MedTech in Emerging Markets 2019
A market access trend report in emerging markets

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Foreword

As we begin 2019, the Economist Intelligence Unit (EIU) Healthcare highlights key trends in the global medical technology (medtech) industry in 2019 – from the industry coming under pressure as US-China economic and technological rivalry continues to unfold to the pick-up of remote monitoring and telehealth solutions.

The report focusses on the implications of some of these trends on emerging markets as companies look to gain greater access to these fast-growing high-potential markets. We look at various opportunities and challenges to help companies understand where and how emerging market medtech companies are evolving as even stronger competitors in 2019, and affordability and infrastructure issues in these markets.

2019 will also mark significant milestones for EIU Healthcare after our acquisition of data information intelligence GmbH (dii), a leading healthcare consultancy and market research provider with a focus on the diagnostic, medical devices and imaging market in 2018 and the launch of our re-developed data product, Surgical Gateway. In 2019, dii’s expertise in sizing the in-vitro diagnostics (IVD) market in European countries will complement the growing strengths of our IVD Gateway database, which will relaunch on a new interface to continue to deliver precise data and forecasts for each of the major IVD segments in Asia-Pacific and Latin America. Surgical Gateway employs data science and analytics techniques to integrate macro insights – from our primary research data on surgical end-users, population health data, patient affordability, hospital capacity to derive market size, share and growth data, to build accurate estimates and forecasts of surgical device and consumables demand across 27 countries worldwide.

We look ahead to the opportunities for medtech companies, governments, payers and various partners to work together to improve access to medtech in emerging markets.

Jin Li Frick
Head, MedTech & Life Sciences Consulting
EIU Healthcare
Data-driven healthcare approaches among consumers and healthcare providers demand for greater connectivity.

Consumers are increasingly expecting medtech to connect over a single platform to offer a holistic solution to multiple needs and demands. High net worth individuals (HNWIs) in Asia, Middle East and Africa polled by the EIU believe that the collection of personal health data will improve their ability to care for their health.

Top two barriers to greater adoption of a personal data-driven approach to healthcare according to HNWIs in Asia, Middle East and Africa:

- Lack of trained healthcare professionals
- Gaps in local healthcare infrastructure

Medtech needs to connect over a single platform for healthcare providers pursuing data-driven healthcare that will need broad sets of data to come together in a connected ecosystem.

Interoperability is one of the top three areas of focus for 2019 for US healthcare providers.

Medtech comes under pressure as US-China economic and technological rivalry continues to unfold in 2019.

>US$1.1bn Estimated total annual value of medical imaging products subjected to US and China tariffs implemented in 2018

Fast-growing and high value medtech segments to watch for intensifying competition and potential trade risks:

- High-value medical consumables
- In-vitro diagnostics (IVD)
- Gene sequencing
Emerging market medtech companies are bolstering their competitiveness in global markets through product innovation and successful go-to-market strategies.

Emerging market medtech companies are cementing their presence in their domestic market.

Emerging market medtech companies are increasingly capturing a larger share of overseas markets — in mid- and higher-end medtech product segments.

Wider adoption of remote monitoring and telehealth under favourable reimbursement schemes.

Big Tech is becoming a more direct competitor in medtech.

In 2018, Amazon launched its own medical device brand focused on diabetes and cardiovascular devices that work with Apple Health and Amazon’s Alexa.

Healthcare providers see potential for collaboration with Big Tech in:

- Streamlining provider workflows
- Implementing consumer-focused services
- Solving supply chain challenges

The rise of emerging market medtech companies

Medtech industry executives are wondering exactly how fast domestic companies have grown in their domestic markets; and more importantly: how sustainable is their growth. US medtech companies have been the largest supplier of medtech to emerging countries such as China, India and Brazil for the past decade or so. But the dominance of medtech multinationals (MNCs) in emerging markets are increasingly being challenged by emerging market medtech companies that are becoming stronger competitors not just in their domestic market, but also in other emerging markets who share similar infrastructure and affordability challenges when it comes to using medical devices and equipment. In 2019, the presence of emerging market medtech companies will continue to strengthen in emerging markets.

China and India set their sights on a bigger share of the medtech market – in mid- and high-end device segments

Many of India’s domestic medtech companies – some 800 of them, produce low-value consumables and disposables that dominate the local market, while the country continues to import most of its specialised medical devices and equipment.

The trend of relying on foreign medtech companies could reverse as more Indian companies are increasingly finding their niche in mid- and higher-end medtech product segments. Blueneem, a ten-year-old Indian company, now exports more than half of the medical devices – from stents to diagnostic devices it develops and manufactures.

In China, domestic medtech companies have already found their footing in some the fastest-growing, most lucrative medtech market segments. Imaging, in-vitro diagnostics (IVD) and high-value medical consumables are some of the largest and fastest-growing markets in China where Chinese companies have also emerged as strong competitors in recent years and are hot on the heels of medtech MNCs. According to analysis by the EIU Healthcare, four out of the ten companies with the biggest share of China’s IVD market are domestic companies. Locally, domestic companies beat out growth rates of MNCs by a large margin – the fast-growing companies in main IVD market segments such as molecular diagnostics and point-of-care testing are all domestic players.  Mindray – China’s largest medtech company has captured almost half of Chinese high-end patient monitoring market.

There is still room for further growth in the domestic market. Under the Made in China 2025 plan, China wants domestically produced medical devices to take up 50% of mid- and high-end medical devices used by its hospitals by 2020 – and to further increase to 70% by 2025.

1. EIU Healthcare (IVD Gateway)
2. National Business Daily, 2018
Chinese medtech companies are increasingly winning over a larger share of not just their domestic market but overseas markets, and in higher-value segments – quickly catching up to the US. Imports of each other’s medtech for the two countries are almost on par in 2017 – with the US importing slightly more of medtech (by about 6%) from China based on the value, than the latter does from it.

**Medtech for emerging markets, by emerging markets**

Companies with emerging market expansion plans should be prepared to face fiercer competition from emerging market players. Cost can be a factor in choosing medtech products manufactured in emerging markets – the lower-end range of prosthetic limbs from the West cost up to 40 times more than those made in a developing country. However, increasingly, the development of devices and related initiatives that make it feasible and easy to use in emerging markets are driving these choices.

Companies need a strong underlying understanding of local infrastructure, healthcare systems and users to develop the right type of technology. Limited infrastructure and lack of skilled healthcare professionals in emerging markets make the use of standard medical devices challenging. In Peru, rural and poor populations reside in distinct geographic regions, each with its own unique challenges.
Limited road networks connect populations living in Peru’s Andes highlands to equipment and resources concentrated in city hospitals; while infectious diseases such as malaria, dengue – that physicians face challenges telling apart with the lack of diagnostic tests on hand – are a problem for those living in the tropical Amazon basin. Point-of-care devices and ultrasound equipment are some of the medical equipment physicians working at primary health facilities in rural Peru highlight to be lacking in their facility. Physicians would also like to see equipment adapted for use in rural settings – such as ultrasound devices of a convenient size to carry to isolated villages or for home consultations.3

One rural healthcare programme in China attempts to solve the challenges faced by physicians in low-resource settings. Working with the government, WeDoctor – a Tencent-backed online healthcare platform, brought portable all-in-one diagnostic devices designed by the company to more than 300 villages in rural areas of China’s Henan province and trained up village physicians on using the device. The device can run 11 tests from measuring blood pressure to routine urine and blood analysis, and automatically uploads medical records after generating its diagnosis that will be reviewed by physicians at city hospitals.

Even as rural health initiatives grow with data connectivity and technology, infrastructural gaps and the lack of healthcare professionals will continue to be challenges in emerging markets. There is a need for the right medtech to support care carried out in rural facilities as they pick up on local demand for healthcare.

Paying for medtech innovation in emerging markets

Emerging markets continue to face affordability related challenges in accessing quality healthcare, especially when it comes to accessing more advanced medical technology. More innovative medical technology are primarily accessed through the private market to those who can afford to pay out of pocket. Patients have a tendency to prioritise out-of-pocket spending on therapy rather than diagnosis – where much of medical technology go towards supporting, hence picking fewer, less complex and lower quality medical tests even when potentially more effective options are available. When reimbursement is provided by public or private schemes, the tendency is converse. We look at the potential of government and third-party payers to improve access to medical technology.

Can governments spend more on medtech?

Universal health coverage and other government funded access schemes remain the most promising means for bridging access gaps in middle-income countries. On the World Health Organisation’s (WHO) calculation, most middle-income countries will have the capacity to self-finance universal health coverage for their population, providing access to what WHO views as essential and affordable medical technology. The world’s most populous middle-income countries – China, India, Indonesia are strengthening coverage through various schemes. Indonesia targets to have its entire population covered under Jaminan Kesehatan Nasional (JKN) in 2019 – its national health insurance programme first introduced in 2014. 75% of private hospitals contracted under JKN have increased their investment in medical equipment since JKN started, particularly in areas of new medtech such as GeneXpert machines that shortens the time take to diagnose tuberculosis from several weeks to a few hours.

However, universal health coverage can be shallow. Patient access to more recent medical technology which may be more cost-effective, but more expensive to implement is also lacking. Although prices of genetic sequencing tests have fallen over time, they are relatively expensive tests and hence an unlikely candidate for inclusion into already stretched public healthcare insurance schemes. Limited equipment and materials, underdeveloped laboratory services and expertise, and large rural populations also brings up the cost of the implementation of such newer technologies in emerging markets. It is estimated that getting low- and middle-income countries – which make up roughly 75% of the world’s population, to provide universal health coverage by 2030 will cost US$274– US$371bn annually. Infrastructure – the building and operating of new clinics, hospitals and laboratories, including buying medical equipment makes up about 34% of the cost.

Smaller scale government reimbursement schemes are plugging the gaps in patient access to more advanced medtech. In China, genetic sequencing tests for non-invasive (NIPT) and cancer screening are not covered by public health insurance at the national level. Shenzhen – a Chinese city with the third largest number of high-income consumers, has started providing coverage for NIPT in 2017. An NIPT service costs about Rmb2,500 (US$364) - 10 times more than a conventional blood test. It is anticipated that Yunnan will be the next province to start reimbursing NIPT services.

4. ‘An Essential Pathology Package for Low- and Middle-Income Countries’, American Journal of Clinical Pathology, 2017
5. WHO, 2017
6. Health Policy Plus, 2018
7. Ibid.
8. EIU (Note: High-income consumers refer to individuals with a grey income-adjusted disposable income of above Rmb200,000 per year)
9. China Daily, 2018
For low-income countries, government-funded schemes to more costly medical technology is unlikely – even access to basic medical technologies can prove a challenge beyond local capacity. As many as 32 of the world’s poorest countries will face a total annual gap of up to US$54bn if they were to implement universal health coverage by 2030.\(^{10}\)

**New partners in expanding access to medtech**

In low-income countries where governments have limited financial capacity for healthcare, third-party payers such as donors and private health insurers are needed as key partners to deliver better patient access. Donated medical devices make up as much as 80% of the supply of medical devices in some low-income countries.\(^{11}\) Strong financing from non-profit organisations in areas such as infectious disease testing in Myanmar are increasing the accessibility of point-of-care (POC) in-vitro diagnostics for the population. The country is now the fastest-growing market for POC diagnostics in South-east Asia.\(^{12}\) But poor visibility of the supply and demand of medical device donations can make it challenging to understand local needs, often resulting in wastage.

Telecommunications companies have also emerged as unexpected partners in bridging access gaps in Africa where the use mobile money is prevalent. A Tanzanian start-up, Jamii Africa partnered Vodacom Tanzanian and Jubilee Insurance, a Kenyan private insurer that offers health insurance in five East African countries, to offer affordable health insurance options starting from US$1 a month in Tanzania where the estimated average monthly disposable income is about US$54. The lower premiums are possible by using Vodacom’s mobile money platform to collect insurance premiums and make payments to some 400 hospitals that are participating in the scheme hence cutting costs of administering the insurance policies drastically.

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10. WHO, 2017
11. ‘Access to Medical Devices in Low-Income Countries: Addressing Sustainability Challenges in Medical Device Donations’, *National Academy of Medicine*, 2018
12. EIU Healthcare (IVD Gateway)
Diagnostic innovation and private health insurance: Rethinking their alignment

Sohila Kwan
Head of Health & Medical Solutions, Asia
Swiss Re

Diagnostic innovations such as genetic testing capabilities can create tricky situations for the insurance industry – consumers may know more about their health than insurers; conversely the insured might worry about discrimination. Applied well, diagnostic innovations can help insurers drive innovation and engagement for their products and customers. We interview Sohila Kwan, Head of Health & Medical Solutions, Asia, at Swiss Re on what recent health innovations mean for the insurance industry.

EIU Healthcare: How are insurers viewing innovations in health screening and diagnostic technology and tools?

Sohila Kwan: Life and health insurance products are designed to provide protection over the long term. Any developments that would impact the future trend of risks related to life and health is something that we should be monitoring to ensure sustainability of existing and new products and that they continue to meet customers’ needs. Medical advances and innovations in diagnostic technology are especially relevant to health insurers and reinsurers; and we monitor developments in this area.

Such innovations are particularly relevant in Asia where health insurance makes up a large share of the region’s life and health insurance market. Health insurance is a rapidly growing segment in China’s insurance market. Japan and South Korea are very mature health insurance markets, particularly for cancer related products. This means that there is a large insured population that will be impacted by any developments in health screening and diagnosis. These developments potentially have a big impact on the insurance products we are developing because how insurers pay out for claims are typically linked to how diseases are diagnosed, for example critical illness and cancer insurance policies.

Where are you already seeing the impact of innovations in screening and diagnostic technology on the insurance industry?

One area of development that Swiss Re is actively monitoring is liquid biopsy and its potential application and use in cancer screening and diagnosis, particularly compared to traditional and clinically accepted practices such as tissue biopsy.

In many Asian markets, current critical illness and cancer insurance policies will pay out a claim for cancer if a policyholder is diagnosed with cancer through diagnostic techniques such as a tissue biopsy. Now, with liquid biopsy, cancer cells can be detected in fluids such as blood instead of taking tissue samples. Compared to having tissue samples taken, taking blood samples is much easier and often better received by patients. Liquid biopsy also has the potential to detect cancer at a much earlier stage.
While the emergence of liquid biopsy offers significant opportunities to improve cancer survival rates and helps with managing cancer development with early detection of cancer, the technology could also pick up cancers that would never have been picked up otherwise. These cancers may have no health impact or pose low to no risk to mortality and morbidity, leading to over-diagnosis and potentially (harmful) over-treatment for customers. For the insurance industry, these scenarios of over-diagnosis (and over-treatment) run against the initial design and customers’ realistic financial protection needs, where traditional critical illness and cancer products are designed to pay out significant sums of money to reflect the normally catastrophic costs that patients face when undergoing major life threatening illnesses and related treatments.

As technology drives faster and hopefully more beneficial advances to medical screening and diagnostics, it will be increasingly more important for the insurance industry to evolve their products, particularly to reflect these developments in product features, definitions, terms and conditions. In the case of liquid biopsy and cancer, I don’t think that the actuaries or the marketing teams imagined this kind of technology would or could exist when critical illness and cancer insurance products were first designed. To ensure the sustainability of the insurance industry to fulfil our parts in financially supporting our customers through difficult times, it is vital that we ensure the products we develop now are future-proof, and our responsibility to keep the industry up-to-date with emerging medical innovations that are becoming available.

**How about genetic testing – how are insurers responding to the availability of such technology?**

Right now, genetic testing is an area – like liquid biopsy, which is still developing in terms of its clinical validity. Genetic testing is already on the market and directly available to consumers, but it remains a new and growing area as to how it’s applied in and impacting insurance.

We’ve seen genetic testing in insurance products is around health and wellness, for example, nutrigenomics (understanding your genetic sensitivity to foods) and pharmacogenomics (genetic sensitivity to drugs). The health and wellness space is a less sensitive application of genetic testing in terms of customer risk. In this new world, where customers are better informed with genetic information about themselves, and as an individual’s genetic information is unique and permanent, we, in the insurance industry, need to be very careful about *if and how* we ask for and use any genetic information disclosed to us, particularly in the underwriting of our customers for insurance.

Genetics is a very new and sensitive area and one that the insurance industry is entering carefully, primarily staying on the edge to use the products and services as an engagement and marketing tool where sensitive genetic information separated from for insurance underwriting purposes. One example is one multinational insurer’s nutrigenomics programme is used for gaining an understanding of how genetics shapes a person’s physiological reaction to the food consumed can augment health advice. Applied and executed in the right way, it can be a great customer engagement tool, as well as a means to promote healthy behaviour and lifestyle change, and essentially improving customers’ overall health.
What disease areas in developing markets are getting more attention from insurers?

Insurers are turning their attention to chronic conditions such as cardiovascular disease and diabetes. As markets develop and populations become increasingly urbanised, they bring changes to the diets and lifestyles of local populations which have not learnt – or the infrastructure does not yet exists – to manage the transformation appropriately. Chronic diseases are relevant not just for developing markets such as India and China, but across all of Asia.

If we dig deeper, diabetes is one disease area that demands more attention. More than half of the people with diabetes live in Asia, many of them are type 2 diabetes, where lifestyle factors are a key driver of disease development. There is a huge opportunity for the insurance industry to develop holistic insurance solutions around chronic diseases, where risk factors for such diseases are modifiable, by integrating health and wellness and disease management programmes in their insurance products to not only engage their customers around their health but work together with them to support their health goals.

How is Swiss Re and other insurers in the region approaching emerging innovations in diagnostics?

As leaders in the industry, Swiss Re has global experts monitoring topics such as genetic testing and liquid biopsy and sharing these developments with our clients, because developments to date show that they have a huge potential to impact the life and health insurance industry. We also work with experts in fields of liquid biopsies, early screening and detection for Alzheimer’s disease to ensure that we have an outsider’s and objective perspective on the applications and impact of these emerging technologies on health generally, as well as on insurance.

Increasingly, in order to deliver value to policyholders, we need to be doing more with partners in the health ecosystem. And it is in that space that we look to partner – whether it’d be technology companies, diagnostic companies, pharma, hospitals, network, etc. What is important is to ensure what we integrate from our partners into the insurance product actually delivers value to our customers: where it’s around diagnostics, it has to be clinically accepted and scientifically proven.
Are emerging market hospitals ready for health innovation?

Dr Muna AbdulRazzaq Tahlak  
Chief Executive Officer, Latifa Hospital  
Treasurer, International Hospital Federation

More than half of global healthcare executives polled believe artificial intelligence (AI) use in medical decision support will be adopted more widely in the Middle East. Within the region, the United Arab Emirates (UAE) is at the forefront of adopting new technologies from AI to genetic sequencing. Are emerging market hospitals ready for health innovation? We speak to Dr. Muna Tahlak, the Chief Executive Officer of one of the busiest hospitals in the UAE to understand.

EIU Healthcare: Healthcare costs are rising across the world. The EIU estimates that UAE’s healthcare spending will rise by almost 8% in 2019, compared to previous year. How are hospitals in the UAE managing the cost of care?

Dr Muna Tahlak: Patients in the UAE, and in Dubai especially have very high expectations of healthcare services. We are trying to run our services as efficiently as possible to cut down on costs without affecting the quality of services. At Latifa Hospital, we have always faced high patient demand at our emergency department. We are currently undergoing expansion to double the capacity of the emergency department from 60,000 patients to 120,000 patients annually. The first phase of the expansion will be completed later this year. It is not just about expansion, but also increasing efficiency by reducing waste. We face high variation in patient demand – sometimes the emergency department is overcrowded, and sometimes it is not. A couple of years back, we have started to reengineer the entire process at the department. We reduced the unnecessary steps for patients, starting running tests which could be done at the emergency department instead of sending them to labs where we would need to wait hours. We had amazing results with the reduction of unnecessary admissions and unnecessary labs.

Across the UAE, there are unnecessary tests, unnecessary medications and unnecessary admissions that result in wastage. Lean exercises are used a lot across the UAE and in Middle East countries such as these Saudi Arabia to increase efficiency.

13. ‘The future of healthcare’ infographic, Economist Intelligence Unit, 2017
The potential of technology to better manage healthcare costs, or to improve healthcare services are often discussed. How are hospital executives in the UAE – like yourself, seeing the potential in technology for wider applications in hospitals and healthcare systems?

Cost can be a big constraint for hospitals in adopting new technology, but I believe that spending on technology is necessary to improve the quality of healthcare and to provide excellent services to patients. Determining the right areas and the right technology to spend on will be key. For us, patient safety is always the number one factor influencing whatever we choose. And of course, patient satisfaction is another area. Today, we are not even talking about patient satisfaction anymore. We are going beyond that to the concept of patient happiness. There is the whole patient journey or patient experience we have to consider when making those investments.

Is the emphasis on patient happiness unique to your hospital? Could you share more on what initiatives are hospitals exploring to improve patient happiness?

I would say patient happiness has become important to hospitals across the country. The UAE has a minister for happiness. There is a clear vision from the government and the top leadership on championing happiness, so it becomes a strategy to implement in healthcare across the country. Different hospitals could incorporate the concept into their work in different ways. We established a ‘Happiness Centre’ at our hospital. We have a committee working on initiatives to make our patients happier. In one instance, we found out the concern patients had when there was a lack of an explanation whenever a drug was given. We assumed that if it was explained once they would know, but patients would prefer if we explained to them each time a drug or procedure was administered to them. Patients wanted to know more – without the medical jargon.

The UAE government looks to be pushing for transformative changes of the country’s healthcare system through technology, e.g. the Dubai 10X genome project, appointing a minister of artificial intelligence (AI). Are these initiatives translating to wider applications and implementation of innovative technology at hospitals and health systems? How ready are UAE hospitals and local healthcare professionals when it comes to adopting these health innovations?

The government is spending a lot of budget on innovations in healthcare. We have a minister for AI, and he wants healthcare to be driven by AI, and to increasingly utilise AI in decision-making in healthcare. We already see how things are changing. At the Dubai Health Authority (DHA), we are in the pilot and experimental phase of using AI in some areas, while also moving towards wider implementation of AI in a few areas. Dubai receives a large number of visa applications and renewals from foreigners to work or study our city, and they are required to go through a mandatory fitness test, which includes getting a chest X-ray. We worked with a company to develop an AI algorithm for reading chest X-rays with a 98% accuracy rate and piloted the technology in four medical fitness centres. The benefits of the technology were very clear and we got the doctors buy-in – an important factor when it comes to adoption of technology in healthcare. The doctors were excited to have the technology to help them manage the heavy load at our centres. It used to take days to read the large number of chest X-rays and write the report. Today, the X-ray report will be ready in the same day. The doctors can focus on what’s
important and not be exhausted reading chest X-rays where the majority of the results are normal. We are looking into implementing this in the 19 medical fitness centres we have.

**Technology is increasingly playing a bigger role in the delivery of high quality healthcare. Some hospital executives have expressed concern over the entry of Big Tech companies in the healthcare space, what are your views?**

I believe the way forward in healthcare is achieved through partnerships between providers and companies – technology, medtech and pharma companies. Healthcare is reforming. In the past, providers did not have a deeper partnership with these companies or suppliers. Now, there is a great potential here in Dubai, and in UAE for collaborations. This is going to be a major change where a lot of partnerships and collaborations will happen. On concerns such as issues in patient confidentiality and privacy, there are ways to work around them such as the use of de-identified patient data that we have received patient consent for use.
Growing your medtech business in emerging markets

Successful growth strategies in emerging markets must address each market’s distinct challenges. EIU Healthcare works closely with our clients and partners on tailored engagements to discover new opportunities and formulate evidence-based strategies based on market strategies:

Customized solutions to meet your needs

We connect our planning and operations by combining local in-market expertise with macro-economic analysis, supported by our own proprietary data solutions and country insights:

- **R&D**
  - Customer ecosystem and unmet needs
  - Greenfield adoption trends
  - New concept test
  - Explore localisation
  - Trade-offs of innovations vs cost

- **Access**
  - Stakeholders influence map
  - Stakeholders engagement models
  - Regulatory and reimbursement trends
  - Funding programmes
  - Treatment pathway benchmark

- **Corporate strategy**
  - Technology and business model innovations
  - M&A or partnership potentials search and profile
  - Commercial due diligence
  - Asset acquisition assessment

- **Strategic planning**
  - Market size and share
  - Growth projections
  - Pricing and margin analysis
  - Market shifts prediction
  - Strategic plan development

- **Commercial**
  - Competitive benchmark
  - Partner search
  - Channel streamline
  - Customer insights and segmentation
  - Communication effectiveness
  - Branding strategy
About the authors

Jin Li Frick
Head, MedTech & Life Sciences Consulting
EIU Healthcare
JinLiFrick@eiu.com

Melissa Lim
Manager, Thought Leadership
EIU Healthcare
melissa.lim@clearstate.com
About EIU Healthcare

Part of The Economist Group, EIU Healthcare delivers world-renowned analytical and strategic advisory services, providing businesses and institutions with unparallelled custom insights and strategies, evidence-based solutions and robust health data analytics on all areas of the global healthcare industry. Our specialised practices comprising Health Policy & Clinical Evidence, MedTech & Life Sciences and Pharmaceuticals, in addition to our Data Solutions offering, ensures we provide our clients with focused expertise to support their business and commercial decisions.

Find out more at [www.eiu.com/healthcare](http://www.eiu.com/healthcare)
LONDON
20 Cabot Square
London
E14 4QW
United Kingdom
Tel: +44 (0) 20 7576 8181
Email: london@eiu.com

NEW YORK
750 Third Avenue
5th Floor
New York, NY 10017
United States
Tel: + 1 212 698 9717
Email: americas@eiu.com

SINGAPORE
21 Biopolis Road
06-02 Nucleos
Singapore 138567
Tel: +65 6715 9200
Email: asia@eiu.com

SHANGHAI
19th Floor, Ruijin Building
205 South Mao Ming Road
Shanghai, China
Email: asia@eiu.com