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January / April

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Inside:

- Dubai Healthcare Overview
- Focus On Diabetes
- Outlook on U.A.E Healthcare Sector

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The image shows a white Autopress device mounted on a stand. It has a digital display and several buttons. Two white fluid bags are connected to the device via tubes. The device is labeled 'autopress' and 'BIEGLER MEDIZIN ELEKTRONIK'.

autopress

AUTOMATIC PRESSURE INFUSOR

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under constant pressure
with electronic control**

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Automatic Pressure Infusor

BIEGLER GmbH develops and manufactures medical devices and disposables for over 40 years. Biegler serves their customers by offering them not only high quality products and services but comprehensive and personal support as well.

The company based in Austria / Europe introduced the AUTOPRESS device as an important part of its fluid warming philosophy. Autopress works directly with Biegler blood and infusion warmers to deliver blood and fluids at high flow rates or as a stand-alone unit to deliver fluids at constant pressure up to 300 mmHg wherever needed.

Pressure infusing bags are mainly used for irrigation purposes during arthroscopy, laparoscopy and hysteroscopy. The adjusted pressure is constantly maintained and therefore does not require manual compensation.

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Biegler GmbH
Allhangstrasse 18a
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Austria

Tel.: +43 1 979 21 05
email: office@biegler.com

CE 0123



Arab Health
Za'abeel Hall, Stand Z2G38
www.biegler.com

Editorial

THE GLOBAL BURDEN OF DIABETES



With the wish that you have started the New Year with success we are excited to develop **an innovation in our Infomedix magazine**. Starting from the upcoming issue our focuses are changing face. The "Focus on Diabetes" is combining scientific and socio-economic information together with market trends. Nevertheless in remaining loyal to our core business, articles will follow on the economic and medical markets in Azerbaijan and the U.A.E. as well as worldwide industry news.

Diabetes is recognised as the fastest growing chronic condition in the world and the number of people suffering from it is growing in each country. Just to mention some frightening figures: one in 11 adults has diabetes and one in two adults with diabetes is undiagnosed. 12% of global health expenditure is spent on diabetes; one in seven births is affected by gestational diabetes; 542,000 children have type 1 diabetes and every six seconds a person dies from diabetes! In response to the growing concerns about the escalating health threat posed by such disease, the World Diabetes Day, held on November 14th every year, has become an official United Nations Day and a United Nation Resolution (61/225). The campaign draws attention to issues of paramount importance to the diabetes world and keeps diabetes firmly in the public and political spotlight. The WHO is also marking World Diabetes Day by announcing that the Organization's annual World Health Day, 7th of April, will focus on the issue of diabetes. With these initiatives both the WHO and the UN are calling for greater action to turn the growing tide of the global epidemic.

Needless to say, chronically ill patients are a big challenge for healthcare systems worldwide. The EU member states are faced with a rapidly ageing population and the related burden of chronic illness is growing to pandemic proportions. Some 60 million live with diabetes, 10 million are suffering from heart failure and 20 million with chronic obstructive pulmonary disease.

These three conditions alone are costing EU health-care systems around EUR 125 billion each year.

On this regard, an interesting initiative, funded by the EU and the first of its kind, is the **Advancing Care Coordination & Telehealth Deployment (ACT) Programme**, specifically designed to help overcome the barriers surrounding deployment of care coordination and telehealth services (CC&TH) in a large scale. The ACT programme brings together a powerful Pan-European consortium which includes healthcare authorities, clinical experts, universities and industry partners. Their efforts are directed at improving health outcomes for the chronically ill. With the objective of identifying good practices, the ACT programme goes beyond the trial setting to assess the structural and organisational drivers, and their barriers, in five EU healthcare regions: Lombardy (IT), Basque Country (ES), Catalonia (ES), Northern Netherlands (NL) and Scotland (UK).

With care coordination and telehealth services chronically ill people can be treated in their own homes through the deployment of integrated care. Care coordination and telehealth services provide patients with independence, freedom and control over their health and lifestyle. Such services will have the potential to reduce hospital admissions, days in hospital and mortality rates, as such reducing the economic burden of chronic care and maximise delivery of clinical support.

Infomedix dedicates its focus, if possible, to raise awareness among its readers, taking part in the campaign even if with a small contribution. As the total number of people with chronic illness are projected to rise in the future, increasing pressure on our health services, we firmly believe that a more intelligent approach to prevention and innovation is crucial to guarantee an active aging, a healthier lifestyle and...**a healthier reading, of course!**

Baldo Pipitone
CEO Infodent S.r.l.
baldo.pipitone@infodent.com

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1-2016
January / April



FOCUS ON DIABETES

"A new study from WHO (World Health Organization) has shown that the number of people with diagnosed diabetes is dramatically increasing worldwide especially in developing countries..."



MARKET OVERVIEW UAE HEALTHCARE SECTOR

"The UAE is a Constitutional Federation of seven Emirates: Abu Dhabi, Dubai, Sharjah, Ajman, Umm Al Quwain, Ras Al Khaimah and Fujairah. The UAE is located on the Arabian Peninsula and is bordered by Oman and Saudi Arabia..."

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• LUFT3 - The New Sensation in Lung Ventilation



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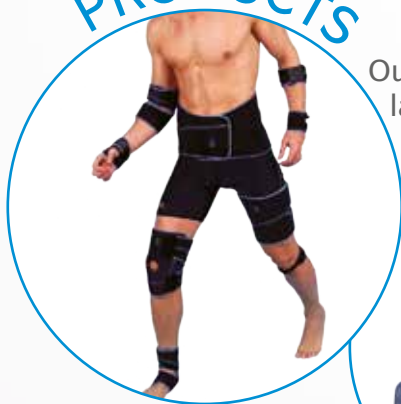
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Our commitment to excellence leads us to be proactive in launching new products which already incorporate last advances in technology and materials.



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The Videra camera system joins other products from Image Diagnostics that include marketing leading C-Arm urology and vascular tables as well as a unique line of portable video integration towers. For further information, contact JD Honigberg Intl at medical@jdhintl.com or visit www.jdhmedical.com



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Calze Olona top quality italian company production

Calze Olona Srl, established in 1964, is located in Locate Varesino, in the province of Como, where it manufactures a large and qualified range of graduated compression elastic hosiery for the care and prevention of varicose veins, with graduated compression from 7 mm Hg to 30 mm Hg, in different models that include woman hosiery, man socks, anti-thrombosis and medical hosiery.

Calze Olona Srl facility is more than 3000 sqm, with over than 100 computerized circular looms with electronic controls and 40 machineries for a production of more than 3.000.000 pairs a year, with the use of high quality yarns.

The first step of the production and all the following ones, from the sewing of the toes to the pantyhose assembling, from the application of the thigh-high bands to the waist band ones, from the application of the personalized labels to the packaging, are completely done inside the two facilities of the company in order to be able to submit the whole production to constant internal controls of the quality and of the graduated compression levels. The only external operations are the fixing and the dyeing because, for ecological reasons, they are done by another company in northern Italy, highly specialized and with suitable environmentally certifications for the health protection.

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Contact us: **www.calzeolona.it** and require the video of the Calze Olona production.



Calze Olona: main facility located 31 km far from Milan

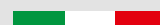
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An italian example in the elastic stockings and orthopedic products field

We turn to doctor Natale Molinari, founder of Luropas company, leader in the elastic stockings and orthopedic field with the Scudotex brand, to know this typical Italian working activity.

Q: Dr. Molinari when did you decide to start your company activities?

A: In 1977 when my wife and me decided to found Luropas company in order to sell our production line and to register it under the Scudotex brand.

Q: Which is the main Luropas production?

A: The main fields we deal with are the ones of the graduated compression hosiery, with the complete range of Scudotex elastic stocking that includes different compressions, from the preventive ones (7 mm Hg) to the therapeutics ones (30 mm Hg), besides the knee-highs for man and the anti-thrombosis models. We also offer a complete line of post-surgical belts, orthopedic corsets and medium-strong corsetry.

Q: Which new markets are you interested in?

A: Scudotex is leader in the Italian market and it is present in more than 40 Countries all over the world, from Europe, to America, to Asia. Our main foreign customers are important companies that mainly deal with pharmacies, orthopedic and sanitary shops or that provide hospitals. Our company mainly sells its products under the Scudotex brand, even if in particular occasions we can offer private label supplies. Being producers, we are also able to provide elastic fabrics for the production of elastic belts and corsets.

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Q: If everything is manufactured in Italy, can your Scudotex products have competitive prices with the competitors?

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We also produce Thermal transfer labels with Class I process indicators that you can print using our Printer Copernico with our self-made software included in it.

The MDD (European Medical Devices Directive) requires for the reprocessing of medical devices to use appropriate procedures and to document the results of the validation of sterilization.

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• COLOR UP YOUR LAB!



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• Health Enterprises Adding Innovative DryEars to Strong-selling Ear Care Range



Health Enterprises, Inc., a leading manufacturer of niche health care products, is adding their innovative, new DryEars ear drying device to their strong-selling Ear Care range; which includes their doctor-designed Ear Wax Removal Syringe and Deluxe Ear Cleanser.

The patented DryEars uses air to safely and effectively dry and remove trapped water from ears. The product works in approximately 20 seconds, and is safe for children over 3 years of age. "Swimmers, among others, often suffer from water clogged ears", said Brendan Leonard, president of Health Enterprises, "our DryEars quickly clears trapped water from ears, and in doing so also helps to prevent 'Swimmer's Ear'". Health Enterprises will begin selling the DryEars in Boots and on www.boots.com in February 2016, and worldwide in March 2016. Health Enterprises, Inc. is a leading manufacturer of branded and private label OTC consumer healthcare products sold in retailers across the globe.



www.healthenterprises.com // export@healthenterprises.com

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highlights

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A single piece, extruded aluminium structure ensures an enhanced temperature uniformity and a good heat dissipation in natural convection conditions.

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Concentrated Growth Factors:



A new medicine for tissue and bone regeneration.

Tissue regeneration is a continuing challenge both in biological and clinical terms. Regenerative medicine and tissue engineering are continuously making huge advances in the identification of new strategies in the field of tissue regeneration. In this field, platelet concentrates represent an interesting and innovative therapeutic alternative, as they provide a rich source of autologous growth factors involved in the induction of cell proliferation, in extracellular matrix remodeling and in the angiogenetic mechanisms, that take place during the different stages of tissue regeneration.



Photo
Two CGF
Yellow part:
fibrin clots
Red part:
erythrocytes

Platelet preparations are obtained from patient's venous blood through a standardized protocol of centrifugation, that sometimes, using the addition of exogenous substances, allows to isolate a fraction rich in platelets and growth factors, called "platelet concentrate" or "platelet gel".



Photo
Fibrin clots

The platelet growth factors have extremely high efficiency in every biological process, in which it is necessary to stimulate tissue repair, growth and modulation of cell life and self-control of the immune system. The technique of platelet concentrates moves plasma rich in growth factors from the blood to the treatment area, speeding and tracking the natural processes of healing.



Photo MEDIFUGE
machine MF 200

Concentrated Growth Factors (CGF), developed by Sacco in 2006, is a special type of platelet preparation with great potential for clinical application.

At the base of the regenerative process, three factors are particularly important: the scaffold (organic, natural or synthetic), growth factors and autologous cells. All these elements are present in the CGF which is obtained by a "one-step" centrifugation process of the blood samples, using a special centrifuge (Medifuge Mf 200, Silfradent srl, Forli, Italy), without the addition of exogenous substances. Its main characteristic lies in its consistency; in fact CGF is an organic matrix rich in fibrin, thus more dense than other platelet concentrates, able to "trap" a large amount of platelets, leukocytes and growth factors, showing regenerative properties and versatility.



Photo
CGF biological
membrane

These features, together with the simple and standardized centrifugation protocol MEDIFUGE, make the CGF a superior autologous product which can be used in different areas of regenerative surgery; for example in dentistry, maxillofacial surgery, cosmetic surgery and orthopedics.

Its clinical efficacy, has so far been demonstrated in various situations ranging from filling of extraction sockets (Tadić et al., 2014), to the filling of the cavities after cystectomy (Mirković et al., 2015), to interventions of sinus lift and augmentation of the crestal profile (Kim et al., 2014; Del Fabbro et al., 2013; Sohn et al., 2011). In addition, CGF features, make it suitable to be used both alone and with bone particulate or autologous biomaterials (Ghenot et al., 2014). In conclusion, if it is true that the blood is the "source of life" for the organism, platelets in it play an important role in the body's regenerative processes.

The research, however, does not stop and Silfradent has still in progress studies at several universities in Italy (University of Bari, University of Brescia), Europe (ACTA Amsterdam University, Dental School-Medical University Vienna; University of Warwick - UK) and also outside Europe (IPK center Hospital Havana-Cuba; Almejiera center Hospital Havana-Cuba).



Photo
Bone-Ring graft material mixed with
CGF

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Malaysian Rubber

Succeeding the Global Market

Standing tall in the district of Kuala Kangsar, Perak, is the oldest rubber tree in Malaysia. One of nine trees planted in 1877, it is the forerunner of Malaysia's rubber industry. For most of the 20th century, rubber contributed greatly to the nation's development. The Malaysian rubber industry has evolved through the years, from primarily exporting rubber as a commodity to developing mid and downstream industries that manufacture high quality and competitively priced rubber products for the world.

Today, Malaysian rubber products are found in almost every sector of human industry, with applications in health and medicine, homes, offices and factories, transportation, construction and infrastructure, recreation, sports and toys, providing safety and comfort and impacting lives around the world in many different ways.

Malaysia is the world's largest exporter of medical gloves, condoms and rubber catheters.

As the world's leading supplier of medical gloves (examination and surgical gloves), Malaysian exports account for more than 50% of global needs. Malaysia is also the world's largest exporter of condoms, and rubber Foley catheters and a major supplier of latex threads.

The reliability and superior quality of Malaysian-made rubber gloves give them an edge in meeting the most stringent standards and requirements of users, making them the preferred choice of most distributors of hospital supplies and healthcare products. The Standard Malaysian Glove (SMG) Scheme, implemented by the Malaysian Rubber Board (MRB) after taking into consideration the requirements of major regulatory agencies such as the US Food and Drug Administration (USFDA), is accepted as a reliable point of reference for natural rubber examination gloves in the international market.

The Malaysian rubber glove industry today is dynamic and innovative, focused on technological improvements in products, materials and processes. The range of products offered by Malaysian manufacturers has grown to cater to the specific needs

of the medical and healthcare industry, with both natural and synthetic rubber gloves being offered to international markets. In terms of gloves for specific applications, gloves for chemotherapy, dental care, orthopaedics, ophthalmology and radiation attenuation are available. In 2014, Malaysia exported an estimated 112.5 billion pieces of rubber gloves. In value terms, Malaysia exported USD 3.3 billion worth of rubber gloves, which accounted for 52% of the total world imports of rubber gloves of USD 6.3 billion.

Malaysian-made condoms can also be found in most countries around the world. While inroads are being made into branding and distribution of condoms, the bulk of condoms from Malaysia can be found in the social, NGO and government distribution channels. Malaysia also produces an extensive range of rubber products for industrial, infrastructure and construction applications, such as bridge bearings, expansion joints, hoses, beltings, seals, wires and cables for the global market. Household products such as garden hoses and floor mats, baby products such as teats and soothers, sporting goods including a variety of balls, swimming gears and goggles, are also exported from Malaysia. From tiny grommets for automobiles to huge seismic bearings for use in buildings in earthquake prone areas, Malaysian-made rubber products help to make the world a better place.

Rubber product companies in Malaysia range from small enterprises providing specific solutions to multinationals that export to almost every country in the world. The industry is served by institutions such as the Malaysian Rubber Export Promotion Council (MREPC) facilitating market promotion, and the Malaysian Rubber Board (MRB) providing research and development support.

Malaysian rubber products are exported to more than 190 countries. The United States (USA), Germany and Japan are the largest markets, accounting for more than 41% of Malaysia's total exports. Other important markets for Malaysian rubber products include European Union (EU) countries, ASEAN, China, India and Australia. For quality rubber products, look to Malaysia.

Malaysia – Your Source Of Quality Rubber Products



Photo Glove and Rubber Catheters

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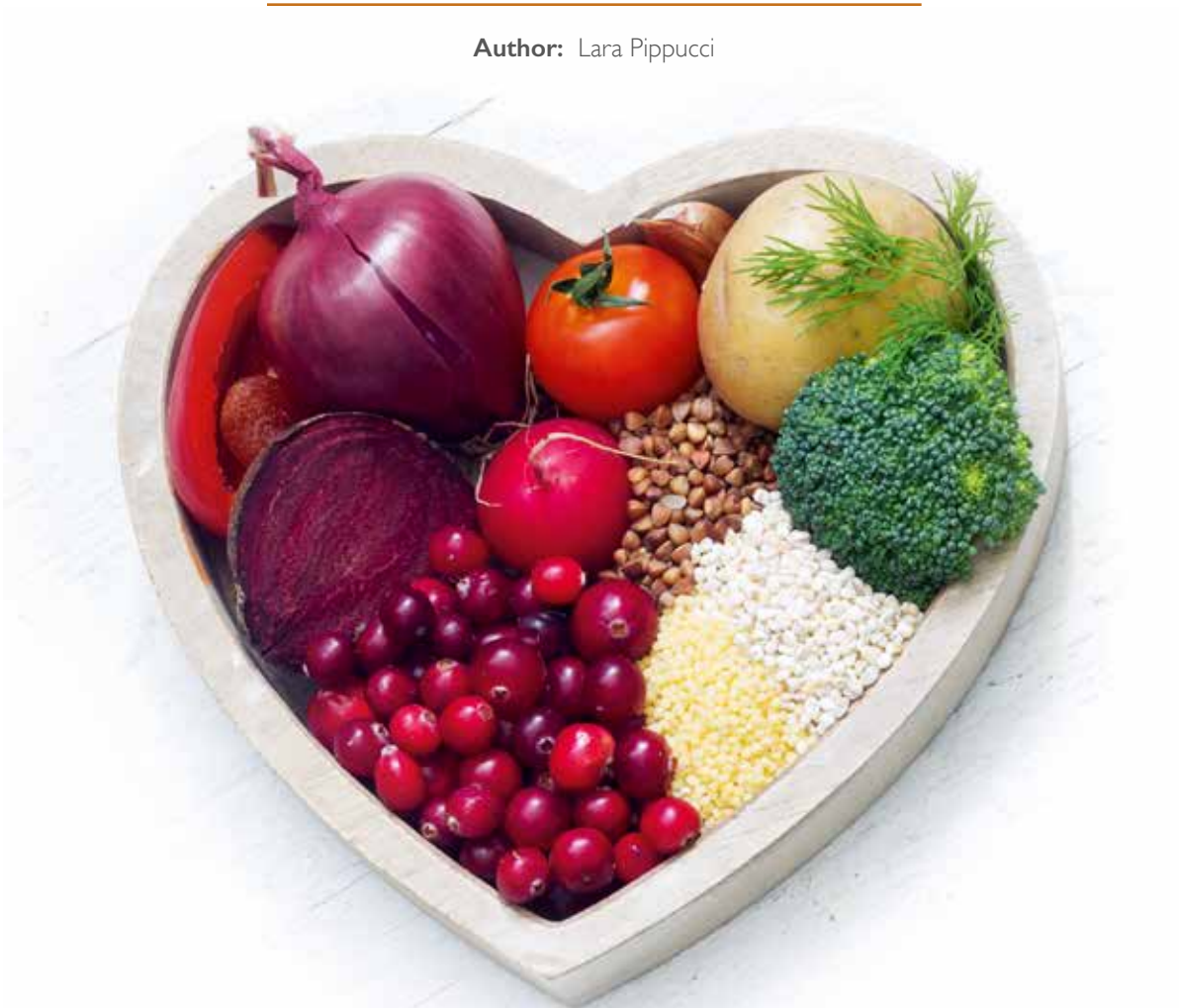


Focus

What is Diabetes

A new study from WHO (World Health Organization) has shown that the number of people with diagnosed diabetes is dramatically increasing worldwide especially in developing countries. Diabetes, even known as the Silent Killer because of its easy-to-miss symptoms, will be the 7th leading cause of death in 2030.

Author: Lara Pippucci



KEY FACTS

Diabetes

- 1.5 million deaths are directly attributed to diabetes each year
- 9% of adults in the world have diabetes
- More than 80% of diabetes deaths occur in low- and middle-income countries
- WHO projects that diabetes will be the 7th leading cause of death in 2030
- In 2014 the global prevalence of diabetes was estimated to be 9% among adults aged 18+ years
- Healthy diet, regular physical activity, maintaining a normal body weight and avoiding tobacco use can prevent or delay the onset of type 2 diabetes
- 90% of people with diabetes in the world have type 2 diabetes

According to a recent study conducted by WHO (World Health Organization) diabetes cases will significantly increase in the near future. **This raise is mainly due to population growth, aging, urbanization, and increasing inactivity particularly in developing countries** where the population is expected to double between 2000 and 2030.

The distribution of diabetes for all age-groups worldwide was estimated to be 2.8% in 2000 and 4.4% in 2030 and the total number of people with diabetes is projected to rise from 171 million in 2000 to 366 million in 2030.

In the light of the fact that diabetes represents a serious health problem and in most cases it can even be deadly, this disease is absolutely not to be underestimated. Moreover, quantifying the prevalence of diabetes worldwide, identifying its main risk factors and arranging an effective prevention campaign is crucial to allow rational planning and allocation of resources.

Diabetes (otherwise known as diabetes mellitus, DM) is described as a metabolic disorder in which the body cannot properly store and use the energy found in food.

More specifically, diabetes is a condition that affects the body's ability to use glucose (a type of sugar) as fuel. Glucose is a form of carbohydrate that comes from foods such as breads, cereals, pasta, rice, potatoes, fruits and some vegetables. Glucose is also synthesized in the liver and is carried in the blood to the rest of the body to fuel cellular processes.

To use glucose as fuel, insulin is required to get the glucose into cells. **Insulin is a hormone (a type of chemical messenger) made by specialized cells in the pancreas.** Insulin regulates blood glucose by stimulating the removal of glucose from the blood and its uptake into muscle, liver and fat cells where it can be stored for energy.

Sometimes the body does not make enough insulin or the cells do not respond properly to insulin. Blood glucose levels can then become elevated while the cells are deprived of fuel. **When blood glucose levels get too high (hyperglycemia) this can cause damage to the tiny blood vessels in the eyes, kidneys, heart and nervous system,** which is why diabetes is associated with an increased risk of cardiovascular disease, kidney disease, loss of vision and neurological conditions.

There are different types of diabetes, some of which are more prevalent than others. The most common form of diabetes in the general population is type 2 diabetes, which often develops from pre-diabetes.

Type 1 diabetes

Type 1 diabetes is known as insulin-dependent diabetes, juvenile diabetes, or early-onset diabetes as people usually develop it suddenly before their 40th year, often in early adulthood or teenage years. Type 1 diabetes is characterized by deficient

insulin production and patients will need to take insulin injections for the rest of their life. They must also ensure proper blood-glucose levels by carrying out regular blood tests and following a special diet.

Type 2 diabetes

Type 2 diabetes, previously called non-insulin dependent or adult onset, results from the body's ineffective use of insulin. **The body does not produce enough insulin for proper function or the cells in the body do not react to insulin (insulin resistance).** Being overweight, physically inactive and eating the wrong foods all contribute to our risk of developing type 2 diabetes.

Overweight and obese people have a much higher risk of developing type 2 diabetes compared to those with a healthy body weight. People with a lot of visceral fat, also known as central obesity, belly fat, or abdominal obesity, are especially at risk. Being overweight/obese causes the body to release chemicals that can destabilize the body's cardiovascular and metabolic systems.

The risk of developing type 2 diabetes is also greater as we get older. Experts are not completely sure why, but say that as we age we tend to put on weight and become less physically active. Those with a close relative who had had type 2 diabetes, people of Middle Eastern, African, or South Asian descent also have a higher risk of developing the disease.

Men whose testosterone levels are low have been found to have a higher risk of developing type 2 diabetes as researchers from the University of Edinburgh, Scotland, say that low testosterone levels are linked to insulin resistance.

Some people may be able to control their type 2 diabetes symptoms by losing weight, following a healthy diet, doing plenty of exercise, and monitoring their blood glucose levels.

However, type 2 diabetes is typically a progressive disease - it gradually gets worse - and the patient will probably end up have to take insulin, usually in tablet form.

Gestational diabetes

Gestational diabetes is hyperglycaemia with blood glucose values above normal but below those diagnostic of diabetes, occurring during pregnancy. Women with gestational diabetes are at an increased risk of complications during pregnancy and at delivery as the baby may be bigger than he/she should be. **The majority of gestational diabetes patients can control their diabetes with exercise and diet and**

only between 10% to 20% of them will need to take some kind of blood-glucose-controlling medications. Anyway, they are at increased risk of type 2 diabetes in the future.

Prediabetes or Impaired glucose tolerance (IGT) and Impaired fasting glycaemia (IFG)

Prediabetes, Impaired glucose tolerance (IGT) and Impaired fasting glycaemia (IFG) are intermediate conditions in the transition between normality and diabetes. People with IGT or IFG have blood glucose levels higher than normal, but not high enough to merit a diabetes diagnosis. People with IGT or IFG are at high risk of progressing to type 2 diabetes, although this is not inevitable.

Main Symptoms Of Diabetes

Diabetes is often referred to by doctors as the **Silent Killer** because of its easy-to-miss symptoms. In fact patients can experience different signs and symptoms of diabetes but sometimes there may be not signs at all. **Anyway, the development of type 1 diabetes is usually sudden and dramatic while the symptoms can often be mild or absent in people with type 2 diabetes,** making this type of diabetes hard to detect.

Early Warning Signs Of Diabetes

- Increased urination, Excessive thirst
- Weight loss
- Increased Hunger
- Skin problems
- Slow healing
- Yeast infection
- Fatigue and irritability
- Blurry vision
- Tingling or numbness

Complications Linked To Badly Controlled Diabetes:

- **Eye complications** - glaucoma, cataracts, diabetic retinopathy, and some others
- **Foot complications** - neuropathy, ulcers, and sometimes gangrene which may require the foot to be amputated
- **Skin complications** - people with diabetes are more susceptible to skin infections and skin disorders
- **Heart problems** - such as ischemic heart disease, when the blood supply to the heart muscle is diminished
- **Hypertension** - common in people with diabetes, which can raise the risk of kidney disease, eye problems, heart attack and stroke
- **Mental health** - uncontrolled diabetes raises the risk of suffering from depression, anxiety and some other mental disorders

Diabetes is often referred to by doctors as the Silent Killer because of its easy-to-miss symptoms.



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The global market for diabetes care devices is forecast to reach \$26.96 billion by 2019 at a Compound Annual Growth Rate (CAGR) of 5.93%.

- **Hearing loss** - diabetes patients have a higher risk of developing hearing problems
- **Gum disease** - there is a much higher prevalence of gum disease among diabetes patients
- **Gastroparesis** - the muscles of the stomach stop working properly
- **Ketoacidosis** - a combination of ketosis and acidosis; accumulation of ketone bodies and acidity in the blood
- **Neuropathy** - diabetic neuropathy is a type of nerve damage which can lead to several different problems
- **HHNS** (Hyperosmolar Hyperglycemic Nonketotic Syndrome) - blood glucose levels shoot up too high, and there are no ketones present in the blood or urine. It is an emergency condition
- **Nephropathy** - uncontrolled blood pressure can lead to kidney disease
- **PAD** (peripheral arterial disease) - symptoms may include pain in the leg, tingling and sometimes problems walking properly
- **Stroke** - if blood pressure, cholesterol levels, and blood glucose levels are not controlled, the risk of stroke increases significantly
- **Erectile dysfunction** - male impotence
- **Infections** - people with badly controlled diabetes are much more susceptible to infections
- **Healing of wounds** - cuts and lesions take much longer to heal

Prevention

At present time type 1 diabetes cannot be prevented while a healthy lifestyle can help prevent the development of type 2 diabetes.

Type 2 Diabetes Prevention

- Weight loss
- Physical activity
- A balanced and nutritious diet
- Quit Smoking
- Avoid Emotional Stress
- Have good sleep habits

Global Diabetes Market

The global market for diabetes care devices is forecast to reach \$26.96 billion by 2019 at a Compound Annual Growth Rate (CAGR) of 5.93%.

Market is segmented into two major segments i.e. **Glucose monitoring device market and Insulin delivery device market**. Glucose monitoring devices are segmented into blood glucose meters, blood glucose testing strips, lancets, and continuous glucose monitoring devices. Insulin delivery devices are further segmented into Insulin syringes, Insulin pens, Insulin pumps and Insulin Injectors.

Glucose monitoring devices will be the largest category in the market, with a value of \$14.2 billion by 2019 with a CAGR of 6.02 %.

The insulin delivery devices market is forecasted to grow at a CAGR of 5.59 % to reach revenues of \$12.76 billion in 2019. Specifically the insulin syringe patient share will decrease while the insulin pen and insulin pump patient share will increase over the next five years.

CGM-Continuous glucose monitoring devices will show more innovations and technological advances as they are increasingly widely used and saw a growth of about 20% in 2012.

BRIC Market For Diabetes

According to a new market research published by *MarketsandMarkets*, the **Diabetes Care Devices Market in BRIC countries (Brazil, Russia, India and China) is expected to reach around 2.3 Billion USD by 2020 at a CAGR of 6.3% .**

In 2014 the **testing strips segment** accounted for the largest share of the blood glucose monitoring devices market whereas the **insulin pens segment** was estimated the largest share of the insulin delivery devices market. The large share of the insulin pens segment is mainly attributed to the adoption rate of insulin pens in China and Russia. Moreover, the increasing adoption of insulin pens and easy availability of recently launched affordable insulin pens in India have further contributed to the growth of this segment.

CGM- Continuous blood glucose monitoring systems is the fastest-growing subsegment of the blood glucose monitoring devices market. Growth in this segment is mainly attributed to the rising adoption of continuous blood glucose monitoring systems by healthcare professionals who needs to monitor real-time blood glucose levels and guarantee an effective management of diabetes.

China is estimated to be the largest diabetes care devices market among BRIC countries, followed by Brazil, India, and Russia. In fact China, with over 100 million diabetics, has already outpaced other nations in terms of number of people affected by this disease. Growth of the diabetes market in China is driven by high prevalence of diabetes among the aging population, increased life expectancy, a surge in sedentary lifestyle, unhealthy diet, high stress levels and increased disposable income. **Moreover, the market is boosted in terms of volume by low priced local products which make diabetes treatments affordable** besides supporting adoption of new technology

products such as insulin pump and CGM in hospital segment and insulin delivery products as well as SMBG- Self monitoring of blood glucose in the home-care segment.

European Market For Diabetes

The European market for diabetes care devices is forecasted to reach \$8.08 billion by 2019 at a Compound Annual Growth Rate (CAGR) of 8.19%.

Since the 1980s there has been a tremendous upswing in the use of medical devices for diagnostics and therapeutic measures in diabetes therapy. **Diabetes is one of the most critical issues in healthcare systems across the EU** and the entire diabetes community is actively involved in making diabetes a policy priority. Just to consider the 2012 EU resolution calling on the EU Commission and Member States to develop and implement a targeted EU Diabetes Strategy and, at the end of 2013, a work package dedicated entirely to diabetes in the EU's Joint Action on Chronic Diseases.

In 2013 more than 32 million Europeans lived with diabetes i.e. 8.1% of the entire population. **By 2035 people affected by diabetes are expected to increase to 38 million** and this data is impressive considering that so far only 50% of the population with diabetes has been diagnosed.

In 2013 Europe spent approximately €100-150bn on treating and caring for diabetes and one in ten deaths in Europe can be attributed to diabetes – equaling 619 000 deaths in 2013.


The market is primarily expected to be driven by increasing incidence of people suffering from diabetes, increase in innovation technologies, more R&D in diabetes diagnosis and treatment, and minimally or non-invasive products. Moreover, increasing awareness, improving diagnosis and treatment rates and a growing need for faster, safer and more effective method of diagnosis and treatment of diabetes will lead to increased adoption rates for diabetes care devices. However, market is constrained by high cost associated with diagnosis and treatment, reimbursement issues and patent expiry.

The market is basically dominated by glucose monitoring device market because of increasing awareness of people for diagnosis and treatment of diabetes.


US Diabetes Market

Recent studies have shown that the largest number of cases of diabetes and pre-diabetes worldwide are found in the United States where diabetes is a major cause of heart disease, stroke, kidney disease, blindness, and numerous other debilitating diseases and afflictions and IT represents the seventh leading cause of death.


focus




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Mod. Medical V2/20




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The U.A.E. ranks among the world's leaders for prevalence of diabetes, obesity and other risk factors for cardiovascular disease

29.1 millions Americans i.e. 9.3% of the population of the United States have diabetes and 2.5 millions currently live with type 1 diabetes. Considering that many people are still unaware of their diabetes or pre-diabetes condition this is a considerable data. Nearly 1 in every 400 children in the U.S has type 1 diabetes and 86 millions Americans aged 20 or older are classified as prediabetic while more than 26% of the U.S. population aged 65 or older suffer from this chronic disease.

Studies have shown that the total healthcare expenditure in US was US\$ 281 Billion in 2014 which was the largest share of the world healthcare expenditure and it has been estimated that the prevalence of diabetes will be 14% by 2030 in the US.

According to a research conducted by Decision Resources Group the diabetes device market in the US will grow at a strong pace through 2023. Growth will be mainly driven by rapid expansion in the large insulin delivery device market as well as the continuous glucose monitoring (CGM) market which is currently underpenetrated in the US.

Australian Market

The Australian Diabetes Management and Diabetes Diagnostic Devices market jumped to \$46 million between 2005 and 2013. The market comprises continuous glucose monitors (CGM), self-monitoring blood glucose (SMBG), manual insulin delivery products, glucose test strips, lancets, syringes, insulin pens and insulin pumps. **The growth is driven by the high prevalence of diabetes, acceptance and proliferation of advanced patient compliant technologies, increased reimbursement of devices and government subsidy on consumables.** Especially, continuous glucose monitors (CGM), self-monitoring blood glucose (SMBG) and manual insulin delivery products exhibited significant market growth.

The prevalence of diabetes in Australia has skyrocketed three times to 4.2% over the last 25 years. Around 1 million people in country suffer from diabetes and around 2 million have pre-diabetes. Of these, 11% have type 1 diabetes, 87% have type 2 diabetes and 2% women have gestational diabetes. **We estimate that approximately 3.4 million citizens will suffer from diabetes by 2030.**

The improvement in government initiatives has also fuelled the market growth. **Australian government provides approximately 70% reimbursements for glucose test strips under the Pharmaceutical Benefits Scheme (PBS).** The Australian Institute for Health and Welfare (AIHW) reports that the

number of new Insulin Pump Therapy (IPT) users increased from 107 to 140 per month during the period from 2003 to 2010-pushing up the number of IPT users to 10,510 in 2010. Increased affordability due to the Government's Insulin Pump Program (IPP), subsidized Insulin Pump Consumables (IPC) and private health insurance has contributed to the increased use of IPT over the past 10 years.

UAE Diabetes Market

The U.A.E. ranks among the world's leaders for prevalence of diabetes, obesity and other risk factors for cardiovascular disease. The causes include increasing levels of affluence, the growing popularity of fast food, tobacco use, plus sedentary lifestyle caused by hot weather and one of the highest vehicle-to-person ratios in the region.

UAE's high rates of Type 2 diabetes represents significant societal costs, in relation to morbidity, mortality and also lost productivity coupled with a huge burden on the healthcare system. It has been observed that the high prevalence of diabetes in the UAE is gradually taking its toll on the overall health of the nation and also risking the country's economic well-being.

The total number of diabetes patients in UAE were estimated around 0.75 Million in 2013. With factors such as obesity, rising sedentary lifestyles and unhealthy diet acting in full force, it is expected that the number of diabetic patients in the UAE would grow at a CAGR of 4%-6%, which is double the growth rate of the global market. **The number of diabetics in the UAE is expected to surpass 0.85 million by 2018.**

Efforts to reverse current trends include **Weqaya**, a population screening and intervention program for Emiratis implemented by HAAD that currently focuses on diabetes and cardiovascular disease. This online service screens individuals for various risk factors, explains screening results, provide access to relevant information and services, and connect users to doctors, clinics, and opt-in health and wellness programs tailored to user needs.

Diabetes care is a focus across the country. In 2012 the 8,000-square-foot-government-run diabetes center in Dubai's Latifa Hospital was moved to a new 20,000 square foot facility with 50 percent more capacity. Abbott Diabetes Care has a presence in Dubai and the Dubai Harvard Foundation for Medical Research is investigating diabetes, among other chronic conditions, in its collaborative research efforts.

The Imperial College of London Diabetes Center, with locations in Abu Dhabi and Al Ain, is a state-of-the-art outpatient center specializing in diabetes treatment, research, training and public health. Since its opening ICLDC has treated over 200,000 people.

Further, many UAE organizations such as Mubdala Healthcare, are actively seeking partnerships in the areas of personalized medicine, preventative medicine and health awareness, lifestyle adjustment and treatment, with an emphasis on diabetes and solutions that allow for intellectual property rights.

The production of diabetes devices is not significant in the UAE. Only basic items such as syringes are manufactured in the UAE as the country is mainly an importer of medical products and devices.

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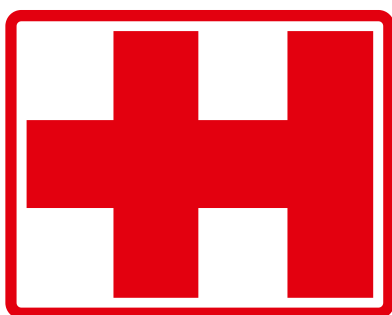
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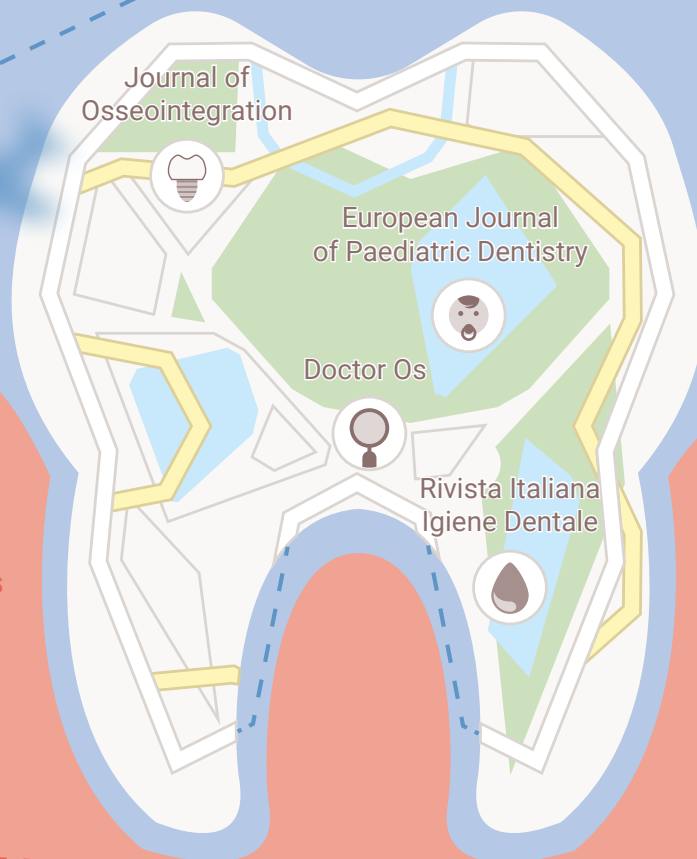
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Outlook on UAE Healthcare Sector

Author: Lara Pippucci

The UAE is a Constitutional Federation of seven emirates: Abu Dhabi, Dubai, Sharjah, Ajman, Umm Al Quwain, Ras Al Khaimah and Fujairah. The UAE is located on the Arabian Peninsula and is bordered by Oman and Saudi Arabia. It covers an area of 83,600 square kilometres, roughly the same size as Austria or the Czech Republic.

Abu Dhabi The largest of the seven emirates and it makes up 87 per cent of the entire country occupying 67,340 square kilometres. Abu Dhabi is the federal capital of the United Arab Emirates and it has a population of 2.65 million. Abu Dhabi is the world's eighth-biggest producer of oil. It has 95 per cent of the nation's oil reserves and about 94 per cent of gas reserves. In 2014, because of the diversification policy, it maintained a GDP of AED 952.6 billion, and the share of non-oil activities increased to 49.5 per cent.

Dubai The second largest of the seven emirates and it occupies an area of approximately 3,900 kilometres which includes a small enclave called Hatta, situated close to Oman, amongst the Hajar Mountains. Dubai, the capital city, is located along the creek, a natural harbour, which traditionally provided the basis of the trading industry. Dubai's population was recently estimated at 2,427,736 million. Dubai is an important tourist destination and its port (Jebel Ali) operates at the centre of the exporting trade in the Middle East. The introduction of the Dubai International Financial Centre (DIFC) in 2004 has allowed Dubai to develop as a global hub for service industries such as IT and finance.

Sharjah Shares its southern border with Dubai, is approximately 2,600 square kilometres and it is the only emirate to have coastlines on both the Arabian Gulf and the Gulf of Oman. Sharjah has a diversified economy. Key contributors are gas, tourism, education, healthcare and logistics and its GDP reached around 113.89 Billion AED as of 2014. Population of Sharjah is 800,000 as of 2008 estimations.

Ajman The smallest of the seven emirates and it covers an area of 260 sq km. The emirate is located on the Arabian Gulf Coast in the northern area of the UAE and it has a population of about 263,000. Currently, Ajman city ranks third among the emirates in industrial development and it is known to have the largest shipyard in the country. Ajman Port and Ajman Free Zone are two key players in the economic growth of the emirate. Ajman's GDP increased at an annual average rate of 4 per cent during the period of 2010-2012.

Umm Al Quwain The second smallest emirate with a total area of around 770 square kilometres. Positioned between the emirates of Sharjah and Ajman to the south and Ras Al Khaimah to the North, Umm Al Quwain has a population of about 65,000. Fishing is a key contributor to the economy of Umm Al Quwain. The emirate exports seafood throughout Europe and Middle East. The construction of Ahmed Bin Rashid Port and the Free Trade Zone signifies the emirate's plans towards expanding its commercial and investment base.

Ras Al Khaimah The fourth largest emirate and it covers an area of 1,700 square kilometres. The emirate is estimated to have a total population of 300,000. Ras Al Khaimah has been witnessing a wide expansion in its economy marked by the recent establishment of free zone areas, which attracted many foreign investments in different sectors. Apart from its agricultural attributes, RAK runs two vital industries: the cement industry and the pharmaceutical industry.

Fujairah The only emirate located along the Gulf of Oman. It covers an area of around 1,300 square kilometres and its population reached 202,667 as of 2014. The emirate's economy relies on trading, manufacturing, ships supply services, transport, storage, and agriculture. Its GDP reached 140,93 million AED of 2014.

U.A.E. Economy

Key Facts

- IMF forecasts UAE will grow by 3.5 percent in 2015-16 despite the oil price slump
- Non-oil growth is projected to slow to 3.4 percent in 2015 before increasing to 4.6 percent by 2020 supported by the implementation of megaprojects and private investment in the run-up to Expo 2020.
- A variety of fiscal buffers have been put in place to help absorb the economic shock of the slowed oil demand
- National GDP will rise to Dh1.6 trillion this year from Dh1.5tn last year
- Industrial investments in the UAE would double in five years
- Diversification and long term economic sustainability will remain a priority

IMF forecasts UAE economy will grow moderately in 2015-2016, in fact the International Monetary Fund has lowered its growth projection for the UAE in 2015, citing lower oil production as reason.

TOTAL AREA:
83,600 sq km

NATURAL RESOURCES:
petroleum,
natural gas

LANGUAGES:
Arabic (official),
Persian, English,
Hindi, Urdu

Last October the IMF projected that the UAE's economy would grow by 4.5 percent in 2015 based on a higher level of oil production and demand but hereafter Masood Ahmed, the IMF's Middle East and Central Asia department sector, speaking at a press conference on the Middle East and Central Asia 2015 Economic Outlook said: "Our current projections on UAE for this year, 2015, are 3.5 percent overall and it will be 3.5 percent also for the next year."

Ahmed added that probably the growth in the economies of Abu Dhabi and Dubai would perform differently over the coming year, with Dubai expected to grow by 4.5 percent this year and 4.6 percent next year.

At present one of the main problem for the UAE economy is that lower oil prices are eroding long-standing fiscal and external surpluses, but luckily the UAE has continued to benefit from its perceived safe haven status and large fiscal and external buffers that have helped limit negative spillovers from lower oil prices, sluggish global growth, and volatility in emerging market economies.

Healthcare

Healthcare Spending

- In 2014 UAE healthcare expenditures represented only 3 percent of the GDP compared to Saudi Arabia with 4.6 percent and Egypt with 5.2 percent
- 69 percent of healthcare expenditure comes from the public budget and 31 percent from private sources
- Healthcare costs are expected to rise by about 30 to 40 percent in the coming years
- Healthcare in the UAE can be divided into 3 main sections: Abu Dhabi (Southern Section), Dubai (Central section), and Sharjah, Ajman, Umm Al Quwain, Ras Al Khaimah and Fujairah (the Northern Section)

The UAE has a comprehensive, government-funded health service and a rapidly developing private health sector that delivers a high standard of healthcare to the population.

The UAE healthcare sector is divided between public and private healthcare providers.

Public health services are managed and regulated by federal and emirate-level government entities such as the Ministry of Health, Dubai Health Authority, the Health Authority Abu Dhabi and the Abu Dhabi Health Services Company (SEHA). These entities often partner with foreign healthcare organizations to run the daily operation of hospitals and clinics throughout the UAE.

Private healthcare service providers such as the New Medical Centre are non-government run hospitals and clinics that provide specialty and full-spectrum care for the UAE population. Needless to say, these Emirati private sector initiatives, like New Medical Centre and Al Noor Hospital are very important to the UAE's overall and long-term healthcare development.

The United Arab Emirates (UAE) spends approximately \$1200 (AED 4,420) per person each year on healthcare, ranking it among the top 20 countries in the world for healthcare spending per capita and the evolution of healthcare is a top priority in all seven Emirates.

In fact, healthcare development and spending is emphasized as a key pursuit in the UAE's federal diversification plan. The UAE vision 2021 states that "the UAE will invest continually to build world-class healthcare infrastructures, expertise and services in order to fulfill citizens' growing needs and expectations".

Further, the Emirate of Abu Dhabi explains in the Vision 2030 plan that "The growth of the medical sector is dependent on large investments in technology, which Abu Dhabi is in a position to make(...) Abu Dhabi will have to attract qualified doctors and medical scientists as well as train local medical staff in order to develop this sector sufficiently".

What sets the UAE apart from other countries in the Gulf is that the federal and individual-emirate governments are backing this vision with significant and strategic investment intended to drive the industry forward. In 2013, alone, UAE healthcare expenditures reached an estimated \$16.8 bn.

However, the UAEs relatively small population has hindered the government's development of specialty care practises, and gaps still exist across the nation in critical areas such as women's care, oncology, pediatrics, and diabetes care. Patients traditionally have obtained this care outside the UAE in places such as India, Thailand and Singapore but are increasingly focusing on North America as well. This transfer of capital is significant as the International Medical Travel Journal estimates that Emiratis travelling abroad for treatment spend roughly \$250,000 per visit.

Still, the UAE is rapidly improving its healthcare sector in the hope of providing quality care in-country, as opposed to having patients travelling around the world for a higher level of care.

POPULATION:
9,445,624 million
*Immigrants make
up more than 80%
of the total population
(July 2015 est.)

POPULATION
GROWTH RATE:
2.58% (2015 est.)

GDP - REAL
GROWTH RATE:
3.6% (2014 est.)

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Health System Organisation

Successful healthcare regulation and industry development requires coordination between many different organizations working together. The entities below represent the major healthcare organizations operating in the UAE today.

Regulatory Bodies The **Ministry of Health (MoH)** is the federal authority responsible for unifying the UAE's health policies, developing a comprehensive, nationwide health service and ensuring the healthcare remains accessible across the country

The **Ministry of Finance (MoF)** is the federal authority involved in the insurance aspects of the UAE healthcare sector

The **Federal Health Insurance Authority (FHIA)** will eventually be a stand-alone organization and it is still in its developmental stage as overseen by MoH, MoF and emirate-level healthcare authorities, to manage all aspects of health insurance in the UAE as well as licensing, registration, and codes of conduct for healthcare service providers.

The **Dubai Health Authority (DHA)** the regulator and operator of the Emirate of Dubai's healthcare sector; oversees and sets healthcare policy and strategy, develops medical education and research, and regulates and licenses all healthcare facilities and services in Dubai and its free trade zones.

The **Health Authority of Abu Dhabi (HAAD)** is the Emirate of Abu Dhabi's financially and administratively independent public health authority that creates requirements for healthcare facilities, health insurance, clinicians and health services while overseeing the management of health services at the policy level.

Healthcare Service Providers And Developers

Abu Dhabi Health Service Company (SEHA) directly and indirectly owns and manages government-owned health services and hospitals in Abu Dhabi.

The **Dubai Health Authority (DHA)** serves a dual role as regulator; as mentioned previously, and operator of Dubai's healthcare sector inclusive of all public healthcare facilities, hospitals, clinics and services in Dubai and its free trade zones.

The **Ministry of Health (MoH)** serves as dual role as the nation's healthcare policy entity, as mentioned previously, as well as the manager for healthcare services for Northern Emirates, alongside the emirate level regulatory bodies and operators of Sharjah, Fujairah, Ras Al Khaiman, Umm Al Quwain and Ajman.

Mubadala Healthcare is the healthcare-focused division of an investment and development company established by the Abu Dhabi government to build key social infrastructure and support the UAE's strategy of economic diversification. Its current assets and services are designed to meet some of the specialised care



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requirements of the Emirate, and currently focus on diabetes care and research, orthopedics, spine, physiotherapy and rehabilitation, primary care, imaging, visceral medicine and medical diagnostic testing.

Insurers

Daman (the UAE National Health Insurance Company) is the first and largest specialized federal insurance company to be formed in the United Arab Emirates and it was established in September 2006

Hospitals In The U.A.E.

According to CIA factbook UAE has 9,445,624 million population of which Emirati nationals represent only 20 percent. Currently there are 104 hospitals throughout the seven Emirates and the World Health Organization reports that there are about 19.3 physicians and 40.9 Nurses and Midwives per 10,000 persons in the UAE.

Abu Dhabi

14 Government Hospitals
25 Private Hospitals

Dubai

6 Government Hospitals
32 Private Hospitals

Sharjah

5 Government Hospitals
10 Private Hospitals

Ras al Khaimah

4 Government Hospitals
1 Private Hospital

Fujairah

2 Government Hospitals
1 Private Hospital

Umm Al Quwain

1 Government Hospital

OVERVIEW
UAE

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Abu Dhabi: 39 hospitals (14 government, 25 private; 26 are JCI accredited) with 4,226 beds, or 2.7 beds for every 1500 of the population, servicing approximately 2.5 million people.

Dubai: 38 hospitals (6 government, 32 private; 20 are JCI accredited) with 3,857 beds or 1 bed for every 532 of the population, servicing approximately 2.1 million people.

Sharjah: 15 hospitals (5 government, 10 private; 1 is JCI accredited) with 898 beds, or 1 bed for every 1,670 of the population, servicing approximately 1.5 million people.

Ras Al Khaimah: 5 hospitals (4 government, 1 private; 1 is JCI accredited) with 562 beds, or 1 bed for every 533 of the population, servicing approximately 300 thousand people.

Ajman: 3 hospitals (1 government, 2 private; 1 is JCI accredited) with 189 beds or 1 bed for every 1,269 of the population, servicing approximately 24 thousand people.

Fujairah: 3 hospitals (2 government, 1 private) with 358 beds, or 1 bed for every 558 of the population, servicing approximately 200 thousand people.

Umm Al Quwain: 1 Government Hospital, with 165 beds, or 1 bed for every 6060 of the population, servicing approximately 100 thousand people.

Health Insurance

U.A.E. has been moving toward a universal healthcare system. A law passed in 2005 required all expatriates and their families living in Abu Dhabi to have private medical coverage, and a law passed in 2007 gave HAAD to mandate to develop insurance policy and provide health insurance regulation services.

In 2010, a requirement in Abu Dhabi was enacted for all hospitals and insurers to bill a diagnosis rate group (DRG) system. This requirement, plus other measures such as standardized contracts, is expected to slow the rising cost of medical services.

Today universal healthcare insurance is in place in Abu Dhabi and Dubai but actively enforced in Abu Dhabi. Dubai is in the process of rolling out its universal healthcare insurance system and recently mandated that the population of the entire emirate must be covered by 2016. Sharjah is expected to implement a health authority and policies similar to HAAD and DHA in the near future.

Daman is the largest and specialised federal health insurance company in the UAE and it currently provides comprehensive health insurance solutions to more than 2.4 million members in the UAE Daman provides health insurance for both individuals and organizations, and exclusively manages the UAE Government's healthcare program, Thiqat, for UAE nationals, and the Abu Dhabi Basic Plan for low income expatriates.

Medical Device Market

The United Arab Emirates (UAE) is among the top 40 largest medical device markets in the world and ranks fourth in the Middle East & Africa (MEA) region.

Manufacturing capability is limited therefore the market will continue to rely on imported medical devices.

Population growth, a changing epidemiological profile, a growing medical tourism industry, continuous healthcare infrastructure developments, an expanding health insurance and increasing health expenditure are factors contributing to market growth even in the current environment of weaker oil prices. The UAE is becoming the regional hub for leading medical device multinationals and a medical tourism hub for the Middle East Region.

According to Dubai Health Authority (DHA) in the first half of 2015 Dubai attracted 260,000 medical tourists and 40% of them are outside the country. The medical-purpose visits to Dubai generated Dh1 billion in revenue during six months period and Dubai's medical visitors number are expected to grow around 12 per cent annually. **By 2020, the Emirate is expected to welcome more than 500,000 medical tourists and generate Dh2.6 billion in revenue marking a 20 per cent growth over 2015.**

Moreover, the UAE government is taking measures to introduce programs and incentives to encourage private sector growth, optimize current operations, and leverage technology where possible and public/private partnerships (PPP's) are encouraged and well subsidized by the UAE government.

During the period 2013-2018 the medical device market in UAE will expand at a CAGR of 8.7% in US dollar terms, this means that the market should grow from an estimated USD 0.8bn in 2013 to around USD 1.3bn in 2018.

**HEALTHCARE
EXPENDITURE:
3.2% of GDP
(2013 est.)**

**INDUSTRIAL
PRODUCTION
GROWTH RATE:
3.5% (2014 est.)**

Orthopaedics & prosthetics are expected to record the highest 2013-2018 CAGR while patient aids are expected to register the lowest CAGR.

Medical device imports will supply most of the market and Europe, the USA and China will be the leading suppliers as in the past.

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EXPORTS:
\$404.7 billion
(2014 est.)

EXPORTS-COMMODITIES:
crude oil 45%,
natural gas,
reexports, dried fish,
dates (2012 est.)

EXPORTS PARTNERS:
Japan 14.8%, Iran
11.4%, India 9.6%,
South Korea 5.7%,
China 5.5%,
Singapore 5.4%,
Thailand 4.5%
(2014)

market overview



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Dubai Healthcare Overview

Dubai's healthcare sector is constantly growing and it is offering significant opportunities for both medical investors and operators.

Author: Lara Pippucci

There are several key contributing factors:

- **High population growth rates.** The population of Dubai reached 2.2 million in 2013 from 1.3 million in 2005, with a CARG of 6.66%. Current projections anticipate the population will further increase to 3.5 million by 2020.

- **The population of the UAE and Dubai is predominantly expatriate workers,** the majority of whom are considered Generation X (born between 1965 and 1980) and Generation Y (born between 1981 and 2000). As the current population of the UAE, ages including Dubai, there is likely to be a sharp rise in healthcare demand as almost 80% of a person's healthcare requirements typically occurs after the age of 40 – 50 years.

- **Introduction of compulsory health insurance in Dubai.** After compulsory health insurance was introduced in Abu Dhabi, the revenues of most of the private hospitals doubled in subsequent years, Dubai healthcare sector is also expected to follow the same pattern.

- **High returns on healthcare investments.** High quality, efficient private hospitals could achieve 15% – 20% net profit margins after initial stabilization years.

- **Heavy reliance on imported medicine and medical equipment.** This increases the cost of establishing healthcare facilities. A number of medical equipment suppliers provide medical equipment on long-term leases, and even equity investment in order to facilitate healthcare initiatives.

- **Continued growth of regional medical tourism.** The government of Dubai has recently taken a number of initiatives to establish and promote Dubai as a medical tourism hub.

- **The overall supply of healthcare facilities struggles to keep pace with the burgeoning population.** The Government has introduced a number of recent initiatives in the recent past to encourage the private sector to match the shortfall and benefit from this potentially lucrative sector.

Economic Overview The UAE is an attractive market for investors and companies, reinforcing its position as a leading global business hub.

- **Strong and stable economic growth** – while economic growth in developed countries remains sluggish, the UAE's GDP is forecast to grow between 3.4% and 3.9% annually for the next 5 years.

- **Highly competitive economy** – ranked 19th globally by the World Economic Forum (WEF), and the only Arab nation to be classified as an innovation-driven economy, attracting companies and talent from around the world.

- **An efficient country** – ranked 23rd globally in The World Bank's 'Ease of Doing Business' report, due to the lack of bureaucracy and red tape.

- **Attractive labour market** – relatively affordable labour, no income tax and 84% of Dubai's population between the ages of 20 and 65.

- **Dubai is open-minded** – being open-minded, Dubai is for many companies an entry point into the Middle East. New brands are often introduced in Dubai before being rolled out to the rest of the region.

- **Ease of access to Dubai** – With the third best air transport infrastructure in the world according to WEF, and being 8 hours from two-thirds of the world's population, Dubai is an ideal place for medical tourism.

Macroeconomic Highlights

- Dubai is one of the major contributors to the UAE's GDP. In 2013, GDP increased by 4.8%.

- Being perceived as a safe haven amid regional and political unrest, Dubai has enticed investments from abroad increasing capital flows into the city.

- Given positive government initiatives and the successful Expo 2020 bid, the economy is forecast to continue its forward momentum and sustain its economic growth in the foreseeable future.

Demographic Overview Dubai has one of the fastest population growth rates, both regionally and internationally.

According to the Department of Statistics, the population at the end of 2013 stood at approximately 2.21 million with an overall CAGR of 6.66% for the period between 2005- 2013.

Colliers International estimates that the population of Dubai is expected to reach 3.48 million by 2020, subject to it maintaining the current growth rate patterns. Should the projected growth rate increase to 8% due to various recent initiatives and infrastructure projects taken by the Dubai Government, then the population is expected to reach 3.8 million by 2020.

During 2005- 2009, just before the global financial crisis, Dubai's population was growing by a CAGR of 13.3% compared to the period following the crisis (2010 -2013), where the CAGR stood at 5.1%.

Increasing population, coupled with rising average income levels, will continue to feed demand for infrastructure and services particularly in energy, water, telecoms, technology, housing, education, and financial sectors, which consequently will have positive impacts on the healthcare sector.

Increasing population, coupled with rising average income levels, will continue to feed demand for infrastructures and services which consequently will have positive impacts on the healthcare sector.

Dubai's population is heavily skewed towards males aged 25-40, which is partially due to the construction workforce living in the emirate.

Currently, 84% of Dubai's population is in the active workforce age group, i.e. between the ages of 20 and 65.

97% of Dubai's population is below the age of 50, and within Generations X, Y & Z.

The Rise of Generation X, Y & Z and its Impact on Healthcare Demand

- Lifestyle diseases (sometimes called diseases of longevity or diseases of civilisation) are diseases that appear to increase in frequency as countries become more industrialised and people live longer. They can include: Alzheimer's disease, atherosclerosis, asthma, some kinds of cancer, chronic liver disease or cirrhosis, chronic obstructive pulmonary disease, type 2 diabetes, heart disease, metabolic syndrome, chronic renal failure, osteoporosis, stroke, depression and obesity.

- Some analysts maintain a distinction between diseases of longevity and diseases of civilisation. Certain diseases, such as diabetes, dental care, and asthma appear at greater rates in young populations living in accordance with the "western lifestyle" as their increased exposure is not related to age, so the terms cannot accurately be used interchangeably for all diseases.

- As a result of urbanisation and rising disposable income, the majority of the GCC population including the UAE and Dubai, have adopted a sedentary lifestyle characterised by an aversion to exercise and consumption of processed foods leading to increased chronic diseases (such as diabetes, coronary problems and other obesity related illnesses) previously uncommon to the region.

- The rate of diabetes related illnesses have witnessed an unprecedented increase in the GCC which is expected to increase from 1.5 million cases in 2000 to 4.5 million by 2030.

Healthcare Overview The Ministry of Health delegates a portion of the duties to specialised health authorities, within every emirate in accordance with the federal mandate.

Dubai Health Authority (DHA) is responsible for overseeing the healthcare sector of the Emirate of Dubai, in addition to enhancing private sector engagement. The DHA is also responsible for the operation of a significant share of hospitals in Dubai.

The Private Sector in Dubai represents the majority share reaching almost 79%, with a total of 22 hospitals out of a total of 28 hospitals operating within the

emirate. Medical centres were historically operated only by the private sector; however, 16 local and 9 federal medical centres were opened in 2009.

By the end of 2012 there were a total of 1,348 medical clinics, out of which 97% were owned and operated by the private sector.

Tertiary Healthcare Providers

- Dubai has experienced a significant construction boom during the last decade across all asset classes in general, including the healthcare sector.

- However, 71% of the hospitals in Dubai are located in what is commonly referred to as "Old Dubai", which presents an opportunity for establishing new facilities in the "New Dubai" areas, such as MBZ Road, Al Khalil Road and along Sheikh Zayed Road.

- The exhibit below highlights the main cluster of hospitals operating within Dubai.

Hospitals and Bed Capacity

- The overall bed capacity in Dubai reached a total of 3,816 beds by the end of 2012 compared to 3,155 beds in 2008, recording a CAGR of 4.9%.

- Bed capacity growth was relatively stagnant during the period between 2009 and 2011, following the global financial crisis.

- There are currently over 28 hospitals, both within the public and private sectors, providing various healthcare facilities and treatments throughout Dubai.

- Public hospitals in Dubai hold a significantly higher average of 391 beds, compared to the average of 85 beds recorded for private hospitals in the emirate.

Key Healthcare Indicators

Comparing healthcare indicators in Dubai to other developed countries such as the US, UK and Germany, shows that the ratio of doctors, nurses and beds per 1,000 population is low and offers significant opportunities for growth. The shortage is prevalent across all GCC countries; Dubai's beds per population ratio surpasses the average ratio across the GCC.

While Dubai currently holds the second highest ratio for nurses (5.5) across the GCC, surpassed only by Qatar (7.4) it is still however lower when compared with the healthcare markets in developed nations. Dubai's ratio for physicians (2.7) is significantly higher than the average ratio of physicians across the GCC (1.75), ranking 2nd across the region, whilst being in line with the majority of the healthcare markets in developed nations.

Dubai's key healthcare indicators clearly showcase how the emirate has surpassed the majority of the

Comparing healthcare indicators in Dubai to other developed countries such as the US, UK and Germany, shows that the ratio of doctors, nurses and beds per 1,000 population is low and offers significant opportunities for growth

GCC markets across most indicators, whilst lagging behind developed markets across the world, signaling an opportunity for further growth within the sector. Key indicators for Dubai are higher than the ratios recorded across the UAE, this is due to the disparity in speed of development compared to neighbouring emirates.

Manpower The total number of physicians has achieved robust growth, reaching 5,618 physicians in 2012 compared to 4,145 physicians in 2008, achieving a CAGR of 6.2%.

As of the end of 2012, almost 73% of the physicians in Dubai were employed by the private sector, which is in line with the prevailing market dynamics.

Over 75% of the physicians employed by the private sector are specialists with the top 10 specialties accounting for over half of the physicians working within the private sector.

The total number of nurses in Dubai experienced a marginal decrease of 3.8% in 2010. However, a CAGR of 5.1% was recorded during the aforementioned period, resulting in a total of 11,238 nurses employed within the emirate.

Similar to the trend highlighted with physicians, the majority of nurses are employed by the private sector, with over 66% compared to almost 34% working for the public sector in Dubai.

Inpatients and Outpatients Activity

- Based on the latest data available in 2012, out of the total 8 million patients across Dubai, almost 97.3% were outpatients, compared to only 2.7% of the total patients as inpatients.
- The average number of visits per 1,000 population continued to increase during the period between 2009 and 2012, reaching 15.6 visits in 2012 compared to 11.6 visits in 2009.
- The average length of stay (ALOS) in hospitals across Dubai currently stands at 4.97 days for DHA facilities, whilst ALOS was comparatively lower within the private sector with 2.3 days, across all specialties.
- Bed occupancy in hospitals across Dubai currently stands at 65.4% for DHA facilities, whilst recording a bed occupancy rate of 56.6% across the private sector.

Size of Dubai's Private Sector Healthcare Market

Colliers International estimates that the value of Dubai's private hospitals reached US\$ 430 million in 2005 and US\$ 870 million in 2013. It is anticipated to reach US\$ 1.62 billion by 2020.

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Ensuring essential health insurance coverage and access to essential health services to every national, resident and visitor in Dubai is the fundamental basis of the law

Private hospital business value in Dubai (including property) was estimated at US\$ 860 million in 2005 and US\$ 1.75 billion in 2013. Colliers International estimates it to increase to US\$ 3.23 billion by 2020.

Size of the UAE Private Sector Healthcare Market

Colliers International estimates that the value of the UAE's private hospitals property reached US\$ 1.13 billion in 2007 and US\$ 1.39 billion in 2011. This is estimated to reach US\$ 2.83 billion by 2020.

The UAE's private hospitals business value (including property) was estimated to reach US\$ 2.26 billion in 2005 and US\$ 2.79 billion in 2011. This is estimated to increase to US\$ 5.56 billion by 2020.

Number of Private Sector Beds in Dubai

The number of beds in the private sector was recorded at 793 in 2005, which increased to 1,468 in 2012, a CAGR of 9.2%. Based on the same CAGR, the estimated number of private beds will reach 2,967 by 2020. An estimated 1,500 new beds will be required over the next 6 years.

Number of Private Sector Beds in the UAE

The number of beds in the private sector was recorded at 2,549 in 2008, which increased to 2,556 in 2011, a CAGR of 6.3%. Based on the same CAGR (9.2% for Dubai and 6.3% for rest of the UAE), the estimated number of private beds will reach 5,188 by 2020. An estimated 2,632 new beds will be required over the next 6 years.

Introduction of Compulsory Healthcare Insurance in Dubai

In 2013, Dubai Health Authority (DHA) issued the Health Insurance Law making healthcare insurance compulsory and stipulating rules and regulations for

all parties involved with the provision and implementation of health insurance in the Emirate of Dubai. The implementation of the healthcare insurance will be as follows:

- Employers with 1,000 or more employees must comply by October 2014;
- Employers with 100-999 employees must comply by July 2015;
- Employers with fewer than 100 employees must comply by June 2016.

Ensuring essential health insurance coverage and access to essential health services to every national, resident and visitor in Dubai is the fundamental basis of the law. Moreover, the mandatory health insurance is also linked to the renewal of expatriates' residence or work visas.

Under the new law mandatory health insurance universally includes blue collar workers and domestic workers such as maids and drivers.

Once the law is fully implemented in Dubai, the Dubai health insurance sector, and consequently the healthcare sector as a whole, is expected to grow significantly, as in Abu Dhabi.

There is however concern among insurance companies that the costs versus premium may be unsustainable, possibly leading to a greater tiered provision of cover and enhanced scrutiny of healthcare providers. This could result in medical coverage linked to payments to the operator. According to various reports, less than half of Dubai's current population has medical insurance.



The basic package is approximately AED 600 per annum, similar to Abu Dhabi, however, unlike Abu Dhabi, where Daman is offering a Basic Package, most of the insurance companies in Dubai are not offering a Basic Package to individuals, and offer Basic Packages for blue collar workers with companies that have a minimum of 1,000 employees. Moreover, the Basic Package is applicable only for those employees earning less than AED 4,000.

At present, insurance coverage of employee's dependents, is not mandatory, if the employer does not cover the employees' dependents, their sponsor (i.e. the employee) will have to cover them. The mandatory insurance for dependents will take effect in 2016. Based on information obtained, the individuals who are not provided with dependents insurance presently, may have to spend AED 2,000 or more, depending on age, medical condition etc, to obtain medical insurance as insurance companies are reluctant to offer insurance coverage to individuals at AED 600 per annum due to unsustainability of costs versus premium. In order for the implementation of the law to be successful, a practical solution needs to be found so that more affordable coverage levels does not hinder success of this law.

Attracting and Retaining Quality Human Resources

The major challenge facing operators is the ability to attract and retain quality staff in order to deliver on the promise of quality healthcare services. Operators desperate to recruit appropriate specialised staff have prompted a trend of poaching physicians from competitors. With a limited pool of established physicians, physician salaries have witnessed exceptional growth in the recent past in the UAE and in Dubai. A successful international recruitment process is paramount to operational success.

Furthermore, it is quite common for nursing and allied health professionals to use their experience in the UAE and in Dubai as a launch pad to practice medicine in larger more established markets, typically spending only 3-5 years in the country. The pattern represents a significant burden on healthcare organisations.

Funding Options for the Private Sector

A number of funding options are available to healthcare players. Al Noor Hospital, NMC Healthcare and Dallah Healthcare Holding have all successfully listed on regional or international exchanges (IPOs).

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Banks are also actively seeking investments within the healthcare sector; however, they are limiting their investments to established players with proven track records. Investors entering the healthcare sector with Greenfield projects struggle to find project finance unless via recourse to alternative cash flows. Further difficulties arise with the terms offered. Healthcare investments are typically long term investments contradicting banks risk appetite which typically extends to terms between 5-7 years.

Typically real estate investments in the healthcare sector generate yields of 9%-11%, whilst IRR's for healthcare operations range between 15% to 23%. Exploring the sales and leaseback model, is an alternative approach for established players to improve returns through release of cash from noncore activities, and directing capital into core business strategies, in order to accomplish further growth.

One of the key ingredients for a successful medical tourism market is the availability of easy access to the target markets.

Dubai as a Medical Tourism Hub Dubai plans to become the top international destination for medical tourists by 2020, with a target of approximately 500,000 medical tourists by 2020. In 2012, Dubai attracted approximately 107,000 medical tourists compared to only 12,000 in 2009.

The revenue generated from medical tourism was estimated at US\$ 177.5 million in 2012, which is expected to grow to US\$ 710 million by 2020. Globally medical tourism is a US\$ 50 billion to US\$ 60 billion a year industry, and is expected to grow to US\$ 100 billion annually over the next decade.

Dubai is currently a small player generating less than US\$ 1 billion. If medical tourism in Dubai were to capture 2% of its international tourists in 2015, an additional US\$ 1 billion in revenues would be generated by the healthcare sector.

Key Ingredients to Establish Dubai as Medical Tourism Hub

One of the key ingredients for a successful medical tourism market is the availability of easy access to the target markets. Dubai's two airports provides reach to over two thirds of the world's population being within an 8-hour flight.

Dubai International Airport

- In 2013 Dubai received 65.8 million passengers, only 2nd to Heathrow's 66.7 million. The Airport offers over 7,000 weekly flights to over 230 destinations.

Al Maktoum International Airport

- Projected Capacity: 160 million per annum.
- By 2020: Traffic forecasted to be over 100 million across both airports.

Tailor Made Packages Healthcare providers in Dubai offer tailor-made comprehensive Tourism Packages which include costs of medical treatment, visa, hotel stays and even recreational activities for accompanying family members. Colliers International recommends that hospitals may work in collaboration with airlines, hotels and health authorities to successfully establish Dubai as a medical tourism hub. The expanding hospitality market in Dubai also contributes to the growth of Dubai's healthcare sector. The hospitality sector which supports medical tourism is expected to cater to over 20 million tourists by 2020 with over 160,000 rooms.



Medical Visa

- To encourage medical tourism Dubai offers three months medical tourist visas, extendable twice- up to nine consecutive months for overseas patients who wish to seek medical treatment in Dubai.
- Hospitals can also issue medical visas in collaboration with the Health Authority.

Focus on Wellness Beside medical tourism, wellness tourism is also a focus area for Dubai, given the increasing demand for lifestyle and wellness medical treatments in the region. The number of new projects focusing on wellness, announced in the recent past, includes Phase 2 of DHCC (19.5 million sqft) which is expected to offer services relating to healthy living, hotels/health resorts, econ/fitness and healthcare and education facilities to facilitate and promote Dubai's vision to become a regional medical and wellness tourism hub.

Source:

Colliers International

Colliers International is a global leader in commercial real estate services, with over 13,500 professionals operating out of more than 482 offices in 62 countries. A subsidiary of FirstService Corporation, Colliers International delivers a full range of services to real estate users, owners and investors worldwide, including global corporate solutions, brokerage, property and asset management, hotel investment sales and consulting, valuation, consulting and appraisal services, mortgage banking and insightful research. The latest annual survey by the Lipsey Company ranked Colliers International as the second-most recognized commercial real estate firm in the world.

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spotlight

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Expomed 2016



23rd Expomed to open in March 2016

Highly anticipated medical show of Eurasia is set to take place in March 24-27, 2016 in Istanbul's Tüyap Fair Convention and Congress Center with the organization of Reed Tüyap Exhibitions. The show will put suppliers face-to-face with key medical sector both in Turkey and emerging neighboring Eurasian markets.

The upcoming expomed expects to host over 800 Turkish and international exhibitors and more than 40,000 professional visitors.

Labtechmed simultaneously takes place with expomed

The must-see laboratory equipment and technologies show offering a wide range of products and services is being simultaneously organized with expomed. 19th edition of labtechmed is ready to bring the exhibitors together with the visitors in Istanbul coming from all across the world targeting to be the meeting point of laboratory industry.

Hosted buyer programme offers great business opportunities throughout the shows

Thanks to the VIP Elite+ Programme both the exhibitors and the hosted professional visitors will make the best of expomed and labtechmed shows. All visitors on this programme are closely vetted to ensure that only serious business professionals are accepted.

A dedicated lounge area for distributors powered by Infomedix

Exhibitors looking for distributors in Turkey and also in Eurasia will be able to use the special lounge area located in the fair-ground to hold pre-arranged B2B meetings with their potential distributors. This will not only enable the exhibitors to find the ideal distributors in the targeted regions, it will also let the willing companies find the right brands to represent in their distribution range. As part of the expomed Distributor Matchmaking Programme which is powered by Infomedix, we will help you to meet with the right companies with great products!

Visitor focus country: Iran

expomed and labtechmed shows are welcoming special buyers from Iran. With its emerging potential this year Iran is going to be the visitor focus country. Executives, managers, buyers and decision-makers of hospitals, clinics, laboratories, blood banks, and also healthcare authorities in Iran are going to be visiting the shows running from 24th to 27th of March 2016 for the purpose of business transaction.

Germany is the country of host

Having a great experience and know-how in the field of medical technology Germany is the country of host of the upcoming expomed and labtechmed exhibitions.

A satisfying seminar and panel programme throughout the exhibition

As in the previous editions a busy side event programme awaits both the exhibitors and the visitors of the shows running simultaneously during expomed and labtechmed that will add a plus value to the shows. Attendees will be able to obtain in-depth information about the latest developments in the field of medicine. More information is yet to come in the days ahead. Check www.expomedistanbul.com and www.labtechmed.com for further information about the programme.

Expomed team visited Medica

Leading medical companies from Poland, Italy, India, USA, Malaysia, China, Korea, UK, Ireland and Germany as expomed's Country of Honor for 2016 attended the dinner on 17th of November which was held in a boat on Rhine River.

The increasing importance, needs and the potential of Eurasian markets in medical field and the key role of expomed as the gateway to these new markets for those companies willing to enter to these markets or find distributors in these regions were highlighted with a presentation made during the dinner. The fact that Turkey is a key country to enter to Iranian market and that is the reason why Iran was chosen as the visitor focus country for the 2016 edition were explained to the audience.

Guests were greeted with Turkish hospitality and Turkish music at the dinner where typical Turkish foods were served.

Expomed opened a stand at Islamic Conference of Health Ministers

expomed had a stand at the 5th Session of the Islamic Conference of Health Ministers held between 17th and 19th of November in Istanbul. expomed team was in touch with health ministry authorities from Islamic countries at this year's conference with the title of "Building Bridges for Healthier Ummah".

Expomed stand attracted the attention of many participating healthcare authorities including the Minister of Health of Turkey, Dr Mehmet Müezzinoğlu. They obtained detailed information about the show which is going to be held on **March 24-27, 2016** in Tüyap Fair Convention and Congress Center.



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The XX edition of Exposanità, International Health Care Exhibition, will take place in Bologna, Italy, from 18th to 21st May 2016.

In over thirty years of activity, all the major issues focused on the national health system have been discussed here: economic and management aspects, relationship between health care and assistance, hospital engineering, purchasing procedures, technological innovation, organizational modernization. In these years, very important partnerships with associations and bodies representing health care professionals have been established.

The event is the opportunity to find out more about: products, equipment, technologies and services for health care facilities and hospitals. From diagnostic to health IT, from mobility aids, physiotherapy and rehabilitation, to equipment and solutions for the elderly.

The cultural program, aimed at all the professionals involved in the field, will develop in more than 200 workshops and conferences with over 600 hours of training.

As every year, all international visitors are welcome to Exposanità. They will be offered free admission to the exhibition and to the international welcome lounge, discounted hotel rates and workshops to get to know the Italian health care market.

The main topics of the next edition:

OPERATING ROOMS AND STERILIZATION CENTERS

Exposanità 2016 will host a latest generation operating room for cardiac surgery and neurology with connected sterilization center.

CLINICAL ENGINEERING

The Clinical Engineering Meeting, organized by AIIC (Clinical Engineering Italian Association) will focus on the role of clinical engineers in the management of medical equipment and devices.

HEALTH CARE BUILDING

Experts will discuss about lighting, paving and plants both for the effects that these aspects have on the wellbeing of the patient and for the savings that they can ensure to the management of the structures themselves.

THIRD AGE

From solutions for active life to products for the assistance to the fourth and fifth age. This exhibiting area will display equipment and facilities for the elderly as well as products deal with fragility.

INFORMATION & COMMUNICATION TECHNOLOGY (ICT)

This focus will offer all those who manage or use ICT an overview of the most innovative equipment and digital technology to support improvement and innovation in Health.

EMERGENCY

This area will focus on health emergency, offering demonstrations and training sessions to the professionals involved in the emergency topic both in hospitals and in the territory.

DISABILITY

Job placement, accessible tourism, school integration, Paralympic sport. The exhibiting area focusing on disability will offer professionals and private visitors a 360 degrees view of the theme.

ORTHOPAEDIC TECHNOLOGY

National conference organized by FIOTO, Italian Federation of Orthopaedic Technicians.

For further information about exhibiting or visiting, please contact Mrs Caterina Poli - caterina.poli@senaf.it or visit www.exposanita.it/promoestero_infomedix

MEDICAL FAIR ASIA to host inaugural Asian edition of MEDICINE + SPORTS CONFERENCE in 2016

- First ever MEDICINE + SPORTS CONFERENCE ASIA to feature greater focus on Southeast Asia, bringing together sports medicine experts, healthcare providers, physicians, fitness trainers and industry players to discuss innovations in sports medicine and pertinent healthcare challenges in the region
- To be held on 1 Sep 2016 during MEDICAL FAIR ASIA 2016 at a new venue, the Marina Bay Sands Singapore

16 November 2016 - The MEDICAL FAIR ASIA, Southeast Asia's most definitive event for the medical and healthcare industry, will host the first ever Asian edition of the MEDICINE + SPORTS CONFERENCE in 2016.

The inaugural MEDICINE + SPORTS CONFERENCE ASIA will be held on 1 September 2016 during MEDICAL FAIR ASIA 2016 at a new venue, the Sands Expo & Convention Center, Marina Bay Sands Singapore. The conference is jointly organized by Messe Düsseldorf Asia and Navispace AG, with the support from founding cooperation partners namely; Sports Medical Association Singapore (SMAS), Exercise is Medicine Singapore (EiMS), FIMS (International Sports Medicine Association) and WT Wearable Technologies Group.

Founded in 2013 at the largest medical trade show MEDICA, the internationally established MEDICINE + SPORTS CONFERENCE has repetitively attracted great speakers and high-level attendees from around the world. The inaugural Asian edition will feature eminent speakers on topics such as physical activity as a key to disease prevention, defining health and fitness guidelines, creating the right activity programs for athletes and non-athletes, vital data and performance monitoring, digital systems in elite and recreational sports as well as new digital solutions such as new activity trackers, monitoring devices and other health gadgets.

The conference also aims to feature a greater focus on the pertinent healthcare challenges in the Southeast Asia region, using the opportunity provided by MEDICAL FAIR ASIA, with relevant industry participation and attendance of quality trade buyers and decision makers, to generate high-level exchanges and discussions.

The established MEDICINE + SPORTS CONFERENCE has been brought to Asia in view of the booming sports medicine market in this region. According to market research solution ReportLinker, the Asia Pacific sports medicine market is estimated to grow at a compound annual growth rate (CAGR) of 6.96% and is expected to reach US\$3.85 billion by the end of 2019.

At the same time, with the rapid economic development and increasing adoption of modern lifestyle habits in Southeast Asia, rising non-communicable diseases like cardiovascular diseases, chronic respiratory diseases, and diabetes have become one of the major healthcare challenges in the region. According to the World Health Organization (WHO), 62% of all deaths in the region are due to non-communicable diseases and 48% of affected persons are aged below 70 years.

Mr Gernot Ringling, Managing Director of Messe Düsseldorf Asia, said: "Over the years, we have seen sports medicine advance by leaps and bounds worldwide, making it important for stakeholders and industry players in this region to remain at the forefront of the latest innovations and to address the most prominent healthcare challenges. I am very excited for Messe Düsseldorf Asia to partner with Navispace AG in bringing MEDICINE + SPORTS CONFERENCE to Asia for the first time. This will enhance the experience of all our delegates at MEDICAL FAIR ASIA 2016 and add significant value to the event. MEDICAL FAIR ASIA is proud to host the inaugural Asian edition of MEDICINE + SPORTS CONFERENCE."

"It is most appropriate and timely that we base the Asian edition of MEDICINE + SPORTS CONFERENCE at MEDICAL FAIR ASIA, the hallmark event for Asia's medical and healthcare sector," said Dr Sonja Sulzmaier, Managing Partner of Navispace AG. "Healthcare investment and the emphasis on sports medicine are shifting towards Asia, particularly in the Southeast Asia region. It is imperative to facilitate the right dialogue and networking platform to discuss how technology and innovation in this sector can help address some of the region's healthcare challenges. We are confident that this inaugural conference will deliver valuable opportunities for discussions and development of solutions to meet the challenges of the fast changing healthcare landscape in this region."

MEDICAL FAIR ASIA 2016, organized by Messe Düsseldorf Asia, will be held from 31 August to 2 September 2016 at a new venue, the Sands Expo & Convention Center, Marina Bay Sands Singapore. As a testament to the significance of the event for the medical and healthcare industry, 1,000 exhibitors from 45 countries, 20 national pavilion and country groups and 15,000 qualified trade buyers and decision makers are expected to participate in this 11th edition.

The 3rd edition of MEDICAL MANUFACTURING ASIA in 2016 will also co-locate with MEDICAL FAIR ASIA 2016 to offer synergistic opportunities for specialists sourcing diversified solutions for the healthcare and medtech industries. Focused on the medical technology and medical manufacturing sector, MEDICAL MANUFACTURING ASIA is jointly organized by Messe Düsseldorf Asia and the Singapore Precision Engineering & Technology Association (SPETA).

For more information, please visit
www.medicalfair-asia.com

Hospitalar 2016

The largest and most important healthcare fair in the Americas

Event brings together the global industry represented by 1,250 exhibitors from 33 countries, welcoming 96,000 professional visits from 59 countries. From May 17 to 20, healthcare leadership, industry entrepreneurs, professionals and main players will gather in São Paulo/Brazil to participate in the HOSPITALAR - 23rd International Fair of Products, Equipment, Services and Technology for Hospitals, Laboratories, Pharmacies, Health Clinics and Medical Offices.

The largest and most important healthcare fair in the Americas, HOSPITALAR, held at the Expo Center Norte, showcases the trends in products, equipment and services, in addition to an extensive debate and discussion about contemporary management and development in healthcare service, fostering discussions and the exchange of experiences that will result in improvements to the global healthcare system.

"HOSPITALAR has become a mix of good business, professional recycle and major opportunities for everyone involved, a reflection, on the strength of an industry that combines its determination and intelligence in order to keep advancing towards a quality healthcare system for an increasing number of users", say the president and founder of HOSPITALAR, MD. Waleska Santos.

With the participation of 1,250 exhibitor companies from 33 countries, the 2016 edition is gearing up to host over 96,000 professional attendees from 59 countries, including international buyers and distributors, sector industries, managers of hospitals and clinics, nurses, physicians and professionals from the medical field in general.

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Every new edition, it becomes more evident the strategic importance that the HOSPITALAR forum has to the strengthening and projection of the fair itself, exhibiting companies, hospitals and other institutions involved in the Brazilian healthcare process.

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Bulmedica 2016

BULMEDICA / BULDENTAL to celebrate its 50 years anniversary in 2016

BULMEDICA / BULDENTAL will celebrate its 50 years anniversary in 2016, announced the organizers from Inter Expo Center. The largest national and regional exhibition for human and dental medicine in the course of already half a century demonstrates the developments in this sector from all over the world. The jubilee edition of the international exhibition will be held from 17 to 19 May 2016. Generations of doctors and dental professionals will meet each other at "the exhibition of their own" to exchange knowledge and experience and keep learning from each other.

This year the event was attended by nearly 180 companies from Bulgaria and 12 other countries. The exhibition included foreign companies from Germany, Greece, Spain, Italy, Poland, Hungary, Romania, China, Korea, Pakistan, Taiwan, Russia.

There were presented more than 120 new products from Australia, Austria, Belgium, Germany, Greece, Denmark, Italy, China, Korea, Liechtenstein, Poland, USA, Slovakia, Finland, France, Czech Republic, Switzerland, Japan and others.

During the latest edition of BULMEDICA / BULDENTAL visitors had the opportunity to learn about products and solutions, having already held their premiere at the largest exhibition for dentistry, IDS- Cologne.

Nearly 13,000 physicians and dentists, dental technicians, nurses, health specialists, managers of healthcare facilities and businessmen who showed interest and visited this year's BULMEDICA/ BULDENTAL.

In 2016 BULMEDICA / BULDENTAL will once again demonstrate new opportunities, unique achievements and best practices of specialists from the global medical community.

We will offer not only the latest generation of systems, technologies and equipment, but as well a fruitful business program of events for the benefit of the specialists, announced from Inter Expo Center. We will unite once again with businesses in order to offer the best solutions in medicine.

The exhibition is organized under the patronage of the Bulgarian Ministry of Health and supported by professional organizations such as Bulgarian Medical Association, Bulgarian Dental Association, Bulgarian Dental Technician Union, the Association of Dental Dealers in Bulgaria and Bulgarian Pharmaceutical Union.

50 years

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ECR 2016 to reflect the rich diversity of the medical imaging world

The annual meeting of the European Society of Radiology will promote science and innovation on March 2–6, 2016, in Vienna, Austria.

VIENNA, DECEMBER 28, 2015 (ESR) – The latest results and trends in medical imaging will be unveiled during the 28th European Congress of Radiology (ECR) at the Austria Center Vienna in March. Over 20,000 delegates from 101 countries are expected for the conference.

To call the congress a strictly European radiological meeting doesn't go far enough. Not only participants from all over the globe, but also professionals from various related medical disciplines, have become an integral part of each ECR and add to the diversity of the congress. The strong relationship between the ESR and the European Federation of Radiographer Societies (EFRS), for example, has had a strong impact on the scientific programme, helping to make the ECR the primary event for radiographers in Europe.

To keep up with the latest developments and trends in radiology, ECR 2016 is offering an even more comprehensive programme, as well as a wide range of high quality training and refresher opportunities.

With congress president Professor Katrine Riklund from Umeå, Sweden, being both a radiologist and an expert in nuclear medicine, it is easy to guess that one of the key aspects of the ECR 2016 programme will be hybrid imaging. The importance of the discipline will be underlined by the official launch of Europe's latest subspecialty society, the European Society for Hybrid Medical Imaging (ESHI), at ECR 2016.

Following last year's successful increase, the ECR will again feature a large number of slots for scientific sessions to match the high demand of the international radiological community. The meeting will also offer a glimpse into the future of radiology through its New Horizons Sessions, which will focus on biomarkers in imaging, the predictive role of imaging in the evolution of atherosclerosis and on how to make best use of big data.

There will be three State of the Art Symposia, nine Professional Challenges Sessions, 15 Special Focus Sessions, more than 70 Refresher Courses and three multidisciplinary sessions, which feature radiologists, oncologists, gynaecologists and surgeons involved in the interdisciplinary treatment of patients.

The E3 programme will cover the entire range of educational issues from undergraduate medical education to subspecialised continuing professional development. It will feature the long-running Rising Stars and Beauty of Basic Knowledge Sessions, and the three formats introduced last year – the European Diploma Prep Sessions, ECR Academies and ECR Master Classes – that will deal with many aspects of radiology. These five branches reflect the different levels of education in radiology by addressing the different stages of an individual's professional career. A major addition to this ECR programme is a new poster presentation format called The Voice of EPOS. "At ECR 2016, for the first time, posters will not only be available in digital form but will also be presented to the audience by the authors themselves. You can watch these presentations each day during the conference, and there will be sessions for organ-based topics as well as sessions. To make it more widely accessible, the ECR will broadcast nearly every lecture via live web streams on ECR Live, a service delegates have used increasingly since its introduction three years ago. Lectures will also be available to watch on demand afterwards. This option will make it possible for delegates who are not able to attend a session in person to catch up on its content afterwards.

Another popular feature of the ECR, the 'ESR meets' programme, which sees three national radiological societies invited to the congress, will feature Japan, Columbia and the Nordic countries as the programme's guest countries.

"I am delighted to welcome representatives of the Nordic countries as part of the ESR meets programme," said Prof. Riklund. "With Denmark, Finland, Iceland, Norway and Sweden together with Japan and Columbia we have found very interesting partners which will make the 'ESR meets' sessions some of the highlights of the congress."

The ECR is the annual meeting of the European Society of Radiology (ESR), which represents more than 63,000 radiologists worldwide. The ECR is one of the largest medical congresses in the world, attracting more than 20,000 congress participants. With 300 companies exhibiting across more than 26,000m², its exhibition is also one of the largest medical exhibitions in Europe.

For further information, please contact:

European Society of Radiology | ESR

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Aid Agencies Call for a 'New Deal' for Syria's Refugees

The international community must agree to a bold new deal for Syria's refugees if it is serious about tackling the largest humanitarian crisis since World War II, seven major aid agencies warned today in a new report.

With no end to the conflict in sight and no prospect of safe return home, the new deal must provide more investment in Syria's neighbors, which host more than four million refugees, and an end to restrictions that prevent refugees from working and in some cases living legally in these countries. At the same time, it must protect and strengthen their right to seek asylum.

"Many refugees are currently being condemned to a life in legal limbo with an array of restrictions which leave them in fear of arrest, detention and deportation" said the Secretary General of Norwegian Refugee Council Jan Egeland.

"Their living conditions are deteriorating dramatically, forcing refugees to adopt extreme measures to cope, including increasingly to return to the warzone they fled or to risk their lives crossing to Europe. We need to help the host countries give refugees the opportunity to live dignified lives and make a positive contribution to the communities hosting them."

The agencies argue that a new, creative, long-term approach is needed. With the right help from international donors, Syria's neighboring governments should develop policies that allow refugees to better support themselves financially without the risk of arrest by authorities. This would also allow refugees to contribute to the economy of the communities hosting them.

Unable to afford rent or food, and relying on dwindling aid, refugees are pushed into a spiral of destitution and debt. Some 70 percent in Lebanon lack the documents needed to stay in the country legally and many refugees in Jordan outside of camps are struggling to access medical and education services because they lack updated documents.

"We risk losing a whole generation of young Syrians – the same generation that will have to rebuild Syria once the conflict is finally over. With adults unable to earn a living, more and more children

end up in work. Hundreds of thousands of children are missing years of education as the school systems in neighboring countries are bursting at the seams and need much greater support" said Misty Buswell, Regional Advocacy Director at Save the Children.

"For over four years now, refugees have been living hand to mouth, relying on humanitarian aid, not knowing where the next meal comes from" said Oxfam's Executive Director, Winnie Byanyima.

"Experienced carpenters, farmers and teachers, among others, who we often meet are struggling to keep a roof over their heads as they scrape money together to pay rent. Their skills should be put to good use, to allow them to provide for their families and support the economies of the countries hosting them. New jobs could also benefit the millions of Jordanians, Lebanese, Turkish, and Iraqis who are facing this crisis too."

"The international community needs to realize that, rather than a burden, as refugees are often wrongly portrayed, the evidence points to the contrary: that refugees who are legally able to work can make positive contributions to host economies with their diverse skills and experience" said Peter Klanso, Danish Refugee Council Middle East and North Africa Director.

Even with the right investment and policies, the scale of the crisis means that the most vulnerable refugees will need asylum outside of the region. Rich countries should provide a safe resettlement option for at least 10 percent of refugees who are most in need, but they have only pledged to accept less than three per cent so far, and waiting time is far too long.

Save the Children gives children in the United States and around the world a healthy start, the opportunity to learn and protection from harm. We invest in childhood — every day, in times of crisis and for our future. Follow us on Twitter and Facebook. Donate online on www.savethechildren.org

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Universal Children's Day: Why fair matters

The world remains a deeply unfair place for the poorest and most disadvantaged children despite major advances since the adoption of the Convention on the Rights of the Child in 1989, according to a UNICEF report released last November.

"In just over a generation, the world has cut child death rates by half, put over 90 per cent of children in primary school, and increased by 2.6 billion the number of people with access to safe water" said UNICEF Executive Director Anthony Lake.

"Yet children make up almost half of the world's poor, nearly 250 million children live in conflict-torn countries, and over 200,000 have risked their lives this year seeking refuge in Europe."

The report For every child, a fair chance: The promise of equity presents a statistical picture of how the world's most marginalized children have fared against basic human development indicators. It points out that:

- Children from the poorest households are nearly twice as likely as those from the richest households to die before age five, and five times more likely to be out of school.
- Girls from the poorest families are four times more likely as those from the richest families to be married before 18.
- More than 2.4 billion people still do not have adequate toilets – 40 per cent of them in South Asia; and more than 660 million still lack access to safe drinking water – nearly half of them in sub-Saharan Africa.
- Roughly half of the 159 million children suffering from stunting live in South Asia and one-third in Africa.

"Such vast inequities fuel a vicious intergenerational cycle of poverty and disadvantage" Lake said. "But it doesn't have to be this way. We know how to slow, stop, and reverse it into a virtuous cycle of inter-

generational progress. It is up to us to decide to do so through more commitment and resources. We must make this moral, pragmatic, strategic...and fair...choice."

For every child, a fair chance makes the case for closing persistent gaps in equity, arguing that investing in children, particularly the most vulnerable, is right in principle and right in practice – and that such investment brings multiple benefits not only to children but also to their families, communities and economies. An impressive team of UNICEF Ambassadors are raising their voices or activating their social media networks to help spur action for the world's most vulnerable children as part of UNICEF's "Fight Unfair" campaign.

"It is shocking to think that one in nine children lives in a country affected by armed conflict, witnessing horrific violence and having their rights to survival, health and education destroyed," said British actor and UNICEF Goodwill Ambassador Orlando Bloom. "I travelled with UNICEF to the former Yugoslav Republic of Macedonia and Serbia to see the how war is driving children and their families from their homes. The world is facing the biggest refugee crisis since World War II. Every country that can should be supporting the children and the families who have been affected."

About UNICEF

UNICEF promotes the rights and wellbeing of every child, in everything we do. Together with our partners, we work in 190 countries and territories to translate that commitment into practical action, focusing special effort on reaching the most vulnerable and excluded children, to the benefit of all children, everywhere. For more information about UNICEF and its work visit: www.unicef.org

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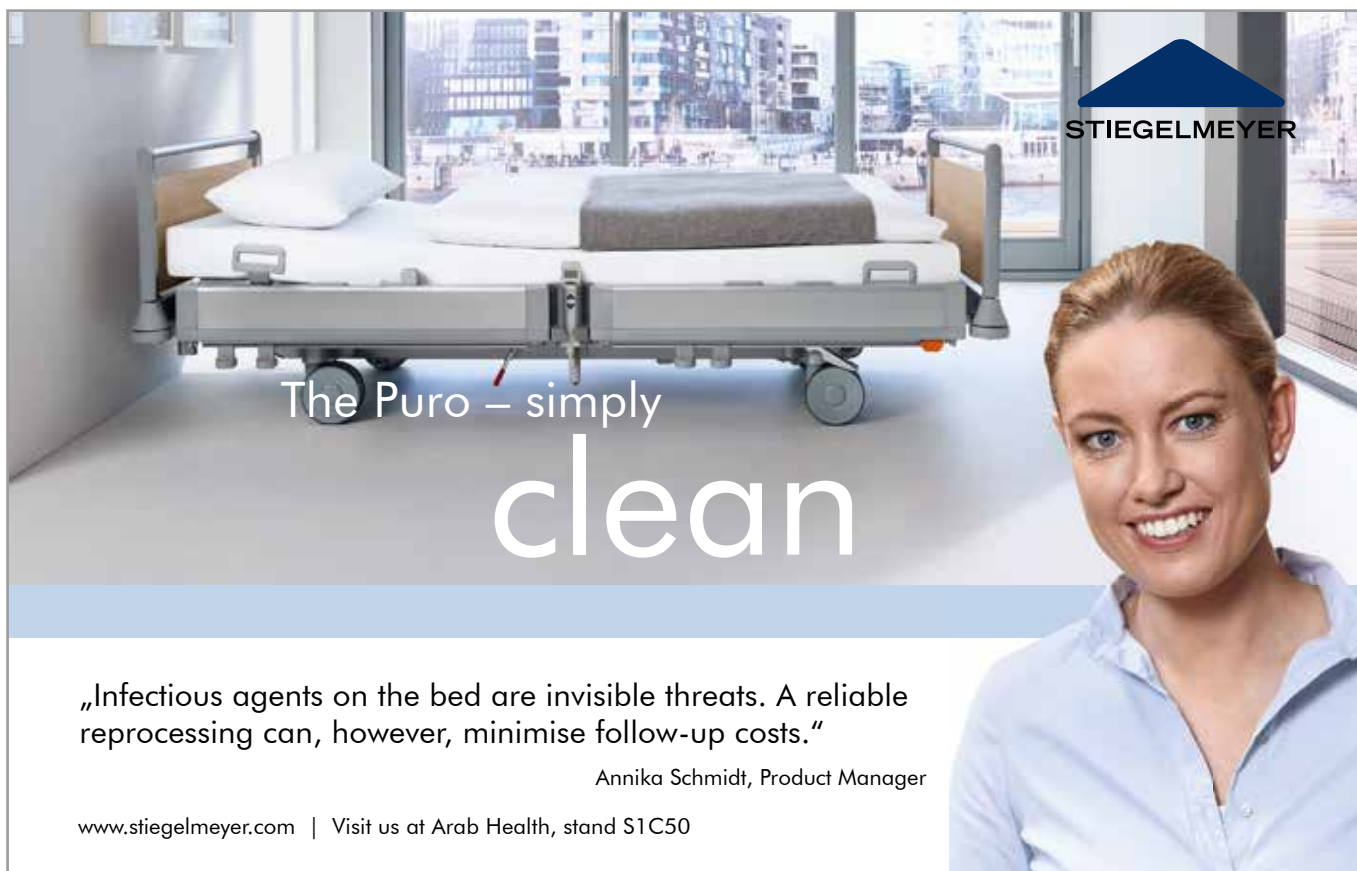
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• **11-12/05/2016**

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• 17-20/05/2016

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