Joining the Dental Tribune International Group

We are excited to be the new licence partner of Dental Tribune International in India and to be able to introduce new publications in the country’s yet under-represented segment of dental professional media. Indian dentists in private practice will now be able to access a wide range of information on current trends in dentistry through DTI’s offerings, including their flagship publication Dental Tribune and five specialty magazines. The high demand for online information and educational tools will be met through DTI’s offerings.

Our company Jaypee Brothers (JP) is India’s largest publishing house with an operating revenue of US$28 million. The group has four decades of publishing experience and maintains ten regional offices throughout the country. The group is moving forward with a commitment to the medical and dental community to publish scientific content in all areas of science, and is continuing to expand its current range of publishing ideas. A dedicated in-house team of 80 professionals in the editorial and design division continually evolves the product and content quality, in order to meet new market demands and support growth plans.

Dental media by JP are also available worldwide in regions such as the Middle East, Eastern Europe, Africa and Southeast Asia. In the US, McGraw-Hill Publishers distributes JP titles on an exclusive basis, with a similar model in place for McGraw-Hill medical books in India. Overall, JP registered double-digit growth in its business last year. In order to achieve a global presence and enhance its brand value through media and consumer interest in JP products, the group showcased its new products at over 40 international conferences in 2008.

With the addition of 52 titles last year, and 55 new titles to be released this year to add to the existing 211 titles, the growth of JP’s print portfolio in dental medicine has been consistent and rapid. The portfolio includes undergraduate and postgraduate textbooks, reference books and handbooks for various specialities, and ranges from basic subjects, such as anatomy, physiology, oral histology and dental hygiene, to more advanced subjects, such as maxillofacial surgery, periodontics, prosthodontics and restorative dentistry. The target readership of dental titles is dentists, dental assistants, dental hygienists, dental technicians and dental therapists. In addition, the dental titles are read in all 280 of the country’s dental colleges.

The group is also expanding its journal portfolio and plans to achieve a list of 17 journals by next year. The International Journal of Clinical Pediatric Dentistry and the International Journal of Clinical Implant Dentistry are already in active circulation. New titles in orthodontics and cosmetic dentistry are under development.

With Dental Tribune as our new title for general practitioners, we hope to benefit from an already existing network of 25 international publishers. We are excited to be the new licence partner of Dental Tribune International in India and to be able to introduce new publications in the country’s yet under-represented segment of dental professional media. Indian dentists in private practice will now be able to access a wide range of information on current trends in dentistry through DTI’s offerings, including their flagship publication Dental Tribune and five specialty magazines. The high demand for online information and educational tools will be met through DTI’s offerings.
“India has much going for it”

Interview with Dr Johannes Wamser and Mike Batra, Dr Wamser + Batra GmbH, Germany

The Indian market with a population of more than 1 billion people and an emerging middle class offers enormous potential for all kinds of industries. Dentistry is one of them. Editor Claudia Salviczek spoke with Dr Johannes Wamser and Mike Batra from German consulting company Dr Wamser + Batra GmbH about the current market conditions in India and why foreign manufacturers of medical and dental equipment should start to invest now.

Claudia Salviczek: Dr Wamser, you offer consulting services to companies that are interested in setting up in India. Why are you focusing on dentistry?

Dr Wamser: We are not exactly focused on dentistry and offer our services to many industries. The common denominator is simply India. In our company, we will find a number of professionals that have much experience in dealing business there, such as managers from German companies who worked and lived in India for a couple of years. The reason that we are dealing with dentistry is because India has much going for it.

Could you please explain this to us?

Dr Wamser: Sure. Currently, a small but powerful social class is developing in India that is influenced by international media and is able to fly to London or Dubai occasionally to do shopping. This developing part of the population is placing high demands on the Indian health care system, which unfortunately is still under-developed in most parts of the country. India is still a classical example of a developing nation with low standards in clinics and the education of medical personnel. This is changing now only in a small segment that offers high-quality products and services, but not throughout the country.

There is a large gap between what is currently available and what people are willing to pay for good health care. I suppose the conditions in public hospitals paint a different picture?

Mr Batra: Indeed. Public hospitals are generally unin-teresting for most foreign manufacturers of medical equipment because the price and quality levels are different from what they offer in Western markets. For example, it is common for 500 people to share a room that only has the capacity of 100 beds. Syringes are re-used twice or even three times, which makes these hospitals perfect breeding grounds for diseases like hepatitis C. Patients also have to bring or buy wound dressing material from the clinics, and bedside care is often provided by a family member instead of a nurse.

Is medical treatment free?

Mr Batra: In most cases, the treatment is free and patients only have to pay for materials and medicine. The public health care system is state subsidised and financed, but as you can imagine, these financial means are not sufficient for the 1.2 billion people living on the subcontinent.

But about dentistry?

Mr Batra: There are certain basic procedures like normal check-ups that are free. Dentures, however, must be paid out of pocket and this is where street dentists usually come into play. We focus mainly on the private sector, which has experienced quite an upswing in the last four to five years. In this sector, the technological standard, the dentist–patient ratio and the quality of bedside care is comparable to Western countries. At the moment, a number of private clinics with capacities of 1,000 to 1,500 beds are being built in India. Why are you focusing on dentistry now is trivial. India has much going for it.

India needs dental services and hygiene standards. Many private clinics have dental departments that were established especially for overseas patients, which help them with travel arrangements, such as booking flights, transport from the airport and getting visas. I have to say that this has become very successful.

It is also not a secret that many Indian dentists who have practised in England or the US are now using the opportunities that these clinics offer and return to practise in India for a while.

What’s the price range of these clinics?

Dr Wamser: Dental services are 60 to 70 per cent cheaper than in Europe or North America but the cost of materials is more or less the same. These clinics are independent and can offer less expensive services because they do not have to pay opportunity costs, for example.

India is often compared to China when it comes to economic development. What potential does the Indian dental market really have?

Dr Wamser: On the one hand, we have a mass of people that offer dental services on the streets but who have never had any dental education. On the other hand, we have a small segment of well-educated and foreign-trained dentists who work in many of the private dental clinics. The group of street dentists or those with small practices are not able to buy expensive equipment; therefore, it falls upon the private sector and hospital chains to invest in new equipment. Moreover, the constant and growing demand is a significant opportunity for foreign manufacturers of dental equipment.

What should be done?

Dr Wamser: India needs a big leap forward to reach the same level of technological development that Western countries have achieved in two decades. This includes all sectors, such as high-quality equipment, sterilisation methods and hygiene standards.
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India is in need of—and certainly wants—foreign expertise and this can only be achieved through the purchase of new products. However, merely selling advanced equipment will be not enough: doctors in India have to be trained in new methods and technologies.

In most Asian countries, manufacturers often struggle with the various registration procedures for their products. What is the case in India?

Dr Wamser: I have to admit that India is a country with a very high level of bureaucracy. The system introduced by the British in the 19th century was taken over and even extended by the Indians. Therefore, product registration is a requirement in India and will become a problem when industry players try to achieve it under time pressure. Companies that plan and provide all the necessary documentation will face no problems.

Mr Batra: We found out that it took many German companies actually longer, sometimes years, to register a product in China than in India, even though they had been on the market there for quite some time. There is certainly the risk that guidelines and regulations change and extend the registration process, but usually it goes smoothly. As far as dental products are concerned, we have learned that the registration of implants takes more time than the registration of dental units.

How competitive is the dental market in India?

Dr Wamser: To answer that question we have to look into other industries. There certainly is competition and the market in India is not necessarily uncharted territory. If you compare it with China once again, private business has been allowed in India for decades and small- and medium-sized enterprises have been producing and selling dental equipment for years. Their products, however, usually do not meet the requirements for quality and technology that we have here in Europe or the US.

Sounds promising...

Dr Wamser: Well, not really. Foreign manufacturers still try to enter the Indian market by dumping technology that was state-of-the-art 20 years ago. Doing so is a big mistake and will definitely backfire because the low-price sector clearly is and will be dominated by Indian companies.

So what are your recommendations?

Dr Wamser: There are not many standards in India as far as technology is concerned and this gives companies the chance to influence the future of dentistry in India. Manufacturers that enter the market early will be able to shape the market conditions there.

Being the first is the key?

Dr Wamser: If we talk about dentistry in India, we do not only look at the present state and today's market potential but at development that will last for the next two or three decades. Manufacturers can choose to enter the market now as pioneers or later when the market will be fully developed.

Also keep the persistence effect in mind. Dental graduates who practised on one particular device are likely to use that device or its successors for the rest of their professional lives. Being the first in the market can mean successful business for decades to come. Entering the market later means more competition or breaking into an already established market system.

Thank you very much for the interview.
Mumbai prepares for major dental show
IDEM to address growing dental market opportunities in India

LEIPZIG, Germany/MUMBAI, India: Preparations for the first International Dental Meeting & Exhibition (IDEM) in Mumbai are in full swing. According to preliminary reports from the organiser Koelnmesse, more than 60 per cent of the available booth space at the Bombay Exhibition Center has been booked. The organisers have confirmed that countries like Switzerland, Italy, Korea, Germany and the US will have joint booths at the show. IDEM India is scheduled to take place from 25 to 25 October 2009.

IDEM India’s show concept is based on a major dental event that is organised by Koelnmesse in Singapore and takes place every two years. The last show in 2008 drew more than 6,000 trade visitors to the South Asian city-state and confirmed its role as a pivotal dental meeting in the Asia Pacific region. A survey revealed that more than 20 per cent of the exhibitors there are already serving Indian customers or are looking for a similar platform to address the Indian market directly.

Amongst Asia’s emerging market countries, India remains one of the countries with sustainable growth. The country currently has at least 40,000 practising dentists and a market volume of around US$440 million, which is three times higher than that of China. However, the tempo has slackened compared to the current situation in the global financial markets. For the current fiscal year 2008/09, analysts from the Centre for Monitoring Indian Economy corrected expectations from the Office of Statistics in India, which was confirmed in the current fiscal year 2008/09, from the current situation in the global financial markets. For the current fiscal year 2008/09, analysts from the Centre for Monitoring Indian Economy corrected expectations from 8.2 per cent to 7.4 per cent after 9.0 per cent the previous year. The Office of Statistics in India is reckoning on only 7.1 per cent, which was confirmed in the most recent report by the company Germany Trade and Invest. However, compared with recent growth forecasts of only 2 per cent for countries in the EU or the US, the opportunities for making an entry into the Indian market are excellent.

IDEM India will feature not only a major dental exhibition, but also an academic conference at which experts will have the opportunity to present on the latest topics in Indian and international dentistry. In addition, seminars and workshops will give visitors the opportunity to obtain selective training and continuing education. A Speaker’s Corner with product presentations by key industry players is also planned.

“With the IDEM show in Singapore we have proven that we can address existing and future customers.”

Kuhrt said that visitor advertising, which was begun during IDS Cologne in March and is targeted at dealers and professional users from India and the neighbouring countries in South-East Asia, will be increased in the coming months. Around 5,000 trade visitors from the Indian subcontinent are expected to attend the first IDEM India show, he added.

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Medical tourism in India is growing by 20–30 per cent

Interview with Vivek Shukla, India

Vivek Shukla is a health care marketing professional from New Delhi in India. With a Master of Business Administration from the Lal Bahadur Shastri Institute of Management in New Delhi, he joined the health care sector in 1998 and has since helped more than 20 hospitals around India in terms of hospital development.

Daniel Zimmermann: You recently spoke at the 2nd European Congress on Health Tourism in Budapest in Hungary. Is the medical tourism market in Europe similar to that of Asia or did you note major differences?

Vivek Shukla: Medical tourism in Asia has two types of patients. On the one hand, there are patients from developed countries like the U.S., who are looking for high-quality treatment options that are cheaper than in their home countries. On the other hand, there are patients from underdeveloped countries looking for treatment options that are not available in their countries.

I believe many Europeans travel ‘within the continent’. In Asia, apart from patients travelling within the continent, a number of health tourists also comes from America, Africa, and other continents. The number of patients travelling from Europe to Asia is significantly lower compared with the health tourists coming from North America or Africa.

Medical tourism in Europe and Asia is booming. In your opinion, what is the reason for this growth?

Treatment costs have risen consistently. It does not matter if you are paying out of your pocket or your insurance company is paying for you. As long as someone is paying for the treatment and the fee, these players will certainly look beyond their borders.

What are the cost differences between hospitals and dental offices in India and other countries in Asia, and how do the cost of travel and accommodation compare?

In India, the medical tourism market is growing by 20 to 30 per cent per year. There is a continual rise in the number of medical tourists flying in because of the global economy. Barring the few signs of medical tourism in the U.S. for the time being, nowhere in the world is medical tourism growing faster than in India. There is a kind of Giffen’s Paradox that we studied in Economics, which implies that the demand for cheaper goods and services goes up during inflation. Medical tourism is good for various allied industries including airlines, hotels, travel agencies, and the pharmaceutical and medical equipment industry.

In India, the medical tourism initiative is driven by players from the private sector. There is a rise in the number of private health-care ventures since 1990. Hence, the medical tourism business is growing further as the number of private health-care businesses increases. Currently, the Compound Annual Growth Rate of the industry is estimated to be about 15 to 15 per cent per year, in spite of the slowdown.

Patients from the rural areas in India are already a significant player in the field of medical tourism. Can you tell us how big the market is in India currently?

In India, the medical tourism market includes medical tours to India and other parts of Asia. In India, general costs, like rent for office space and the cost of equipment, are considerably lower compared with Europe or the U.S. Therefore, the price of treatments can be considerably lower.

Overall, a good standard of living can be maintained in India at a lower cost than in developed countries. For example, groceries cost about 20 times less here than in Germany or France.

Is the medical tourism market in Asia booming? In your opinion, what is the reason for this growth?

There is much speculation about the size of the market. The Indian government claims that there are about 200,000 visited India last year for medical treatment. One report suggests that the medical tourism market is growing by 20 to 50 per cent per year and will reach US$2 billion by the year 2012.

The Indian government recently introduced a medical travel visa, in order to track the number of medical travellers to the country. This will help in drawing conclusive evidence for the inbound numbers.

Can you already see the impact the medical tourism industry will have on the economy and especially the health-care system in India?

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There are initiatives in the European Union that aim to give patients seeking cross-border treatment rights and legal protection are very important issues

Do Indian doctors compete more with their Asian counterparts or with their colleagues in the industrialised world?

The environment is fairly competitive. In India, there has been a rise in medical tourism, and this has benefited Indian doctors, who have been able to attract patients from abroad.

In search for higher revenue and footfall, these players will certainly look beyond their borders.

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