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Med-ad Update

AN E-UPDATE BY BRANDCARE

The Indian healthcare sector will need a total capital investment of Rs. 162500 crore to provide accessible and affordable healthcare during the 12th Plan period, says a report.



Rs. 1.63 trillion- in healthcare by 2017

As per the report by PricewaterhouseCoopers and NATHEALTH, for the 12th plan, just in order to escalate from 1.3 beds per 1000 population in 2011 to 1.7 beds per 1000 population in 2017, India would need to add at least 6,50,000 beds.

Enhancing accessibility of healthcare is a gradual process and would happen only over a period of time. Addition of this number of beds would mean an investment of Rs. 1,62,500 crore which elucidates to more than half of India's annual healthcare expenditure. This kind of increment in the overall budget would require strong ties between the government and the private sector since it is not alone that the government can manage this drastic scale escalation.

This holds true in other areas of upgrading the healthcare system too since it is only with such joint efforts that raising and establishing an equity large enough to maintain and supplement for the entire Indian population would be possible.

Another approach to work better in this direction could be health schemes to be launched and aligned in a fashion that it makes the system more transparent specially with respect to the pricing strategy. Also involving private players through PPPs i.e. public private partnerships could aid bolster the healthcare infrastructure in the nation also providing for the financial access.

Understanding the healthcare consumer

“1 in every 4 patient is not satisfied with the personal attention he gets from his physician regarding management of disease”

“I want an experienced physician and I want attention!” seems to be the overall healthcare consumer sentiment today. Irrespective of the gravity of ailment, patient is concerned about the individual attention paid and the specialised care provided. Over the coming years we would be tracking the parameters that influence his decisions like trust, satisfaction, and choice of healthcare service provider among others. To read more, follow: <http://brandspeak.brandcare.net/2013/06/12/indian-healthcare-consumer-report/>



The great Indian nightmare: Visiting a doctor

Here's the bad news: More people die of cancer in India than those in the West. And the mortality rate is about the same in both rural and urban India, and therefore unaltered by access to healthcare.



As per the Million Death Study, deaths due to cancer were twice more in the lesser educated than among the more educated ones. Assuming a better level of literacy in the urban India, it should therefore hold true that urban India is not that affected by these deaths.

But, the study reveals quite contrary results. We Indians tend to dismiss certain health related concerns because we feel they are “self manageable” so even if it is a recurrent cough we might not really take the pains of visiting a Doctor unless it transforms to a bigger nagging problem. Specifically with respect to this study too, Dr. Shastri was reported saying that, “People in urban areas, too, visit doctors when their cancer is advanced.” Despite an efficient treatment facility available, late consultation with the doctor leads to a treatment therapy that has to start when the problem is already at its apex.

Cancer, fever or cough however big or small the problem may be, for Indians reasons to not visit a doctor are far unfathomable.

Lack of attention, dissatisfaction with respect to the time provided by the physicians has also led to this state of rejection. Specialist care is the top of the mind treatment resolution for the patients today, at least for those who can afford.

Also, another reason to it is also with the advent of this specialist treatment approach, the tab that was once kept by the general family physician does not exist at all. With most of the burden levied on this small section of specialized physicians, treatment requirements taken care of at early stages are just not possible due to that vacuum created, the lack of a family physician.

Neglect of the importance of this section of doctors and caretakers, is sure to have its repercussions, and undoubtedly this resistance to visiting the doctors despite being learned and educated enough is reflective of that. The daily checks on day to day symptoms of some potential threat to

health are just washed off.

Another perspective to it is the availability of various resources at the disposal of patients that help him/ her gain knowledge on the symptoms, disease, treatment, therapy, duration and what not. As they say, half knowledge is worse than ignorance; patients also have been seen resorting to self treatment once they feel they have read enough on the subject. If not much, it does add on to forming a bias at times towards the treatment, or the disease or even the doctor approached.

Need of the hour is to restore the patient faith in the treatment practice reasserting the need of a constant check on their health from a right source. Even patient education material distributed by pharmaceutical companies, healthcare professionals needs to be customised such that it assists the patients in taking better informed decisions and clear their doubts.

WORLD SIGHT DAY

2013 POSTERS:

Brandcare released free posters for World Sight Day, 2013

80%
OF
EYES
CAN
BE
SAVED
FROM
BLINDNESS
GET THEM TESTED

World Sight Day 10th October 2013

For 10th Oct, 2013 i.e. the World Sight Day, where the theme was, “Universal Eye Health” Brandcare released free posters. The call to action for 2013 was “Get your eyes tested”

To view full posters, visit:
<http://brandspeak.brandcare.net/2013/09/30/world-sight-day-10th-october-2013/>.



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