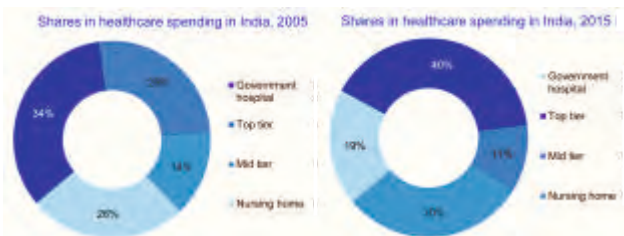
Telemedicine has enormous potential in meeting the challenges of healthcare delivery to rural and remote areas besides several other applications in education, training and management in health sector.

Indian healthcare system has become one of India's largest sectors both in terms of revenue and employment. The industry is growing at a tremendous pace owing to its strengthening coverage, services and increasing expenditure by public as well private players. During 2008-20, the market is expected to record a CAGR of 16.5 percent. The total industry size is expected to touch USD160 billion by 2017 and USD280 billion by 2020. As per the Ministry of Health, development of 50 technologies has been targeted in the FY16, for the treatment of diseases like Cancer and TB. Government is emphasizing on the e-Health initiatives such as Mother and Child Tracking System (MCTS) and Facilitation Centre (MCTFC).



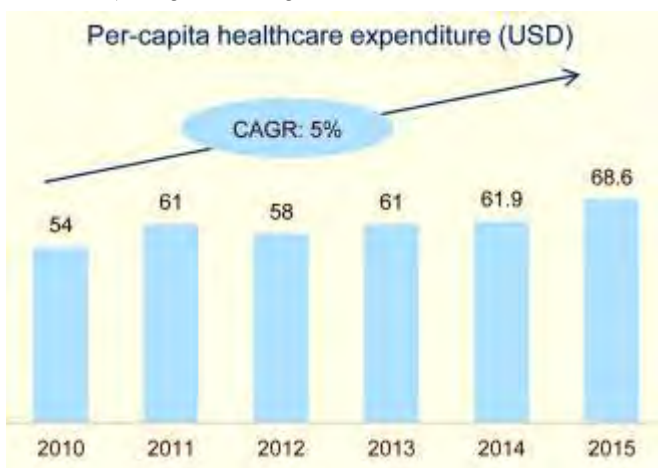
The private sector has emerged as a vibrant force in India's healthcare industry, lending it both national and international repute. Large investments by private sector players are likely to contribute significantly to the development of India's hospital industry, which comprises around 80 per cent of the total market. In India, private healthcare accounts for almost 74 per cent of the country's total healthcare expenditure. Private sector's share in hospitals and hospital beds is estimated at 74 per cent and 40 per cent, respectively. The main factor contributing to rising medical tourism in India is presence of a well-educated,

English-speaking medical staff in state-of-the-art private hospitals and diagnostic facilities.



Source:IBEF

Per capita healthcare expenditure is estimated at a CAGR of 5 per cent during 2008–15 to USD68.6 billion by 2015. This is due to rising incomes, easier access to high-quality healthcare facilities and greater awareness of personal health and hygiene. Greater penetration of health insurance aided the rise in healthcare spending, a trend likely to intensify in the coming decade. Economic prosperity is driving the improvement in affordability for generic drugs in the market.

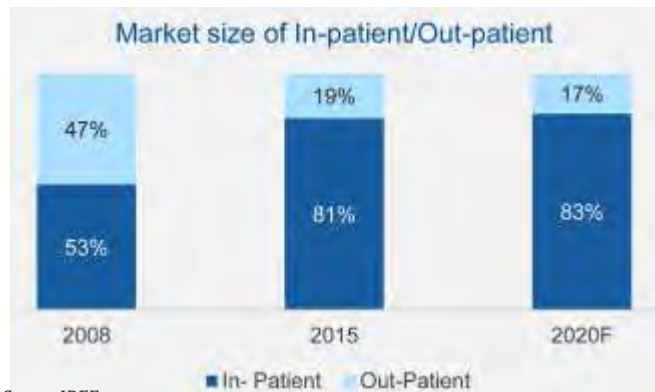


Source:IBEF

A major portion of secondary, tertiary and quaternary healthcare institutions comes from private sector with a concentration in metros, tier II and tier I cities. Large investments by private sector players are likely to contribute significantly to the development of India's hospital industry and the sector is poised to grow to USD100 billion by 2015 and further to USD280 billion by 2020. The private hospital market in India is estimated at USD81.0 billion at the end-of 2015.



Source:IBEF



Source:IBEF

During 2009–15, the market size of private hospitals is estimated to have a CAGR of 24.2 percent. Increase in number of hospitals in Tier-II and Tier-III cities has fuelled the growth of private sector.

Over 2015-20, the In-Patient market is expected to grow at a CAGR of 13 percent.



Source:IBEF

Over 2015-20, the Out-Patient market is expected to grow at CAGR of 10 per cent.

Over 2012-22, diagnostic market is expected to grow at a CAGR of 20.4 per cent to USD32 billion from USD5 billion in 2012. Sub-sector of diagnostic, IVD Equipment market is expected to grow at a CAGR of around 15 per cent from 2012 to 2015. Diagnostic market is split between imaging and pathology with 30 per cent and 70 per cent share respectively.

Growing health awareness and improved paying capacity of the patients, calls for a more rational approach to plan investment in public and private healthcare infrastructure. The government has, with the objective to promote health infrastructure in underserved and unserved areas, offered Universal Health Coverage for all.

The low cost of medical services has promoted the country's medical tourism, attracting patients from across the world. Moreover, India has emerged as a center for research and development activities for international players due to its relatively low cost of clinical research.

Encouraging policies for FDI, tax benefits, favorable government policies coupled with promising growth predictions have helped the industry attract private equity, venture capitals and foreign players. India's healthcare sector is expected to be \$280 billion in size by 2020, growing at a compound annual growth rate of 16 per cent, but it is in the extreme need of proper regulation and infrastructure push, says a FICCI-KPMG report. ■

How India Can build up Its Health System

AT PRESENT, INDIA is in bad health. On the one hand, many of its people are residing with the effects of malnutrition and poverty. A nonexistence of toilets and a defective distribution structure for reasonable medication is why India contributes to almost a quarter of deaths globally from diarrhea.

In India, where most of the people have dug deep into their pockets to pay doctors, drug stores and diagnostic facilities (or 'out-of-pocket spending') has been the norm for a long time, susceptibility to destitution because of healthcare charges remains high. Even though the government budget on healthcare is envisioned to have gradually increased to 30% of the country's total health expenditure up from around 20% in 2005 and out-of-pocket payments have dropped to nearly 58%, falling from 69% a decade ago, these tiers are still high and not proportionate with India's stage of socio-economic development. In fact, the average for public spending on healthcare systems in other lower middle-income countries is more than 38%, while in China, government spending accounts for 56% of total health expenditure.

In 2014, the government said its healthcare expenditure would amount to just 1% of its gross domestic product, among the lowest rates globally, according to the World Health Organization. That minimum level of expenditure positions India in the back of nations like China and Afghanistan. The U.S. government spends about 8.3% of GDP on healthcare. A majority of needy Indians are uninsured and pay-out-of-



pocket for clinical expenditures, sometimes having to settle bills for incidental events in advance, they need to sell their assets. Thus, at this stage, India requires a completely new strategy for its healthcare system that includes a better regulatory framework, improved healthcare services and healthier government programs that won't ask the people who want it most to pay prematurely.

The petite answer to how India can build up its unstable public health system is one that everyone knows: spend a lot more.

Here are five key recommendations that should probably help the Planning Commission:

1. Increase healthcare expenditure to 5% of GDP

At the moment, the Indian government spends about 1.4% of its gross domestic

product on healthcare, according to the World Health Organization Global Health Expenditure database. We would like to expect it spend to 5% of GDP by 2017.

The Indian public spending is at 33% of the GDP, of which only 4% is spent on health care. Compare this to Thailand, a country with a robust healthcare system, where health spending makes up 14% of total public spending.

2. Pay for it with taxes, not with patient expenses

The government should use remaining tax revenues to pay for this system. As the tax base widens, the government could also consider levying a specific income tax to support the national healthcare program, in which case user fees on people above a certain income would be equivalent to charging them twice.

Patient expenses don't actually help



the system pay for itself. That's because they generate their own expenses like paperwork and salaries for staff to handle billing and collections.

And even minimal user fees can deter the poor from seeking care, he said.

3. Spend more on primary care

Additional funds shouldn't go only to maintaining the existing health system, with its slanted incidental alternatives. Much as in education, the Indian health outlay has often wished treatment at hospitals in metro cities over more extensively available basic and preventive care.

The increase in expenses must be followed by changes in how that money is spent. Through the years, 70% of public expenses sought to be on basic care. By directing the health financing mainly into tertiary care it is not providing the population or providers with any incentive for preventive care.

Primary care is outstanding from different ranges of care through the clinical qualifications of the attending doctors and the sophistication of the facilities had to offer it. Pre-natal check-ups and normal deliveries might be primary care, as an example, whilst a

Even though the government budget on healthcare is envisioned to have gradually increased to 30% of the country's total health expenditure up from around 20% in 2005 and out-of-pocket payments have dropped to nearly 58%, falling from 69% a decade ago.

caesarean-section delivery would be secondary care. Therefore imparting better primary care earlier could help decrease the number of cases where diseases or complications progress to a point where they require travel for more expensive and more aggressive treatment.

Indian healthcare expenditure additionally favors urban areas over the rural areas, according to the report, urban areas have four times more doctors and nurses per 10,000 people as rural areas.

4. Improvement of all public-sector healthcare systems

It is proposed that the country needs an overhaul renovation of the public

healthcare system in India as the lines of healthcare system that Tamil Nadu has, which some experts say is the best in India.

On the whole, to make a countrywide health system that works, the report says that more medical and nursing colleges and hospitals will need to be setup and millions more caregiver will be required, mostly in villages.

We need doctors, we need nurses, we need community health workers. We need a multilayered health work force.

5. Buy drugs in bulk

Out-of-pocket expense on medication has gone up in India, and now accounts for nearly three-fourths of all non-public healthcare expenditure. It is advised that the Indian government could take a cue from Tamil Nadu, which purchases medicines in bulk and offers many medicines for free to patients. That would involve significantly growing public expenses on medicines from around \$1 billion now. Schemes such as low cost generic drug prescription should be encouraged. Government programs like "Jan Aushadhi" could result in such paradigm shift in providing for affordable healthcare. ▶

Rural Vs. Urban



The cost of treatment rose at a double-digit pace of growth, beating the average inflation in both rural and urban India over the past decade, according to the recently published results of a cross-national survey on health conducted by the National Sample Survey Office (NSSO) in the first half of 2014.

IN INDIA, the opportunity to enter in the healthcare market is favorable, as still India spends only around 4.7% of its GDP on healthcare services compared to 17.1% of the United States. In addition, there are wide gaps between the rural and urban populations in its healthcare system which weaken the problem. A majority of 70% population still residing in the rural areas has no or limited access to medical facilities. Therefore, the rural population generally depends on alternative medicine, i.e. household remedies and the government programs in rural healthcare facilities. One of these government initiatives is the National Rural Health Mission under National Health Mission to address the health needs of rural people. In contrast, the urban areas have several private healthcare providers and multi-specialty hospitals which provide quality healthcare. These hospitals have better doctors, recent technologies, enhanced diagnostics centers, access to preventive medicine, and several other facilities which are a result of better profitability for investors compared to the not-so-profitable rural areas. ▶

Medical Negligence

ANY NEGLIGENCE BY an act or omission of a medical person in executing their duty is termed as medical negligence. Medical negligence arises when the health specialist fails to provide the care which is expected in each case thus resulting in injury or death of the patient. It can be any offence or breach of contract of healthcare or professional services offered by a healthcare provider to a patient. The standard of skill and care required of every healthcare provider in delivering professional services or healthcare to a patient shall be that degree of skill and care ordinarily employed in the same or similar field of medicine as the defendant, and the use of reasonable care and diligence.

A person who claims negligent medical misconduct needs to prove under the said four elements:

- (1) A duty of care was owed by the health specialist.
- (2) The health specialist must have violated the applicable standard of care.
- (3) The person suffered a compensable loss.
- (4) The injury was caused in fact and proximately caused by the misconduct of the medical person.

Doctors, as professionals, have a duty of care to those who seek medical attention. This element is hardly a matter in negligence litigation, because once a



doctor agrees to treat a patient, they have a professional duty to deliver perfect care. However, the petitioner must show some actual, compensable loss that is the result of the alleged medical negligence. Evidence of any injury or loss can include the physical effects of the treatment performed by the doctor, but sometimes it can also include emotional effects. The amount of compensation at dispute is generally a highly contested part of the litigation.

Public awareness of medical negligence in India is on the rise. Hospital managements are gradually

facing complaints regarding the facilities, standards of professional competence, and the pertinence of their healing and diagnostic procedures. When the Consumer Protection Act, 1986, came into force some patients who had filed legal cases against medical practitioners have proved that the medical practitioners were negligent in their medical service and have claimed and received compensation. Thus, a number of legal decisions have been made on what establishes medical negligence and what is necessary to prove it. ▶

Cost of Healthcare

BESIDE THE RURAL versus urban healthcare systems, another key mechanism of India's healthcare industry is the high out-of-pocket expenditure, roughly around 70%. This means that most Indian patients need to pay for their clinical bills immediately after treatment with no payment provisions. According to the World Bank and National Commission's report on Macroeconomics, only 5% of Indians are covered by healthcare insurance policies. This low statistics has resulted in a healthy

healthcare insurance market, which is mostly available for the urban, middle and high income people. The penetration of healthcare insurance has been growing over the years and is the one of the fastest-growing industries in India.

In 2014, about 44 out of each 1,000 Indians in urban areas were hospitalized excluding childbirth every year, according to the National Sample Survey Office's (NSSO). The cost of treatment rose at a double-digit pace of growth, beating the average inflation in both rural and urban India over the past decade, according to the recently published results of a cross-national survey on health conducted by the National Sample Survey Office (NSSO) in the first half of 2014. As more and

Immature Medical Devices Sector

THE MEDICAL DEVICES sector is still the youngest sector of India's healthcare system. However, it is one of the fastest developing sectors in the country like telecom and insurance industry. Over the decades, the healthcare industry has faced a number of regulatory challenges which has prevented its growth and development.

Recently, the government allowed 100% foreign investment in the medical devices sector to encourage domestic production of medical devices, and clearing the regulatory hurdles related to the import-export of medical devices, and has set a few standards around clinical trials. "In this age of super specialization, if medicines and pharma are one aspect in which India has attained a certain amount of core competence, we still haven't achieved that in medical devices, particularly which are to be installed in human body for the purpose of treatment," ArunJaitley said. ▶



more patients went to private healthcare facilities for treatment, they have been faced with rising medical bills. The cost of treatment varies significantly across the Indian states. Rural hospitalization costs are low as most people visit public hospitals.

About 86% of rural Indian patients and 82% of urban Indian patients do not have access to any form of employer-provided or state-funded insurance, according to the latest NSSO survey. As a result, out-of-pocket health expenditure is higher in India than any other developing market. The burden of high healthcare costs is felt disproportionately by the low income class. However, the Indian regulatory bodies play a significant role in ensuring better healthcare facilities to the citizens at affordable rates. ▶

Demand for a robust Primary Healthcare Facility

INDIA FACES A budding demand to fix its primary healthcare facilities in the rural areas. The primary healthcare system is the backbone of the entire healthcare system as it is a gateway between the various levels of patient care and management in the healthcare system. However, the primary healthcare is irregular and, for the most part, covers management from noticeable irregularities rather than the overall health of the patient. In rural India, the situation is much worse with neither the government nor the private healthcare provider providing this level of care. So, most rural residents either do not have any form of primary healthcare or visit local quacks. These quacks offer any number of rational and irrational cures, several of which cost a great deal of money for little benefit, and a few with strong potential for actual harm. This provides for the need of a PPP Model in rural areas.

One of the key initiatives of the Indian government in strengthening the rural healthcare facility is National Rural Health Mission (NRHM) is to provide every village in the country with a trained female community health activist ASHA or Accredited Social Health Activist. Chosen from the village itself and accountable to it, the ASHA will be qualified enough to work as an interface between the community and the public healthcare system. Their primary responsibilities include motivating women to give birth in hospitals, bringing children to immunization clinics, encouraging family planning, treating basic illness and injury with first aid, keeping demographic records, and improving village sanitation. ASHAs are also meant to serve as a key communicator between the healthcare system and rural populations.

Primary healthcare services in India rely too heavily on the presence of doctors, despite having a shortage of doctors nationally. Since doctors do not often live in the rural areas, especially in remote areas, the primary health centers become dysfunctional. For a vision of healthy Indiathere is an urgent need for strengthening primary healthcare facility. ▶

IN A TECHNOLOGY-DRIVEN world, we are standing at the bottom of a mountain while speaking of healthcare. Wireless telemedicine, point-of-care transactions, e-enabled sickness management, home diagnostics, the virtual clinic, e-enabled customer choice, e-enabled assisted living, e-communities of practice, and finding service providers are just a few of the many areas that can be used to quicken a constructive transformation in healthcare.

Over the years, improvement in medical practices has changed the face of healthcare. From treating cancer to delivering babies, medical experts have better techniques and advanced technology to deliver admirable patient care.

Technology has now made it conceivable for both the doctors and the patients to use portable devices to access medical information, monitor vital signs, conduct diagnosis and carry out a wide range of tasks. With these improvements, it is possible to digitize the human intervention and can remotely monitor each heart-beat, blood pressure reading, body temperature, brain waves, rate and depth of respiration, glucose and oxygen concentration in the blood and almost all things.

The advantage of technology that the healthcare industry has witnessed and will continue to witness in the future is immense; they are innovative; and in the case of several individuals, they are lifesaving. Constant technological developments lead to better treatment options, the further improved and efficient diagnostic results, and even more allied patient-physician relationships.

One of the most evident ways in which technology has helped to enhance the healthcare industry is by contributing to the healthcare improvements that reduce suffering and improve treatment options for patients. The expansion of medicines, machines, and other treatments not only have raised the chance of recovery for millions of individuals worldwide, but they have also saved the lives of many. These technological progressions not only transform the existing healthcare system into new and more sophisticated medical

Technology Is Changing Healthcare



From treating cancer to delivering babies, medical experts have better techniques and advanced technology to deliver admirable patient care.

practices, which indeed help more patients to heal directly but has also expanded the research abilities of health experts so that they can make healthcare more effective and efficient.

With the accessibility of vital records and medical data, specialists can better analyze health information in an effort to more precisely predict certain epidemics or diseases. Access to sensitive data will allow specialists to not only predict diseases, but more swiftly respond to them should they present themselves. Additionally, having the ability to predict such diseases will provide technologists the chance to develop more effective preventative measures.

Progressive software and programs

allow clinicians the chance to instantly diagnose medical problems within patients. Not only that, but better technologies have also given doctors the skill to get a more in-depth look inside the body, without actually going inside. This means quicker diagnosis and better treatments in a healthy manner.

It is slightly suspicious that technology has offered the healthcare industry the much-needed advancement that it was in dire need of and will continue to positively benefit the industry for years to come. From smartphone applications to online instant chat with specialists that help patients live healthier and more prosperous lives. ▀

Diagnosis



DIAGNOSIS IS A basic part of the procedure of a doctor's visit. The procedure of deciding which disease or condition elucidates an individual's symptoms and signs' is referred to as medical diagnosis and the place where these processes are performed are called Diagnostic centers. It is generally revealed to as diagnosis with the medical viewpoint being understood. The data required for diagnosis is usually collected from a medical history and physical examination of the person seeking medical attention. Often, patients have to go through more than one diagnostic procedure. These diagnostic procedures include X-ray scans, USG, CT-Scan, Pathology tests and so on. Sometimes Posthumous diagnosis is considered a kind of medical diagnosis.

Sometimes diagnosing a disease can be challenging because various signs and symptoms are common. For example, fever is a sign of various diseases such as Dengue, Chikungunya, Swine Flu and thus it is difficult to tell the medical professional what is wrong. Thus, differential diagnosis tests are performed in which several credible clarifications are compared and contrasted, to know the correct disorder. These diagnostic procedures involve the correlation of several segments of evidence and information together followed by the recognition and differentiation of patterns. A diagnostic procedure can be performed by several medical professionals such as a physician, therapist, optometrist, health expert, chiropractor,

dentist, nurse practitioner, or physician assistant.

A diagnostic process does not always involve clarification of the etiology of the illnesses or its states, that is, what caused the disease or situation. However, these clarifications can be beneficial to improve treatment, further diagnosis results can help prevent recurrence of the disease in the future.

The primary step is to notice a medical sign to perform a diagnostic procedure. These signs include:

- Detection of any abnormality, in terms of, anatomy (the branch of science concerned with the structure of the human body), physiology (the branch of science deals the body functions), pathology (the branch of medicine that deals with the laboratory examination of samples of body tissue), and psychology (scientific study of human thought and behavior).
- A symptom of sickness expressed by patient to a doctor.
- The fact that a patient has followed a diagnostician can itself be away to perform a diagnostic procedure. For example, nowadays, most of the elderly people regularly check their sugar level and while visiting a doctor, he or she can tell their doctor more accurately about the recent changes in their diagnostic results. ▀

Diagnostic Tests and Centres

THE GOVERNMENT IS providing free diagnostic tests, including several blood tests, x-rays for all who are visiting the public healthcare facilities and is set to propose a scheme for providing free advanced CT scans. Though the concept of providing free diagnostics has been greeted by all, some health economists and health experts expressed concern over outsourcing the tests to the private sector, disagreeing that it is an expensive and inefficient process to deliver the healthcare services.

In India, the total costs of drugs and diagnostics constitute about 70% of health expenditure. The proposed 'national strategy for providing essential diagnostics facilities free for all' is indeed a boon for anyone visiting a public health facility from a village health post to a district hospital.

Under this proposed scheme, existing diagnostic centers in government institutions are to be strengthened, and where there is no such diagnostic center, the public healthcare facility would be linked with the private healthcare providers for diagnostic procedures like collection of blood samples, analysis and reporting. The scheme is meant to outsource only high-cost, low-volume tests.

The Medical Council of India (MCI) and the government's guidelines, helps to keep a strict eye on diagnostic centers in the country and take immediate action whenever needed and penalize diagnostic centers practicing wrong and unethical practices such as accepting commissions on referrals, determining the sex of unborn baby and so on. The medical council is entitled to take proper action under the pertinent laws against offending diagnostic centers.

Pharmaceuticals

In India, all food, drugs, cosmetics, and medical devices, for both humans and animals, are regulated under the authority of

the Food and Drug Administration (FDA). The Food and Drug Administration and all of its regulations were created by the government in response to the pressing need to address the safety of the public with respect to its foods and medicines. Shifting of prescription medicines to Over the Counter (OTC) medicine become a challenge for market as these over the counter medicines not only poses a risk of developing the prescription medicines, but more importantly, also places the risk of spurious medicines in a new competitive environment, specifically in the current pharmaceutical market. The chances of having OTC drugs can be spurious as these medicines are delivered to the consumer without any prescription provided by the doctor or any physician and chemists today are more ambitious about their business rather than one's health. Patients become consumer, while these fake medications face new challenges competing not only against other pharmacological formulations, but often also against other treatment solutions such as functional foods and nutrition products. The regulatory authority must monitor these practices in the pharmaceutical sector and promote awareness among the patients about the substandard, spurious and falsely labelled medicines over the prescription and generic medicines.

The primary responsibility for the regulation and oversight of pharmaceuticals and the pharmaceutical industry lies with the Food and Drug Administration (FDA). The FDA is one of several branches within the central and state government of Health and Human Services (HHS). The FDA's counterparts within the pharma sector include agencies such as the Indian Pharmaceutical Association (IPA), Central Drugs Standard Control Organization (CDSCO), National Pharmaceutical Pricing Authority (NPPA), All India Origin Chemists and Distributors (AIOCD), and Drugs Controller General of India (DCGI). ▶

THE LAST MILE

OVER THE LAST decade, smartphones have drastically transformed many aspects of our day to day lives, from the way we used to do shopping to banking and nevertheless entertainment to hospitality. Healthcare is the next. With the introduction of several advanced digital technologies, applications and cloud computing, the smartphone is going to overturn every stage of health care. In the evolving world, technology will certainly change everything, getting cheap healthcare to those who might otherwise not have access. And the conclusion will be that, the patient, are about to take center stage for the first time. Better health, besides just feeling better, will also yield higher standards of living.

Today, one can upload a snap of their rash or can search for the symptoms on their smartphone or can download a healthcare app to further process the image or diagnosis results. Within a few minutes, a dedicated computer algorithm offers the relevant results. These results could include next steps, such as recommending a current medication or visit to a doctor for further assessment.

Smartphones nowadays can be used to measure blood-pressure or even do an electrocardiogram. These ECG apps have been approved by the U.S. Food and Drug

Administration for consumers and approved by many medical centers. The apps' data are instantly analyzed, graphed, and displayed. The smartphone revolution has never more powerful new set of applications and tools that can diagnose or monitor numerous health problems such as blood pressure, glucose, oxygen concentration in the blood, heart rhythm, and lung function and can reduce visit to the doctors, cut costs, speed up the pace of care and give more power to patients. However, these digital technologies and applications won't replace doctors; one will still be seeing doctors, but the relationship will be completely different.

Using interactive wearable devices, one can use their smartphone to create their own medical data, including measuring your blood-oxygen and glucose levels, blood pressure and heart rhythm. And if you're worried about their health problems, a smartphone application will let you perform an easy assessment that can quickly diagnose the problem without a trip to the physician.

These improvements are just the start. In the next coming year, depending on the approval by the FDA, many such smartphone applications will probably be introduced. With the ease at anywhere, anytime, one can request a secure video

consultation with a doctor through these smartphone apps at the same cost as the typical consultancy charge (Rs.500-1000).

Smartphone selfies are the entire wrath, but smartphone as medical devices are just taking off. We all know that our health is extremely influenced by our surroundings, which has been difficult to quantify. But now several trending smartphone sensors are able to show the exposure to radiation, air pollution and even pesticides in foods. These skills and improvements are ultimately leading the world to Do It Yourself (DIY) diagnosis of any health issues. Today one can diagnose an ear infection with a smartphone is just the beginning. Apps are now being developed to handle almost all health issues, including the eye, the throat and oral cavity, and the lungs and heart.

In the future, medical diagnosis and assessments are to be programmed onto smartphones, and interface with diagnostics, such as ECG, Ultrasound and X-ray. The smartphone platform also empowers two-way sharing of medical data between a central medical record database and the phone, yielding early disease detection. Recently, several companies have focused on registering pregnancies, tracking disease outbreaks and keeping stock of essential medicines through smartphone-enabled databases.

Today, most of the population has their own cell-phone, hence, the technology considered simple in the world of healthcare, like SMS text alerts, can now remind patients about their appointments and prescriptions. While these smartphone apps further provide interactive e-learning programs to improve health awareness and collect patient data and medications that could soon be digitized to ensure a healthy lifestyle.

All thanks to recent scientific and technical innovations, the future of healthcare looks miraculously bright. With all these new applications and tools, it is no wonder that we're talking about the prospect of "doctorless" medicine. Let's not get too assumed, you'll still be visiting doctors but you'll have much more power. ▀

The future of Healthcare: Smartphones



Laughter is the Best Medicine



POOJA
KHAITAN

Humor and laughter give a boost to your immune system and provide energy, reduce pain, and defend you from the harmful effects of stress.

HAVE YOU EVER been in a stressed or hardstate of affairs while you unexpectedly burst right into a fit of laughs? Or sense a release or revived after watching a hilariously humorous movie?

Laughter is contagious. The sound of roaring laughter is far more communicable than any cough, snuffle or sneeze. While laughter is shared, it holds people together and will increase friendliness and happiness. Furthermore, laughter initiates healthy physical changes inside the body. Humor and laughter give a boost to your immune system and provide energy, reduce pain, and defend you from the harmful effects of stress. Above all, this priceless medicine is amusing, and easy to practice.

It turns out there's certain scientific verity behind the old saying "laughter is the best medicine."

Several researchers have found that laughter can have healing properties; and it's contagious. During a laugh, respiration, heart rate and blood pressure temporarily rise. This causes oxygen to surge through the bloodstream that then results in lower blood pressure. Laughter improves the function of blood vessels and will increase blood flow, that can help protect against a heart attack and other cardiovascular problems.



Here are some reasons why one should start laughing:

Laughter is Contagious

The detection of mirror neurons what causes one to smile whilst someone smiles at you gives credibility to the notion that laughter is contagious.



“Your sense of humor is one of the most powerful tools you have to make certain that your daily mood and emotional state support good health.”

~ Paul E. McGhee, Ph.D.

Suppose, when your mood is depressed, finding some friends to giggle with can help your mind, initiate its own laughter reaction and raise friendliness, each of which contribute to your emotion of well-being. Why do you watch that having a sense of humor is such a critical trait while seeking out a companion? We adore the sensation of shared laughter and our body wants as plenty of this emotion as possible.

Laughter Decreases the Stress Response

When you laugh, there's a contraction of muscle tissue, which increases blood flow and oxygenation. This stimulates the coronary heart and lungs and produces endorphins that help you to sense more serene states both physically and emotionally.

Laughter Boosts Immunity

As per the study done at the Indiana State School of nursing, joyful laughter may increase natural killer cell levels, a type of white blood cell that attacks cancer cells.

Laughter Increases Resilience

Resilience is the skill to realize the disappointment as a natural evolution to success rather than as an adverse outcome. Individuals who are vigorous are happier and more successful.

The potential to concede errors without becoming indignant or frustrated plays a significant role in succeeding resilience. Laughing at mistakes allows us to know that making mistakes is a part of being human.

Laughter Fights Depression

Several researchers support, laughter as a super way to get away the downhill spiral to depression. Being unhappy can emerge as a model or attitude if we don't step outside of ourselves now and again. By being an observer to our scenario in place of allowing ourselves to experience the dupe we can find the humor in it and notice with sparkling eyes. Even unavoidable laughter releases a mixture of hormones, neuropeptides, and dopamine that can help to mend one's mood. ▶



Prescription Medicines

MEDICINE IS A substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease. A medical prescription from any medical professional is mandatory to dispense a pharmaceutical medicine to any consumer. It is illegal to dispense any prescription medicine to consumers without a prescription from a physician.

Even if medicines can help you recover and make you feel better, it's important to know your medication as every medicine has their own benefits and risks. The advantage of consuming prescription medicine over other medicine is that the prescription medicine has very less side effects.

Always ask your doctor questions about any concerns or thoughts that you may have after taking the prescription medication.

5 million preventable
deaths occur every
year



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you are one of them



Challenges and OPPORTUNITIES in Indian Healthcare

The population of India has grown rapidly, healthcare has emerged as one of the country's major sectors, both in terms of revenue and employment and its boom is scheduled to linger. Estimates venture that the contemporary US \$40 billion Indian healthcare businesses will grow to US \$280 billion by 2020. Most of this development will arise within the country's low-income markets, where the people have prompted excessive pressure on capitals. This capital scarcity has resulted in a lack of high quality healthcare that is reasonable and easily available. Inadequate government policies and dying substructure both bear a number of the responsibility for this deficit mechanism. However, at the same time several NGOs are active in these low-income markets, their cognizance is usually on sanitation, sexual health and prevention of infectious and communicable diseases. Without the admittance to an extensive range of quality healthcare services, low-income people are at an elevated risk. As a result of their restrained alternatives, families often experience high mortality rates, and generally a cheap lifestyle.



Estimates venture that the contemporary US \$40 billion Indian healthcare businesses will grow to US \$280 billion by 2020.



Health and socio-economic developments are so firmlyknotted that it is impossible to reap one without the other. At the same time as the economic development in India has been attaining momentum during the last decade, our healthcare system is at crossroads nowadays. Even though the government programs in public healthcare have recorded a few remarkable successes over time, the Indian healthcare system is ranked 112 among 190 WHO member countries on overall health performance. Creating healthcare systems that are open to community needs, primarily for the poor, involves politically challenging and directorially demanding choices. Healthcare is a major objective in its own right, in addition to anessentialparticipation in economic development and poverty reduction. Healthcaresgment is complicated with a couple of goals, numerous products, and various beneficiaries. India is

well-placed now to broaden a uniquely Indian set of health sector reforms to empower the healthcare system in meeting the growingprospects of its staff and consumers. Managerial demanding situations are many to make certain availability, access, affordability, and equity in providing healthcare amenities to fulfill the people needs efficiently and efficaciously.

In India, the healthcare industry is both; a complex challenge and hasa huge opportunity. Beyond the health benefits of medical improvements and intercessions, availability to reasonableprimary health and wellness care is still imperative for the low-income Indians. Commonly, one incident of hospitalization accounts for 58% of per capita annual expenditure. Normally, healthcare costs are growing at a 15% CAGR. At the same time, increases in per capita expenditure, disposable income and health insurance penetration makes the

health industry an eye-catching marketplace opportunity to numerous investors. Literally, private costs within the healthcare sector have outmatched public costs by 80:20. Where this allows for swift innovation and unfastened-market rivalry that drives down costs, this often creates a twist towards urban care for the rich while low-income populations in rural areas are often mistreated.

A new opportunity for the enhancement lies in the better distribution of healthcare through telemedicine, a procedure that enables doctors to monitor and diagnose patients remotely. With 72 percent of Indian healthcare specialists living in urban areas, while a majority of 700 million Indians reside in rural areas that lack such healthcare specialists, telemedicine has speedily come to be a US \$500 million marketplace and growing. Several hospital networks across India now have telemedicine applications and programs, including Apollo, AIIMS, Artemis and Medanta Hospitals. The sector's development is being pushed by scientific advances and elevated strain on healthcare resources due to a rising populace. Even though the government has suggested certain standards and schemes for the use of telemedicine, the implementation of this concept is positively associated with regional income, and some rural areas continue to lack the infrastructure to empower data transfer.

The promising effect of better healthcare is superior in remote towns and villages than in urban areas. Since NGOs and non-profits organizations are specializing in preventive healthcare which includes creating awareness about sexual health, HIV, vaccinations and sanitation, remedial healthcare comprising the manufacturing and distribution of health care products and services. With the public health organization

crumbling and no clarification on the horizon for improving affordability and accessibility, the Indian healthcare sector urgently needs transformation. The transformation of the healthcare sector in India offers a major opportunity for innovative business models.

Another sector that's suitable for upgrading is primary healthcare facilities in India, including services provided by general physicians and community pharmacist. Current healthcare programs basically focus on multispecialty care rather than a primary care, though primary care is certainly more important to meet the remediable everyday needs of the Indian healthcare systems, especially those in low-income markets. Healthcare needs to be focused on primary healthcare in order to make an encouraging impact on decreasing the cases of



chronic diseases. Surely, there is a strong need for companies that focus on universal healthcare coverage and precautionary measures, providing revolutionary pricing options for products and services and are determined by the needs of particular people.

To completely apprehend this need, by 2020 it is estimated that chronic diseases such as diabetes, alcoholism and tobacco use can be reliable for seven out of every ten deaths in the developing markets such as

India. Every one of these diseases can be cured by primary healthcare centers in their early phases. To effectively deal with such diseases, India will need robust integration among primary and tertiary care providers, and the initiation of cost-effective distribution channels where primary healthcare centers are now mostly non-existent or ineffective.

As India is a developing country and so is the healthcare industry. Healthcare industry still continues to grow and its miles clear that opportunities exist for health experts, chemists, and investors to have a progressive impact on people living in India, while public and private partnerships will remain most important for overall development of the Indian healthcare industry. ■

Patient's Rights & Responsibilities

We often have a trip to the hospital or a doctor when we are in terrible need of medication. Everything the doctor suggests or does is taken into consideration as a part of the treatment or recovery process and regarded as the naked truth. Healthcare providers must respect the individual rights of all persons that come to the healthcare facility for treatment. Patient rights is the right to take decisions regarding medical care, the right to agree or decline the treatment procedure and so on. Patient responsibilities include such actions on the part of patients that are required so that healthcare providers can provide proper care, make precise and accountable care decisions, address patients' requirements, and maintain a legitimate, complete and viable health care facility. As a patient and a part of patient groups, we have certain Rights and Responsibilities.

Following are the Rights, entitled to a patient:

Respectful Care

A medical person should respect patient's dignity and be sensitive to patient needs. Necessary medical treatment must be delivered regardless of race, religion, origin, gender, or, in emergencies.

Complete Information

The patient must be given complete, up-to-date information on their condition, treatment and chances for recovery and have the right to review their medical records.

Informed Consent

The doctor must explain the treatment procedure and its consequences to the patient.

This informed consent includes advantages and risks of the procedure such as any possible side-effects, consequences of not receiving treatment, and how long recovery can be expected to take.

Privacy

Personal or medical details of a patient's condition and treatment may not be unnecessarily disclosed to any other at any time.

Confidentiality

All conversations and medical records between patient and doctor, hospital charts, diagnostic results, etc. must be kept confidential. The patient must give permission for the release of their records for specific purposes in most cases.

Acceptance or Refusal of Treatment

The patient has the right to accept or refuse any medical treatment.

Refusal of Experimental Treatment

In some cases, health experts may recommend experimental therapies, medication or other courses of treatment. The patient must be informed about the proposed treatment that is experimental and what the potential results and risks are.

Information on Billing

The patient must receive a copy of their medical expenses during treatment. Examine your bill properly. You can claim your rights, only if you are aware of the facts.

Following are the responsibilities, entitled to a patient:

Answer questions correctly:

- Always provide complete and correct health related information to the doctors.

Make sure of effective communication:

- It is necessary to have an effective communication between the patient and the doctor to understand the medical treatment procedure and its consequences.
- Read all medical related documents carefully and enquire for further clarifications before opting any treatment.
- Always stick to the treatment plan suggested by the health experts.

Maintain Discipline:

- Do respect hospital's personnel.
- Be attentive to the hospital's property.
- Abide by all the hospital's rules, policies and safety regulations and be mindful to smoking, noise, visiting hours, and number of visitors and so on.

Always remember:

- Being a decent healthcare consumer does not mean being a silent consumer.
- When you have questions - **MUST ASK**
- When you have problems - **MUST SPEAK UP**
- When you like what happens - **MUST EXPRESS YOUR APPRECIATION** ■

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