

RECENT TRENDS AND FUTURE PERSPECTIVES IN INDIAN HEALTH CARE - AN OVERVIEW

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ABSTRACT:

Health care in India has always been a major challenge. Due to changing global economic and social conditions, advent of new advanced technology in the treatment of diseases and with new challenges arising in the field of healthcare, we feel the need to look at the recent trends and future perspectives of healthcare in a very vast and diverse perspective of India. Since independence India's healthcare was concentrated on primary healthcare, where around eighty percent of Indian population is covered so that the problem of healthcare is handled at grass root levels. Diseases like Tuberculosis, polio which were very dangerous and their virility caused a number of deaths in the country, which we can attribute to lack of proper health care facilities available at the rural level. There was also lack of awareness about the diseases and a precautionary measure to be taken to prevent and cure them was

one of the factors. Post liberalization, like all sectors the Indian healthcare scenario has undergone a sea change at a faster and more rapid level. Advanced technology made way to the traditional way of treating diseases, many super specialty hospitals were started in the Metros with advanced medical innovations to their utility. Slowly the tertiary healthcare started taking a more dramatic turn for good. Our study in this fast changing scenario of Indian healthcare is primarily focused on Medical Tourism and its effects on health sector, Reducing the health care expenditure in terms of hospital and medicines by health insurance, Vaccination for children and also study the economic feasibility of Combined vaccine for children and Major disease efforts made to contain and eradicate them by 2020 in India.

Key words:

Medical Tourism, Health insurance, combined vaccination, Primary health care

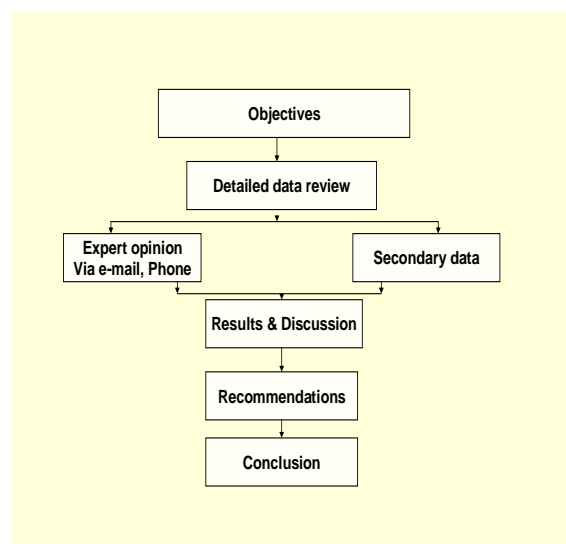
Introduction:

The enormous changes that India has seen since independence towards the bright future it is heading in many fields including the health sector, which is evolving to be the best in the world. Health is best understood as the indispensable basis for defining a person's sense of well being. Health care in India has always been a major challenge^[1,9]. Over the last five decades, India has built up a vast health infrastructure and manpower at primary,

secondary and tertiary care in government, voluntary and private sectors. Indian pharmaceutical majors have made enormous progress in generic formulations which resulted in decrease of medicine cost of many life saving drugs. The most notable change in the Indian health sector is the advent of Medical Tourism which is booming in the country and is supposed to reach the peak in the coming years ^[2,3,5]. The amount of money that is generated by medical tourism is not only helping in the health care economy but also giving rich practical experience to the healthcare professionals of the country. Increase in hospital expenses and medicinal bills are also major areas of concern as health insurance in the country is not structured, but mostly concentrated to select few population and cities of the country resulting in around eighty percent of people are outside its benefits. Vaccination to children is still a distant dream as most vaccines are imported into the country from Global Multinational companies at higher cost which is borne by the government of India and the new entry of combined vaccines which promises a lot of benefits but will not stand true to its claims in many cases ^[7,8]. Despite the growth factors there are major challenges that are faced by the people of the country in terms of eradication of communicable and non communicable diseases where major steps are outlined in health vision planning in India by 2020 ^[9].

Review Methodology:

Extensive secondary research was carried out over the World Wide Web, International publication in reputed journals and national journals along with planning of health care in India. The information gained were analyzed in results and discussion part and based on these understanding conclusion was drawn and recommendations were put forward regarding healthcare sector in India to make it more effective and beneficial to a wider group of people, the following chart indicates in detail.



Results and Discussions:

Medical Tourism which is currently the fastest growing healthcare sector in India. There are various major factors that are contributing to its growth, like Low cost but quality health care provided on par with western hospitals, highly qualified doctors with work exposure in western nations, No waiting

period or queue for any type of surgery which is one of the major hindrances in the developed world where for a heart related ailments needs a waiting period of up to six months or even more and due to which we end up paying more if the surgery is needed on immediate basis. All hospitals are well equipped with advanced machinery on par with western counterparts ^[5].

Nowadays language barrier is not a problem in India. Patients can communicate freely about their problems with doctors, nurses or every one concerned in health care , Ancient alternative therapy like Ayurveda, Yoga form the backbone in many areas and its an age old treatment to various health ailments. Certain states like Kerala are

promoting it in a big way as an alternative type of medicine for various ailments.

The government of India is also promoting Medical Tourism in a big way by introducing medical visa which can be extended without any hindrance, success rate for heart ailments is as high as 98.5%, the other big contributor to the healthcare sector is strong Indian pharmaceutical research and development of various Indian multi nationals which brings down the cost of medicines.

The comparative cost advantage of various diseases and their treatment cost in developed world and other Asian destinations are given in table.1 which clearly shows India in an advantageous position in terms of cost.

Table-1 Medical Tourism: Advantage India over other Asian destinations

| Procedure | United States (\$) | Thailand (\$) | Singapore (\$) | India (\$) |
|-------------------------|--------------------|---------------|----------------|------------|
| Heart bypass | 130000 | 11000 | 18500 | 10000* |
| Heart valve replacement | 160000 | 10000 | 12500 | 9000* |
| Angioplasty | 57000 | 13000 | 13000 | 11000* |
| Hip replacement | 43000 | 12000 | 12000 | 9000* |
| Hysterectomy | 20000 | 4500 | 6000 | 3000* |
| Knee replacement | 40000 | 10000 | 13000 | 8500* |
| Spinal fusion | 62000 | 7000 | 9000 | 5500* |

*The figures indicated are approximate and will differ after final Diagnosis.
Sources AMA June 2007

Health insurance is another sector which is seeing tremendous changes. The medical cost has gone up in India and is very difficult to manage with out a health insurance. As per the World Bank report 85% of Indians cannot arrange cash of 5 lakh rupees and 14% of Indians have liquid cash which will later lead to severe financial crisis and only 1% of Indians can arrange without any problem^[15].

Many private and govt insurance agencies are offering variety of schemes as per patient needs, but if we evaluate the health insurance sector in India, it

does not cater to wide set of population and certain policies are not covering major ailments suffered by people like lifestyle related diseases etc which make the health insurance ineffective which in turn increase the burden on the patients. Many major Private Hospitals like Apollo are also offering insurance to the patients. The need for health insurance is important because if we look at health insurance in various sectors across the wide spectrum of people in India we can come to a conclusion that 75% of the health care cost are borne by the people from their pocket as shown in the table.2

Table-2 Health Insurance: Done across various cross section of Population

| | <i>Central (%)</i> | <i>State (%)</i> | <i>Corporate (%)</i> | <i>Personal (%)</i> | <i>Total (%)</i> |
|---|------------------------|----------------------|--------------------------|-------------------------|----------------------|
| Primary care | 4.5 | 5.4 | 0.8 | 48 | 58.7 |
| Inpatient | 0.8 | 8.5 | 2.5 | 27 | 38.8 |
| Non service | 0.7 | 1.9 | NA | NA | 2.5 |
| TOTAL | 6.1 | 15.6 | 3.3 | 75 | 100 |
| Sample size is of 100 divided into different medical services | | | | | |

Source: Rajan Madhok (2005) National workshop on Health Insurance.

Vaccination: Vaccines are important preventive medicines for primary health care, and are a critical component of a nation's health security. This is particularly true for a huge and diverse

developing country like India, with its population of more than 1 billion people and 25 million new births every year. The current Indian market for vaccines is estimated to be about US\$260 million.

India is among the major buyers and makers of vaccines, locally as well as globally, and has traditionally aimed at self-reliance in vaccine technologies and production. A new trend of combined vaccine is introduced, which is a result of complex R&D and clinical trials that claims to have a Major competitive advantage and improved product.

Major advantage of combined vaccine:

Fewer injections, lower administration costs, storage, transportation, material &

equipment, reduced time, money, fewer side effects and related treatment, safety improvement are their advantages^[6]. However on further study on combined vaccinations there are some interesting facts that are usually ignored under the influence of their advantages and further we can say that combined vaccinations are not always in expensive as they claimed to be as shown in Table.3 and in some cases the patients are forced to take vaccinations where it may not be necessary.

Table-3: Combined Vaccination

| Vaccine | Unit Dose (Rs) | | No of Doses | Full immunization | |
|---|----------------|---------|-------------|-------------------|---------|
| | Public | Private | | Public | Private |
| DPT | 2.25** | 3.5 | 3 | 6.75 | 10.5 |
| HB | NA | 35-185 | 3 | NA | 105-555 |
| DPT-HB* (Combined Vaccine) | NA | 55-230 | 3 | NA | 165-690 |
| *Combined vaccines are not always economically feasible but they cost more in combination than in separate unit doses, data from the company web sites. | | | | | |
| ** Please note that all values indicated are in Indian rupees and are subject to change. | | | | | |

Sources compiled from MIMS India December 2005, and Srinivasa Rao Bio spectrum 7 December 2007, Opinion quoted Y.Madhavi.

Major diseases to be eradicated by 2020 in India:

Health care in India is primarily divided into three parts, Primary healthcare, Secondary health care and Tertiary healthcare. More than 80% of population as already discussed comes under

primary healthcare which is focussed in rural India and comprises of Health care centres and basic ambulatory services with general physicians and cater to the day today needs of the population. It also plays a major role in creating awareness of communicable and non

communicable diseases along with rapidly spreading diseases like AIDS. The major efforts taken by the government of India are reflected in primary health care centres. These centres are trying to educate people upon the importance of hygiene in day to day activities, awareness about AIDS, causes and means by which it is spread and try to remove the social stigma which is very prevalent with AIDS. People are also educated about the prevention and cure of various communicable diseases like malaria, Tuberculosis etc which are still prevalent in major parts of the country and also educate them about the importance of vaccination and its schedule to protect the infants at very young age. Pregnancy related mortality of the mother and child has drastically reduced which clearly reflects in the health policy of the planning commission of India. As far as the secondary health care is concerned it covers around 15% of the population and are mostly semi urban centric with better facilities compared to rural set up. Tertiary care is highly specialised and seeing a vast improvement in case of Medical Tourism. But this sector caters around 5% of population of the country and is very expensive in comparison to other healthcare setup.

Recommendations:

Medical Tourism which is growing at a fast pace, need to be regulated by a regulatory body by maintaining the standards. Health insurance needs more

players in the market and cashless transactions need to be improved to a great extent, if not, the entire meaning of health insurance will be useless as people have to arrange money as loan and then claim it at a later stage. Combined vaccinations necessity should be evaluated and administered as per requirement, not by market pressure and a thorough research should be done on local conditions for the suitability and quality of the vaccines. Primary level healthcare needs a serious look and awareness reaches a large section of people like organizing health camps and street plays about various health ailments and their prevention so that a large section of population are benefited.

Conclusion:

Medical tourism in countries like India has been on the rise in few selected hospitals, giving them the much needed global recognition and exposure to different medical demands, which will not only help in the health economy but also increase in the expertise of the health care professionals. Indian pharmaceutical majors have made enormous progress in generic formulations which resulted in decrease of medicine cost of many life saving drugs like in the recent case of swine flu drug made by Cipla. Health insurance sector has also seen unprecedented growth in recent times and includes both private and government players offering different types of insurance for the people to get down the cost.

Combination of vaccine is also rarely investigated for its benefits and other advantages which has to be thoroughly investigated. Primary health care sector which is largest in India should be taken care as it will address a huge population which will benefit in the long run and should be given proper importance and implementation at grass root level.

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